



TRACTION IN DPC:

Keeping Your Partnership Focused and Your Business Strong

Eleanor Glass, MD, FAAFP

Integrated Family Care
Adjunct Associate Professor | University of Cincinnati
College of Medicine

[AAFP1.CNF.IO](https://aafp1.cnf.io)

- ▶ Navigate to [https://aafp1.cnf.io/](https://aafp1.cnf.io) and tap the session titled "Traction in DPC: Keeping Your Partnership Focused and Your Business Strong"
- ▶ OR just point your phone's camera at the QR code to join directly



Activity Disclaimer

The material presented here is being made available by the DPC Summit for educational purposes only. Please note that medical information is constantly changing; the information contained in this activity was accurate at the time of publication. This material is not intended to represent the only, nor necessarily best, methods or procedures appropriate for the medical situations discussed. Rather, it is intended to present an approach, view, statement, or opinion of the faculty, which may be helpful to others who face similar situations.

The DPC Summit disclaims any and all liability for injury or other damages resulting to any individual using this material and for all claims that might arise out of the use of the techniques demonstrated therein by such individuals, whether these claims shall be asserted by a physician or any other person. Physicians may care to check specific details such as drug doses and contraindications, etc., in standard sources prior to clinical application. This material might contain recommendations/guidelines developed by other organizations. Please note that although these guidelines might be included, this does not necessarily imply the endorsement by the DPC Summit.



Disclosure Statement

It is the policy of the AAFP and ACOFP that all individuals in a position to control CME content disclose any relationships with ineligible companies upon nomination/invitation of participation. Disclosure documents are reviewed for potential relevant financial relationships. If relevant financial relationships are identified, mitigation strategies are agreed to prior to confirmation of participation. Only those participants who had no relevant financial relationships or who agreed to an identified mitigation process prior to their participation were involved in this CME activity.

All individuals in a position to control content for this activity have indicated they have no relevant financial relationships to disclose.



Learning Objectives

1. Examine a real-life application of principles from Traction: Get a Grip on Your Business by Gino Wickman within a DPC practice.
2. Explore best practices from a successful 50:50 physician partnership that has thrived for 7 years.
3. Learn strategies to maintain business focus, including annual retreat formats, quarterly goal setting, and techniques for sustaining growth and stability.

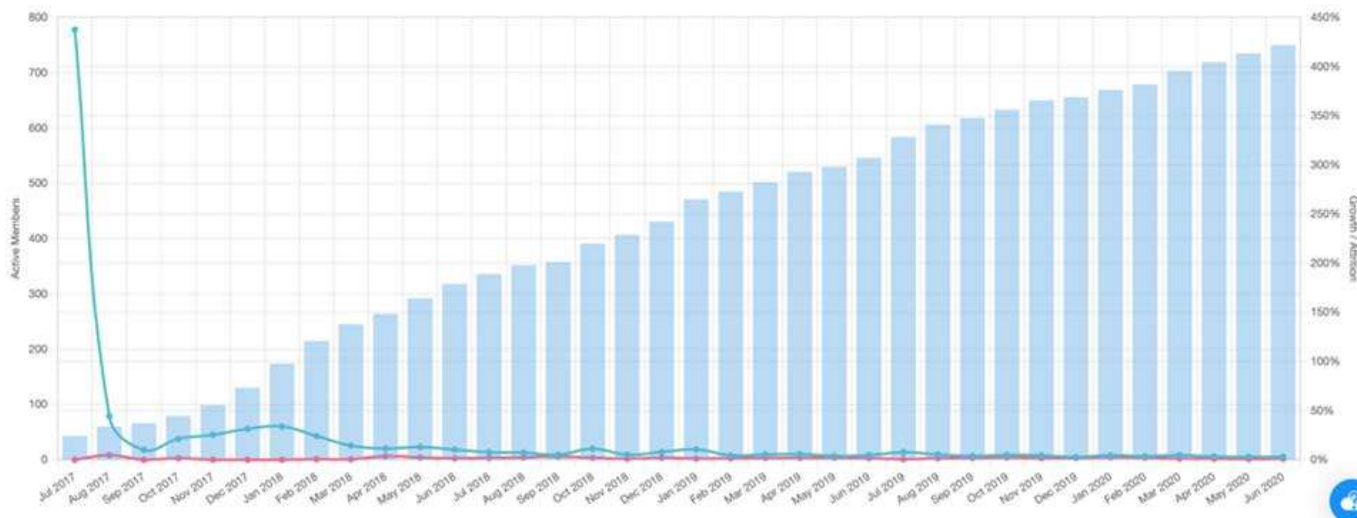
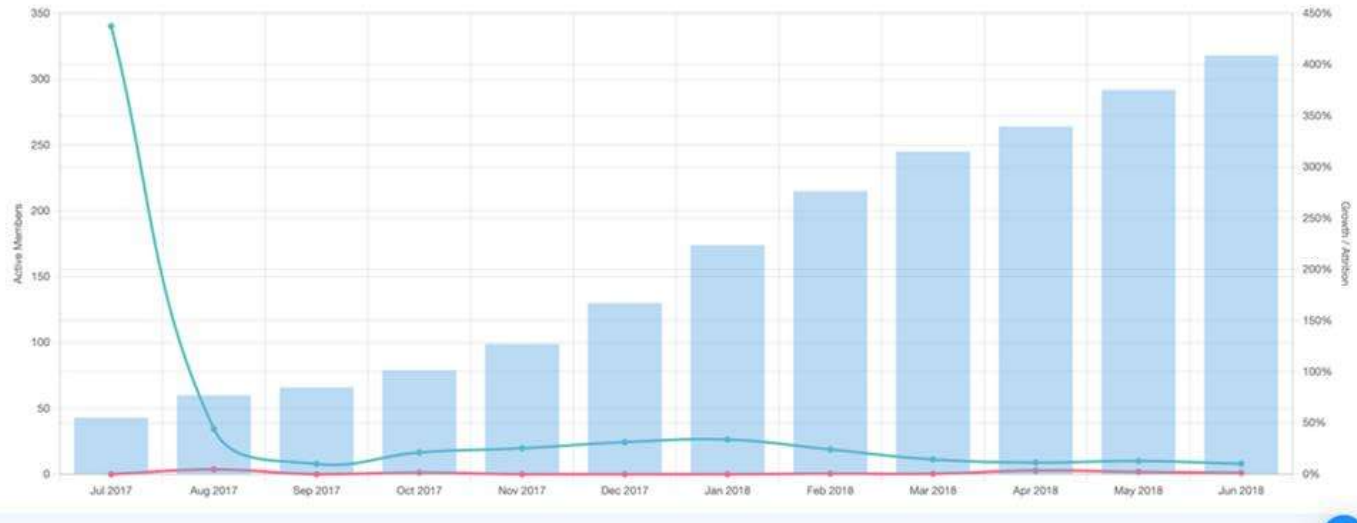


WHO WE ARE

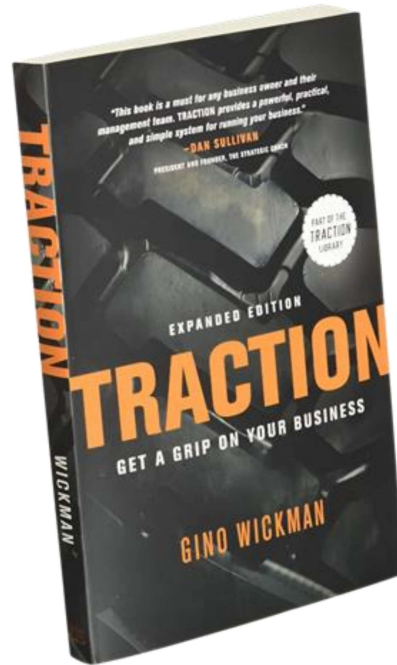


Show me Active, growth, attrition broken out by No Breakout

All Providers All Sponsors All Plans All Engagement Statuses



What is Traction and what should you do to get it?



Step 1: Pick a great partner



Step 2: Create a structure

January 2020 Retreat

1. Patient interaction: scheduling and communication: 12-1
 - a. Patient Scheduling: elation options, portal update
 - i. Add new provider (Mechley Beason).
 - b. boundaries for self scheduling
 - c. How to address no-shows? Policy: start to charge after 2 -
 - d. Make descriptive appointments - done by karen
 - e. Messaging with patients
 - f. Spruce
 - i. appropriate, conversational?
 - ii. Register, any need for defined boundaries?
 - g. Elation passport- time?
2. Difficult Patient
 - a. Write down patients that are beyond boundaries
 - b. How to define > 8 visits per year; how to tally spruce visit/ phone visits (elation note)
3. Reports: what initial reports would be valuable to start pulling from elation (prev visits, quality, utilization...etc) 1:30-2:15
 - a. Quality: annual physicals, colonoscopy, mammo, (elation, ogg)
4. Follow up Regalia:
 - a. Document date of last impact report in vaccine, ask parent where receiving impact, document on impact, process, impact of doc after updating chart, doc to hand to parents as order
 - b. Could we schedule vaccine appts for our kids at crossroads, health dept, little clinic? appts at little clinic
5. Review Maternity coverage details, Gina onboarding, 2:15-2:30
6. Consider tiered pricing for July 1, 2020 - 2:45-3:45
 - a. Limited - current with no access to spruce (in person only, well exam and one acute visit)
 - b. Full, current
 - c. Intensive (more than 8 visits per year (includes phone/ spruce if medical advice --tag) increase, propose 110 per month
 - d. Kids no family full membership
 - e. Then Lifestyle Intensive (tod: Design for deeper dive)
7. Ideas, all goes up to \$85 per year
8. Kids up to 80
9. Change offerings
10. Charge per visit...all yrs, or coverage.
11. Add fee cc, reduce a fee for each

Lifestyle medicine offering proposal? Structure
12. Feedback from anna - more clarification on pricing on website

13. Marketing goals for 2020

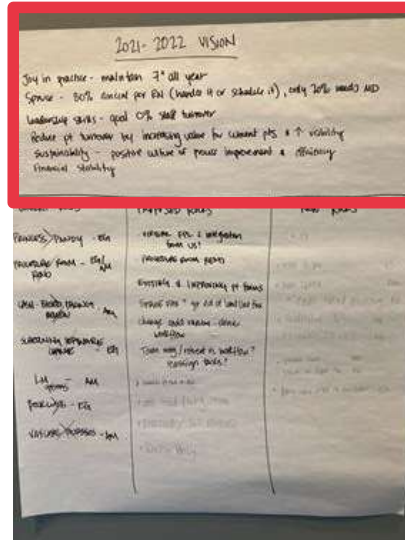
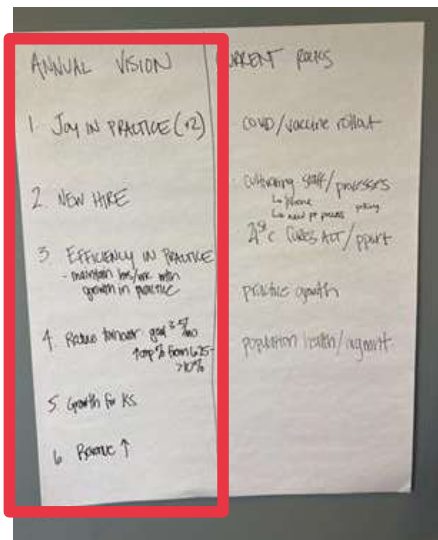
- a. How do we make it easy for our patients to refer
 - i. Referral bonus \$XX for another person signing up, \$XX if you business signs up. (self funded)
 - b. Increase marketing for WWAD
 - i. Move all walks to the office
 - ii. Alternate mechley and glass
 - iii. Commit to topics ahead of time and advertise
 - iv. Promote to patients in the office
 - c. Value to current patients as WOM best marketing
 - d. Increasing overall visibility of our value (lab pricing, ER bills), and adding valuable non one-on-one care
 - e. Lifestyle medicine offerings
 - f. Meditation class
 - g. Acupuncture clinic
 - h. Group visits
 - i. WWAD increased visibility
 - j. cin
14. Tri-DPC - review discussion items for operating agreement
15. Add time for full team together at retreat.

Potential spruce workflow:

Okay, I'll take a stab at it. (I did not want to have to monitor Spruce myself during office hours). And first I will say that we are handling incoming texts EXACTLY as we handle phone messages. We use autoresponders in spruce to let patients know that texts are seen during regular hours. After hours, if they need us urgently, they must call. During office hours - front staff check messages first thing in am from overnight. Then they are also checking frequently throughout the day (We use Spruce for outgoing faxes, so it's always open on their desktop). If they cannot handle the issue, they copy the message from Spruce into an Elation message to the appropriate physician. The physician then is responsible to handle as they see fit and archive the text message in Spruce (whoever completes the task, archives the call/message/thread). This keeps us (the docs) on top of incoming messages without having to do all of it ourselves. We are not automatically putting Spruce stuff into Elation and we are not copying entire message threads into Elation. That is just busy work. It's available in Spruce if we need to see the details. Hope this helps! I was worried about adding the text option, but it's been very smooth sailing with the autoresponders set up and patients really like it.

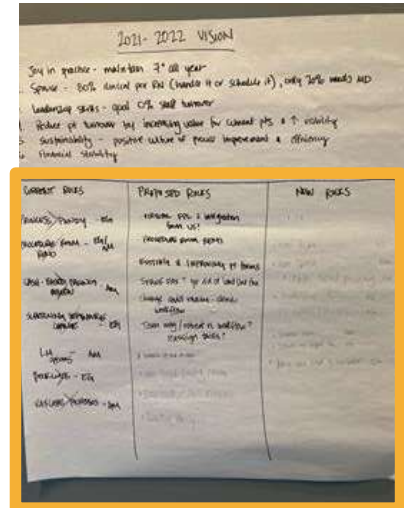
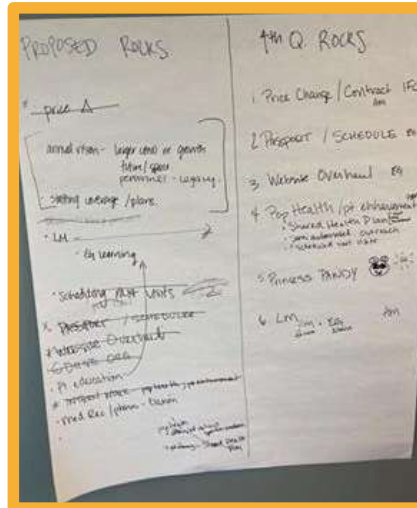
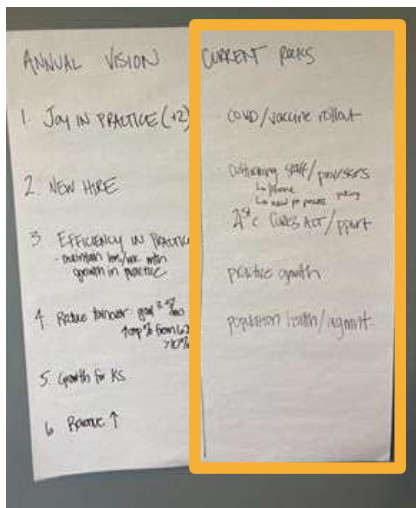


Step 3: Create your vision. Re-evaluate annually



Step 4: Define your rocks

“When everything is important, nothing is important.”



Step 5: Check-in regularly

Weekly Organizer/Check-in

Annual Vision July 2023:

1. Implement a staffing strategy that reduces overall overhead while maintaining efficiency in practice, excellent patient care, reduced staff turnover and reduced physician burnout. This may include: hiring a front-office host, utilizing a virtual assistant, promoting and developing RR as lead nurse, and replacing CM position.
2. Reduce patient turnover with focus on decreased terminations.
3. Follow and achieve improvement in quarterly metrics including net growth, income, P&L statements, TAA (<https://www.ihl.org/resources/Pages/Measures/ThirdNextAvailableAppointment.aspx>), Joy in Practice scores.
4. Evaluate and improve our overall customer service experience.
5. Define and achieve our goal income.



Step 5: Check-in regularly

What are this quarter's rocks?

	Not yet started	In process	Completed
1. AM LM next steps	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. EG: website/video redo	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Labcorp pricing workflow with Goverdhan	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



Step 5: Check-in regularly

What progress have you made toward this quarter's rocks?

Your answer _____

What "issues" are you working on this week (any weekly maintenance tasks you would like to share/fires and firehoses)

Your answer _____

Any new "rocks" that you are saving for next quarter?

Your answer _____

Current patient volume:

Your answer _____

Newsletter content - what value should we draw attention to?

Your answer _____

Recent highlight that was mission affirming - JOY in practice!

Your answer _____



Step 6: Keep Adapting



“
LM2021
 Creating a pathway for all who wish to practice integrated Lifestyle Primary Care Medicine, designed on successful models. Join us to play, create, synergize and leave with an inspired plan for your LM future!
 ”



Amy R. Mechley, MD, FACLM, FAAFP, DipABLM
 Workshop: Primary Care of the Future: Lifestyle Medicine as the foundation of your thriving Primary Care Practice

LM2021 

Change is to be expected.



When in doubt, go back to the data

Time On Hold	Adult Total	Child Total	Status
April & May 2020	\$100.00		
April 2020	\$80		
Apr-20	\$80		
June & July 2020	\$ 160.00		INACTIVE
June & July 2020	\$ 160.00		
Nov & Dec 2020		\$ 60.00	
Nov & Dec 2020		\$ 60.00	
May & June 2020	\$ 160.00	\$ 120.00	
April & May 2020	\$ 160.00		INACTIVE
Sept & Oct 2020	\$ 160.00		
Jul-20	\$ 80.00		
Aug & Sept 2020	\$ 160.00		
Nov & Dec 2020	\$ 160.00		INACTIVE
Nov & Dec 2020	\$ 160.00		
Jan & Feb 2021	\$ 160.00		*Only me
	\$ 1,780.00	\$ 240.00	

Labcorp - January 2020	\$	342.13
Labcorp - February 2020	\$	398.32
Labcorp - March 2020	\$	412.83
Labcorp - April 2020	\$	156.81
Labcorp - May 2020	\$	223.48
Labcorp - June 2020	\$	392.95
Labcorp - July 2020	\$	383.32
Labcorp - August 2020	\$	397.55
Labcorp - September 2020	\$	421.71
Labcorp - October 2020	\$	393.04
Labcorp - November 2020	\$	426.47
Labcorp - December 2020	\$	290.15
	\$	4,238.76
SNAP - October 2020	\$	43.75
SNAP - November 2020	\$	43.75
	\$	87.50
TOTAL	\$	4,326.26



Other guiding principles:

- Our Northstar is outstanding patient care
- Make visible the invisible
- I've got your back
- Our health is our wealth



Live Content Slide

When playing as a slideshow, this slide will display live content

Social Q&A for Traction in DPC: Keeping Your Partnership Focused and Your Business Strong



Thanks!

Do you have any questions?

doctoreleanor@ifcdirect.com
ifcdirect.com

Special thanks to my partner Dr. Amy Mechley, our staff and patients, our other spouses and families, and Maya Goertemoeller UCCOM MSII for slide prep!

 Integrated Family Care

 @ifcdirect

