EXECUTIVE DECISIONS IN

DERMATOLOGY

MARCH & APRIL 2017

25TH ANNIVERSARY 25th EDITION

2017 ANNUAL MEETING

A Great Success!

Congratulations to ADAM's 2017 Practice Manager of the Year!

>> Check out an exclusive interview with the Winner here

ADAM

Association of Dermatology Administrators & Managers

EXECUTIVE DECISIONS IN
DERMATOLOGY
MARCH & APRIL 2017

inside

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 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.***

ADAM
Association of Dermatology Administrators & Managers

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President's Message

This month I'm writing directly after having attended ADAM's 25th Annual Conference. While it is always wonderful meeting ADAM members, renewing friendships, enjoying the incredibly beautiful hotel and surroundings, hearing some amazing speakers, and taking in volumes of information, the thing that I always return with is the feeling of having been refreshed and renewed. I realize: I am not alone! There are others of my kind out there! And now I'm ready to take on the world! Well, at least my practice.

This meeting set records with 335 attendees, of which 110 are new members, this year. We had 44 exhibitors, 18 of whom were either new or had not exhibited in several years. The opportunities to meet in person with these companies' representatives and possibly bring something back to the practice is so appreciated. Particularly since these firms are either dermatology-specific or have significant experience in the dermatology market.

This is the half-way mark for my tenure as President. It has been an incredible experience so far. The ADAM Board of Directors with whom I am honored to work is one of the hardest working, goal-oriented, and committed groups with whom I have had the pleasure of working. We have accomplished a great deal in the past two years but we have plans to bring even more resources and opportunities in leadership to ADAM. As with everything, it takes time to build programs but we will be seeking input from the membership as we begin development.

Last year we announced the addition of a Billing Certification program which is progressing nicely. If things remain on track I believe we should be able to unveil this program at next year's Annual Meeting which is at the Coronado Bay Resort in San Diego, February 12-14.

Is there something you would like to see ADAM provide? Is there a particular topic you'd like to see addressed in an article, a webinar, or as a speaker next year? We love member participation! Perhaps you'd like to contribute an article on something you do in your practice or in which you have expertise? We welcome member participation in all shapes and forms. Please don't ever hesitate to contact me by e-mail at gabibrockelsby@yahoo.com or on my cell phone at (615) 556-1949.

Warmest Regards,

Gabi Brockelsby
ADAM President

THE POWER OF A WORD ...

With all the changes that have happened and will continue to happen in healthcare, it is important that we don't get too caught up in what the future changes might be, that we don't forget to thank and cherish today those who are in it helping to make each office and organization the best that it can be.

Someone close to me recently shared that she and her friends (all professional working women) get together every year for a New Year's dinner. At this dinner, it is tradition for each of them to choose their individual "word of the year". They need to share with each other why they chose their word and what effect or impact they are hoping to have with regards to their personal and professional life. This group of friends helps to remind each other of the word they chose throughout the year and continue to hold them accountable for utilizing it.

This can be a team building type of exercise among your management staff or with your entire office. At the very least, try it for yourself. Words have the power to inspire, encourage, appreciate, heal and turn the impossible into the possible. One single word can change your attitude, and the way you think, speak and act. It can help you find clarity and focus as you navigate through the hectic and sometimes stress-filled world that we live in.

I will share with you the word that I have picked for myself for this upcoming year.

em·brace

/əm'brās/

noun

1. Act of holding someone closely in one's arms

2. An act of accepting or supporting something willingly or enthusiastically

This word can be integrated beautifully into my home and my personal life. From a personal standpoint, my family had a difficult year as my 14 year old daughter was diagnosed with stage IV metastatic Hodgkin's Lymphoma and my father, who I cared for, passed away just before Christmas.

I am choosing to EMBRACE each and every moment with my 3 children, my husband, my friends and extended family. I am going to embrace their presence in my life and be grateful for each one of them. I will celebrate their personalities and be thankful for their diversities. I will embrace and cherish the memories of my father and the wonderful man and dad he was.

I will embrace that my children have been wired to test my every last strand of patience. I will embrace my husband's selective hearing and I will even embrace that my second job is now a non-paid Uber driver for my children.

Why will I embrace it? Let's be honest, I will still have to drive my kids everywhere, repeat myself 12 times to my husband and deal with the kids constant bickering. If I change my mindset to EMBRACE these circumstances rather than get frustrated by them, I am looking at a positive rather than an irritant, which makes it a win-win for everyone.

My professional life is no less hectic than my personal life. I run a large dermatology office with many satellite offices and

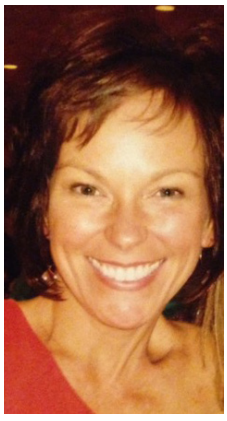
a large supportive staff. I wear many hats and am constantly juggling many items at any one given time. I bet many of you can instantly relate to that statement. My office has been going through some changes as we are trying to tighten the belt buckle and streamline many of our procedures. There are times that I can sense the staff getting nervous as to what change or cut back is coming next. Administrators' and managers' thoughts are often no different. People, typically, do not like change. Change can be scary. However, sometimes change is necessary...and let's face it, if we aren't changing, we aren't growing. We must remember that we need to lead by example. Any fear of change needs to be tucked away. If the staff sees or can pick up on your unsettled energy, it can cause pandemonium. I am choosing the word EMBRACE for my professional life as I am embracing the changes that have been made within my organization and will continue to embrace further changes. In order to continue to strive to be better, we must occasionally take a temperature as to how the organization is fairing compared to others and make changes necessary to remain competitive and in demand. I am embracing that the organization is heading in the right direction and we will emerge much stronger than what we started out as.

Whether it be personal or professional, I feel that my word, EMBRACE, is very fitting for me this year. We don't always know that future holds (in health, home and work). To use the old adage, we need to stop and smell the roses holds true. Many of us move 100 miles per hour during the day. It is very easy for us to overlook the good of the moment because we are fixated on the next hour, day, month or year.

Join me this year in EMBRACING everyone and each moment that make up this crazy thing we call life.

Wishing everyone a year full of love, health and happiness.

-Shannon



Shannon Page
Communications Committee Chair, Clinical Operations Manager, New England Dermatology & Laser Center

HISTORY OF ADAM

Celebrating 25 Years of ADAM

In February, over half of ADAM's membership celebrated ADAM's 25th Anniversary at the Annual Meeting in Orlando, Florida. One third of the attendees were new ADAM members. ADAM members, whether brand new or longstanding, enjoyed learning about the history of ADAM. We share an overview here with you.

In 1991 some visionary people met to talk about creating an organization for dermatology practice administrators and managers. It started with a meeting in Washington, DC, followed by a meeting in Chicago. An organizational group was formed, chaired by Chuck Lowe, with Melody Maeyens as Vice Chair and staffed by AAD staffer, Diane Krier-Morrow. After much discussion and hard work, bylaws were drafted and in San Francisco in 1992, the Association of Dermatology Administrators and Managers was formally established and officers were elected. Melody Maeyens was the first elected President.

ADAM was initially housed within AAD and its first Executive Director was Thommy Tompson, also with AAD. Following Mr. Tompson, another AAD staffer Bruce Sanders, became the Executive Director. When Mr. Sanders left AAD and started his own company in Oakland, California, he took ADAM with him and continued to serve as ADAM's Executive Director. In 2006, Strategic Health Care was selected as the association management company and Lisa Spoden became the Executive Director, based in Columbus, Ohio, followed by Pam Kroussakis in 2010 in Washington, DC and Diane Turpin, JD in 2015, also in Washington, DC.

ADAM's first annual meeting was scheduled for an hour and a half during AAD's Annual Meeting. There were approximately 45 attendees. Reports are that the first meeting lasted five hours! Some of the big issues in the early years included developing electronic records and managed care. By the following year, attendance at the Annual Meeting grew to 105 attendees.

A critical issue at the time was the new coding system and guidelines by the forced transition from the revised CPT coding system. The codes became inclusive of some office calls and follow-up visits, including ones where complications had occurred. The codes were itemized in both CRVS and the CPT versions prior to the new revised system. ADAM held regional educational seminars on coding and insurance claims management in the early years. ADAM published its first *Executive*

Decisions newsletter in the first year. This newsletter, *Executive Decisions in Dermatology*, remains a staple of ADAM's offerings.

ADAM'S logo has changed over the years:

1ST VERSION

2ND VERSION

CURRENT VERSION

but its mission has remained the same – serving the dermatology profession through education, resources and networking opportunities. Throughout the past 25 years, ADAM's Annual Meeting has exemplified its mission. In addition, ADAM continues to educate members through its bi-monthly newsletter, its website, www.ada-m.org, the members'-only discussion group on LinkedIn, frequent webinars and our Committees and Task Forces.

Thank you for being a member of ADAM and contributing to its success. Here's to 25 more years of service.

ADAM'S HISTORY AT A GLANCE

KEY MILESTONES

1991

Visionary people met to talk about creating an organization for dermatology practice administrators and managers.

Group included Chuck Lowe as Chair, Melody Maeyens as Vice Chair and AAD staffer, Diane Krier-Morrow

1992

Bylaws were drafted and ADAM was formally established and officers were elected.

Melody Maeyens was elected as the first President and Thommy Tompson was the first Execcutive Director.

ADAM's first annual meeting was scheduled with approximately 45 attendees.

Executive Decisions newsletter was published.

2006

Strategic Health Care was selected as the association management company.

2017

ADAM celebrates it's 25th Anniversary!

EXECUTIVE DIRECTORS OVER THE YEARS

- Thommy Tompson
- Pam Kroussakis
- Bruce Sanders
- Diane Turpin, JD
- Lisa Spoden

2017 ANNUAL MEETING

RECAP & HIGHLIGHTS

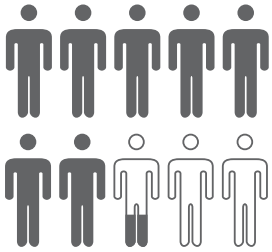
Presentation Summaries from 4 Members • ADAM Board Changes •
2017 Practice Manager of the Year Nominees • Interview with the Winner

Are They on the Clock or on the Team?

This is the question the always entertaining and informative Kyle Mills of Revision SkinCare challenged us to answer.

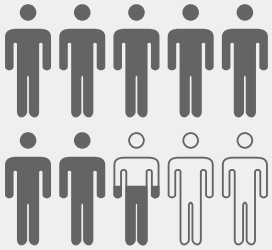
83%

of dermatologists spend **40 hours** or more per week seeing patients.



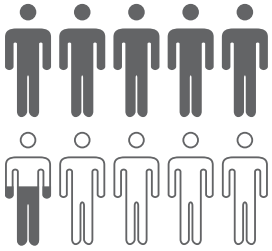
85%

spend **less than 17 minutes** with a patient.



56%

spend **less than 11 minutes** with a patient.



And yet, practices offering a better patient experience grow at twice the speed of their competition. ***How do we improve the patient experience?***

REFRESH THE PHYSICAL SURROUNDINGS: How long has that silk tree been sitting in the corner? How thickly covered with dust? Do the chairs sag when you sit in them? Does the office feel welcoming to the patient?

REDESIGN THE EXPERIENCE: It may not make sense to slow the provider down so how can we improve the quality of the experience? Can the aesthetician or another specialist be pulled into the exam room to review skin care plans and products? Can an added experience such as a free Visia evaluation be incorporated? How about a paraffin treatment while a patient is numbing for surgery?

ENGAGE THE FRONT LINE: 96% of employees try their hardest when they are engaged in their jobs. Include employees in decisions, communicate effectively, be fair and transparent with them and the end result will result in a better experience for both patients and employees.

Large Practice Roundtable

I have always loved roundtables because it gives me an opportunity to hear what others are experiencing, how they have solved issues similar to mine, or to just listen to some of the totally creative ways things are being done in other practices. This is the first time ADAM broke up into large or small practice roundtables which gave me pause. Our practice could be considered large or small, depending upon your definition. But what is always true is that we all have similar challenges but of different scale. This roundtable moved quickly from topic to topic with tremendous participation by many.

Workplace Trends and Survival Tactics for the Next Decade

by Margaret Morford was an excellent way to start the conference off with a bang. As a former attorney, Margaret was very knowledgeable, a little comical and very well received by the group.

Margaret spoke about today's workforce and how it is taking a shift. Margaret spoke on how wise it would be for offices to have offerings that appeal to the new workforce (millennials). Some suggestions discussed were:

1. ***Contact outside vendors*** *to provide concierge services for employees. (meals, dry cleaning etc., negotiate prices on behalf of the staff)*
2. ***Build in-house temporary labor pools*** *to cover vacations and leaves of absence.*
3. ***Ask yourself, "Are we able to outsource any of the work"?***
4. ***"Parenting Hours"*** *– extra help during the peak times*
5. ***Diversity Education*** *should also be performed. It is suggested that you do not use canned info. Look at geographic and demographic data in your area. Incorporate that diversity into your presentation. This presentation needs to be scripted so that it will help to pull the workforce closer together.*

I am quite certain that everyone who attended this session walked away with something that they can incorporate into their office life.

7 Secrets of Being a Positively Unforgettable Office Manager

presented by Dr. Steve Shama and Tena Brown was an upbeat, feel good interactive Keynote session. The two speakers complimented each other and kept everyone on their toes.

They shared their 7 secrets to being unforgettable:

1. *Be you – don't be fake*
2. *Be in the moment instead of always looking ahead in time*
3. *Be Kind*
4. *Show Empathy*
5. *Use Humility*
6. *Don't judge*
7. *Appreciate your employees*

While these are common sense attributes that should be incorporated every day when running an office (or even in life). Often management, staff and providers can overthink and overlook the obvious. We are always looking for more sophisticated/data driven ways to run a medical practice that we may, at times, forget to go back to the basics.

Dr. Shama and Tena Brown's advice, sprinkled with a touch of humor, was a wonderful way to start our last day of the conference.

Counselling vs. Discipline

by Margaret Morford

This session was extremely helpful as counselling/ disciplining an employee is never an easy or fun task to do. With today's world being so litigious, having an attorney speak on this topic was both eye opening and re-assuring.

A couple of helpful "takeaways" are:

Let your employee know, up front, that you have an issue (or a couple issues) that you would like to discuss with them.

GO INTO THE DISCUSSION WITH A 3 STEP OUTLINE:

1 **State your issue and give the employee a plan (for improvement)**

a. State performance expectations in a positive (not negative manner).
b. Tell the employee what you will do to assist them.
c. Communicate to the employee that only they have the ability to correct this problem but you will be there for them every step of the way.

2 **Tell the employee that you will be following up with them, give them a time frame for the follow-up and then make sure you do it!**

a. You will need to outline what the next steps are if the employee doesn't correct their behavior.
b. Put the onus on the employee, "Please fix this issue before our next follow-up because the next meeting afterwards will be for termination. Please do not make me do that"!
c. Set a specific date/time to follow up. Do NOT reschedule.

3 **Ask the employee, "What else do you need from me in order for you to be successful"?**

HELPFUL TOOLBOX

When counselling, it needs to be a discussion and NOT a lecture

Avoid judgement words

Describe how this behavior is hurting their performance

Give them an encouraging statement, "It is in your best interest to succeed and it is in my best interest for you to succeed".

When counselling or disciplining a patient, do NOT ask yes or no questions. Ask questions that demand an answer rather than just a yes or no.

Bringing Diversity Into the Mix – Building Highly Effective Teams and Organizations

presented by Frank D. Cohen, MPA, MBB

"*Together Everyone Achieves More.*"

Frank left the group with several take-away points that we all need to be reminded of. Here are a few:

1. **Importance of Teams** – teams bring more creativity. Selectively choosing your team gives immediate access to multiple skill sets.
2. **Benefits of a Team** – the group gains a better understanding of the issues from all angles. You ultimately build stronger relationships as you problem solve and understand the issues facing each department. There is great satisfaction and buy-in when you are chosen to be part of the solution.

Frank ended the meeting sharing points about conflict resolution, including the common causes and the results of conflict:

1. Conflict is the result of mutually exclusive objectives or views.
2. Not all conflict is preventable and not all conflict is bad.
3. Negative conflict may result from too much diversity or too large of a team.

We face many challenges within our small to large dermatology practices. Building specialty teams to tackle the various day-to-day and long term issues of our practices will most certainly contribute to the growth and success of our dermatology practices!

In summary, Frank's presentation couldn't emphasize enough the important role we play as managers to recognize the benefits of building highly effective teams which involves creating groups that have multiple skills sets and most importantly players that are high-performers with good problem-solving skills. It is also imperative that the team understands they won't all have the same view, but that they must be willing to work together to achieve more.

Handling HIPAA Breach Investigation and OCR Disclosure Requirements

Saul Ewing, LLP had two presenters: Bruce Armon, Esq. and Karilynn Bayus, Esq.

Our annual meeting would not be complete without an overview of HIPAA.

Bruce and Karilynn challenged us to return to our practices and review our Privacy and Security Practices.

"Know the rules!" –Bruce Armon.

Our practices, as well as technology, are ever-changing. It is important to review your company's Privacy and Security manual and make sure there isn't something to add, revise, or eliminate. In 2016, the Office of Civil Rights (OCR) launched a Phase 2 HIPAA Audit Program. We were tasked to head home and check out the OCR website. Focus on Phase 2. You will find a very detailed check list of all the changes.

"HIPAA is really enforced people!" stated Bruce Armon.

Through November of 2016, the OCR had settled 41 cases with parties and received total payment of $48M. As of the meeting, the number increased to $58M. The consequences of a breach is another "Hot Issue." With laptops, iPads, smart phones and thumb drives leaving our dermatology offices on a daily basis, it is very risky!

Run a risk assessment of your Practice. Make sure equipment is password protected, and if it comes to the day when you do have a breach, REPORT IT!

1. Take the time to train and re-train your staff.
2. Review your policies.
3. Confirm your privacy officer and security officer are still with the company.
4. Keep your IT Company on their toes. Test them occasionally to make sure they are doing their job.
5. If you have a breach, document the "Day of Discovery."
    a. If less than 500 individuals involved, keep an in-house log and submit to HHS within 60 days at the end of the year.
    b. If more than 500 individuals involved, you must report to HHS within 60 days.

"An ounce of prevention is worth a pound of cure." --Benjamin Franklin

Avoiding and Preventing Embezzlement presented by Debra Phairas, President of Practice & Liability Consultants, LLC

Debra Phairas spoke very candidly about the prevention of embezzlement. Healthcare ranks 5th in the number of embezzlement cases from the Association of Certified Fraud Examiners.

Medical practices, without safeguards in place, can be an easy target. Our speaker shared many thoughts on the underlying motivation for why an employee might embezzle. **Here are a few**:

- Employee feels underappreciated.
- Employee thinks they are underpaid.
- Employee feels like they are overworked.

Ways to avoid the above would be to step-up your "appreciation" program. Catch employees doing things right! Honor them with holiday or appreciation parties. Keep up with wage surveys and make sure you are competitive in your area. Provide health insurance and retirement benefits for your employees. If your staff is continually into over-time, maybe it's time to bring on another staff member to alleviate the "over-worked".

Always be on the look-out for the signs of embezzlement:

- Employees that never take a vacation.
- Employees who prefer to work long or odd (early–late) hours.
- Signs of life-style change.
- Petty Cash not balanced. Keep your petty cash balance at or under $50.00.

Review your internal controls.

- Make sure more than one employee has control over the cash transactions.
- Receipts should be given for cash – with a numbering receipt system and carbon copy.
- Have limits on the amount that can be written off by your billing staff.
- Owner/physician should sign the checks.
- Owner/physician should review credit card statements.
- Perform background checks on the staff handling the money.

In conclusion, if you as a manager suspect a staff member is embezzling, the worst thing you can do is act too quickly and haphazardly. Do not confront the suspected employee until you have undeniable proof.

Don't terminate the employee until you are completely certain you have proof. And lastly, don't share your suspicions with other employees until the case is completely closed.

Though this topic is hard to even comprehend, embezzlement presents itself in many forms. A quality dermatology practice makes sure they have compliance practices in place from their front desk, to their billing department, and into their medical clinical facility. Embezzlement is not just in the form of "dollars", it surfaces in many ways. Office supplies, cosmetic products, skin care products, and more. The employee may have innocently planned to pay for the product they took home on Friday night, but after the first time was missed and easy, it opens the door for a second and third occurrence.

Take the time this 2017 to review your compliance manual protocols and internal controls.

PRESENTATION SUMMARY FROM JILL SHEON

Workplace Trends and Survival Tactics for the Next Decade

Margaret Morford

How do you respond to employee work performance issues? Do you address them or let them build? Do you hide from them hoping that they will go away? Do they ever go away? Are these the issues that on a great day will get you down or on a bad day drive you over the edge? How are you to respond to an adult employee who is not performing to the expectation? Margaret Morford, CEO for The HR Edge, Inc., an international management and consulting company and our keynote speaker on the first day of our annual meeting, provided many recommendations, including the following:

"I do not think you are working up to your full potential that I need you to do."

"Your workload is 50% of your expected job capacity."

"I have a work performance issue to discuss with you and I know it will upset you but we need to talk about it."

Regarding employee attitudes, "if you can see it or describe it, then its fair game to discuss with you".

Ms. Morford provided a focus from which we can effectively manage employee behavior in the workplace.

Ms. Morford has a BS degree from the University of Alabama and a JD degree from the Vanderbilt University School of Law. Prior to The HR Edge, Ms. Morford served as the Senior Vice President of human resources consulting for a national consulting firm. She has worked as an attorney, specializing in employment law. She has written several books, including *Management Courage: Having the Heart of the Lion* and *The Hidden Language of Business.*

Academic Roundtable Discussion

Moderators: Don Glazier, University of Oregon and Kathy Ryan-Morgan, University of Colorado

This session could have gone beyond its scheduled three hours. Don and Kathy did a great job in leading the discussion on many topics including the following: provider productivity, patient access and appointment lag, licensed advanced practice providers (PA's and NP's), MACRA/MIPS and hiring faculty. This session became very interactive with everyone in the room sharing approaches and new ideas to these and other topics. It's a very collaborative session; one of my favorites!

2017 Annual Meeting

ADAM BOARD CHANGES

Many Thanks to Jeff Stewart

Jeff Stewart led the Mentoring committee during his time on the ADAM Board of Directors and was instrumental in helping ADAM make decisions about an upcoming change in software used to manage the organization. Jeff's passion for the value of developing a mentoring relationship reflected in every aspect of his work with ADAM.

The decision to join a Board is never an easy decision because you know you are going to be asked to give up time you may not have. Jeff stepped forward to share his time and knowledge with us but, more importantly, his passion for what ADAM brings to its members.

Thank you, Jeff, for your hard work in advancing the goals of ADAM during your tenure on the ADAM board and for sharing your time with us.

Welcome Michele Blum

We welcome Michele Blum, Practice Manager for Front Range Dermatology to the ADAM Board of Directors.

A nominee as Practice Manager of the Year in 2016 and recent grandmother to Quincy,

Michele is also a veteran (Thank you for your service!). She manages a busy dermatology office with four locations in Greeley, Fort Morgan, Loveland and Fort Collins, Colorado. Michele decided to join the board because she wants to give back to an organization from which she has learned so much.

For a full list of ***ADAM's 2017 Board*** *click here*

2017 Annual Meeting

PRACTICE MANAGER OF THE YEAR NOMINEES

We are pleased to announce the 8 candidates for the 2017 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.

Heather Beard

Heather Beard is the Office Manager for Montana Skin Cancer & Dermatology Center in Bozeman, Montana. She has been credited for bringing the morale of her practice to highs never seen before and her commitment to patient satisfaction is obvious. Heather is skilled at retaining revenue and utilizing staff and resources to their fullest potential. As her nominating physician states, "What stands out most is her commitment and passion for the practice, employees and in the end, patient care. I think it would be difficult to find a more deserving nominee."

Kip Denson

Kip Denson is the Practice Administrator for The Woodlands Dermatology Associates in Spring, Texas, the largest dermatology practice in the Houston area. She ensures that the practice remains up-to-date with all the ongoing compliance and EHR standards, manages a heavy workload with a smile on her face, and is very attentive to the needs of patients, going above and beyond in her service to them at times. Her practice knows they are lucky to have Kip in the lead and credits her with keeping them thriving and growing.

Lori Skraba

Lori Skraba is the Office Manager for DuBois Dermatology and Cosmetics in DuBois, Pennsylvania where she has been instrumental in the formation and success of this practice. Her interactions with patients have been far beyond the typical duties of an office manager - she will go out of her way to take as much burden off of patients as possible. Additionally, Lori has recovered more than $60K of lost revenue, taught herself to do the practice billing, and has spent countless hours ensuring the practice's compliance with PQRS and Meaningful Use criteria. Her leadership, customer service, and management skills make up an excellent Practice Manager.

Michele Blum

Michele Blum is the Practice Manager for Front Range Dermatology Associates in Greely, Colorado. Under Michele's leadership, her practice has remodeled two offices and opened a new location in four months. She has opened two Mohs histology labs, which have passed CLIA certification with flying colors, and credentialed the practice with previously closed

insurance networks. Michele has also been able to bring billing and other services in house, expanded the services provided to patients, and streamlined employee operations.

Neeru Peterson

Neeru Peterson is the Office Manager for Newton Brighton Dermatology in Brighton, Massachusetts. Her leadership skills and eagerness to help new employees are part of what makes her a great Office Manager. She works closely with employees to ensure improvement and progress. Neeru's dedication to her patient's needs is also worth highlighting as she will go out of her way to explain outstanding bills and insurance conflicts. She is also very committed to the well being of her practice, ensuring bills are monitored closely and that the practice stays on budget.

Sarah Nielson

Sarah Nielson is the CFO/ Practice Manager for the Center for Dermatology in Scottsdale, Arizona. Under her leadership, the practice has grown from three offices to eight locations, a pathology lab, and a billing call center. She now manages a practice with 19 providers in dermatology, plastic surgery, and vein surgery in addition to over 120 support staff. Despite her responsibilities in contract negotiations to supply chain, Sarah will still make herself available and attentive to patient needs and issues, making her an all around fantastic Practice Manager.

Shar Preslar

Shar Preslar is the Practice Administrator for Bay Dermatology and Cosmetic Surgery in Port Richey, Florida, a large practice with eight offices, 130 employees, and sixteen providers. Within her time at Bay Dermatology and Cosmetic Surgery, Shar oversaw the expansion of two office sites and an additional four providers. Shar has been instrumental in establishing an internal pharmacy as well as the hiring of a Dermatopathologist for the pathology lab, and in significantly growing the cosmetic portion of the business. As her colleagues have noted, the culture of her practice changed for the better once she was involved.

Suzi Dennis

Suzi Dennis is the Practice Manager for Dermatology Specialists in Boulder, Colorado. In the words of her nominating physician, "Suzi's leadership, organizational skills, and willingness to go above and beyond expectations to fulfill the needs of our growing practice are what sets her apart from any other managers." She embraced the challenge for her practice to participate in clinical trials, oversaw a dermatology practice acquisition, and created a call center. Additionally, she fosters a supportive environment for employees making the office feel like a true work family.

Congrats to Our 2017 Practice Manager of the Year **Lori Skraba**

Check out an interview with Lori on the following page

INTERVIEW WITH THE WINNER

Lori Skraba

What is your favorite aspect of your job?

I enjoy so many aspects of my job that I need to think about this one for a minute. I function best when I have multiple elements of the practice to deal with throughout the day. I enjoy that no two days are ever the same. My role could often be described as the concierge for the practice, assisting wherever needed, not only with patient issues and concerns but also working with my staff to maintain a positive and productive work environment.

What is your least favorite aspect of your job?

The least favorite part of my job is the difficult and multiple step process that we often times need to navigate in order to get insurance approval for the prescribed patient treatment. I'm sure that anyone who struggles with this process can sympathize!

What contributions have you been responsible for in improving your present office?

We now have a policy in place to provide transparency to those patients with a health insurance plan that allows price determinations at the point of care. We perform the insurance eligibility verification for each patient and explain the benefits and coverage details. This allows for a discussion of treatment options that are sensitive to patients' day-of-service expenses.

Can you tell us a couple things you do to keep your staff motivated, engaged and feeling appreciated?

Our "work family" is composed not only of different age groups but also different personalities. I feel that it is important to stress that each staff member brings something different and unique to our team. Throughout a two week period each employee is encouraged to fill in a slip of paper that describes something that another employee did for them that was appreciated. The slips are then read at our bimonthly staff meeting and a drawing is held for a $5.00 gift card. Nice gestures need to be recognized and applauded!

I also have the staff rotate positions within their department on a weekly basis. This allows them to be cross-trained on different jobs and also keeps things from feeling repetitious or stagnant.

How do you handle an under-performing employee?

I like to deal with an employee issue shortly after the problem becomes apparent. If problems are not dealt with quickly, they can easily bring down the morale of the entire team. Before documenting anything in an employee file, I meet with the employee in a non-threatening discussion to find out why there is an issue, giving as much feedback to them as possible. We discuss what changes need to be made and create performance goals together. Follow up and accountability are critical, assessing their attitude and willingness to change. Employee reaction will tell whether they have a strong commitment to team objectives which in turn, will determine the path going forward.

What advice can you offer to a new Office Manager or Administrator just starting out?

You will need to master a wide range of skills - administrating and implementing processes, assisting your physicians in multiple ways and also helping your staff members achieve excellence. Remember to coach, communicate and most of all, listen. ■

ASK THE LAWYER Q&A

with Michael J. Sacopulos, JD
Medical Risk Institute

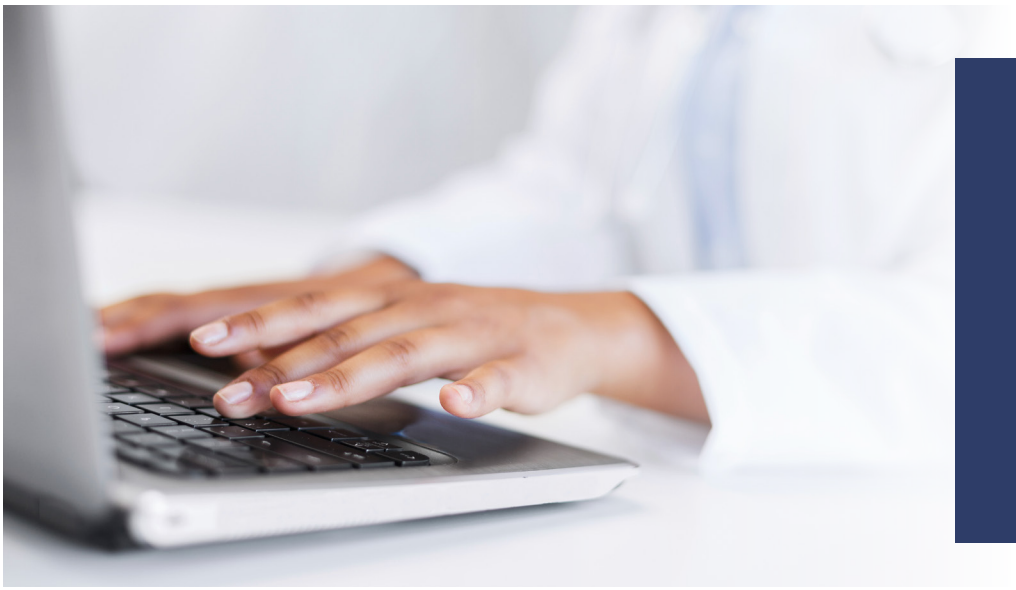
QUESTION: **Should our practice have a social media policy to set expectations for employees on social media sites? If this policy addresses usage, disclosure of company info, and consequences of disparaging comments about the company or co-workers, can the employee be written up and/or terminated for offensive statements or references to work on their social media sites? Does this policy legally hold up in court if an employee challenged it?**

ANSWER: Every medical practice should have two social media policies firmly in place: one that governs material posted by the practice as part of its social media presence, and one that covers references to work-related matters by employees in their personal social media use. Your two-part question focuses on the second type of social media policy—the employee social media policy. The answers to your question are "yes and yes, but it is complicated."

The unique nature of a medical practice makes an employee social media policy more than a good idea. In fact, it makes such policies essential. HIPAA regulations require that a practice have policies, procedures, and systems in place to protect patient privacy. Given that even the most well-meaning employee can slip up and unwittingly breach patient privacy by posting information on social media—to say nothing of the disgruntled employee who may do so willfully with malicious intent—failure to have a policy in place means that your practice is failing to meet a defensible standard of HIPAA compliance.

In addition to meeting HIPAA standards, a well-crafted employee social media policy helps your practice maintain a positive image, comply with federal employment law, stay in step with current human resources' standards, and avoid various legal liabilities. Fashioning an effective, legally enforceable employee social media policy may not be as simple as it appears. At this point, you are probably thinking that involving an attorney and an HR professional in the creation of your policy is a good idea. You are absolutely right.

Article 7 of the National Labor Relations Act (NLRA) grants employees the right to communicate with each about workplace conditions, including salary. State and local regulations



Every medical practice should have **two social media policies firmly in place**: one that governs material posted by the practice as part of its social media presence, and one that covers references to work-related matters by employees in their personal social media use.

may come into play as well. The NLRA applies to all employees, union and non-union. Since 2010, the National Labor Relations Board (NLRB), which enforces the act, has received worker complaints regarding employee social media policies.

Like the Supreme Court, the NLRB rules on specific cases. Reports and decisions issued by the Board have not resulted in a legally approved, one-size-fits-all set of employee social media rules, and it is unlikely that they will. Still, a review of the Board's memos and opinions does allow for the formulation of some general guidance your practice can apply to help create an effective policy. It is reasonable to say that your employee social media policy needs to take the following into account…

Policies should be thorough. Key elements of a comprehensive employee social media policy should include:

1. *The extent of the policy*
2. *The technology covered*
3. *Unacceptable personal and professional online behavior*
4. *Policy violations*
5. *Policy amendments*
6. *The term of the policy*

Policies should deal in specifics, not generalities. This applies to all aspects of the policy. Vague terminology, sweeping statements and "umbrella" sentences or clauses that attempt to cover a multitude of issues or possible issues with one bold stroke do not typically hold up under legal scrutiny. Terms, including "confidential information" and "company secrets," should be defined in detail. This applies to unacceptable behaviors and potential disciplinary actions as well. I'm sure you have plenty of real life examples to spice up your policy with.

Just because it makes you uncomfortable does not make it wrong. Most employers might be unnerved to hear that staffers are discussing issues like wages and working conditions, especially on social media. But that does not make it illegal or subject to workplace discipline. Even employee statements that employers believe are derogatory or malicious may not be considered so under law. That is because the employee's intent must be considered as well. After all, we have all said something we thought was perfectly benign,

only to have someone else take it another way and get upset, have we not? Unless you can establish willful, malicious intent, you probably do not have solid disciplinary grounds beyond discussing the remarks with the employee. Do not be surprised if the employee is surprised by your interpretation.

That having been said, the isolated malcontent who lurks online and constantly spews mean-spirited opinions about everything and everybody at work is unlikely to find much sympathy within the legal system. This is because the NLRB does not consider "individual griping" to rise to the level of protected behavior. (Of course, an individual who has been singled out for unfair treatment or abuse is a very different situation.) So, intentionally derogatory comments that do not touch on legitimate issues and are unlikely reach fellow employees can qualify as policy violations and lead to write-ups or dismissal. What is more, it's highly unlikely that the NLRB or any other legal entity is going to side with any employee who uses social media to knowingly reveal PHI, pose as someone else, proffer medical advice he or she is unqualified to give, or make threats against others.

As with any other workplace policy, when it comes to enforcing your employee social media regulations, education, awareness, documentation and fairness are essential. Every employee should have the opportunity to read and sign-off on the policy. If someone does not understand the policy, the logic behind it, or simply has questions, it is up to management to provide answers and explanations. Should violations occur, it is up to you to document them and determine an appropriate disciplinary response. Your practice has created the policy for several very good reasons. Do not undermine it by failing to enforce the rules in an evenhanded manner. Playing favorites is unacceptable.

Your employee social media policy plays an important role in HIPAA compliance. But the world of social media changes rapidly, with new platforms and apps appearing at an astonishing pace. These are two very good reasons why you should always include the policy in your annual HIPAA compliance review and update it when necessary. Be sure to cover any policy updates with your employees and have them sign off on the revisions.

The bottom line? A well-constructed and applied employee social media policy ensures that your patients' rights, your employees' rights, and your practice's rights are properly defined, communicated, and protected. ■

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