DERMATOLOGY

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DERMATOLOGY

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Executive Decisions in Dermatology is a bimonthly publication of the **Association of Dermatology Administrators & Managers (ADAM).** ADAM is the only national organization dedicated to dermatology administrative professionals. ADAM offers its members exclusive access to educational opportunities and resources needed to help their practices grow. Our 650 members (and growing daily!) include administrators, practice managers, attorneys, accountants and physicians in private, group and academic practice.

To join ADAM or for more information, please visit our Website at ada-m.org, call 866.480.3573, email ADAMinfo@shcare.net, fax 800.671.3763 or write Association of Dermatology Administrators & Managers, 1120 G Street, NW, Suite 1000, Washington, DC 20005.



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President's *Message*

It was wonderful seeing so many of you in Washington. D.C.

Congratulations to Jill Sheon and Tony Davis for putting together another excellent conference!

Like many of you, I've been a member of ADAM for a number of years, but I've never been more excited and thrilled with what's happening at ADAM than right now. ADAM's Board Members are passionate about ADAM and dermatology practice management.

ADAM has initiated dermatology benchmarking, providing access to the most relevant data available to dermatology practices. The Benchmarking Committee has done an outstanding job of setting the parameters, gathering the data, and disseminating the information. Plans are already underway for the 2016 Benchmarking Survey with targeted survey distribution in early fall. A total of 133 practices participated in the initial survey in 2015 and we hope to have even more participation in 2016.

Additionally, we have been working hard on several other projects we believe will be meaningful to our members. Here's a peek at just a few:

MENTORING

It is our goal to offer individual mentorship to members new to the field or the profession as well as an expert or team of experts in various areas so we have someone to turn to when our practices suddenly change. Whether it's adding a new provider, acquiring another practice, merging with another group, adding Mohs or a path lab, we have a wealth of knowledge within our membership. Everyone I've met in ADAM is more than happy to share that knowledge - we just need to know who to ask. If mentoring or mentorship is of interest, please let us know.

MEMBER EDUCATION

Our goals for this coming year include providing webinar opportunities every month for you, developing specialized dermatology-related training opportunities ranging from customer service to billing to professional development. We will also explore the delivery models of educational opportunities whether through distance learning, in-person training opportunities, webinars, or using some of the newer technologies available to us. Could an updated salary survey be in our future? We hope so!

Our 25th Anniversary of our Annual Meeting is next year and will be at Universal Studios in Orlando. What a great setting for this celebration! Stay tuned for additional details.

DEVELOPMENT

Developing a stronger membership base and ensuring we have financial support to provide more opportunities to our members are also crucial goals for the coming years. Our corporate members are key to our development as well, providing our members access to products and services created specifically for dermatology practices. We are also looking at savings opportunities for our members. Can we use the power of the association to develop cost saving programs with our partners?

As passionate as your ADAM Board is, we cannot do this without our members' support. Please consider joining a committee to either lend your expertise in a particular area or to develop a skill you might not be able to do in your organization. If you have an idea of something ADAM could do please don't hesitate to reach out to myself, one of the other board members, or to our headquarters staff at ADAMInfo@shcare.net. The strength of ADAM is in its membership. We need your voice, your energy, your commitment to move forward.

Warmest Regards,



Gabi Brockelsby ADAM President





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IN THE SPOTLIGHT

Practice Manager of the Year



Congratulations to Bobbie Warren,

Practice Manager of Ali Hendi MD, PC of Chevy Chase, MD, named ADAM's 2016 Practice Manager of the Year!

See page 4 for the full list of nominees and biographies.

2016 Practice Manager of the Year Nominees



We are pleased to announce the **11 candidates for the 2016 ADAM Practice Manager of the Year award**. Each candidate received exceptionally high praise from the physicians they work with and we commend them for their professional accomplishments.

Terri Boucher

Terri Boucher is the Office Manager for the Dermatology Associates of West Michigan in Grand Rapids, Michigan. As her nominating physician states, Terri is "an exceptional leader, knowledgeable, a great communicator, creative, and efficient with a positive mindset." Terri has led the charge on transitioning to a new EHR system with patience and clarity. The staff of Dermatology Associates of West Michigan know they can always depend on Terri for guidance and encouragement through anything, both professional and personal.

Lewis Bergman

Lewis Bergman is the Practice Administrator for Water's Edge Dermatology in Palm Beach Gardens, Florida. In the past decade, Lewis has been critical in the expansion of the practice from a handful of offices to its current number of 26 (and growing!) offices. Throughout the growth, there has been no detail too large or small that he does not handle with care and consideration – and he does it all without allowing the quality of care to lessen. Additionally, Lewis has fostered a culture of well-being, loyal, caring, and competent professionals through his leadership skills.

Kip Denson

Kip Denson is the Practice Administrator for The Woodlands Dermatology Associates in Spring, Texas. She has been with the practice since 2013 and oversees one of the largest private practice dermatology groups in the Houston metroplex. Within the practice, she oversees 7 dermatologists, a Mohs surgeon, and a nurse practitioner as well as an aesthetician and registered nurse in the cosmetic center. Woodlands Dermatology employs a total of 58 employees and Kip has flawlessly meshed the whole staff into a cohesive team that continually receives praise from patients and local physicians – no easy feat for a practice of this size!

2016 Practice Manager of the Year Nominees

Marie Edwards

Marie Edwards is the Practice Manager for Advanced Medical Research, P.C. in Atlanta, Georgia as a result of a joint dream vision between herself and her physician to offer better care for patients who had diseases that were considered untreatable. To achieve this dream, Marie educated herself on all the legal and ethical compliance obligations of running a clinical trial to support these patients and took on major responsibilities for the start-up company. This was all done while maintaining her role as medical assistant with Medical Dermatology Specialists, P.C. Today, Marie takes full ownership of both the dermatology practice she started in as well as the research center, where she continues to fulfill her vision of making sick people well again.

Dawn Fortner

Dawn Fortner is the Practice Manager for Southeastern Dermatology in Knoxville, Tennessee. She has been with the practice for more than a decade and oversaw the growth of the practice from 2 staff members to 12 employees, including a nurse practitioner and a full-time aesthetician. She has seen the implementation of 2 electronic health record systems and 3 (going on 4) practice manager systems. Additionally, Dawn (without office interruption), went back to college full-time to earn a B.S. in Organizational Management (cum laude) and a minor in Human Resources. She is also a Certified Dermatology Coder.

Gibran Leesha

Gibran Leesha is the Office Manager for William W. Kwan, MD, Inc. in San Francisco, California. Gibran has been with the practice for nearly a decade and is credited as the key reason behind the practice's growth in both size and complexity. He has overseen the growth of the practice from two employees to its current size of three dermatologists, two registered nurses, two receptionists, a medical assistant and an aesthetician. Gibran (in the words of his nominating physician) "has the respects of his fellow staff members, the confidence of (our) valued patients, and (my) trust that as a practice manager, he will continue to support the success of the practice."

Jessica Pape

Jessica Pape is the Administrator for Chicago Cosmetic Surgery and Dermatology in Chicago, Illinois. She leads the office with more than a decade of management experience and 3.5 years of administrative experience. Although she has only been with the practice for just under a year, every business decision made has increased efficiency, decreased costs, and improved the practice. Jessica has achieved many large accomplishments over a short period of time including a \$300K+, six-week buildout of the practice's downtown office, switching to a new EMR system, payroll and time-keeping softwares, and an average of 237 new patients per month.

2016 Practice Manager of the Year Nominees

Michele Pirog

Michele Pirog is the Practice Administrative Manager for the Department of Dermatology at Northwell University in Hampstead, New York. In 2014, Michele was part of the core team of 4 personnel who helped establish the launch of a dermatology department in a 21 hospital, 400 practice regional health system. Her responsibilities included establishing policies and procedures for practice administration as well as standards of excellence for the staff. In her role, she oversees the day-to-day takes related to physician templates, appointments, bills for services, and the onboarding and training of new staff. She is the frontline steward of the patient experience and her contributions have been credited towards the department's 332% growth since inception.

Janice Smith

Janice Smith if the Office Manager with Spencer Dermatology Associates in Crawfordsville, Indiana. In 2015, Janice filled virtually every position within the practice due to long-term absences of staff that is already stretched thin. Despite staff shortages, Janice managed to find a way to maintain staff morale and oversee the hiring and training of two new staff members all while facing the challenges of ICD-10 conversions, PQRS mandates, new computer software, insurance contract negotiations, and a new telephone system. Through it all, Janice maintained a positive demeanor and was able to bring out the best in her colleagues.

Bobbie Warren

Bobbie Warren is the Practice Manager of Ali Hendi MD, P.C. of Chevy Chase, Maryland. Bobbie has more than 20 years of experience in the field and oversees all administrative aspects of the practice with outstanding leadership and managerial skills. She works hard at ensuring every staff member's concerns are heard and every triumph recognized ensuring that everyone knows they are valued and supported. This in turn, creates a pleasant atmosphere for both staff and patients alike. As her nominating physician states "she is the definition of a model practice manager and we are grateful to have her as our own."

Christina Watson

Christina Watson is the Practice Administrator for Stockton Dermatology in Phoenix, Arizona. She has been instrumental in implementing the mandated Meaningful Use process and assuring the practice is prepared for the 2015 Fall ICD-10 update. Christina oversees compliance with HIPAA, OSHA, the Arizona Cosmetology Board, and any other laser-related requirements, allowing the rest of the practice to never have to worry about regulatory issues. Additionally, she has worked on the improvement of clinic flow and operating budgets, assisted with benchmarking, identified opportunities to increase physician and staff productivity, and continues to monitor expenses for maximum profit.



2016-A Look Ahead



By Stephen Dickens, JD, FACMPE

physicians and practice executives will continue to face challenges as they provide care to their patients and seek to manage their organizations and position them for the never ending changes before them. As I write this article we are just learning that Meaningful Use will end this year. While that comes as good news to most, it creates more questions than answers. What will replace it and how does this impact the Merit-Based Incentive Payment System (MIPS)? While those answers will surely play out over the months and years to come there is one thing we can all seemingly count on payment reform is going to continue. Given that reality where should you be focusing your efforts in the coming year?

Begin with an honest look at your organizational dynamics starting with staff. Do you have the right people in the right positions and do they have the training and tools to perform at the highest level? Now is the time to invest in personnel and training. Your staff is your biggest asset and can be your biggest detriment too. The more efficient your staff is the more cost effective you will be in the long run. So many organizations take a short sided approach to training staff and acquiring equipment. As a leader it is your job to do the return on investment (ROI) analysis so you can make informed

recommendations and explain them to your physicians. This gives you the data you need to make improvements, shows your staff you are invested in them and demonstrates your value to your physicians as well. Now is also the time to carefully review staff attitudes. Are there employees not pulling their weight or who create chaos for you and others? Deal with those problems now. Either counsel and coach them to where they need to be or move them out the door. You do not have time to manage problems which can be avoided. Physicians need to empower you to proactively deal with staff issues. Protected



or special employees have no place moving forward in your organization. Suzy may have been a great employee ten years ago but if she is not willing to move with the changes she is in the wrong spot now. Can she change or be retrained? If not, you are not doing her, your physicians or patients any good by retained her. Remember, not only is this a scary time for physicians and practice executives but it is for vour staff too. Take the time to talk with them about what is going on in healthcare, how your organization is preparing itself and them and how they can help ensure success. Employees who understand the big picture are much more supportive of change and work together better. You will also find employees invested in the organization offer some of the



best suggestions for improving efficiency and patient care while saving money.

Patient experience must become a focus for your physicians and staff if it is not already. Whether it is the anticipated Consumer Assessment of Healthcare Providers and Systems (CAHPS) tool or something else, patients are increasingly going to be asked to evaluate you and their care based on their perceptions. Those perceptions are going to impact your reimbursement. Just being nice to a patient is not going to be enough. You are going to have to engage them in their care. That is going to require retraining for both your staff and your patients. The problem is that most patients are not clinically competent to evaluate the care they receive. What they do know is whether the experience is positive or negative and how much knowledge about their own condition and care they received. That is the key in this new model - knowledge. Positive patient experience emerges when a patient is engaged with useful knowledge about his or her own condition. Physicians and



Patient experience must become a focus for your physicians and staff if it is not already.

especially their staff are going to have to work in concert together to engage patients in terms they can understand. This is a tremendous shift from telling the staff to just be nice. It will require us to talk to patients differently. Given the time restraints on physicians they will be more dependent than ever on their staff to help them in this new environment. Remember, patient experience begins the moment the phone rings and continues until treatment is finished and the final bill is paid.

Moving forward there will be an increasing demand for meaningful analytics. Do your systems give you the data you need to make the sophisticated decisions regarding contracting, physician compensation and day-to-day business decisions? You will soon need to consider how to track costs associated with episodes of care if you are not already. The payors are gathering data on you. Are you able to rebut anything you think is incorrect? Get in the habit of routinely requesting



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information from payors to make sure it is in line with your records. How does the care you provide fit into an Accountable Care Organization (ACO) or Patient Centered Medical Home (PCMH) model? Are there other practices with which it makes sense to partner? Now is the time to establish those relationships and gauge whether they can be successful. Just make sure there is a clear path out of the relationship if it falls short of expectations. Fee for service is coming to an end as we know it. Have you considered what that looks like for physician compensation? All of these questions are going to require data and either you or someone else will need to be able to analyze it. Are you satisfied you have the systems in place to do this?

As you move in 2016 it can be overwhelming to think about what is ahead. It would be easy to give up. Just remember, everyone else is going through it as well. The best plan is to take advantage of professional resources, educate yourself, consider your options carefully, make sure you have the best team possible around you, develop a plan, take one step at a time, consider all the options and make informed decisions.



Exceptional Patient Experience

The Key to a Successful Practice

By Jill Sheon

SKINCARE PHYSICIANS®

Keynote presented by Dr. Jeffrey Dover, Co-Director, Skincare Physicians in Chestnut Hill, Massachusetts and past President of the American Society of Dermatology Surgery and American Society for Lasers in Medicine and Surgery

How many times have you gone into a physician's office as a patient, parent or caregiver, and found the front desk staff, the medical assistant AND the physician to be happy people, happy to help you and happy to do their job? Is this what happens in your office? Would you like to learn how to create this environment and how to create buy-in within your practice so that this is the "norm"?

We were fortunate to have Dr. Jeffrey Dover, Co-Director, Skincare Physicians in Chestnut Hill, Massachusetts and past President of the American Society of Dermatology Surgery and American Society for Lasers in Medicine and Surgery, present "The Exceptional Patient Experience – The Key to a Successful Practice" at our 2016 Annual Meeting.

Dr. Dover presented what he terms to be the four key ingredients to an exceptional patient experience. These include having a "calling" or a personal mission in life which embraces empathy and compassion and being willing to have an emotional connection to transform an ordinary patient moment into an extraordinary and exceptional patient experience.

Of course, no office is without its challenges. Examples include:

- Issues related to employee accountability
- Poor communication skills at any level
- Inconsistencies in care practices
- Lack of focus on the patient

However, when great service is provided to the patient, this momentum creates a "happy" patient which, in turn, creates a referral, and another referral, and so on. Dr. Dover summarized his presentation by what he believed to be the "exceptional" patient experience, including connecting, respecting, listening, responding and communicating as a team. This was a GREAT presentation. ■



Politics and Policy Spring 2016

By Gabi Brockelsby



Keynote presented by **Shannon Finley** and **Denise Henry Morrisey** of Capitol Counsel, LLC

Ah! There's nothing like being in Washington, D.C. in an election year! Of course, we couldn't resist bringing some politics into the meeting and for everyone out there groaning, this is the place where so many of the legislative and regulatory decisions that make our life interesting are created. Knowing who to contact is important for each and every one of us.

Presenters Shannon Finley and Denise Henry Morrisey of Capitol Counsel, LLC both entertained and educated with a rapid-fire dialogue about the political parties, the presidential candidates, and the parties' actions in both the House and Senate. Both are well-versed in issues specific to dermatology since they work closely with the AAD.

Listeners received insights into the healthcare platforms of the top four presidential candidates and a glimpse of what might happen when the leadership changes as well as impending regulatory changes with CMS.

Both also expressed the importance of involvement on a local level and gave some ideas on how to start becoming involved.

- Contact your legislators local field offices.
- Invite them to photo ops.
- · Attend fundraisers.
- · E-mail with a concern.
- Set up an opportunity for them to discuss medical concerns with a group of your patients.
- Act as a reference for them in healthcare.

I've had the pleasure of hearing Ms. Finley and Ms. Morrisey speak at prior legislative conferences and always appreciate their insights into the political process − they certainly delivered again this year at ADAM's 2016 Annual Meeting. ■



State of Dermatology

By Janice Smith



Keynote presented by President-Elect Tony Davis, Executive Director of Dermatology Specialists, PA

- and -



Curt Mayse, Principal at Clifton Larson Allen

Presented by our President-Elect Tony Davis, Executive Director of Dermatology Specialists, PA, and Curt Mayse, Principal Clifton Larson Allen, this presentation provided great insight into the dermatology industry. Tony and Curt discussed many of the short-term influences (1-3) years) that drive our practices, including reimbursement, staffing, cost controls, and EHR. They explained ways to maximize the revenue cycle performance by understanding the profile of the patients we see (those that can and will eventually pay vs. those that will likely not pay) and areas where improved efficiency can reduce costs. Both also explained some of the new payer lingo resulting from the SGR repeal:

- MACRA (Medicare Access and CHIP Reauthorization Act of 2015)
 - Ended SGR (Sustainable Growth Rate)
 - Reward providers for BETTER care not just MORE care
 - Combine Quality Reporting into ONE system
 - Timeline 2015 to 2021
- MIPS (Merit-based Incentive Payment System)
- **APM (Alternative Payment Methods)**

The presentation also included discussion of the long-term influences (3 years and beyond), such as quality vs. traditional FFS reimbursement, diversifying revenue streams, and consolidation/private equity acquisitions of practices. Right before the conclusion of the presentation, Tony and Curt provided six key takeaways from the survey results:

- Medicare's commitments to risk-based payment is now clearer than ever.
- The private payer market is moving toward risk more slowly.

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- Consumer-driven health care is here to stay and it is growing.
- Loyalty is the right paradigm for defining success.
- Medical groups must expand their business portfolios to remain financially sustainable.
- With so much change afoot, the risk of physician burnout is at an all-time high.

The highlight came with the release of some data from ADAM's first Benchmarking Survey. A huge thank you to the Benchmarking Task Force and all practices who participated! Data shared during the presentation included salaries and some practice production and expense information. We are all eagerly looking forward to release of the full survey! ■

As a reminder, those that participated will receive the survey for free. Non-participating ADAM members can purchase the survey for \$100.00 and non-ADAM members can purchase it for \$250.00. If you're interested in purchasing, please contact ADAM Headquarters at ADAMInfo@ shcare.net or visit www.ada-m.org to make your purchase online.



Telephone Doctor's

Six Cardinal Rules of Customer Service



By Nancy Friedman, Keynote speaker, Customer Service Expert, President Telephone Doctor Customer Service

FACT: The best weapon for a small business against the **BIG** guys is Customer Service.

It's that simple.

We will pay more for better service! So if you're a small business owner and if you're looking for ways to improve, read on. Telephone Doctor, an international customer service training company headquartered in St. Louis, Missouri, believes in helping small businesses get better at communicating with their customers.

To get off on the right foot with your customers, whether you're a large or small retailer, whether your customers come to you via the phone or in person, here are the Telephone Doctor's Six Cardinal Rules of Customer Service.

Adapting these easy steps will make your day, and more importantly, make the customer's day a better experience for you and your company.

CARDINAL RULE #1

People Before Paperwork

When someone walks into your place of business, or calls you while you're working on something, drop everything for that person. Remember, paper can wait, people should not. We've all been abused when we go shopping and been ignored and we know how that feels. Let's not abuse our own customers. Remember: People before paperwork.

CARDINAL RULE #2

Rushing Threatens Customers

Sure, you may understand something real quick, but rushing the customer along will only lead to them feeling intimidated and you won't see them coming back to you. Take it easy. Remember, speed is not success! Trying to be "done" with a customer as quickly as possible is seen as being rude and uncaring. Take your time with each and every contact.

CARDINAL RULE #3

Company Jargon

Ever get a report from a company and not understand it? Some companies have company jargon that makes the CIA wonder what's up. Be very careful not to use your own company jargon on your customers. You and your employees may understand it very well, but the customer may not. And you'll only cause a lot of unnecessary confusion. Spell things out for your customers. Don't abbreviate. Remember, don't use military language on civilians.

CARDINAL RULE #4

Don't Be Too Busy To Be Nice

Hey, everyone's busy! That's what it's all about. Being busy does not give you carte blanche to be rude. Remember, you meet the same people coming down, as you do going up. They'll remember you. (What's worse than being busy? NOT being busy.)

CARDINAL RULE #5

"Uh huh" is not 'Thank You' —
"There ya go" is not 'You're Welcome'

How often do you hear these slang phrases? We need to remember 'Thank you' and 'You're welcome' are beautiful words. The customer cannot hear them too often. However, if you're telling your customers to "have a nice day," please say it with meaning! I recently had a checkout clerk tell the FLOOR to have a nice day. She wouldn't look at me. Make eye contact when you're saying something nice.

CARDINAL RULE #6

Be Friendly BEFORE You Know Who It Is

There's a good lesson to be learned here. The Telephone Doctor motto is: SMILE BEFORE you know who it is. It will earn you many classic customer service points. The customer needs to know you want to work with them, no matter who they are. Remember, sometimes it's way too late to smile and be friendly after you know who it is.

Any one of these tips will boost your customer service! ■

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QUESTION: Would you address the anti-kickback statue prohibiting a practice from offering freebies for cosmetic related services? It is not uncommon for cosmetic patients to see providers for non-cosmetic related services. Does the fact that the patients are classified as both cosmetic and medical mean that a practice could run into anti-kickback implications if they offer, for example, a \$50 gift card for having the cosmetic service? Also should the practice be concerned about the anti-kickback statue when offering a reward program?

ANSWER: Your question identifies an interesting and complex area of the law. Practices that participate in a program such as Medicare are prevented for providing financial incentives to either to secure patients or to have patients to receive additional services. This clearly means you cannot offer a \$50 gift card to your medical patients.

Let's assume your practice is restricted to private pay individuals. You still have some issues with using gift cards for marketing purposes. For example, you cannot offer an existing patient \$50 for every new patient they bring to your practice. This would be seen as an ethical violation by the State Boards of Medicine and could be considered fee-splitting with a nonphysician.

The issues do not end there. The Federal Trade Commission also has guidelines for compensated endorsers. This means that if you are compensating a patient, you must disclose that fact. Remember Ed McMahon and Publisher's Clearing House? On the television screen, Ed McMahon's balloons and 5 foot check was writing that said he was a compensated

endorser of Publisher's Clearing House. Most recently these laws have been enforced against bloggers who accepted compensation and product discounts in exchange for positive postings.

Although marketing private pay services and procedures is somewhat of a mine field, it can be done legally. Karen Zupko from the firm Karen Zupko & Associates helps practices with this area. "The issue of incentives is interesting and common in many aesthetic practices," says Ms. Zupko. Offers such as "Buy a series of 3 and get the 4th free!" or "sign up for this and we'll give you something," may attract some patients. But Zupko says the real question is "Do these incentive keep patients loyal and coming back?" The answer may surprise you. "All of the sales literature shows that business that is 'bought' does not engender loyalty," cautions Zupko. Ultimately, you have to decide what is right for your practice. "Be thoughtful in what you offer, and, remember, tracking is mandatory!" Take this expert advice from Karen Zupko to heart and you will be on your way to safely and effectively marketing your practice.



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