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## What You Need To Know About The Flea That (Metaphorically) Killed The Medical Center CEO

A few days ago, a flea bit and killed the CEO of one of the top-ranked academic medical centers in the nation. Metaphorically speaking, of course.

And the lessons cut both ways for you and your organization, whether it's a medical group, a hospital, an ASC, or any other sort of business.

In his book, *The War of The Flea*, the seminal work on guerrilla warfare, Robert Taber wrote about how a small band of guerrilla fighters could emerge victorious in a conflict with a larger, well organized enemy.

"Analogically, the guerrilla fights the war of the flea, and his military enemy suffers the dog's disadvantages: too much to defend; too small, ubiquitous, and agile an enemy to come to grips with."

In 2014, Ohio State University concluded a national search for the new leader of its Wexner Medical Center by hiring Sheldon Retchin, M.D. as its CEO. His salary? Close to \$1 million per year.

Yet a few days ago, just three letters signed by a handful of the 1,200 physicians that Wexner employs, triggered his resignation.

The first letter, dated May 1, 2017, signed by only 25 physicians, raised complaints about Dr. Retchin's management style. According to a report in *The Lantern*, the Ohio State school newspaper, the complaining physicians wrote they had "no confidence" in Dr. Retchin's leadership. The signers claimed that more than 100 other doctors supported their position, but were afraid to join in the letter.

The two subsequent letters were signed by 6 physicians each.

Even assuming no crossover in the signatories, 37 physicians (yes, some in positions of authority) out of 1,200, that's only 3%, were able to unseat the king.

Dr. Retchin, the front man for a high and mighty organization, and, one can argue, the organization itself, became the latest victims in the war of the flea.

What's this mean for your organization and for you, personally?

From the organizational perspective, as in a guerrilla war, change within the organization, as well as within a domain in which the organization interacts, can occur as a result of agitation by a vocal minority. Just as no vote was required for a dictator like Casto to take over Cuba, no medical staff vote, no survey by Press Ganey, no long and drawn out process among "stakeholders," is required to topple the status quo.

What you think is permanent is only temporary. *How temporary* is the question.

What you do, and how you do it, within your organization, and how you project it to essential third parties (e.g., hospital-based medical group to hospital) is all-important in maintaining relationships, contracts, and even existence. That's the flea collar.

And, just the same, from the perspective of the individual, the small, the "out group," the "flea," a steadfast, vocal, and somewhat intransigent minority, can kill the dog. The large group can be made irrelevant. The hospital CEO can be forced out. The small organization can ingest the larger. Yes, the dog bites back. No win is guaranteed.

Many say that the world is a tough place. Maybe it is, because it's not just dog-eat-dog. In Dr. Retchin and Wexner's world, it's flea-kills-dog as well.

Whether you're the metaphorical dog or the metaphorical flea, the same applies to you.



## Wisdom. Applied. 103 - Why You Must Know How Framing Changes Value

There is no such thing as fixed value. Value determination is based on obtaining something worth more than what is being given up. You can heavily influence how your perceived value by employing the valuable technique of framing.

July 31, 2017

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## NEW BOOK OFFER

### The Impending Death of Hospitals



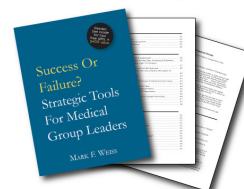
## COMPLIMENTARY BOOK DOWNLOAD

Having fallen for the fallacy that there's profit in market share, hospitals have gorged on acquisitions and on employment and alignment of physicians. But it's becoming evident that physician employment leads to losses and that integrated care delivers neither better care nor lower costs. And now, technology is about to moot many of the reasons for a hospital's existence. How can your practice survive and even thrive in the post-hospital world?

The Impending Death of Hospitals is available for download below.

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## Success Or Failure? Strategic Tools For Medical Group Leaders



## COMPLIMENTARY BOOK DOWNLOAD

Today's medical groups must confront multiple challenges, including the impact of Obamacare. Increasing commoditization. More competition, not just from other physicians and medical professionals, but also from hospitals, investor-owned groups and also

## All Things Personal

I was listening to a business podcast. The host was interviewing a guest who said, "you can't step into the same river twice." Wow! That's really Zen-like . . . or is it Zen-lite? (Note: I pictured the guy with a man bun.)

On a level I imagine the guest never imagined, that is, on the actual, not metaphorical, level, the one to which I can certainly relate, he's absolutely correct. That 4 or 14 or 44 gallons of water that rushed by my left foot in the Owens river will never be at X longitude / Y latitude again.

But, if one can't step into the same river twice, why is it that many people step into the same shit twice? After all, the river of time *has* moved on, hasn't it?

Yes, each situation is different. Sure, that's true. But situations often come in categories, and it pays to pay attention to categories.

Maybe your now metaphorical wet foot isn't in a river, just some other water that, this time, is circling around.

Keep your eyes open. Watch where you step.

## Recently Published Blog Posts

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[How Not Letting Go Leads To Medical Group Management Messes](#)

Thursday, July 27

[It's All Related](#)

Wednesday, July 26

[Why The Hospital's Idea of Physician Leader Means Follower](#)

Tuesday, July 25

[How Would An Antitrust Attack On A Hospital Impact Your Practice?](#)

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## Whenever you're ready, here are 4 ways I can help you and your business:

### 1. Download a copy of *The Success Prescription* Book.

My book *The Success Prescription* provides you with a framework for thinking about your success. Download a copy of the e-book [here](#).

### 2. Be a guest on "Wisdom. Applied. Podcast."

Although most of my podcasts involve me addressing an important point for your success, I'm always looking for guests who'd like to be interviewed about their personal and professional achievements and the lessons learned. [Email](#) me if you're interested in participating.

### 3. Book me to speak to your group or organization.

I've spoken at dozens of medical group events, healthcare organization events, large corporate events, university-sponsored events, and private, invitation-only events on topics such as The Impending Death of Hospitals, the strategic use of OIG Advisory Opinions, medical group governance, and succeeding at negotiations. For more information about a custom presentation for you, [email](#) my Santa Barbara office staff.

### 4. If You're Not Yet a Client, Engage Me to Represent You.

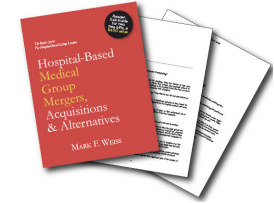
If You're Not Yet a Client, Engage Me to Represent You. If you're not yet a client, and you're interested in increasing your profit and managing your risk of loss, [email](#) me directly. I'll contact you to set up a call or meeting.

disruptive ventures. Yet at the same time, the future of healthcare offers medical groups tremendous opportunity.

This small book is a collection of essays, of thoughts as tools for your success. Read. Think. Succeed. Repeat.

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## Hospital-Based Medical Group Mergers, Acquisitions & Alternatives



### COMPLIMENTARY BOOK DOWNLOAD

Some days, it seems as if everyone, from anesthesia or vascular surgery practices, is talking about selling their larger group, to private equity investors, or to a hospital.

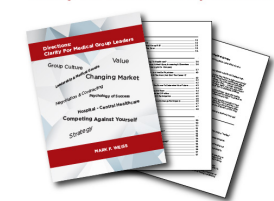
The reality is that some practices can be sold, some can't, and some have nothing to sell.

The reality also is that there are a number of strategic a practice sale.

A perfect storm of factors is accelerating the market for based medical group mergers and acquisitions.

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## Directions: Clarity For Medical Group Leaders



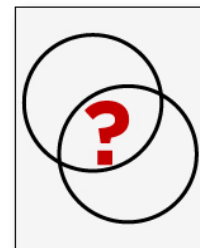
### COMPLIMENTARY BOOK DOWNLOAD

The healthcare market is changing rapidly, bringing new problems.

How can you find a solution, how can you engage in the development of strategy, and how can you to plan your, group's, future without tools to help clarify your think

Directions is a collection of thoughts as thinking tools, to instruct, inform, and even more so, cause you to give instruct and inform yourself.

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Mark was quoted in the article **ASC Regulatory Areas That Developers Need To Pay Attention To** published on The Ambulatory M&A Advisor. Read [here](#).

Mark's article **OIG Advisory Opinion Secrets and Strategy** published in the Summer 2016 volume of Communique. Read [here](#).

Finders keepers, losers weepers. Except in connection with overpayments from Medicare, then it's a violation of False Claims Act leading to significant liability, that is, to repay the overpaid sum within 60 days. **CMS Resets the Clock for Return Of Medicare Overpayments**, was published on AnesthesiologyNews.com on May 2016. Read [here](#).