



WOMEN'S HEALTH

How to Staff Your Practice in an Unpredictable Marketplace

Adapt your hiring strategy to withstand uncertainty

nextgen
healthcare

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INTRODUCTION

The women's healthcare industry has largely recovered from the COVID-19 pandemic. Patient volume has returned to pre-COVID levels, and there is less intentional delay of care.

Independent women's health practices continue to grapple with issues that were present before the pandemic—declining reimbursements, increasing costs, and health system consolidation. In addition, many smaller practices may still be struggling financially due to their size.

For all practices, new challenges have emerged with finding and keeping talent. The great resignation hit the healthcare industry hard. Employees look for fulfillment in their work now more than ever before and may quit if they don't find it. What's more, burnout is not only affecting physicians in medical offices. Front desk, administrators, billers, and coders may experience burnout as well (although to a lesser degree) and may leave their jobs, as a result, increasing the workload on the remaining staff.

COVID-19 was an eye-opening experience. Attitudes changed. Many people chose careers in healthcare because they perceived this sector to offer stability and secure employment. COVID-19 made us wiser. It taught us that the business of medicine is vulnerable to economic forces, just as are other sectors of the economy.

In recent years, many women's health practices have experienced a supply versus demand roller coaster—a shortage in patients may be followed by a surge in demand, which may be followed by another decline. Suddenly, uncertainty has become a hallmark of the business of providing office-based women's care.



According to the U.S. Department of Health and Human Services, demand for OB/GYNs is projected to noticeably exceed supply soon, based on current utilization patterns. The number of OB/GYNs is expected to decrease by 7%, while demand is projected to increase by 4% by 2030. In addition, the healthcare sector continues to contend with a shortage of workers, including office staff.

One common challenge women's health practices face: **How to staff their offices in this unpredictable environment.**

To succeed in this changing environment, a women's health practice must become an employer of choice. For your practice to become an employer of choice, consider how the past couple of years have affected your employees' wants and needs at work.

This e-book explores trends likely to impact how you staff your women's health practice and provides guidance for moving forward.

VIRTUAL CARE

Telehealth will remain a central care delivery tool for the foreseeable future. Large health systems and small, independent practices have invested a lot of time and money into telehealth—and are unlikely to abandon this technology. Patients have experienced the convenience of telehealth appointments and now expect it.

As more care continues to shift to virtual, the staffing model required to support your practice will change. If your office treats fewer patients in person, you may need to redeploy nurses and medical assistants into new roles that support updated workflows. Doing so will enable you to continue to leverage the training and capabilities of your clinical staff.

Depending on the telehealth system they've implemented, some women's health practices may need fewer administrative support staff.

Telehealth solutions that integrate well with the EHR and practice management system can reduce your administrative burden.

Tip: When considering telehealth options, look for a solution that offers tight integration with other administrative systems. For example, when a patient is ready for their virtual visit, telehealth software should automatically deliver a notification to the EHR and practice management system. Key information from the visit, such as visit duration, intake response, and consent, should be delivered automatically to the patient's chart within the EHR. You should be able to manage visit documentation as you would an in-person visit.

If your practice adopted telehealth rapidly during the COVID-19 public health emergency, consider your long-term needs and reimbursement potential. As patients return to the office, virtual visits are becoming a new, separate revenue stream—rather than just a replacement for in-person visits.

From this perspective, women's health practices may implement virtual visits as a growth opportunity with a relatively low barrier to entry.



WORK FROM HOME

Many non-clinical and some clinical staff continue to work from home. These staff members access the practice's health IT systems remotely to perform billing, care coordination, and other administrative tasks. This should be done securely, and your system needs to be built to protect PHI.

As time moves on, practices will likely continue to accommodate work-from-home staff.

Tip: When seeking to fill office staff positions, consider candidates from a wider geographic area. Many administrative and back office operational roles can be performed remotely—therefore, these roles don't necessarily have to be filled by people who live close to your practice. Recruitment and retention of top-quality staff has become increasingly competitive, which may make broadening the geographical boundaries of your talent pool more necessary.

THE DEMAND FOR STAFFING FLEXIBILITY

Moving forward, non-physician office staff may need to be more flexible and develop multiple skill sets. For example, front desk and medical records staff can be trained to manage the practice's A/R. Once training is complete, these employees can start collecting aging receivables.

At the beginning of the COVID-19 pandemic, women's health practices had to quickly adapt new processes for triage—to assign patients to virtual or in-person care workflows—often on the fly. Now, practices should have standardized processes for triage.

Medical assistants and entry-level, but computer-savvy staff, may take on a new responsibility—helping patients connect to a virtual platform. Medical assistants may also serve as scribes for providers during virtual visits.

Clinical staff can also be trained to provide more assistance in managing patients with chronic conditions.



See *Increase Focus on Care Management* on [page 8](#).

OPPORTUNITIES OF THE NEW MEDICAL OFFICE

The women's health industry has bounced back significantly in the post-pandemic world, but women's health practices still rely on telehealth visits and have worked them into their day-to-day schedules.

The crisis created opportunity. Consider the medical office itself. In many cases, less space is needed as more administrative staff work remotely, and telehealth reduces the time physicians and patients spend inside the office. Some women's health practices downsized their waiting rooms and repurposed space for clinical use. Other practices cut back on their rent expense.

If your practice owns a medical building with available space, consider leasing to an organization or provider whose services complement yours. **For example, consider renting space to a primary care provider or behavioral healthcare provider.**

Tip: Consider outsourcing functions that are not central to the practice of medicine. For example, if your practice hosts its own EHR and practice management software, consider whether it's worthwhile to maintain servers in-house—this may be the time to move to a cloud-hosting solution.



INCREASE FOCUS ON CARE MANAGEMENT

Care management responsibilities may become more prominent. As value-based payment models gain a stronger foothold in women's health, the opportunity grows to manage the entire patient population with effective programs.

Expect increased focus on care plan development, patient education, and adherence to the plan of care. Staff will need to develop skills that support health maintenance over many years of a patient's life. Staff may require additional training to better manage patients with chronic illness and address social determinants of health.

Consider shifting nurses and medical assistants to tasks that support population health and care management—reaching out to patients, identifying and closing gaps in care, and monitoring and engaging with patients with chronic conditions to improve outcomes and reduce hospitalizations and emergency department visits.

Tip: Consider implementing a high-touch virtual approach to care management. Care managers can use telehealth for patient outreach and follow-up. This helps alleviate the need for patients to find transportation or risk contagion during in-office visits. In addition, virtual outreach leverages the practice's investment in its IT infrastructure.

ROLE OF THE WOMEN'S HEALTH PROVIDER

As leaders of the women's healthcare team, obstetrician-gynecologists (OB/GYNs) will oversee the establishment and implementation of standardized, practice-wide triage guidelines to govern the assignment of patients to virtual visits or in-person care. These workflows, and subsequent staff training, will largely determine a women's health practice's success in implementing virtual care.

As the visit mix shifts toward virtual care, practices can become more efficient. OB/GYNs, in turn, may get an opportunity to extend the time spent with higher-need, complex patients.

OB/GYNs may also have an opportunity to focus more attention on population-level problem-solving. Additional time may allow physicians to develop workflows and outreach programs to address specific patient cohorts.

The ability to perform virtual visits from any location, including home, can help *reduce* physician burnout. Virtual visits allow reimbursement for on-call work that, until recently, was not billable.

Tip: Virtual visits can save the patient the need to visit an urgent care or after-hours clinic. Particularly for women with responsibilities to their career and family, this is a desirable option. At the same time, these visits generate revenue for the practice as a replacement for non-reimbursed, after-hours phone calls. You can integrate mobile technology with a telehealth solution to enable women's health providers to conduct virtual visits using their smartphones.

PROACTIVE STRATEGIES TO MANAGE OFFICE STAFFING

Like other businesses, women’s health practices must be prepared to adjust staff resources during times of financial transition. Consider the recommendations below.

Perform time studies

Time studies are fundamental to establish a baseline of current operations in preparation for staffing changes. These studies determine how much time is needed—per patient—for each office function based on a full schedule. Repeat time studies over multiple days to identify outliers, account for variability related to the specific day of the week and care team composition, and obtain a meaningful average.

For example, determine how much time nurses require to complete their charting on a single day by calculating a weekly average. Then divide this by the number of patients that were seen on average in one day. This will show how much nursing staff time must be allocated per patient for charting.

Note that these time studies are based upon tasks and that staff members may perform multiple tasks. A medical technician, for example, may spend most of the day providing clinical support for the doctor, then answer phone messages for a couple of hours, and, as their last responsibility for the day, balance the drug cabinet.



**TIME SPENT
ON CHARTING**
(Weekly average)



**NUMBER OF
PATIENTS**
(Daily average)



**TOTAL TIME
NEEDED**
(Per patient)

A separate time study will be needed for each of these functions. How many messages did the tech answer in one day? How many drugs were dispensed in a day? How long did it take the technician to balance the drug cabinet? What was the variability from one day to the next or between two staff members performing the same tasks? As staff roles become more complex, time studies do as well.

Once time-study information is obtained, you can more easily determine how many hours you need to add or cut back for each specific function when a sudden rise or drop in patient visits occurs.

For example, suppose time studies show your medical practice needs one front desk person and one check-out person to work eight hours each day when the schedule is full. Then a surge in COVID-19 cases or some other unforeseeable event occurs, and patient visits drop by half. Based on time study information, you can combine the front desk and check-out functions into a single role or reduce the hours for each of these tasks by half.

Another reason to measure these studies—**to make sure your staff is performing and meeting goals.**

Assess office functions versus available technology

When reviewing office functions, consider technology solutions that allow for greater staffing flexibility. For example, an online self-scheduling tool integrated with a patient portal and your EHR may reduce the burden on front-office staff.

Consider technology solutions that facilitate work from home. For example, patient eligibility checks can be performed online—it may benefit your practice to have them performed by work-from-home staff.

Now is an especially opportune time for women's health practices to assess their use of administrative technology. Expanded use of technology may give your practice the adaptability it needs to thrive in a volatile economy.



Monitor staffing needs

Review staffing numbers compared to production based on key performance indicators (KPIs). Two important KPIs are daily charges and daily payments. To establish a standard for your practice and account for variability, obtain averages based on your office operating at full capacity over a period of time.

To determine staffing needs, use your KPI for daily charges to calculate your projected charges for the week:

- If, at the end of the week, you don't meet these projections, it may be time to reduce staff hours.
- When you see charges returning to projected levels, you need to bring staff back.

Make your staff as nimble as possible

Know your staffing model and which KPIs you should monitor to swiftly adjust your workforce. The goal is to be ready to make staffing changes quickly.

With stricter enforcement of rules about staying home when sick, you may have to cross-train staff to have sufficient coverage. Such flexibility will only be possible if you have done time studies and understand what skills and technology are optimal for each function.

Cross-train staff whenever possible. Determine what functions can adapt, change, or be combined should there be a dramatic change in patient volume.



Monitor appointments

Keep track of how many appointments are scheduled. Determine milestone numbers for adding or reducing provider time. When the demand for care suddenly increases or decreases, having milestones in place helps you make staffing decisions quickly.

Become an employer of choice

We all want a positive work environment. For employers, it is important to treat all employees with respect and care. Staff members should feel like they can communicate openly about their problems and suggestions.

Listen to your employees and make sure there is an accessible, reliable way to get input from them regularly, such as quarterly survey or suggestion box. Be patient and understanding whenever issues arise. Your employees are people; they can't be superhuman.

Support employee wellness and team bonding. Be thoughtful about the benefits you provide to your employees and treat them the way you want to be treated.



Tip: Plan for ways to augment your staff. Consider collaborating with a third-party revenue cycle management (RCM) partner who can perform administrative tasks, including claims management, payment posting, and financial reporting. Other functions that potentially can be outsourced include denial and insurance A/R management, patient A/R management, and patient cost estimation, messaging, and call center support.

Be prepared for change

To guide your women's health practice in an unstable environment, you must know your business well.

This doesn't mean you have to be an expert in every aspect of running a medical practice. However, you must know your staff, both their strengths and weaknesses.

A volatile marketplace may also require practice owners and administrators to show more of their human side. There will be times of shortage and times of surplus. Let your staff know what's going on. Be as honest as you can.

A thoughtful plan and a sincere approach to communication will lead to the best possible financial and human resource outcomes.

Worry about what you can control—becoming a women's health practice with business operations and a staff of which you can feel proud.



Tip: Have a plan ready for adjusting staff—to respond to changes in the economy and achieve your practice's long-term goals. Communicate the plan to key members of your clinical and administrative staff and get buy-in from them. Right now, we are experiencing a staffing shortage, but it won't be this way forever. Everything is subject to change.

BETTER STARTS HERE.

Contact us at 855-510-6398 or advisors@nextgen.com.

One common challenge practices face: **How to staff their offices in this unpredictable environment.** The medical practice that becomes an employer of choice has a much better chance of succeeding.

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