



WOMEN'S HEALTH

PUT THE BRAKES ON BURNOUT

Reenergize your women's healthcare team

nextgen[®]
healthcare

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Introduction

OB/GYNs, nurse practitioners, physician assistants, nurses, midwives, and other vital women’s health team members are humans, not robots. They’re not invincible to the pressures within themselves and the forces that dictate their work environment. Behind the smiles, in many cases, underlie currents of:

- Self-doubt
- Mental and physical exhaustion
- Loss of motivation
- Compassion fatigue
- Cynical outlook
- Decreased satisfaction and sense of accomplishment

This e-book focuses on strategies to help you minimize burnout and help safeguard your women's health providers and staff.

CHAPTER 1

BURNOUT PREVALENCE

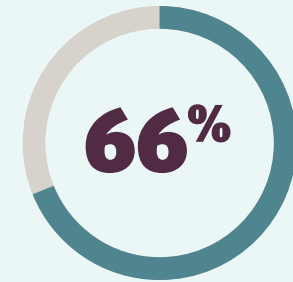
Researchers at the Stanford University School of Medicine noted a significant increase in burnout among providers who cared for pregnant women and newborns during the early days of the COVID-19 pandemic.

A survey of 288 nurses and physicians in the US revealed that 66% suffered from burnout. Of those questioned, 73% observed symptoms of burnout in their co-workers. These levels of burnout are 2.5 times higher than pre-pandemic samples.¹

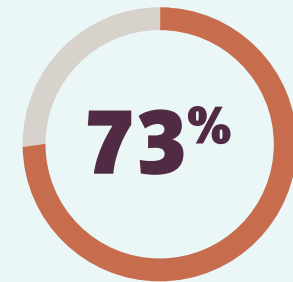
With change comes stress

The drive to improve the quality of care at a lower cost, meet patients' expectations, comply with regulations, and maintain profitability fuels the engine of change among ambulatory practices.

Stress increases as providers and staff deal with health IT changes that involve tasks related to documentation, reimbursement, administration, and performance metrics, which too often create barriers to what providers want to do—**take care of their patients.**



suffered from burnout



observed symptoms of burnout
in their co-workers

These levels of burnout are **2.5 times higher** than pre-pandemic samples.¹



Patients see the effects of physician burnout

Stressed providers consumed with documentation tasks have difficulty maintaining relationships with patients. Physicians' EHR time is approximately 4.5 hours a day, which weighs heavily on their ability to be truly present with patients and distracts them from patient care.²

Unempathetic providers can fall into clinical depersonalization and lose emotional connections with patients. Patients who sense this lack of attention may move to another practice to find a more caring, personally engaged provider.³

Shadow over the future of healthcare

According to a survey conducted between July 1 and December 31, 2020 by the Mayo Clinic Proceedings, more than 20,000 respondents at 124 institutions across the country expressed that burnout, workload, fear of infection, anxiety, or depression due to COVID-19 and the number of years in practice motivated the intent to reduce work hours or leave.⁴

Burnout is also a costly problem across the entire healthcare landscape. Job turnover in the primary care physician workforce led to an additional \$979 million in annual excess healthcare costs across the US, with \$260 million (27%) attributable to burnout.⁵

OB/GYN shortage

Trends in the supply and demand of women's health providers increase the challenges for a practice to administer care efficiently—adding more emotional and physical strain to an already stressful work environment.

OB/GYN supply consisted of approximately 50,850 full-time employees in 2018. Trending forward to 2030, assuming new physicians continue to be trained and practicing physicians continue to retire (or otherwise leave their profession) at the same rates as is currently being observed, approximately 3,360 fewer full-time OB/GYNs will be in the workforce.

Women's health practices are not immune to staffing shortages across the greater healthcare sector. Approximately 50,000 jobs have been added in the US since January 2021, and more than 500,000 jobs need to be filled to get back to pre-pandemic levels.⁶

In contrast to the OB/GYN shortage, it's projected that there will be rapid growth in the supply of certified nurse midwives, nurse practitioners, and physician assistants **to help alleviate the growing shortfall.**⁷

WHAT TO DO ABOUT BURNOUT?

There is no cure-all to mitigate provider and staff burnout. However, much can be done to alleviate burnout in the administration of a women's health practice. One strategy that stands out is integrating technology and professional support services in new and innovative ways.

Unfortunately, the central technology platform for healthcare administration, such as EHR and practice management systems, can often be a source of great frustration. However, new technology is emerging, health IT is becoming more integrated, and user-friendly options are becoming more prevalent. EHRs and practice management systems don't need to be the enemy of the care team.

A less frustrating work environment can start with practice-wide initiatives that affect how you operate your practice. One strategy is to ensure the use of the right tools as efficiently and cost-effectively as possible so that your patients, staff, and women's health providers can have a more satisfying care experience.

When considered as part of an end-to-end solution to optimize practice efficiency and minimize routine tasks, the EHR can be your best friend.



Optimize mobile technology to make providers' lives easier

Mobile technology saves significant time by mitigating excessive screen time and the tedium of documentation in an EHR. You can access clinical data on any device with an internet connection—talk, type, or touch patient charting at the point of care, in-between patients, or even outside the office.

Women's health providers can break free from their desktop or laptop computer with their smartphones. As a result, a healthy work-life balance can be achieved as the stress of administrated tasks is alleviated.

Integrate practice management software with your EHR

Excessive time spent on administrative tasks is one of the most significant contributors to provider burnout. Another major issue for women's health practices is revenue generation. Providers are busy and typically see many patients, especially for gynecologic and prenatal care. Proper documentation, coding, and the ability to process clean claims are key to ensuring providers are fully paid for their services.

One way to help alleviate this burden is to implement technology that automates administrative functions, such as tasks related to revenue cycle management (RCM).

With a practice management platform integrated into your EHR, your staff can simplify routine tasks, increase billing speed, keep your schedule full, and provide a better care experience. Automation further enhances repetitive tasks such as scheduling, verifying eligibility, and billing.

Additionally, an RCM partner that offers access to advanced health IT systems can help automate claims and billing.

This can cut even more time spent on routine tasks and help ensure claims are billed at the contracted amount and more likely to get paid at the first pass.

Make life easier for your practice, and your patients

Consumerism, patient expectations, and the repercussions of COVID-19 have reshaped how patients engage with medical practices. An integrated patient engagement platform can safely, conveniently, and seamlessly meet these demands. Patients should be able to go online to schedule appointments, pay bills, request medication refills, access their medical records and test results, and communicate with your practice.

For providers struggling with burnout, virtual visits make schedules more manageable. It allows providers to split their work hours between virtual and in-person consultations. For example, a provider can choose to dedicate specific hours or days of the week to virtual visits where they can see patients from the comfort of home, thereby reducing commuting time.

Develop a culture of continuous process optimization

One central aspect of process optimization is how your practice uses the EHR and whether your vendor is a partner alongside you. Commitment to continuous improvement helps ensure the EHR supports the best possible workflows and evolves with you as your needs change. For process optimization to work, your team must be on an EHR platform that offers sufficient flexibility.

EHR software is meant to semi-automate your chart notes using templates. Make sure the staff takes advantage of opportunities to automate routine documentation tasks. If the same note is being re-entered into the EHR a dozen times a week, for example, modify a template to reduce repetitive data entry. If you need help modifying templates, seek support from a knowledgeable staff member or your EHR vendor.

CHAPTER 3

A BETTER USER EXPERIENCE MAKES A DIFFERENCE

Technology can stem the rising tide of healthcare burnout and help put the bounce back in your step. The following health IT platforms provide the tools to sustain a healthy work-life balance and rejuvenate your passion as a medical professional.

Yes, there is a user-friendly EHR

NextGen® Enterprise EHR and NextGen® Enterprise PM

An award-winning, CURES-certified EHR that integrates with a robust practice management system offers a refreshing respite from burdensome tasks normally associated with EHRs. Marrying the right EHR with the right practice management system enables you to automate reports and statements, billing, claims, collection, recall letter generation, eligibility, and claim status requests, all in one place.

These capabilities go a long way to improve provider and staff satisfaction.

AWARD WINNING



“ Because we’re documenting accurately and efficiently, it’s easy to report our successes. We’ve improved our communication process, patient plans, and overall workflow. ”

William Maxwell, Jr., MD
OB/GYN Division Chief
Texas Health Care, PLLC



Increase efficiency, expedite claims, and improve decision-making

NextGen® Financial Management

Revenue cycle management (RCM) and medical billing services can help improve financial performance and combat rising practice costs, allowing you to focus on what matters most—patient health.

Your practice can devote more time to your patients with revenue cycle management services that provide transparent billing, manage claim denials, correct operational inefficiencies, and support your staff.

““ Some people think you lose control when you outsource your billing, but with NextGen Healthcare, that’s far from the truth. ””

Debbie Redd
Chief Executive Officer and President
Capital Women’s Care

Integrate virtual visits and make life easier

NextGen® Patient Experience Platform

Women with career and family responsibilities may struggle to prioritize their health. Accessing care conveniently is essential. Patients may switch to another practice if they cannot easily make an appointment. An integrated patient experience platform can help manage scheduling to ensure patients can be seen. Virtual visits also increase access to care and enable busy women's health practices to manage patient demands more efficiently.

For example, a virtual visit solution that integrates with an EHR and practice management system can increase satisfaction for providers and staff. When virtual visits are added to an existing workflow, you can optimize your time and focus more on patient care. Any information obtained during the encounter flows back or is documented directly into the patient's chart.

A host of other solutions, such as patient self-scheduling, online intake capabilities, payment options, a patient portal, and remote patient monitoring, can take your women's health practice to the next level of convenient, compassionate care.

“When the patient sees that text or email reminder, all they need to do is click through and they're into the system immediately. They answer a few intake questions, give consent, and then they're ready to go. There's no need for any app or anything like that.”

Damon Hou, MD

Medical Director, Health Informatics
Capital Women's Care

Access an EHR in the palm of your hands

NextGen® Mobile

The access enabled by a mobile EHR means you can treat patients anywhere, and all documentation automatically flows into the patient chart. With the right mobile technology, you can collaborate via a secure, HIPAA-compliant texting platform in an instant, thereby potentially avoiding critical errors.

From a mobile device, you can:

- View the patient schedule and share clinical content instantly
- View images and documents from the EHR
- Capture images
- Document in the field from any device
- Text securely with colleagues
- Dictate notes offline



“ I stopped setting the computer in front of me while I’m interacting with patients. My coding has become much more accurate, and my charges are more readily justifiable. ”

Darryn Band, MD
Physician and Partner

BETTER STARTS HERE.

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

1 More burnout among pregnancy, newborn care providers during pandemic, Stanford-led study, finds, March 16, 2021, Erin Digitale, Stanford Medicine, <https://med.stanford.edu/news/all-news/2021/03/burnout-among-pregnancy-and-newborn-care-providers.html>. **2** Physicians spend 4.5 hours a day on electronic health records, April 21, 2022, Richard Payerchin, Medical Economics, <https://www.medicaleconomics.com/view/physicians-spend-4-5-hours-a-day-on-electronic-health-records>. **3** Preventing Physician Burnout from Impacting the Patient Experience, January 2019, Sara Heath, Patient Engagement, Xtelligent Healthcare Media, <https://patientengagementhit.com/features/preventing-physician-burnout-from-impacting-the-patient-experience>. **4** What we've learned about COVID-19, burnout and the doctor's shortage, May 4, 2022, Andis Robeznieks, AMA, <https://www.ama-assn.org/practice-management/sustainability/what-we-ve-learned-about-covid-19-burnout-and-doctor-shortage>. **5** AMA cost analysis examines primary care physician turnover, February 28, 2022, [https://www.ama-assn.org/press-center/press-releases/ama-cost-analysis-examines-primary-care-physician-turnover#:~:text=The%20new%20analysis%20found%20that,27%25\)%20attributable%20to%20burnout.](https://www.ama-assn.org/press-center/press-releases/ama-cost-analysis-examines-primary-care-physician-turnover#:~:text=The%20new%20analysis%20found%20that,27%25)%20attributable%20to%20burnout.) **6** The health care workforce is understaffed for life after Covid-19, July 2, 2021, Jamie Nguyen, STAT, <https://www.statnews.com/2021/07/02/the-health-care-workforce-is-understaffed-for-life-after-covid-19>. **7** Projections of Supply and Demand for Women's Health Service Providers: 2018-2030, March 2021, U.S. Department of Health and Human Services, <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/projections-supply-demand-2018-2030.pdf>

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