Motivating Physicians

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What Motivates Physicians?

Physicians find it difficult to express what motivates them but it is very simple. Too often hospitals and the public think the answer is simply financial but this is too simplistic of an answer. A physician in a poorly designed system will find financial rewards an excuse to stay but this approach often creates an atmosphere that leads to escalating tensions.

There are some simple answers to motivating physicians. First doctors want appreciation, tools and feedback to perform at the highest level. My fifteen years of managing physician performance has given me many great opportunities to prove these points.
• Appreciation, it’s vital that the physician advisor learn how to express the best ways to engage the medical staff on important issues confronting your organization.

• Tools, most physicians want to perform at the highest possible level. We are hardwired to do so. Whenever I presented a need such as denials, LOS, Case Mix I found one consistent and simple request. “What’s my data and how can I improve?” Amazingly, everytime that I have provided personal performance number with tools to improve them, I have seen dramatic improvement.

• Feedback, too often we administrators are great at expressing the need but we miss the opportunity to keep the momentum due to lack of feedback.
Case Mix

Case Mix is an obviously important metric. Despite its linkage to re-imbursement this metric is about so much more. Doctors for the most part can care less about the hospital’s need for improved Case Mix if its for financial purposes. When Case Mix is linked to other metrics such as outcomes, adjusted mortality, Case Mix Adjusted Length of Stay and Average Direct Costs we have found that all these metrics improve.

If your facility’s or group’s Case Mix values are less than the optimal averages listed above its time to contact Physician Motivators!

<table>
<thead>
<tr>
<th>Clinical Group</th>
<th>Expected Average Case Mix</th>
</tr>
</thead>
<tbody>
<tr>
<td>General Surgery</td>
<td>Above 2.50</td>
</tr>
<tr>
<td>Internal Medicine</td>
<td>Above 1.70</td>
</tr>
<tr>
<td>Family Practice</td>
<td>Above 1.50</td>
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</tbody>
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Do you need Physician Motivation to Fix Any of These Problems?

- Excessive Observation Use
- Three Day Qualifying Stays with no Inpatient Criteria
- Sub-Optimal CMS Core Measurement performance
- Excessive Inpatient Denials

We can help!
Length of Stay continues to be an issue that dogs healthcare. Its not how low can we get it. Its how can we manage our LOS to a safe and pleasing level for our patients and physicians.

Our collective experience in throughput initiatives can help **re-design your case management process**. Often the best local answer is to grab the most agreeable staff member to reach out to their colleagues hoping that this will get things done. Too often this proves to be disappointing and frustrating for all parties.

Our physicians can **coach your physician advisor** on how to motivate your physicians.

**Case Management Best Practices**

- ✓ Long Stay Reviews
- ✓ Targeted MSDRG LOS monitoring
- ✓ Post Acute Network Integration
- ✓ Reduction of Re-Admissions

Find out how we can improve these processes.
Recovery Audits

• What is your process for preventing and defending the RACs?
• Are you satisfied that your team can keep up?
• Do you feel that your outside firm is charging you as much as the RAC is threatening to take away?

Contact us at 330-402-4260 or by email at jarnott@physicianmotivators.com