

Presented by  
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# Expanding Services In Your Pediatric Practice



# Challenges & Opportunities

# Today's Market

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- Recovering from Covid challenges
- Depressed rates and little leverage with Payers
- Growing concerns for viability or independence
- Continuing competition from non-physician practice entities like retail-based clinics and freestanding ERs, Payers now purchasing providers too
- Growing competition as practices compete for more volume
- More acquisitions, larger entities growing, practices consolidating
- Growing Medicaid

# Start With Building Your Brand

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Payers and Patients are Looking For –

- A recognized 'brand'
- Key components of your practice that are unique and valuable
- Innovation and 21<sup>st</sup> century technology utilization
- Ability to build relationships
- Access and accessibility
- Value, value, value . . .

# Get Clear On Your Mission

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- Get clear on your mission (update it if you haven't thought about this for a while)
- What is the personality of the practice?
- Does it fit with where you are now? And where you want to go?
- What opportunities exist that you could evolve / aspire toward?
- What's the practice identity?
- How do patients perceive you?

# Assess Your Resources

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- What do you do well?
- What could be expanded upon? (e.g., do you have an RN who is also a great asthma educator?)
- What services do your patients request that you may have the resources to accommodate? (e.g., an MA who is also a CLC, or a colleague who wants to share a nutritionist)

# Assess Your Opportunities

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- What opportunities lie with others? (e.g., creating a super group, working with an ACO to develop clinical integration)
- What opportunities do your patients tell you you have?
- What specialists may be available to you? (e.g., lactation consultants, mental health / case workers, nutritionists, etc.)



New Service Offerings

Services & Lines of Business

# Creating Diversity Within Your Practice

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Meet your patients needs with defined 'clinics'

- Asthma clinics
- Nutrition clinics
- Adolescent clinics

□ Provides excellent marketing opportunities and helps with scheduling

# Developing New Services

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## What others are doing:

- Asthma clinics
  - Certified Asthma Educator to assist with treatment, education and management of asthma and asthma related diseases including
  - Medication monitoring and compliance;
  - Asthma control and action plan
  - Spirometry and nebulizer treatments
  - Patient centered goals and objectives related to control of the disease

# Developing New Services

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## What others are doing:

- Nutrition clinics
  - On-site nutritional health evaluation by independently contracted counselor
  - Treatment and counseling services for individuals, families and groups
  - Tie in with community based weight ins and 'weight watcher' program at the local YMCA
  - Schedule alongside well visits

# Nutrition example

How about an 8 month visit or a 21 month visit with the nurse to teach proper nutrition habits?

Calculate by forecasting:

- Number of 8 month olds seen a year, say 300)
- 99211 (nurse payment), say \$50.00
- Cost of your nurse, say \$25 an hour

300 visits x 20 minutes per visit = 100 hours x nurse salary (\$25/hr)= cost of \$2,500

300 visits x \$50 = \$15,000 less cost of \$2,500 = **\$12,500 net profit**

# Developing New Services

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## What others are doing

- Adolescent clinics
  - Specific hours for teens (certain days & hours)
  - Specified exam rooms for teens that are age appropriate (not 'kiddie')
  - Teen education programs playing in waiting room
  - Greater emphasis on teen screens (BH) and services
  - Layering in resources

# Developing New Lines of Business

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## Develop Entirely New Lines of Business

- Lactation / Breastfeeding Center
  - Behavioral / Social Health Center
  - Urgent Care / After Hours Clinic
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- Bringing services in-house either through direct employee contributions or through sub-contracted professionals, extends your reach in the market.
  - These can be developed as extensively as you like, with their own tax ID numbers and 'brand', or less extensively as a business within your practice that is financially separate

# Developing New Lines of Business

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## Lactation / Breastfeeding Center

- Can reside within your pediatric practice footprint or as a separate area altogether
- Some practices designate 2 exams rooms and design as newborn & nursing rooms
- Schedule consultations alongside the newborn visit and / or the 1 month for patient convenience
- Utilize a trained employee or contract with an independent agent
- Great practice builder and new Moms love the newborn / nursing rooms



# Developing New Lines of Business

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## 'After Hours' Care

- Operate it separately if possible
- Network with small practices to be their preferred referral choice when they are closed (by providing excellent follow up and pass back)
- Compete directly with retail-based clinics
- Explore Urgent Care contracts (though most Payers have very specific requirements for UCs including radiology, lab, accreditation, etc.)

# Developing New Lines of Business

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## Behavioral Health

- Keep patients within the pediatric practice instead of referring out
- Employ directly if practice population supports it (risk)
- Or contract with an independent agent or lease space to therapist / social worker who is building their practice through 'shared services', as a better alternative
- Allows for better care, coordination, access



**MARKETING**



# Marketing New Services

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Let your patients know about your new services and attract in new patients that are looking for comprehensive medical homes.

- Present these services on your website and social media channels so that existing and potential patients know you have these services
- Provide details about how these services work (insurance plans accepted, hours, types of services)
- Profile ancillary providers as part of your team on the website and channels
- Provide resources related to these services to help your patients better understand how these services benefit them

# Example of Presenting Services

[PRE-VISIT](#)[PAYMENTS](#)[PATIENT PORTAL](#)[Your Visit](#) ▾[Pediatrics +](#) ▾[Parent Resources](#) ▾[Providers](#)[About](#) ▾[Offices](#) ▾

## What's the "Plus"?

Our expert team provides care for the big things, the small things, and everything in between. We offer a full array of services and specialists you won't find anywhere else.

[PEDIATRICS +](#)

## Our Specialties

[Breastfeeding](#)[Infant Sleep](#)[Adoption](#)[Immunization](#)[Concussions](#)[Nutrition & Fitness](#)

# Integrated Group Models



# Super- or Clinically-Integrated Groups

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The most popular type of super-groups are those that are physician-owned. Management may vary:

1. Umbrella corporation with one tax id and owned centralized services
2. Umbrella corporation with one tax id and hybrid / outsourced centralized services



# Challenges with Consolidation

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Issues for physicians to consider in any merger, acquisition or sales activity:

- Potential loss of autonomy
- Limitation on income potential
- Hospital / larger entity objectives may not always align with physician objectives
- Lack of transparency in everyday dealings & strategies
- Competing goals
- Compliance challenges
- Cultural fit

# Benefits with Consolidation

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- More stability in growth and income through “brand recognition”
- Reduced insurance administrative burden / ability to afford professional management and services
- Improved Payer leverage
- Reduced risk
- Access to larger patient base
- Improved infrastructure (HIT, staff training, etc.)
- Access to clinical programs / value-based options

# Costs of Consolidation

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- Loss of autonomy
- What if things don't work out
- Cost of Exit
  - Non-compete?
  - Loss of premises?
  - Loss of staff?
- How will payer contracts be affected?
- Etc.

# CONTACT



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Direct Care/Concierge Models

Adding Revenue Streams

# Concierge vs. Direct Care

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## Hybrid (Concierge) vs. Direct Care

- Concierge usually means accepting insurance and charging an annual fee
- Direct Care means services sold directly to consumers / patients and no participation with insurers

# Concierge

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## Annual / Aggregated Fees

- Be careful that you aren't charging for 'access!'
  - Unethical to do so
  - Can get you kicked out of a Payer network
- Define services that fall under that annual fee (limit them to very specific essential but non-covered services)
- Payers may take exception and cause problems (depends upon what you are charging for and how)
- This is a good source of additional revenue that helps to finance other programs

# Direct Care

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## No insurance contracts at all

- No contracts means no limiting agreements and no reach from insurers
- Be sure to provide HCFA forms so that patients can apply to insurance companies for reimbursement
- Be transparent in your pricing
- Have patients sign Patient Agreement
- Make sure to keep credit card on file and use it!
  - And make sure to have a BAA in place with the credit card company

Assess if there is an opportunity to offer this – are you in an upscale location?