

# How to Be Your Own Healthcare CEO



This step-by-step business plan will help patients manage their chronic illness and get the care they need.

By Cynthia Perry

**HEALTHCARE IN THE U.S.** is changing. Today, the norms are 15-minute patient appointments and an ever-increasing documentation burden for physicians. Primary care providers likely care for more than 1,000 patients, spend more than six hours a week on paperwork<sup>1</sup> and are overextended or at capacity, with no time to see additional patients.<sup>2</sup> Insurance reimbursement for patient care is getting more and more complicated, and physician burnout is real. And, while it would be ideal if patients had a provider who played quarterback on their healthcare team, the reality is that role is increasingly falling to patients.

Yet, despite these challenges, it is possible to receive excellent care. By acting as CEO of their healthcare, patients can successfully improve their odds of getting the care they need. All that is required is to take the time to properly prepare for the 15 minutes they will likely get with their providers.

### The Healthcare Management Process

Good CEOs adhere to a business plan. And, this should be the case for patients, too. As CEO of their healthcare, patients should view managing their care as a business endeavor, which includes the following steps:

- Setting treatment goals
- Hiring (and firing) healthcare providers
- Researching treatment options
- Prioritizing objectives
- Managing treatment risk
- Reporting progress back to providers

Figure 1 illustrates the healthcare management process. Note that the lines in this diagram are nondirectional, indicating the steps can be completed in either direction. The steps could even be viewed as a web in which any step could be completed in any order, and as often as needed.

### Communicate Effectively

Throughout each step of the process, effective communication between patients and healthcare providers is critical. As a basis for good communication, patients and providers need to build a rapport with one other. For instance, no matter how sick they feel, patients can try to smile, and both parties can make an attempt to find something they have in common. It is also important for patients to thank their providers in person, via email, with cards or by giving good ratings on surveys and Internet sites.

Patients can facilitate good communication by organizing their medical records. This includes gathering records important to their diagnoses (tests, imaging, blood work, surgical records

and doctor notes), and using these to create a medical summary of information such as current providers, diagnoses, surgeries, tests, medications and anything else their healthcare providers need to know. This way, valuable appointment time won't be wasted communicating medical background information. Instead, appointment time can be focused on current medical needs.

Finally, patients should be direct in their requests for tests or referrals, and providers should offer clear answers in return.

### Set Treatment Goals

Before meeting with providers, patients need to decide on their treatment goals. Some doctors start a visit by asking, "What can I do for you today?" This open-ended question is designed to focus the appointment. As Yogi Berra said, "If you don't know where you're going, you'll end up someplace else." Some sample treatment goals patients could set include:

- Optimally managing a chronic condition
- Looking for a healthcare provider who will prescribe a minimum of medications
- Seeking opinions for a new approach
- Finding a cure for a diagnosis or condition

**Figure 1. The Healthcare Management Process**



## Hire and Fire Healthcare Providers

With many insurance plans, patients are only able to see providers in their network. Once these are identified, patients can search for the best fit. Some ways to start the search include:

- Asking their primary care provider and other providers for recommendations
- Talking to family and friends
- Reading local media reports of doctor rankings
- Using websites such as Healthgrades and Yelp
- Visiting providers' websites to find out about their care philosophy, education, research interests, etc.

Once potential providers have been identified, patients can “speed date” these candidates until they find the best match. When meeting new providers, patients should bring their medical summary along with a printed list that includes treatment goals and any acute and chronic issues they want the provider to manage. They should discuss how they would like to partner with the provider, and the best way to get urgent care, if needed. If patients feel the provider is a good fit for them, they should ask the provider if they are willing to take them as a patient. Sometimes, a provider won't want to take on a complex patient and will state that outright. And, sometimes, they will refer patients to another provider as a subtle way of saying they don't want to treat the patient.

Regardless of how patients and the provider feel about the appointment, patients should always thank the provider for his or her time. If the provider wasn't a good fit for any reason, patients shouldn't feel bad about moving on to the next one. The goal is to look for long-term partnerships for their healthcare. In some cases, for very complex and rare conditions, the best match may be out of state and/or out of the insurance network. Under very special circumstances, patients can successfully argue

to have out-of-network providers covered as in-network.

Occasionally, patients may need to “fire” a healthcare provider. Circumstances under which patients might need to do this include when the provider:

- Has a style that doesn't match the patient's
- Won't listen
- Isn't taking concerns seriously
- Won't answer questions
- Doesn't treat the patient as a partner in his or her care
- Isn't making the patient better, or the patient has lost confidence
- Is giving referrals that aren't working for the patient
- Has billing or office staff issues

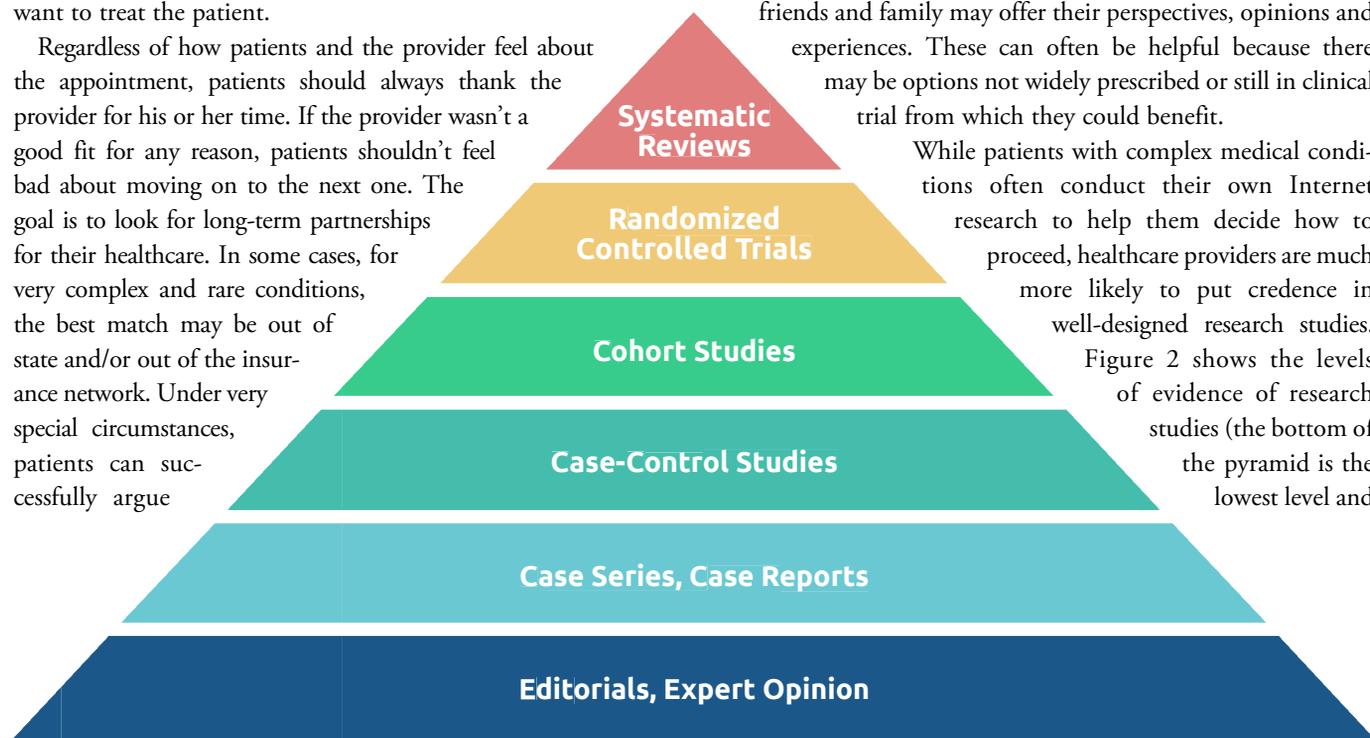
When patients fire a provider, they should find another one first, whenever possible, so there is no gap in treatment. They should retrieve their medical records to give to the new provider and cease seeing the previous provider. There is no need to explain anything to the previous provider if they don't want to, but they can write a succinct and professional letter.

## Research Options

When providers decide how to proceed in treating patients' conditions, they may present options. In addition, well-meaning friends and family may offer their perspectives, opinions and experiences. These can often be helpful because there may be options not widely prescribed or still in clinical trial from which they could benefit.

While patients with complex medical conditions often conduct their own Internet research to help them decide how to proceed, healthcare providers are much more likely to put credence in well-designed research studies.

Figure 2 shows the levels of evidence of research studies (the bottom of the pyramid is the lowest level and



**Figure 2. Levels of Evidence for Therapeutic Studies**

Source: Center for Evidence-Based Medicine, Oxford

the top is the highest level). Randomized trials with some participants receiving a therapy and others receiving a placebo are the gold standard in medical research. In general, the larger the study size, the more reliable results are deemed. Even more rigorous than a single randomized trial, though, is a systematic review of multiple studies. What healthcare providers are least likely to accept, even if published in a reputable medical journal, is an expert opinion with no case studies, controls or trials.

## Prioritize Objectives

Providers are paid using a complex formula that includes work expenses (by diagnosis), practice expenses and malpractice insurance expenses (rate-adjusted for area of country).<sup>3</sup> Medicare sets payment rates that private insurance generally follow; however, private insurance plans usually pay more than Medicare. For these reasons, most providers limit appointment times and the number of issues they will address with patients in a single appointment. A study of 392 videotaped patient visits showed an average 15.7-minute visit with an average of 5.3 minutes of patient talk time and 5.2 minutes of physician talk time.<sup>4</sup>

While many patients with multiple chronic conditions try to address everything at once, neither primary care doctors nor specialists can address all of a complex patient's issues at once. Therefore, it is important for patients to triage their conditions by determining which they feel are most important to address, and which can wait for future appointments.

Patients also need to prioritize their objectives. To do this, they should create an agenda to guide the discussion during the appointment. Once at the appointment, they can give one copy of the agenda to the provider and keep one for themselves. The agenda should include items such as:

- Treatment goals and/or goals of appointment
- Questions they want to ask
- New or changing symptoms
- A list of other providers they have seen and their recommendations and prescriptions
  - A summary of any research patients want to discuss
  - Tests or referrals desired
  - Prescription refills needed

## Manage Risk

Patients have the right to make their own medical decisions. However, insurance companies also determine whether treatments are medically necessary and safe and effective for a diagnosed condition before agreeing to pay for them. As such, patients, must consider many factors before deciding on a treatment plan:

- Insurance coverage and expense
- Goals of treatment
- Quality of life versus possible side effects
- Stage of life
- Possible risks versus expected benefits

While patients can decline a recommended treatment, doctors can terminate their relationship with a patient for noncompliance. If patients choose to be noncompliant, it is very important they discuss the reasons with their provider. If the patient and provider can't agree on a treatment plan, the patient may want to find a provider with a care philosophy more in line with their treatment goals.

## Report Progress

After treatment goals have been established and a plan is in place, it is important for patients to report progress back to their providers. Many smartphone apps can help patients track symptoms, some that are good for overall health issues and some that are created for specific health issues such as diabetes, headaches or chronic pain. Apps, which are available for both Apple and Android platforms, are described and rated in the app stores.

Those with chronic health issues might benefit from making appointments every three to six months with their primary care provider. These visits, which should be outside of sick appointments and regular checkups, are a good time to review progress with specialists, medications and side effects, and how they are holding up under the stress of dealing with health issues. Providers, especially primary care providers, are also often open to email communications for updates between appointments.

## It's Up to the Patient

In today's healthcare environment, providers must care for more patients than is desirable to make their practices financially viable. Because patients know their bodies and health histories better than anyone else, it's up to them to take the time to act as CEO of their healthcare by managing their health with a disciplined process and approaching their providers as partners. By doing so, they are more certain to get excellent care. ■

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