

Creating a Win/Win System of Advanced Practice Provider Oversight

Dr. Terry McWilliams

Physicians in employed networks understand the wide-ranging benefits of collaborating with and/or supervising Advanced Practice Providers (APPs). However, beyond being readily available to discuss specific elements of immediate patient care, physicians typically feel weighed down by the process of performing required quality of care reviews. Changing perceptions and enhancing protocols can greatly improve physician and APP morale as well as the quality of each review. By approaching reviews with a shared purpose, rather than viewing them only as regulatory-driven requirements, health systems, physicians, and APPs can mutually benefit from practical, sustainable solutions with favorable outcomes.

The following is worth noting—while the state requirements for APP oversight apply to every type of practice, experience indicates that physicians and APPs in small independent practices may not be accustomed to adhering to well-defined programs, whereas physicians and APPs in health system employed networks tend to be subjected to more formal compliance programs. This difference in understanding may need to be considered during the transition of formerly independent physicians and APPs into an employed network relationship in order to avoid additional transitional culture shock.



Before diving into specific review processes, it is helpful for health systems to take a step back to identify gaps in both program process and understanding. States regulate APP oversight and typically require quality of care reviews, however, not all state requirements are identical and most do not delineate specific review requirements. Considering these circumstances, developing a well-defined review process depends on knowledge of the state's requirements and a reasonable understanding of which criteria will validate competencies while adding value to the final report, which forms the basis for stipend payments. Identifying programmatic gaps can lead to program improvements and create a more solid foundation for interactions and oversight.

IMPROVING THE APP PERFORMANCE REVIEW APPROACH

Once the program requirements have been reviewed and clearly established, creatively approaching the quality of care review process can change perceptions from arduous to win/win.

- Consider reviews a mentoring opportunity Mentoring tends to elicit thoughts of a positive, mutually beneficial relationship that we voluntarily accept. Although chart reviews are programmatic requirements, viewing them as a formal opportunity for mentoring can encourage both parties to look forward to the discussion.
- Schedule time each month
 "Finding time" is a primary complaint. Scheduling time on both schedules before or after patient care provides a "deadline" to keep the review process on track. More importantly, it creates the time and common expectations for discussing clinical care and professional development.
- Employing a standard review form
 Employing a standard review form has
 numerous advantages. It makes quality review
 documentation quicker and easier, whether
 electronic or hard copy. It helps ensure that all
 APPs are reviewed on similar standards. And it
 helps facilitate more efficient reviews in the future
 by allowing for a past/present comparison.
- Engaging the APP
 Engaging the APP in the review content can provide a more meaningful discussion. For example, the physician can ask the APP to suggest patients for quality review based on interesting presentations, challenging circumstances, or alternative options.

- Capture "real-time" interactions
 - Performing reviews in patient settings can save time, and it's often easier to cover situations in the moment rather than trying to recreate the situation and provide feedback after time has passed. For instance, when a physician and APP are working with a common patient or are involved in the same encounter, they can use the opportunity to go through a review of the documentation.
- Regularly emphasize additional benefits Formal care review can enhance physicians' professional relationships with APPs, instill confidence that patients are receiving highquality care, and mitigate the risk of "negligent supervision" concerns.



ADDRESSING COMPENSATION

In addition to establishing a comprehensive APP oversight program that satisfies regulatory requirements and provides value to participants, many organizations struggle with the question of whether physicians should be compensated for collaborating with and/or supervising Advanced Practice Providers (APPs), or whether those activities should be considered a standard practice requirement. Physicians typically express that comprehensively satisfying state regulatory requirements, such as conducting formal care (chart) reviews, discussing review findings with the APP, creating and reviewing practice protocols, and submitting the reviews to program coordinators, takes a level of effort that exceeds standard professional practice of being collegially available. Recognizing physicians for this level of effort and meeting program requirements in a timely manner with a defined stipend reward is a reasonable consideration.

National benchmarking can be used to ensure that the amount of the defined stipend meets Fair Market Value and commercial reasonableness criteria. The stipend amount could be a flat rate (e.g., national median) for all collaborators/supervisors, or the stipend amount could vary based on APP patient volume (direct relationship) or experience level (inverse relationship). If contemplating incorporation of APP patient volume into stipend determinations, national productivity benchmarking can be used to develop a tiered stipend based on the degree of APP productivity (wRVU-based percentiles). Note that this consideration is not rewarding the collaborator/supervisor for APP expended effort, but rather, acknowledging that APPs with higher patient volumes tend to have more frequent interactions with their collaborators/ supervisors and more charts for the physician to review (if a percentage-based chart review process is utilized).

Regarding consideration of experience level, programmatic review requirements could be designed to decrease the numbers of charts reviewed over time with increasing APP experience levels and exemplary prior review results. Having said that, some teams find that maintaining the set review process throughout the APP's career is mutually beneficial – and even preferred regardless of experience level – when a mentoring approach and mentality is cultivated.



...comprehensively satisfying state regulatory review requirements takes an exceeded level of effort...

LOOKING AHEAD

Going forward, health systems will encounter additional questions and challenges to solve regarding physician and APP collaboration. APP review program requirements and their potential contribution to physician burnout is not a small matter. Finding value in the review process (i.e., mentoring) helps to mitigate this effect. An additional future concern is that CMS has already spotlighted medical directorships for review to ensure that physician compensation is not being padded by ill-defined, unmonitored, and unnecessary "ghost" positions. Stipends for APP collaboration or supervision in organizations that do not have a well-established, monitored program with specific collaboration expectations are ripe for similar scrutiny—and may be the next frontier for external audits. This can be a genuine issue for healthcare systems and warrants further examination. **Get ahead of the curve through an internal evaluation of the APP oversight program to ensure it is reasonable and robust.**

The expert team of HSG consultants has worked with many healthcare systems to either establish or improve a formal APP oversight program. While this issue often ends up on a back burner or falls to the bottom of the to-do list, organizations that make meaningful changes also experience meaningful results, ultimately reducing losses and mitigating risks. Find out how your employed network can benefit by contacting Dr. Terry McWilliams at HSG Advisors tmcwilliams@hsgadvisors.com



ABOUT HSG ADVISORS

HSG Advisors partners with health systems to transform their approach to markets, services, and providers for improved growth and operational and financial sustainability.

SERVICES



HSG CLAIMS DATA ANALYTICS

Data analysis leveraging all-payer healthcare claims data with HSG's insights and expertise to evaluate competitive dynamics related to markets, service lines, providers, and patients.



HSG STRATEGY

Strategic development for health systems' long-term goals and direction that allow for simultaneous pursuit of immediate market opportunities, with a focus on Growth Strategy and Medical staff Development planning.



HSG EMPLOYED PROVIDER NETWORKS

Building Shared Vision, designing organizational, leadership, and governance support structures for better quality and financial performance, and developing solutions for overall Operational Excellence.



HSG COMPENSATION AND COMPLIANCE

Provider compensation model development and implementation guidance for hospitals and health systems focused on sustainable solutions that promote market competitiveness, financial sustainability, and regulatory compliance.

CONTACT THE AUTHOR



Dr. Terrence R. McWilliams, MD, FAAFP
Director & Chief Clinical Consultant

(502) 614-4292 tmcwilliams@hsgadvisors.com

