



Prescriptions *Medical Alert*

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Branding Your Practice

Many physicians are reluctant to consider actively shaping their “brand,” as they believe that marketing their practice could undermine their professional reputation. But just as a company’s brand conveys useful information to consumers about the types and quality of the products and services it offers, a physician group can benefit from developing a brand that informs prospective patients about the practice’s strengths, including the qualifications and areas of expertise of its medical staff. When crafted with care, a brand can attract new patients, especially those most likely to value the specialties offered.

While it may seem that all primary care practices offer roughly the same services, there are often distinct differences between practices that are not necessarily reflected in the signs posted outside office doors. Your practice may, for example, have a broader range of equipment or more up-to-date equipment than other local practices. Even if the physicians in your practice are all general practitioners, individual doctors may have particular areas of interest and expertise, such as knowledge of alternative medicine or the ability to perform specialized procedures, which could attract certain patients.

When selecting images and messages for your practice’s branding strategy, consider the characteristics of both current and potential patients. A practice with primarily older patients may, for example, choose to focus on its expertise in helping individuals cope with chronic conditions, such as diabetes or arthritis. If your patient base is ethnically diverse, your group could emphasize that your physicians and nurses are multilingual.

After identifying your target audience, consider changing the graphics and text on your marketing materials, including advertisements, your website, social networking

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Smartphone Apps for Busy Physicians

These days, most professionals have smartphones that allow them to talk, send text messages, and surf the Web. Increasingly, doctors, nurses, and other medical professionals are using mobile health care software applications designed for use on smartphones that make it easier for them to diagnose, prescribe, access patient histories, track patient care, manage their schedules, and handle billing.

Among the mobile software options designed for physicians are apps that provide instant access to databases on prescription and over-the-counter drugs, including up-to-the-minute information on pricing and health insurance formularies, dosage, pharmacology, side effects and interactions, and off-label indications. Online medical calculators, converters, and algorithmic tools can make it easier for doctors to determine appropriate dosages or interpret test results. Many health care apps also offer access to reference materials that can aid physicians in making diagnoses, ordering tests, and prescribing treatments.

While versions of these software applications are also available on desktop computers, many medical professionals prefer to have the option of using these tools as they move around the office, or when they are at home or traveling. As more doctors and nurses grow accustomed to using cell phones as their primary means of personal communication, they are also becoming comfortable with using mobile apps to meet their professional needs. And, as electronic health records (EHRs) gradually replace paper files, being able to receive and transmit medical information anywhere and at any time may become increasingly important for physicians.

Research indicates that medical students are already making extensive use of mobile health care software applications. A 2010 survey of future physicians by Epocrates concluded that nearly 80% of students report turning to mobile or online references for help on clinical questions on a daily basis, and a majority use these apps multiple times throughout the day. The results further showed that medical students upgrade their smartphones regularly, and the overwhelming majority (94%) sees the presence of an EHR system as an important factor in deciding where they will practice medicine.

Even physicians who have not yet made the full transition to EHR systems can use apps on their

phone to order lab tests and receive results, re-stock medical supplies, update their schedules, communicate with insurers, or e-prescribe. Physicians can also use voice recognition software on their phones to dictate notes, recording updates on a patient's pain levels or other symptoms. In some cases, doctors may want to use their phone to snap a photo of a patient's skin tone or rash that can be added to the patient's file, or they may use mobile video conferencing apps when consulting with a colleague.

When working with a patient who needs an exercise or diet program, or even a more complex disease management program, a physician can, for example, log on to a phone app for weight loss and enter a patient's data, which will generate some initial recommendations to help the patient get started. The doctor can then show the patient how she can use the app on her own phone or computer to stay on track with the program, develop new exercise regimens or access new recipes, and monitor her progress.

Basic versions of these and many other medical apps are available for free, and versions with enhanced functionality can usually be purchased for a relatively small fee. While physicians may be concerned about the security of using handheld devices and the possibility of HIPAA violations, the possibility of privacy breaches can be lessened if phones are used properly and security measures, including passwords and data encryption software, are in place. While handheld devices are convenient for transmitting patient information, alternative methods may be needed for storing more sensitive data that could be compromised if the phone is lost or stolen. Some clinics even have servers capable of remotely erasing the information on a phone that has been lost.

As technology develops, smartphone apps may play an even bigger role in the practice of medicine. With EHR systems, doctors can use their phones to access not only reference materials, but also individual health records that provide the patient's full medical history, including current prescriptions, drug allergies, recent lab work and test results, and immunization history. Especially when integrated with records and billing systems, the regular use of mobile apps may improve the work flow of a physician, making it possible to treat patients and manage administrative tasks more quickly and effectively than in the past. *P*

Adding Specialist Services to a General Practice

While a family practice can provide a wide range of medical services, many times patients require additional services from specialists. Primary care physicians often have a network of specialists to whom they regularly refer patients. Yet, sending patients to another location to consult with a specialist can cause disruptions in patient care, and it may be difficult to track the treatment given outside the practice.

To supply patients with a wider range of services in one location, and to tap into new revenue streams, some physician groups have transformed themselves into multispecialty practices. However, other groups choose to maintain a primary care focus, yet also offer patients access to specialists on the premises through a variety of arrangements.



For smaller primary care practices, expanding into a full-service multispecialty group may not be a viable option. Instead, physician groups may want to consider bringing on board a small number of

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pages, informational brochures, and any exterior signs, to reflect the new brand. Even your waiting room can be altered to communicate your brand identity. If, for example, your practice focuses on treating certain diseases, additional informational materials about the conditions and your treatment approaches, including posters or videos, may be displayed in the waiting area. If physicians in your practice have special credentials or distinctions relevant to your brand, be sure to post their certificates and awards in your offices and mention them prominently in your marketing materials.

Branding your practice can also help you narrow your networking efforts. A practice that focuses on sports medicine, for example, can seek to build relationships with local teams. If your practice's main area of expertise is in chronic illnesses in the geriatric population, physicians may spend more time visiting assisted-living facilities or organizations frequented by seniors. The physicians in your practice may also consider contributing to print publications, blogs, or other websites visited by your practice's target population, or even adding a blog to your website that addresses frequently raised questions by patients. Your practice may also want to offer special clinics or informational seminars to people with an interest in the areas of medicine that fit your brand, with

titles like "Preventing Sports Injuries" or "Monitoring Your Blood Glucose Levels."

If you are unsure what differentiates your practice from others, start by asking your patients. Both formal and informal patient surveys can provide useful insights into how your practice is perceived in the community. Negative feedback can serve as a basis for making improvements, while positive input can become a platform on which you can build further. Your practice may, for example, be seen as particularly accessible to patients with disabilities. Or you may discover that your patients are especially pleased that your practice offers longer office hours three days a week. This information may lead you to brand your practice as one that caters especially to individuals with disabilities or to working professionals who prefer evening appointments. Even having a convenient location close to public transportation or with ample parking could turn out to be a key element of your branding strategy.

No two medical practices are exactly alike, so consider your practice's distinctions and strengths when making decisions about your brand. Developing a brand can help attract prospective patients, especially those most likely to value your unique areas of expertise. *P*

Referral Practices of Primary Care Physicians

Despite the widespread availability of advanced communication technologies, when referring patients, physicians are still more likely to fax or phone another provider than to exchange details of the patient's medical history electronically, according to a 2010 survey by Growth Survey Research for electronic health record (EHR) provider Practice Fusion.

The survey of 183 primary care providers found that only 16% of physicians use an electronic process to send patient records for referrals. More than one-quarter (28%) of respondents indicated they make the referrals by fax, 20% said they use the phone, 19% reported giving the information to the patient, and 4% said they make referrals by mail. The findings also revealed, however, that the providers who use an electronic process to generate referral letters reported significantly more satisfaction with their method than those who call other providers.

Researchers noted that approximately 5% of primary care visits include a referral to another physician, which means that an estimated 22 million referrals are made by primary care physicians each year. They also observed that gaps in the exchange of patient information after the referral is issued can be problematic, sometimes leading to increased healthcare costs due to duplication of services. The survey found that the providers who issue the referrals often do not receive feedback about the patient's visit with a specialist. *P*

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specialists on a more flexible basis. The specialists chosen may depend on the types of services most frequently needed by the practice's core group of patients. Important information can be obtained by examining current referral trends and patient populations. Some physician groups may find, for example, that they frequently refer patients to mental health professionals, while others more often send their patients to cardiologists, orthopedists, or pain management specialists.

There are a number of ways a practice can structure a relationship with a specialist, including hiring him or her as a full- or part-time employee. A part-time arrangement may be attractive to a physician who prefers a less demanding schedule or one who is already working part time at another practice or hospital. The group may also consider taking on a specialist as an independent contractor; the host practice may handle the scheduling and

billing, and a portion of the revenue may be paid to the specialist.

In other cases, a practice may invite a specialist to use its offices for a certain number of hours a week, with the specialist compensating the host practice for the use of its facilities. It is advised that physician groups consult with a legal professional when structuring these arrangements to avoid violating any state or Federal fee-splitting or kickback rules, and to clarify any issues surrounding medical malpractice liability.

Besides providing an additional source of potential revenue, adding specialist services to a primary care practice can improve patient satisfaction and adherence to treatment regimens. When several doctors handling various aspects of a patient's care work together at a single location, they may be better able to ensure that all of their patients' needs are being met. *P*