In an ideal world, every medical practice would run smoothly, with no hiccups or setbacks to slow down efficiency in the workplace.

Unfortunately, that is not reality as even the most well-prepared practices face workflow problems. These delays can result in a decrease in revenue or even a loss of patients.

However, this isn’t cause for panic! There’s a number of ways a practice can improve its clinical efficiency without costly overhauls or long hours of training.
Don’t be afraid to delegate

Delegation is a key part of managing a practice. When utilized correctly, delegation can result in a smoother over-all workflow. Shifting things like patient education or data collection from physician to physician’s assistants or trained administrative staff will result in faster completion rates, as well as more time for physicians to devote to patient visits.

- Other examples of work that’s typically delegated include:
  - Verifying the reason for the patient’s visit
  - Taking the detailed patient’s history
  - Reviewing and documenting current medications
  - Documenting allergies and vital signs
  - Reviewing clinical alerts
  - Reviewing clinical protocols, as well as a list of procedures the specific patient requires

There’s a fine line between delegation and simply making others do the work, however. Delegating certain responsibilities means strategically picking the right person for the job with the overall success of the practice in mind. Following up the individual to give feedback is also recommended.

If done properly, administrative staff can save approximately 15 minutes of the physician’s time. Doing so encourages continuous improvement in three important areas: staff performance, physician satisfaction, and patient satisfaction.
Establish easy-to-follow procedures

Preparation is key for any business, especially medical practices, as it helps ensure any situation is manageable whenever they occur. By creating a number of go-to procedures, administrative staff will have a clearly-laid-out plan empowering them to succeed in the face of unexpected patient or physician circumstances, such as:

- **Creating a process to deal with last-minute appointments** — Instead of relying on front-office staff to cram patients into an already bogged-down physician’s schedule, cases should be evaluated by level of severity. For example, a patient with a head cold should be told the next available appointment time, while a patient with, say, a broken bone, should be immediately directed to an emergency room.

- **Put together a concrete routine for necessary forms** — When a new patient arrives, give them the registration form to fill out first, followed by the health history questionnaire. If the patient hasn’t completed the form while still in the waiting room, they can simply take the form with them to the examination room and finish it there. And if the attending physician arrives before they’ve finished it, it can be completed together, cutting down on unnecessary wait time.

- **Don’t procrastinate** — Many healthcare professionals often fall into the habit of “do later piles” that can consist of finishing patient charts and notes, which can put a physician at greater risk for documentation errors. While the temptation to push off patient records to the end of the day may seem appealing, it proves to be inefficient in the long run. Taking the time to complete—or delegate—tasks as they occur lowers the risk of error, and it often boosts patient confidence in their providers.

No matter what procedures work best for physicians and administrative staff alike, establishing routines can cut down on wasted time, user error and frustration levels.
Establish Revenue Cycle Management Procedures

Whether a practice relies on a billing service provider or in-house billing staff, a clear plan regarding revenue cycle management should be well-established before patients arrive. Assigning a staff member to verify all insurance eligibility, co-pays and deductibles prior to patient visits can minimize lost revenue. If there is any doubt about a patient’s insurance status, that patient should be asked for their insurance card at check-in. The billing service provider or staff should also:

- Submit claims daily
- **Post daily payments and bill balances to the insurer or patient**—don’t wait until the end of the month!
- **Process claim denials within 72 hours**—and keep them in your system for follow-up
- Audit outstanding claims monthly and create action plans for follow-up
  - If a significant amount of money is due, inviting the patient in to discuss payment in a private setting may clear up any lingering confusion regarding payment. If a payment schedule is required, the patient may be asked to sign a promissory note with a specific agreed-upon amount.

A smooth billing process not only saves the practice money, but its patients, too.
technology is a friend

In the modern healthcare era, there’s no separating healthcare services from technology. Whether it’s the computers used to access your practice’s electronic healthcare record software, or the tablets that allow patients to input their information quickly and effectively before their appointment, technology touches all aspects of the healthcare experience. And that’s not a bad thing! From the front office to the exam room to the back office, technology empowers greater accuracy and efficiency across pertinent workflows.

However, too many technologies in one practice can cause problems. Identifying what types of machinery may best benefit your practice before a purchase is a good place to start.

For example: instead of a practice relying on multiple providers for different services—one for EMR, another for practice management, and still another for billing services—finding a provider who can offer fully-integrated software can cut down on both cost and time.
CLINICAL EFFICIENCY IS KEY TO A WELL-ROUNDED PRACTICE

A clinically efficient practice is best positioned to deliver optimal patient care and achieve consistent, long-term success as a business.

While implementing these steps are not a guarantee, they do provide a strong foundation for any practice to build upon and improve its clinical efficiency.

Making the most of staff’s skills and time, or ensuring that various software and technology are being used in the proper way are to both practice and patients’ benefit.