



First Quarter 2013

midwestmd.org

Healthcare Reform and Your Interview

by Beth Everts

One of the new initiatives in healthcare reform is called the Affordable Care Act (ACA) which requires that all participating hospitals and clinics be reimbursed by Medicare based on the quality of care they provide.

This initiative, called *Value Based Purchasing (VBP)* gathers information based on a scoring criteria obtained through patient surveys called *Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS)*. Translated this means that hospitals and clinics will be paid for services based partly on ratings compiled from these surveys that are completed by the patient. The patient's perception of the visit, not necessarily the number of patients seen in day or the census in the hospital, will determine the payment institutions and clinics receive.

You might ask, how does this affect the interview? To answer this question, understand that the administrators you will meet with are well aware of the impact of this change in how healthcare is delivered. You can turn their heads by addressing some of the key components of the HCAHPS surveys in how you communicate your practice style.

To do this, take a closer look at the parameters for VBP and HCAHPS. As we discussed, under the old RVU or fee for service programs, physicians were paid for the quantity of patients and services they provided. With VBP, the patient will need to feel as though a valuable service was rendered to them in order for the institution or clinic to be receive maximum payment. Understanding what types of questions are asked on these surveys will help you discuss your patient care style in a way that impresses the interviewer to see you as a physician ready to meet the requirements of a new healthcare system.

HCAHPS may survey a variety of aspects of the physician/patient

encounter. Below are listed some possible areas addressed on a survey, based on information from Press Ganey. Also listed are suggestions on how providers can address these areas. You can highlight these behaviors as you discuss your practice style and relay your knowledge of the new requirements.

1. Time the physician spent with you.
 - a. This measures the extent of the time the physician was physically present and how the time spent effectively met the patient's need. The challenge is not so much how much time was spent according to the clock but if the patient had the impression the physician was listening. Here are some ways to meet this challenge:
 - i. Encourage patients to write down questions for the physician (supply a notepad for this before the doctor enters the room)
 - ii. Allow the patient to "tell the story" without interruption
 - iii. Ask open-ended questions and respond with empathy
2. Physician concern for your questions and worries.
 - a. Although a physician can't assess the private feelings of the patient, the question is designed to measure the extent to which the physician's overt behaviors displayed concern for the patient.
 - i. Offer a gesture of kindness such as a handshake or touch upon entering and leaving the room
 - ii. Sit down with the patient, at eye level if possible
 - iii. Ask about the patient's understanding of the disease and treatment

These are just a few of the areas HCAHP Surveys will measure to determine the quality of a patient encounter with a physician. If you can convey to the interviewer that your style of practice addresses some of these key components by telling examples of patient encounters and how you handled difficult situations to create satisfaction, you will make a lasting impression.

We will feature additional aspects of HCAHPS requirements in future editions of the newsletter so stay tuned and happy interviewing! We look forward to meeting you!

How early should I look for the perfect job?

By Paula Johnson

As a physician you have invested years of your life and money you didn't have focusing on one goal- to practice medicine. How early in residency should you start to look? If you have an idea of where you would like to live start now!

If you don't know where you want to live, make a plan. In house recruiters know what the organizations job openings are now and many times will sign candidates up to two years in advance. They also typically know about upcoming retirements and community growth.

The earlier you decide the more time you have to focus on your

residency. It is not a good idea to go home for Easter vacation and have to report that you finish residency in 3 months and you don't have a clue. The earlier you look the more opportunities you can consider.

You will also have more time to interview if you use vacation days in your first years of residency or fellowship. Other advantages of starting early is you have more time to evaluate your options, you can focus on preparing for boards, assurance you will start on time and keep insurance and benefits for your family.

Start your search early and you will make better decisions.

