EXECUTIVE DECISIONS IN
DERMATOLOGY
NOVEMBER & DECEMBER 2015

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ADAM
Association of Dermatology Administrators & Managers

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NOVEMBER & DECEMBER 2015

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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****.*

ADAM
Association of Dermatology Administrators & Managers

2014 - 2015
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From the *President*

Hello!

We are fast approaching our 2016 Annual Meeting in Washington, D.C. It is an exciting time as I know the Education Committee has been working hard to curate an incredible experience at this 2016 meeting - I hope to see many of you there! Each day offers seminars in a variety of topics, from basic dermatology coding to upping your social media visibility as well as the opportunity to connect with your peers from across the country in the Nation's Capital!

We understand it can be difficult to take three days away from your practice and if we won't be seeing you in March, I hope you take advantage of our upcoming Health IT webinar. Please stay tuned as we continue to schedule webinars in the coming months!

In closing, as we approach the holiday season and our busy lives get even busier, my quick thought for this issue and time of year is to remember kindness towards others – the impact may be much bigger than you think. On behalf of the ADAM Board of Directors and myself, thank you for your participation in ADAM – we hope that you and your staff have an excellent holiday season.

Take care and enjoy the newsletter!

Pam M. Matheny

MS/IO Psychology, MBA/HCM, CMPE

ANNUAL MEETING

HIGHLIGHTS

Shannon Finley and **Denise Henry-Morrisey** of Capitol Counsel, LLC will present *"Legislative, Policy and Political Overview: Outlook and Environment"* current to March 2016.

Tony Davis, Dermatology Specialists, PA and Curtis Mayse, CliftonLarsonAllen LLP, will present *"State of Dermatology"*.

Dr. Jeffrey Dover, MD, FRCPC, Skincare Physicians will present *"Exceptional Patient Experience – The Key to a Successful Practice"*.

Dr. Robin Gehris, MD, FAAD, FAAP, Pediatric Teledermatology Children's Hospital of Pittsburg of UPMC will present *"Teledermatology"*.

Terry Lewis, UPMC Legal Department, will present *"Overcoming Legal and Regulatory Issues Related to Pediatric and Adult Teledermatology"*.

Nancy Rose Senich, Nancy Rose & Associates, will present *"Guerilla Medical Practice Marketing: Social Media 2016"*.

ADAM

Association of Dermatology Administrators & Managers

Mentorship
Experience and Testimony

Dear ADAM Members and Friends of ADAM:

My name is Jeff Stewart and I serve as the committee head for ADAM's Mentoring Committee. I have been a member of ADAM since 2012 and would like to share with you my experience as an ADAM mentee.

The first Annual Meeting I attended was the 2012 meeting in San Diego, CA and it was a great experience for me! I was a little shy and because of that, opted to sign up to have a mentor. Christina Watson was my mentor and although I have never thanked her, she is the one that got this awesome ball rolling! She told me about the networking dinners and as I love food, I decided to go to my first networking dinner and ended up coming out of my shell a bit.

The second night of the Annual Meeting, I attended another networking dinner and met fellow ADAM members, Ellie and Thelma. We swapped stories and I learned how close they really have become through the organization. I thought how great that must be to have someone so close to you in this organization. Little did I know that soon I would have my own best friend…. Shannon, I miss you!!!

As mentioned before, I am more of the shy type, but after meeting such wonderful fellow members, I am currently on five committees and a Board member. This organization has so much to offer! If you need someone to show you the ropes, I highly recommend that you sign up to be a mentee. If you already know the ropes, I suggest you sign up to be a mentor.

Christina, I hope this story expresses how much I appreciate all that you have done for me. I look forward to seeing everyone at the Annual Meeting in 2016!

Best,
Jeff Stewart

Jeff Stewart

> "I am more of the shy type but after meeting such **wonderful fellow members**, I am currently on **five committees and a Board member.** This organization has so much to offer!"

AADA Legislative Conference

Experienced Attendee & First Timer's Perspective

Experienced

Pam Matheny, MS/IO Psychology, MBA/HCM, CMPE

I was privileged to participate in the AADA Legislative Conference in late September with Gabi Brockelsby, Tony Davis, Pam Kroussakis, Patricia Chan and Maren Thomas. It was a great experience that I will treasure and derive benefit from throughout my career. Each year the AADA provides opportunities to meet with your legislators on Capitol Hill and this year, I was fortunate enough to participate.

I learned a great deal about the legislative process and the need to add your voice to the advice legislators need to hear to make sound decisions during their terms in office. This year, the message included the high cost of prescriptions for patients, the need for further research and the need for better controls on insurance and for legislators to participate in the Congressional Skin Cancer Caucus to help keep them informed of the challenges facing patients and care providers. The conference included training on how to meet and talk to the legislators and lectures from some influential people in D.C.

If you have an opportunity to travel to D.C. and meet with you legislators, remember they want to hear from their constituents. They are people like you and me who want to make a difference in the world-help them understand what we need as people who have to live with the regulations and legislation they put into place.

I encourage you to become involved on the local, state and national level. Legislators cannot fix problems if they do not know problems exist - your voice does make a difference. ■

First Timer

Maren Thomas

As a newcomer to ADAM and the world of dermatology as a whole, I expected to be extremely overwhelmed and severely under-informed at my first American Academy of Dermatology Association Annual Legislative Conference. However, I was pleasantly surprised to walk out of the JW Marriott on Tuesday morning, ready to clearly and concisely relay the AADA's message to members of Congress. In a 48-hour whirlwind of lectures, conferences and meetings, I was able to grasp the "Asks" of AADA and why our journey to Capitol Hill is so important for the future of dermatology doctors, staff and most importantly, patients.

As I noted earlier, I'm new to the dermatology world so I found the breakout sessions to be extremely valuable. I had the opportunity to quickly learn some of the biggest challenges and successes in the legislative department of dermatology. Throughout the conference, we focused on the Affordable Care Act and how insurance companies are dropping dermatologists mid-year, causing problems for patients who aren't aware that they can no longer return to the physician that has been treating them.

Another major issue is the constantly increasing co-pays, which are making even the most generic dermatology drugs difficult to afford. Furthermore, drug tiering, which incentivizes lower-cost medications before the use of more expensive and effective medications, can force patients to spend months on paying for and using medicines that do not treat their illness. At the AADA conference we focused on a variety of issues, but I felt like this really summarized the core concerns of dermatologists and patients and the stimulus for our meetings with State Representatives.

The main goal of this meeting is to educate as many congressmen as possible about the laws being written and voted on in

> "I had the opportunity to quickly learn some of the **biggest challenges** and **successes** in the legislative department of dermatology."

the House of Representatives and the Senate, and why it is essential to their constituents, and your dermatology patients, that these bills receive their attention and support. To make sure that we were prepared for these meetings, we spent a good portion of Monday learning about the issues and eventually we all had the opportunity to work with legislative consultants to prepare and practice! Although I was not visiting my own congressmen, I was fortunate to accompany ADAM President, Pam Matheny, to the Missouri meetings where I observed lobbying in action on Tuesday – an incredible experience I'm fortunate to have!

Fun DC-centric speakers were interspersed throughout the conference, including former ABC Whitehouse Correspondent Ann Compton and Political Analyst Stuart Rothenberg, to help get us in the political mindset and bring a little humor to the event (who doesn't love to poke fun at politicians every once in a while?)! Overall, the conference was a great opportunity to network with dermatologists, residents and patient advocates from around the country and learn about the some of the legislative challenges that dermatologists, and their patients, face. ■

ADAM Member Spotlight

Jeff Young

Where do you work? Tell us a little bit about your practice.

I am the Director of Operations for Suzanne Bruce and Associates. We have 2 offices, one in Houston, Texas and one in a suburb of Houston called Katy. We have four service lines: Medical, Cosmetic, Research, and a Spa, and 14 total providers. In all, there are roughly 85 staff members in our organization. While all 4 service lines are critical to business, we are constantly focused on growing our cosmetic services in order to increase top-line revenues and provide a premier customer experience for our patients who trust us with their skincare.

When and why did you join ADAM?

I joined ADAM shortly after taking on my role as director of operations at Suzanne Bruce and Associates in the Fall of 2014. Being new to the dermatology specialty, I wanted to be able to learn not only the best practices from colleagues in my field, but also the latest news and events impacting our specialty and the greater overall healthcare economic market.

How long have you been a practice manager?

I have spent the majority of my career in the business side of healthcare in some aspect. I have been a practice manager for just about a year, and prior to that, I ran Ambulatory Surgery Centers as a licensed ASC Administrator since finishing graduate school in 2011.

How did you get into dermatology?

Life is serendipitous sometimes! I was approached in an airport by a recruiter who had overheard a casual conversation I was having on an airplane. We exchanged contact information and several months later she approached me about the Director role at my current company. I was happy in my prior role, but was drawn to this field, because of the opportunities to increase margins through growing our cosmetic business. This role

JEFF YOUNG | DIRECTOR OF OPERATIONS
SUZANNE BRUCE AND ASSOCIATES

was also a growth opportunity to be able to oversee operations at a multiple sites.

As a practice manager, what do you find to be the most challenging part of your job?

The most challenging job part of my job is continuing to think big picture, strategically, while also managing the day-to-day, run of the mill operations. Oftentimes it is easy to get caught spending time responding to emails or putting out fires and before you know it, the day has gotten away. Leaning on the strength of my team has helped me tremendously in that regard, but like any manager, I always have to know what's going on.

What is your strongest attribute as a practice manager?

I have always tended to be more of a hands on manager, which I think has helped me establish rapport with many of my team members—many of whom have been in this field much longer than me. My father once told me that, "someone too big to do the small jobs is probably too small to do the big ones." I always make time to round throughout the clinic at least twice-a-day to interact with staff, doctors, and patients. This helps me to be able to stay close to what's going on even though I have other responsibilities to my desk work and all the various other things on my plate.

"The presentations at the conference and being able to interact with such wise colleagues really helped to close the loop for me and **broaden my knowledge** and **ability to serve my staff and patients.** I encourage everyone reading this newsletter to **attend next year's conference** in Washington,D.C."

What has been your best experience as an ADAM member so far?

The conference in San Francisco was a fantastic experience for me. I had been in my role about 6 months by last spring and had learned just enough to be dangerous by that point. The presentations at the conference and being able to interact with such wise colleagues really helped to close the loop for me and broaden my knowledge and ability to serve my staff and patients. I encourage everyone reading this newsletter to attend next year's conference in Washington, D.C.

What ADAM benefit has helped you the most?

The networking available at the conference has been a tremendous crutch for me. I have exchanged messages and phone calls with several experienced professionals I have met through ADAM and it's been nothing but a treat to bounce ideas back and forth and share what has worked well and what has not.

Tell us something fun that not many people know about you.

I learned as a young adult that I can play piano by ear. I never had much of an interest in music when I was growing up, but took it up shortly after college. I'm not Liberace by any stretch of the imagination, but it's been a fun hobby that not many people know about because I rarely, if ever, play in front of people. ■

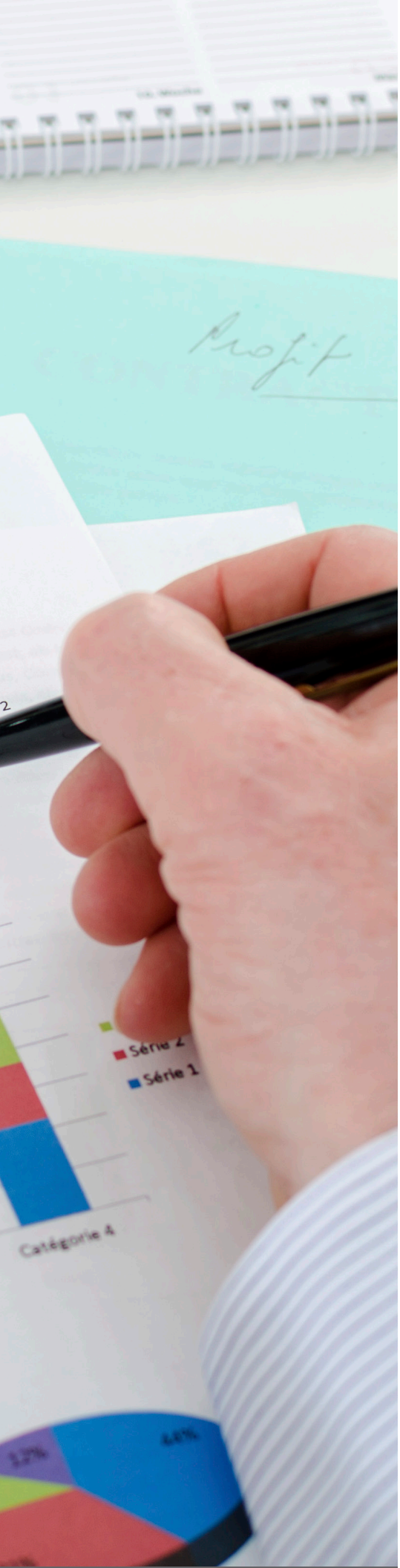
ADAM Benchmarking

Coming Soon!

By Tony Davis CPA CMPE

I am thrilled to announce that our inaugural dermatology financial benchmarking endeavor is underway!! Our task force consists of myself, George Smaistra (Bellaire Dermatology), Elisha Andrews (CT Dermatology), Darin Brown (Alta Vista Dermatology) and our vendor partner, Curt Mayse, from CliftonLarsonAllen, LLP www.claconnect.com

We are the midst of constructing the questionnaire and by the time you are reading this, the final survey will be ready to be sent to the membership (mid-November) with a mid-January deadline for survey submissions. We are excited to also announce that we will be presenting the findings of the report on the final morning of the ADAM Annual Conference in Washington D.C. If you weren't incentivized enough to attend our annual meeting, we have now made that decision easy for you!! See you on March 2-4, 2016!



Tony Davis CPA CMPE
Executive Director
Dermatology Specialists, Edina MN

The survey itself will cover three main areas of practice management – demographics, financial metrics and staff salary and benefits.

The demographic section will be an attempt to better understand the size and departments that make up the ADAM population. This will include the number of providers (doctors and mid-levels), estheticians and general staff. We will also determine whether departments such as Mohs surgery, dermatopathology or cosmetics exist within the practice. This will help with matching similar size practices together for the purposes of comparison.

In preparation for the survey, I have written a series of benchmarking articles for Executive Decisions in Dermatology which address the various metrics that we will be measuring as well as how to utilize the data to help you manage the financial component of your practice. Therefore, the major segment of the survey will address provider productivity, clinic overhead and accounts receivable aging.

Finally, we will be establishing benchmarks relative to key staff member compensation and benefits. The value in this section is to provide you with a low, medium and high hourly rate for clinical, operational and business office staff members. You will also be able to see what types of employee benefits your peer groups are offering.

The survey will cover the most recently completed fiscal year which will be 2014 for most of us. So, in the next couple of weeks, get your practice management reports, your income (profit and loss) statement and your payroll reports ready and be prepared for the inaugural dermatology financial benchmarking tool. Your participation is key to its success!! ■

Public Relations for Healthcare

Grow Your Practice Using Earned Media

By Michelle Abdow

Marketing is a powerful business development tool, and with the rapid (and costly!) changes occurring in the health care industry many practices are struggling to find the budget to keep marketing part of the business plan. This second installment of a three-part marketing series will focus on public relations – one of the most cost-effective marketing initiatives connecting medical experts with the public through the use of media.

Health care is one of the most covered topics in the media. In fact, many national TV affiliates even have chief medical correspondents that provide commentary about health care like Dr. Sanjay Gupta and Dr. Mehmet Oz. While chief medical correspondents are not available for many local media outlets, such as newspapers, TV and radio stations, the local media is also covering these important stories. Offering a physician or medical professional as a source for the local media is a great public service, but it is also one of the most influential and cost-effective ways to grow your practice. Why?

NEWS COVERAGE IS FREE

Unlike advertising, or paid media, public relations generates "earned media." This means that when a reporter or editor interviews a medical professional, the reference in a news article is free of charge. There is a cost associated with the development of press releases or media outreach (whether this is done in-house or by a contracted agency), however successful public relations outreach can generate articles and broadcast stories that would cost considerably more if the space or air time was purchased through advertising.

PUBLIC RELATIONS BUILDS AWARENESS

Sometimes the most difficult part about business development is just getting the message in front of people. From new products and procedures to everyday best practices for healthy living, there are many topics that a reporter or editor may want to use medical expertise to support. Public relations professionals build relationships with the media to connect them with sources, which is often why contracting a marketing agency can be helpful (though it can be done in-house, too, if there is a staff to budget time toward media outreach). Just one article or broadcast story can amplify the awareness of a product, service or brand. What's more, is that once reporters, editors and producers have an expert as a contact they are likely to call back again for other stories. Repeat appearances and regular guest columns are often the result of successful media outreach, which catapults awareness.

MEDIA MENTIONS ESTABLISH CREDIBILITY

Credibility is one of the strongest arguments for the value of public relations. While a business or brand can say they are the best at what they do or produce… it does not ring as true unless others think and say so, too. Well-established brands often use a spokesperson to add credibility, however, those endorsements are thinly veiled advertising. Everyone knows that the celebrity, athlete or other influential person advertising the product is paid to do so. The media, on the other hand, cannot sell a story, it's against the law.

> "News coverage should be just that, new! **Sharing** new products, services and even new hires with the media is an **effective conversation starter.**"

So when a news story includes expert commentary, the public knows that what is shared is fact and there is no ulterior motive.

Another consideration when it comes to public relations for health care is determining what a practice can share with media influencers to generate coverage.

NEW PRODUCTS AND NEW HIRES

News coverage should be just that, new! Sharing new products, services and even new hires with the media is an effective conversation starter. Product and service-related releases can be more difficult when it comes to garnering coverage because both topics are self-serving. The best way to make this news more valuable to the media is to show how the new product or service has value among the masses. After all, the main allegiance to any journalist or producer is to the general public. New hires, however, are very newsworthy. From hometown press that features profiles of influential residents to health care trade press that features "movers and shakers" in the industry, the media often shares stories about new appointments. This can be an incredibly valuable way to introduce a new employee and their technical skill set to attract new patients and convert existing patients for additional services.

SUCCESS STORIES

The Health Insurance Portability and Accountability Act (HIPAA) makes case studies a challenge

> The health care industry is **ripe with opportunity** related to corporate social responsibility. CSR initiatives have **high appeal to the media** because they **truly benefit the public** as opposed to a business.

for the health care industry, however they are not impossible. A case study is a narrative that demonstrates a real-life example of a problem, solution and results. Before and after photos of surgery, for example, are great visuals that supplement a health care case study.

ACCREDITATIONS, EXPERTISE AND AWARDS

As previously alluded to, the health care industry is changing rapidly. Attracting new patients is critical for success and any way a practice can set itself apart from the competition is a valuable opportunity. Seeking accreditations for specialty services, adding board-certified professionals to the staff and applying for industry awards recognizing outstanding care helps to differentiate the real experts and industry leaders. Sharing this news with the media can result in news coverage and it adds credibility to a source at the same time.

CORPORATE SOCIAL RESPONSIBILITY

The health care industry is ripe with opportunity related to corporate social responsibility. CSR initiatives have high appeal to the media because they truly benefit the public as opposed to a business. Rather than just sponsoring a 5k or fundraising event, it's great to share photos of staff members participating in these events that benefit an industry-related charity. Practices can even consider organizing an event for a particular beneficiary, such as the Dermatology Foundation for example. While it's great to support any cause, the most successful CSR campaigns are those that have relevance to the industry the business serves.

Overall, the benefits of public relations opportunities are vast. Understanding that it takes time to develop a relationship and rapport with key media targets and influencers is important. Equally important, is how to facilitate media relations. The media moves swiftly and a company spokesperson must be at the ready.

If done effectively, public relations is a cost-effective and persuasive marketing tool that health care professionals should consider as part of any marketing plan. ■

Michelle Abdow
President
Market Mentors, LLC - *a full-service marketing, advertising and public relations firm*

marketMentors
MARKETING ADVERTISING PUBLIC RELATIONS

Advocacy:

How to Get Involved and Why It's Important

By Gabi Brockelsby

The ADAM 24th Annual Meeting is in Washington, D.C. this year - what a wonderful opportunity to develop and cultivate congressional ties! Think you don't know a lot about the politics or the political process? The Sustainable Growth Rate (SGR), tanning bed taxes, HIPAA, the Affordable Care Act, scope of license, truth in advertising were all created through the legislative process.

I am often asked why I became involved in the political process and my answer is always the same: Legislation, and the accompanying regulation, touches every aspect of the medical world. As a professional within the field of medicine, I believe it important to be well-informed, and as involved as possible at the state and national level. That being said, it took me a while to get where I am today.

My first encounter with politicians was unexpected. I was sweeping my sidewalk with my 6-year old daughter when we met a gentleman campaigning in my neighborhood. We spoke with him for a long time about his positions on important topics, his desire to run for the House of Representatives, and most importantly, him. This candidate had an open invitation to company picnics, which he often attended, and once elected, he kept in touch with us on relevant issues. Nearly twenty-years later, my daughter still remembers the Congressman who impacted the foundation for her own political beliefs.

Are you ready to make a difference but not sure how to get started?

FOUR STEPS TO **GETTING STARTED**

1. Know your Legislators
2. Be Informed
3. Educate your Legislators
4. Tell your Story

STEP ONE:
Know your Legislators

To become involved in politics, you must first find an opportunity to establish a dialogue with your legislators.

If you are not familiar with the legislators in your district, each state has a website that will identify your representatives in the House and Senate based on your address. It is important to research both your work and home address because district boundaries can cut across communities which can mean changes in legislature. Here, you can also find a list of current bills in each branch of Congress.

At a national level, you can visit the House and Senate official websites, www.senate.gov and www.house.gov , where you can sign up to participate in committees on issues you are interested in. You can expect e-mails from your legislator, and possibly invitations to committee meetings on this topic.

Meeting legislators in person can often take a little more planning than my encounter, but there should be plenty of opportunities throughout the year. Civic organizations, such as the Chamber of Commerce, often host opportunities to meet legislators in person, which can be a great introduction! If it is an election year, attend fund-raising events where the candidates are present. If neither of these opportunities arises, keep an eye out for events like Doctor's Day at the Capitol, which administrators are usually welcome to attend.

Finally, if your physician is a member of your state's medical association, ask him or her how to get in touch with their legislative department, and from there kickstart your political involvement.

STEP TWO:
Be Informed

Before communicating with your legislators, make sure you know and understand the issues you wish to discuss. Every year states enact legislation that has a direct impact on how physicians, administrators, and managers are required to practice medicine within that state. Several years ago, compounding pharmacies came under review and new legislation pertaining to the compounding of medicine was enacted. However, according to this legislation, practices that routinely bugger lidocaine to make injections less painful may be put under FDA purview for "compounding" drugs. This was the unintended consequence of the bill that we are still in the process of overturning.

Legislators do not always witness the impact of their laws on our practices unless we communicate with them. However, before reaching out to a legislator, it is important that you have a full understanding of the bill or law, and are able to discuss its direct impact. Legislative officials can not help you unless you communicate a problem, but they can work more efficiently if all involved parties truly understand the implications of the specific bills.

> "Legislators do not always witness the impact of their laws on our practices **unless we communicate with them.**"

The American Academy of Dermatology website is a great place to find a "breakdown" of the legislation that directly impacts our practices, and can be a good place to start your research.

STEP THREE:
Educate your Legislators

How do we communicate these issues with our legislators?

Meeting directly with your legislator is the natural first choice, but may not be realistic. If you already have a relationship with your congressman or senator, this could be an option, but unfortunately you might not have the time or resources for this meeting to occur.

Writing to your representative is the most common method of communication. On one issue, a well-written letter may influence a legislator's decision, but a high volume of letters will certainly catch the attention of the both the legislator and their staff.

There are some formalities you should adhere to while writing:

Regardless of whether you agree or disagree with the stance a legislator has taken on an issue, **BE POLITE AND RESPECTFUL AT ALL TIMES**.

NEVER BE ARGUMENTATIVE OR CONFRONTATIONAL. Be prepared to state your facts and opinions calmly. Never, ever threaten the receiver in written or oral communications.

USE APPROPRIATE FORMS OF ADDRESS. Correspondence to Representatives should be to The Honorable John Doe. Open your letters or e-mails with Dear Representative Smith or Dear Senator Jones.

AVOID THE USE OF TECHNICAL JARGON. While legislator take action on everything from over-the-road trucking to aeronautical issues to medical issues, they are most likely not experts in that field. View this as an opportunity to educate them on the issues using layman's language. If that isn't possible, be sure to explain what the terminology used means in layman's language.

BE SPECIFIC. If you have a position on a bill include the information on the bill and why you agree or disagree with their position or what action you would like them to take.

KEEP YOUR MESSAGE BRIEF. Correspondence should be limited to one page, where possible. However, if you have more information available, offer to provide additional information if it is helpful to them.

Written correspondence is the best form of communication outside of an actual meeting. While telephone calls may seem effective, it is more difficult for a staff member to record or capture that message and relay it to your representative.

STEP FOUR:
Tell Your Story

Finally, I can't leave you with any better tip or trick than to tell your story. This is what impacts your representative the most.

If I've convinced you this is something you're interested in, here is some final advice. When I come to D.C. and have time to meet with legislators, I e-mail no less than one month in advance to set up a meeting. The staffer will want to know what you'd like to discuss. You may simply want to have an opportunity to introduce yourself and your practice but be prepared with at least one issue. It's a little too early to decide on that issue today, but as we near the conference find something that you'd like to draw their attention to or that is currently being reviewed. You don't need to provide a lot of detail at the initial contact; they are just trying to determine where you would best fit on their schedule.

> "Regardless, you will be doing **a lot of walking**, so comfortable shoes are a definite plus! And, don't forget to **leave adequate time** for going through security systems at every building – it adds up faster than you think!"

I try to space meetings at least one hour apart. Not only does that give me cushion between meetings in case one starts late, but the House and Senate office buildings are on opposite sides of the Capitol building and in March, you may not want to make that hike more than once. I also try to schedule meetings with the Senators' offices together and the Representatives together. The Senate office buildings are connected by hallways and the Representatives office buildings are across the street from each other, making it easy to travel amongst on or the other. Regardless, you will be doing a lot of walking, so comfortable shoes are a definite plus! And, don't forget to leave adequate time for going through security systems at every building – it adds up faster than you think!

If you are able to schedule a meeting, do not be disappointed if you end up speaking with a staff member instead of your representative. These young men and women (and I do mean young!) are well-educated, and it is their job to relay your message to the legislator. Treat them with the same politeness and respect you would treat the legislator themselves because the staff members play a large role in a legislator's decision.

> Politicians **love getting their photo into the paper** and are often **easier to involve** in this type of activity than any other. **You are an expert** in this field. **Offer yourself as a resource** on issues with which they may be unfamiliar.

When you arrive, be prepared to introduce yourself, give the receptionist a business card, your meeting time, and with whom you're meeting. Make sure you bring plenty of business cards with you! When you are called into your meeting, give a brief overview of yourself and/or your practice including where it is located within the state or district, the size and scope of the practice, and the number of employees within the practice. My introductory statement is: "It's so nice to see you again. I appreciate you making time in your schedule for me today. To refresh your memory, I'm Gabi Brockelsby from Murfreesboro, Tennessee. Along with about 50 others, I work at Murfreesboro Dermatology Clinic with offices in Murfreesboro, Smyrna, Mt. Juliet and Winchester where we see general dermatology patients from pediatric to geriatric. I'm here today because…."

Space is at a premium in the office buildings, and your representative and his or her staff will see you wherever they can. Don't be surprised if you're meeting in the lunch room while a staffer is microwaving their meal behind you, or in a room the size of a closet down the hall and around the corner from the legislator's office. At my last meeting there were five of us perched on a loveseat while we met with our district's representative and his chief of staff. Be gracious and don't lose your sense of humor.

Unless you're a true expert on a particular subject, do not represent yourself as such. Instead, if there is an issue of concern, relate it to your business and your patients. Physicians may not garner a lot of sympathy, but patients are our common ground. When I was advocating for the repeal of the SGR at a time when a 25-30% decrease was imminent, I related it to potential loss of access to care and for the Medicare population in very rural areas where our offices are located and to the possible loss of jobs to the geographic area.

Be aware that much of what makes our life difficult is the regulation rather than legislation. Legislators may not be able to do much more than write to the appropriate parties at CMS, the FDA, or whatever organization oversees that particular function. But if they don't hear it from us they will not take action. There are also times when we don't want them to do something such as financing something by lengthening the 2% sequestration withhold period.

During your meeting, try to get the legislator involved on things in your home district! Invite them to your skin cancer screening clinic or a ribbon cutting or perhaps a lunch session with your physicians. Politicians love getting their photo into the paper and are often easier to involve in this type of activity than any other. You are an expert in this field. Offer yourself as a resource on issues with which they may be unfamiliar.

When saying goodbye, thank the legislator or staffer for their time. A week later, follow-up with an e-mail thanking them again for the meeting, and include an open invitation to visit when they are in your district. You can even attach something relevant to the discussion you had with them, even if you left it behind with them at the time of the meeting. And then, be sure to stay in touch. Most of us can't visit the Washington or state capital offices regularly but watch for opportunities to stay in contact locally or via e-mail.

Hopefully this will have provided you with some basic guidelines on getting started. The most difficult part though is that initial outreach. Just remember, the vast majority of our legislators are happy to hear what their constituents have to say, and if there is some way for them to help you with a concrete issue, they will do their best.

See you in Washington! ■

Gabi Brockelsby
Murfreesboro Dermatology Clinics, PLC

Gabi Brockelsby is the Administrator for Murfreesboro Dermatology Clinic, PLC, where she has worked since 2000. Gabi believes that advocacy builds a stronger profession and has been fortunate to be able to blend that passion with her professional life, receiving the 2011 Medical Group Management Association's Legislative Liaison of the Year award in Las Vegas. She works closely with the Tennessee Medical Association and Tennessee MGMA on legislative affairs and has been fortunate to travel to Washington, D.C. on several occasions to lobby with our elected officials. Born in Germany, Gabi immigrated to the States with her parents as a child. She has resided in South Dakota, Minnesota, Nevada, and Colorado but now calls the warmer climate of Tennessee home.

ASK THE LAWYER Q&A

with Michael J. Sacopulos, JD, Medical Risk Institute

QUESTION: **I manage a relatively small practice in the South. We are thinking about starting a derm lab. What regulations and legal issues should we be worried about?**

ANSWER: When it comes to medical-legal issues, "worry" seems like the typical emotion. Fear not, my Southern friend. Below is your road map to success.

I am not certain why your practice is considering starting a derm lab. Most physicians' primary goal for laboratory creation is to generate income. It is possible that you have a different primary goal in mind. Either way, I think it is important to clearly understanding the priority of your goals when considering this new venture. Once everyone is on the same page then the analysis may proceed.

"You want to understand the ownership of the lab and the sources of the referrals to this new lab," says Dallas based healthcare attorney Michael Byrd of ByrdAdatto. There could be anti-kickback or Stark Law implications. "If program patients, Medicare, Medicaid, and Tricare patients, are going to receive services from the new lab, then there is a large body of law that may affect the business structure of the lab."

Sometimes third parties want to share ownership of a lab with a physician or practice. This also triggers numerous legal issues. While it would be impossible to cover all the different scenarios in this answer, you should be aware of the general issue and seek guidance. Skillful counsel can navigate you around the legal pitfalls. Ownership and legal structure of your new lab is not something to try on your own. I repeat, get a health care attorney involved. There are places to save and places to spend. This is the place to spend resources to insure the business is properly established.

Once everyone is comfortable with the ownership structure and compensation model, you will need to move on to the next step. Your lab will need to secure a "CLIA" license. "CLIA" stands for the Clinical Laboratory Improvement Amendments. This law sets standards and issues certificates for clinical laboratory testing. You should know that this is not a quick process. "I would project 60-90 days. I have had some clients get them quicker and I have had some clients have to use alternative venues, like Puerto Rico, to deal with a backlog of applications," says Byrd. You may or may not want help through this application process. Unlike

above, I do not believe that it is mandatory to have legal assistance with this application process.

Additional operational concerns relate to "OSHA". The Occupational Safety and Health Administration are those people that make you have certain safety posters and training for your staff. Remember that these regulations apply to both your practice and your new lab. (It is at this point that I typically get the question "So do you have any good news for me?").

Next, we need to think about how your new lab is going to be reimbursed for all the services it provides. This puts us squarely into the process of contracting with third party payers. Decisions need to be made as to whether the lab will be "in-network" or "out-of-network" with different third party payers. As you might imagine, there are many business and management considerations when deciding whether or not to participate in-network with certain third party payers. Those business decisions are outside my legal and regulatory law analysis. However, I would recommend that you consult with an organization such as that specializes in assisting practices with coding and billing issues. Finally, remember, the process of contracting with third party payers can often time take months. Plan ahead.

There are a few legal issues related to your status as "in-network" or "out-of-network." Certain states require disclosure to patients if the provider is in-network but is utilizing other services or providers that are out-of-network. For example, assume that your dermatology practice is in-network with a third party payer, but the new lab which you have some ownership interest in is "out-of-network" with the same third party payer. Some states would require specific notice of this to be given to patients.

Having ownership in a derm lab can be a profitable venture if it is correctly structured. Because of the complexity of the laws and the criminal and civil penalties that may apply if you stray outside of the law, I strongly recommend getting legal counsel involved early in the process. Once you are comfortable that the ownership and compensation model for your new lab is legally compliant then you can move to the implementation stage. In this stage remember that there are federal laws such as CLIA and OSHA that need to be met. Finally, make sure that you follow your state's laws regarding disclosures should participation in third party payer networks vary between your practice and your lab. I wish you great success in your new venture. ■

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