

Executive Decisions in DERMATOLOGY

A D A M

CPCD™ Exam

Offered Wednesday, March 14, 2012

The Certified Professional Coder in Dermatology (CPCD™) exam was developed by a team of leading dermatology coding professionals in conjunction with the American Academy of Professional Coders and the Association of Dermatology Administrators and Managers.

The exam measures preparedness for “real-world” coding by being operative/patient-note based. In addition to questions regarding the correct application of ICD-9-CM, CPT®, HCPCS Level II and modifier coding assignments, examinees will also be tested on specialty-specific coding and regulations.

The coding boot camp and exam are an integral part of our Annual Meeting Pre-conference, Wednesday, March 14th, 2012, in San Diego. Sign up [here](#).

January/February 2012

This issue

Annual Meeting p.1
President's Corner p.2
Member Spotlight p.2
Marketing Esthetics p.3
EHR Successes and Setbacks p.5
New Member Benefit p.6
Annual Meeting Glimpse p. 6
Camp Discovery p.7
Upcoming Events p. 8

20th Annual Meeting

You simply cannot afford to miss [ADAM's 20th Annual Meeting](#), March 14th through the 17th, 2012, in San Diego, California! ADAM's Annual Meeting Program Committee, working in conjunction with our Education Committee, has structured a unique and knowledgeable group of speakers. In addition, our committees have made a special effort to craft a number of dynamic, interactive panel sessions well worth your time and money.

ADAM's Exhibitor Fair, on Thursday, is a fantastic opportunity for you to visit with our sponsors and exhibitors. Learn about the latest innovations in products and services available to improve your office efficiencies, patient satisfaction and the practice's bottom line!

Finally, if the classes, panels and exhibitors aren't enough, join us for our Welcome Reception on Wednesday evening, and our Exhibitor Reception on Thursday evening, following classes and day long Exhibitor Fair! The Networking and Mentoring Committee has organized events guaranteed to provide a great time and ample networking opportunities! And the party doesn't stop there! Sign up for the networking dinners, scheduled for Wednesday and Thursday nights. Mingle with members, new and old, at some of San Diego's hottest restaurants.



President's Corner

A series about the state of the Association and what's new with

ADAM. Do you have a question for Rhonda?

Email us at ADAMinfo@shcare.net



I am delighted to wish a Happy New Year to the ADAM members, Board of Directors and all of our friends and sponsors! I hope you all had a joyful and relaxing holiday season. It is hard for me to believe that this is my last newsletter message as President. In our next issue, I will introduce Jayne Kresinske, our president elect, to the President's Corner. I am sure you will give her a warm welcome.

You should be aware there will be a few new faces in ADAM leadership positions this year. Our Nominating Committee has put together an excellent slate of Board of Director candidates ADAM membership will vote on in the coming weeks. I feel strongly that our organization will be led by a confident and creative Board of Directors who will work diligently, with ADAM's best interests at heart.

If you haven't gotten involved already, join a committee this year! Our committees offer a great way to participate in events, membership, networking and even this newsletter! Email adaminfo@shcare.net for more information on how to get involved.

I would like to take this opportunity to extend my sincere thanks to all of you who make this organization as vibrant and dynamic as ever. I have truly enjoyed my tenure at President.

Warmly,
Rhonda Holloway

Member Spotlight

Would you like to nominate someone for a Member

*Spotlight? Email us at
ADAMinfo@shcare.net*



ADAM: What is your name and where do you work?

Gina: Gina Welch, Practice Administrator, Rhode Island Dermatology and Laser Medicine, Providence, Rhode Island.

ADAM: When did you join ADAM?

Gina: 2005.

ADAM: How long have you been a practice manager?

Gina: About 15 years.

ADAM: Tell us a little about your practice.

Gina: We're a small group practice, just one full time MD, one part time MD and a full time PA. About 75% - 80% of our patients are multiple skin cancer patients.

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

Gina: Being a jack of all trades: human resources,

computers, billing and coding, real estate management, lasers and cosmetics, recruiting providers, hiring staff, contracting and legal....if it happens in the office, it's my area of expertise.

ADAM: What has been your best experience as an ADAM member?

Gina: Networking with some very bright, energetic managers from across the country.

ADAM: What has an ADAM benefit done for you lately?

Gina: The Aesyntix GPO has saved us significantly on our medical supply expenses.

ADAM: What would you recommend to a member of ADAM who is looking to be more involved?

Gina: Join the Committees! I'm currently on the Annual Program Committee and the Networking and Mentoring Committee and have been on the Fund Development Committee in the past. I really enjoy the Program committee members. It's gratifying to have a role in determining the structure and topics for the Annual Meeting. The Networking and Mentoring Committee is relatively new and looks to welcome new members as well as foster the networking relationships which are key for ADAM members.

Internally Marketing your Esthetic Medical Practice, Esthetician and Services

Susanne Warfield

One of the primary reasons esthetic medical practices fail is due to a lack of understanding of what each professional brings to the table and how they can most effectively work together. Getting your physician and esthetician on the same page requires time and effort. A thorough discussion needs to take place regarding how their professional relationship will work. This includes development of a marketing strategy that advances the practice philosophy and practice objectives; addresses competitive advantages, marketing program design and tracking systems.

If your practice has already developed a mission statement, it should be reviewed by the esthetician to ensure his or her contributions are included. The practice's objectives should include revenues, market share, etc. The competitive advantage states the difference between what your practice is doing versus what the competition is doing. Finally, a marketing program must address product positioning, target marketing, pricing policies, and internal and external promotional advertising.

This article focuses on what the medical practice can do to internally market the addition of an esthetician and esthetic services into your business operation. Often, the simplest way to grow the esthetician's patient base is through passive marketing. Below are basic steps a practice needs to take to successfully integrate this type of marketing strategy.

1. The esthetician needs to know the types of procedures and surgeries performed, as well as disease specialties treated by the practice physician (or physicians). The written protocol detailing the physician scope of practice is the "Standard Operating Procedure (SOP)". This document should include a comprehensive understanding of the procedure(s), possible complications and surgical outcomes, healing times and any other pertinent information about all the procedures. If your practice does not have an SOP, don't leave it up to the esthetician to put these procedures in place. Rather, have the esthetician work with the nurse

or PA who already has experience working with the physician.

2. The physician needs to understand the types of procedures performed by the esthetician. In order for this discussion to be successful, the esthetician should be able to talk at the physician's level, i.e. using clear medical, technical and scientific terminology to describe the efficacy of various esthetic treatments, equipment used and services they will provide. Required knowledge of products and their ingredients are also key elements the esthetician should be able to explain to the physician, so they have a clear understanding of how those products might affect the patient's skin. Hiring a state licensed esthetician who has attained the NCEA Certified credential will go a long way to ensure a higher competency in the esthetic profession.

3. Each procedure or surgery should have its own written SOP, including, when to treat, how to treat and what to treat. For instance, after laser resurfacing when should the esthetician begin skin treatments? What is the physician's SOP on dealing with an acne patient? If you sit the esthetician down with the physician to have a *meeting of the minds* it will ensure that they understand the interconnectedness of their skin care philosophies. The old adage, "fail to plan, plan to fail" holds true. If the time is not taken to carefully set up the integration of the esthetic services, too many assumptions, leading to inaccuracies will be start to appear.

4. Once there is an understanding of what the esthetician can offer the physician and vice versa, the next important step in building an internal client base is to "meet and greet." The esthetician has to "sell" themselves to the existing patient base. The physician can also play an integral role in developing the patient's trust of this new member of the practice team. The physician needs to feel comfortable having the esthetician accompany them on clinical rounds and



The old adage of "fail to plan, plan to fail" holds true

Internally Marketing your Esthetic Medical Practice, Esthetician and Services

meet the patients. Appropriate discretion is required, but the best way to grow an internal patient base is to have the esthetician attached to the physician's hip!

5. It is vitally important the practice identify prospective esthetic patients and make them known to the esthetician. The front desk staff plays an important role in flagging the patients that ask for additional information on services offered by the practice. The use of an intake form is a passive way to inform ALL patients of the new esthetic services that you offer in the practice. The form simply asks, "Do you have any skin care concerns such as dry skin, breakouts, aging skin, fine lines and wrinkles, etc.?" The patient can circle yes – and contact is made. From this point it is up to the physician or front desk staff to let the esthetician know of the patient's interest. Of course, ruling out any chronic condition or dermatologic disease would come first from the physician, but this would create the opportunity to offer a complimentary consultation with the esthetician. Whether the patient is there for a cosmetic consultation with the physician or not, some patients would never *think* of asking about the dry skin on their face! And, if the patient can't afford to do the physician-recommended laser treatment right now, it's in their best interest, at the very least, to begin a healthy skin care regimen. At this point, the esthetician can initiate treatment, develop patient loyalty, grow a cosmetic patient base, and so on.

**Communication is key to
establishing a successful
medical esthetic practice**

6. General internal marketing can include:

- a) The introduction of the esthetician to the practice and overview of the new services offered in the practice via social marketing or e-newsletters.
- b) Placement of patient brochures in the treatment rooms, listing all services (medical and cosmetic) specific to your medical practice. If the patient wants to read something, they will look at whatever is available, and that includes information about other services offered in the practice. If I had a dollar for every time I heard a patient say, "You do that?" I'd be rich!

7. Establish telephone scripts for the services the esthetician offers; this creates communication with prospective patients. This strategy requires clearly written telephone protocols to be used by any staff member with telephone responsibilities. Of course, the esthetician should have already given *everyone—including the physician*, a skin care consultation and facial treatment so that they know *first-hand* what the esthetician does.

8. The art of personal thank-you cards seems to be disappearing in this electronic age, but considering the personal nature of what esthetic services bring to the patient, perhaps we need to reevaluate this simple marketing gesture. Enclosing a complimentary skin care consultation offer with the esthetician, or invitation to an upcoming physician seminar or skin cancer screening, will give the card added benefits.

Communication is key to establishing a successful esthetic medical practice, and although personalities may make collaboration challenging at times, the success of having established clear practice objectives will definitely be seen in your increased bottom line!

Would you like to help mentor and network with new and veteran ADAM members at this year's Annual Meeting? The Networking and Mentoring Committee would like your help and suggestions! Email ADAMinfo@shcare.net for more information!

Switching to EHR The Successes and the Setbacks

In 2009, Dr. Sasha Kramer bought an EHR program for her practice in Olympia, Washington for \$42,000. Her software vendor was recently acquired by another company which no longer provided support for her software's platform. Dr. Kramer then invested another \$30,000 for a new EMR system her practice is currently learning. Dr. Kramer was among public and private health IT experts and physicians who spoke at a June 2, 2011 hearing of the House Small Business Committee's Health Care and Technology sub-committee. "Despite these factors, I fully support the infusion of health IT into physician practices. It is a critical component in improving the healthcare delivery system and, more importantly, providing optimal patient safety and care," Kramer said.

Below is an interview with Dr. Kramer's practice manager, Linda Lord.

Practice Name: Sasha Kramer, M.D., Dermatology

Practice Manager: Linda Lord

ADAM: Who chose the EHR?

Linda: Dr. Kramer did most of the selection.

ADAM: How was the implementation? What were the biggest fallbacks and triumphs?

Linda: During our implementation and going live we had a few issues each day that needed to be resolved. This slowed down the training and we were not able to make the most efficient use of the trainer who was on site. Having used an EHR prior to this new one was helpful in that we were familiar with EHR. If there was no previous experience with EHR, the training would have been more frustrating. It is frustrating when the system does not work the way it is suppose to and the support system is not as user friendly as it could be.

ADAM: Are you pleased with how your practice has integrated with the EHR?

Linda: Overall, I am pleased with the way the practice has integrated with the EHR.

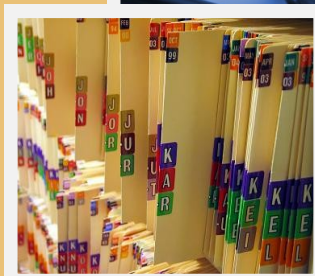
ADAM: How has it changed your day-to-day job?

Linda: My workload has increased greatly with the new EHR. The check in process is so much more labor intensive compared to our old system. It takes longer to check in the patients and this slows down the flow of patient care. It is difficult and time consuming to have to work between two EHR systems. Every patient is like a new patient because all the information needs to be transferred from the old system to new the one. The business side is difficult in that if an insurance payment comes in with payments from both systems, they have to be split. Because of this, balancing for the deposit takes more time. When we begin to work only with the new EHR system, I feel it will be better overall. I knew it would be a difficult time, as I had experienced this when we first started the practice with an EHR two years ago. I did not expect to have a new EHR system so soon after starting the practice.

ADAM: Is there anything else a practice manager needs to know?

Linda: One important question would be, how are support tickets handled? Are you able to talk with a representative when you call, or, do you have to log a ticket and wait for them to call back? The training process may take longer than it did for our small office in that everyone learns differently and the more people working in an office the longer the training will take.

ADAM: Thank you, Linda. We certainly appreciate you sharing your experience with the ADAM membership.



New Member Benefit

Save up to 60%



ADAM members are now eligible to receive up to 60% off on tickets, travel and shopping through the Working Advantage Discount Program! These savings are available exclusively to ADAM members.

Working Advantage offers discounts on entertainment options like your local zoo, Broadway shows, sporting events, hotels and ski resorts! If you are shopping, use the Working Advantage website for special discount codes on flowers, apparel, books, music and more. Can't decide? Use the Working Advantage discounts to purchase gift cards to your favorite stores!

ADAM is so pleased to announce this new partnership with Working Advantage. This member benefit is of no cost to you as an ADAM member. It's 100% free! All you need to do is register.

To register

1. Login at My ADAM to find the ADAM code.
2. Go to www.workingadvantage.com and click Register at the top of the page.
3. Select Employees Click Here and enter in the code. It's that simple!

Annual Meeting Glimpse: Keynote Speaker Paul Lee



Navigating the health care system with its ever-changing opportunities and threats from the government is confusing and seemingly never-ending. Paul Lee, founding partner of Strategic Health

Care, will offer his outlook on Washington, DC and Capitol Hill's progress and potential setbacks in the year ahead at ADAM's 20th Annual Meeting in San Diego, California.

"Americans have two views of health care – and we're the only country in the world that looks at it this way," Paul said. "We have a vertical view when we're standing upright and feeling healthy – 'we've got to bring costs down!' But we also have a horizontal view, when we or someone we love is sick [lying down] and needs care – 'I don't care what it costs, do everything you can!'"

In 2010, \$800 billion was spent on Medicare and Medicaid. For 2011, that number will increase to \$900 billion. Officials say \$3.6 trillion is the current national budget, and \$1 trillion of that is Medicare and Medicaid. Paul will give meeting attendees an updated look on the national budget and how it's

being affected by Medicare and Medicaid.

Paul serves as the key strategist on matters pending with the U.S. Congress, the Centers for Medicare and Medicaid Services, and other federal agencies. Paul serves as the primary adviser for a number of clients concerned with legislation pending at the state level, and manages the efforts of the rest of the Strategic Health Care staff.

Paul served for eight years with a U.S. Senator as press secretary and later as legislative director. He has been an influential voice on many major health care bills passed by Congress over the past 10 years, and he played an important role in the development of the Medicare Modernization Act of 2003 and now with the health care reform initiatives undertaken by Congress and the Obama Administration. Paul continues his close relationship with many members of Congress and senior congressional staff, who routinely seek his views and advice on health policy matters.

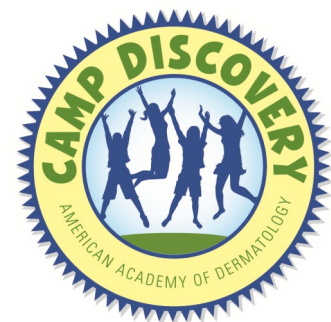
Paul speaks on Thursday, March 15, 2012 at 8:00am at ADAM's 20th Annual Meeting.

Camp Discovery

A new partnership between ADAM and the AAD



In 1993, during his AAD presidency, Dr. Mark V. Dahl founded Camp Discovery with the support of the American Academy of Dermatology (AAD). AAD Camp Discovery is a place where young people (ages 8-16) with chronic skin conditions can meet others with similar conditions and spend a week together having fun.



Little did the AAD know how successful Camp Discovery would become. In the 19 years since it began, nearly 2,200 kids, and their families, have benefitted from these life-changing summer camp experiences. There are now six camps in five states across the

country. Campers enjoy swimming, fishing, horseback riding and so much more, while under the expert care of dermatologists and nurses.

ADAM is honored to participate in helping raise donations for AAD Camp Discovery. There is no cost for campers to attend Camp, full scholarships, including transportation, are provided by the AAD with the support of members, companies and other organizations. ADAM is proud to be one of those sources in 2012.

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Dermatologists are seeing business transformation and clinical improvements using NextGen® solutions. Find out how certified NextGen® Ambulatory EHR can help you speed data capture using dermatology-specific clinical content, such as full body skin exam templates, excision and Mohs micrographical surgical templates, quick visits, and skin cancer tracking templates.

Watch a demo of our dermatology solution: www.nextgen.com/derm



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AAD Camp Discovery truly transforms the lives of campers by providing a setting of acceptance, love and fun.

"Camp is a place to get away from hospitals and have fun without being made fun of."

ADAM would like to encourage you to make a donation to AAD Camp Discovery. Your donation will be made as an ADAM member. Our goal is to reach \$2,000 this year. You can donate on behalf of ADAM [here](#).

Upcoming Events and Happenings

January

SATURDAY
14
2012

January 14-19, 2012

Foundation for Research & Education in Dermatology

Hawaii

THURSDAY
26
2012

January 26-29, 2012

Montana Academy of Dermatology Annual Winter Meeting

Montana

TUESDAY
31
2012

January 31 - February 4, 2012

8th World Congress of Cosmetic Dermatology

Cancun

TUESDAY
31
2012

January 31, 2012

3:00-4:00PM

ADAM ICD-10 Webinar

Webinar

February

FRIDAY
3
2012

February 3-8, 2012

Advances in Cosmetic and Medical Dermatology

MauiDerm

Hawaii

THURSDAY
16
2012

February 16, 2012

Florida Society of Dermatology and Dermatologic Surgery

Florida

THURSDAY
16
2012

February 16-18, 2012

Dermatology Nurses' Association 30th Annual Convention

Colorado

On January 31, 2012 join ADAM and the AAPC for a special webinar on ICD-10 and dermatology! The webinar will take place at 3:00pm EST. Click here to register!

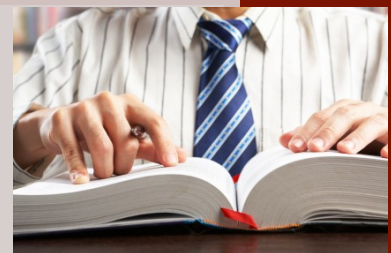
ADAM Members: \$129

Non-Members: \$179

Don't miss our speaker Betty Johnson, CPC, CPMA, CPC-I, CDERC from the AAPC, who will answer all of your derm-specific ICD-10 questions!

This webinar is eligible for on CEU through the AAPC.

[Click here to register!](#)



**Society of Dermatology
SkinCare Specialists**

[Click here](#) for information on
our
Annual Meeting
March 19 - 21, 2012



Save the date! **March 14-17th, 2012** is ADAM's 20th Annual Meeting at the Westin San Diego in San Diego, California!

[Click here](#) to register! Early bird pricing ends on February 3, 2012!

