

WEISS



June 30, 2022

My Father Loved to Buy Cars. And Your Exclusive Contract or Employment Agreement.

My father loved to buy cars. Not lots of them. He wasn't a collector. I mean that he loved, really loved negotiating with car dealers. And in a way, he did buy a lot of them because back then they only lasted about 3 years, max. It seems as if he was always taking me to a car dealer. It was fun.

But my father had rules for negotiating and one of them was to always, always have an alternative. So he negotiated with multiple dealers for that white over maroon 1962 Ford Galaxie 500.

If you're like most people, you hate shopping for a car. But even if you hate it, you probably follow the rule of negotiating with multiple dealers. You know that you have to have alternatives to any one deal.

So why do you throw the rule out the window in connection with your professional practice, especially if you're a hospital-based physician group leader? Have you fallen for the lie that you are in a service relationship to Community Memorial St. Marks or whatever the name of the hospital is? Or, you think that they love you? They don't. Or, maybe they do, but their love isn't stronger than the fact that sooner or later a competitor will say that they can do it without stipend support or that they can do it better because they won some award that no one in their right mind really cares about.

So, how many alternative deals do you have in place right now for your group or for your employment contract? How many other deals are you pursuing right now?

My father loved to simply walk off the lot, leaving the deal in the air. "No," he'd say to the salesman, "you really don't want to sell a car today." And off we'd go. Usually to get ice cream.

Can you say "no" to the hospital's "final offer" because you have another deal in place?

Can you just walk away and go get ice cream?



How to Deploy the Secret Sauce of *Opportunistic Strategy* - Webinar On Demand

They say that COVID-19 has changed the world, creating the "new normal." Many of your colleagues and many hospital administrators are running scared.

Others, leaders like you, know that *crisis means opportunity*.

Let me provide you with the strategic tools and insights that you need in order to seize opportunities, whether they're in the context of your current business relationships, the expansion of your business activities, or the creation of new ventures.

You will learn:

- Defense as a defective default: It's necessary, but not sufficient.
- Exploiting weakness: Drop the guilt and identify opportunity.
- Flat line negotiation is fatal: Understand its myths and limitations.
- Negotiation reality: Learn to identify and deploy on multiple planes to affect the outcome.
- Maneuver: Harness the power of maneuver, both in overall strategy and in specific negotiation strategy.

Others see a crisis and freeze in fear. Learn how to see the opportunities and obtain the tools to increase your odds of obtaining them.

The price to attend is \$479. The cost of not attending is astronomical.

Get Access Now!



Newsflash: Business Life In the Time of Coronavirus - The Way Out

The coronavsaairus crisis, especially as it has become politicized, raises a number of business issues and, quite frankly, business opportunities in regard to future disruptive events.

Check out our [mini-series](#), with actionable business lessons for medical group leaders.

Sooner or later this crisis will end. You can't allow yourself to be too busy, too occupied, too concerned with current events, to devote time and effort to strategizing for your future.



Wisdom. Applied. 163 - The Mismatch Between Story and Culture Within Medical Groups

All medical groups have a culture. Whether or not it's been purposefully created, it exists.

All Things Personal

Credit card companies' "fraud prevention" is beginning to feel more like China's social credit score system.

In the last two weeks, the folks at Citicorp and the geniuses at American Express both decided to send text codes and "safe keys" designed to make buying things difficult, so difficult that I made the purchases using different credit cards.

Citicorp decided that I wasn't really me after sending me two text codes, to which I immediately responded verifying that indeed, it was I who was making the purchase. They then blocked the purchase and required that I call their fraud department, only to learn that their "solution" to their being no fraud was to lock my card until, wait for it, they mailed me a letter with another code so that I would have the pleasure of calling them to turn the darn thing back on. Geez, thank you for protecting me from fraud.

American Express sent me a "safe key" which didn't interface with British Airways. I tried calling American Express, but their greeting told me that they were overloaded with calls and suggested that I call back later. I didn't. I just used another credit card to complete the purchase.

Of course, none of this has anything to do with protecting me or any other customer from fraud. It has to do with Citibank and American Express protecting *themselves* from fraud.

If your policies "to protect the customer" are really to protect yourself, why lie about it?

Not only isn't anyone going to believe you, they're going to badmouth you.

Your customers, call them patients or clients, it makes no difference, deserve the truth. Perhaps, as in credit card fraud prevention, it's hard to tell the truth ("we get cheated by people every day, so we have to be really, really careful when someone who bought Starbucks in Cleveland is charging gas in Karachi four minutes later"), but if you're doing stuff that frustrates your audience, you should have the guts to tell them why you're doing it.

If it then turns out to prevent more good business than it prevents the problem you set out to solve, think about another solution, one that doesn't cost you more in the long run.

Help Us Help You With Helpful Content

What tailored content would you most like to see during this time?
How can we focus on solutions to your most pressing strategic concerns?

Please **fill out our confidential survey** to ensure we best serve your needs!



Podcast Compilation Greatest Hits - Manage Your Practice Edition

We've curated our most popular podcasts on managing your practice into our second compilation album.

Sit back, enjoy, and think about your future.

Listen [here](#).

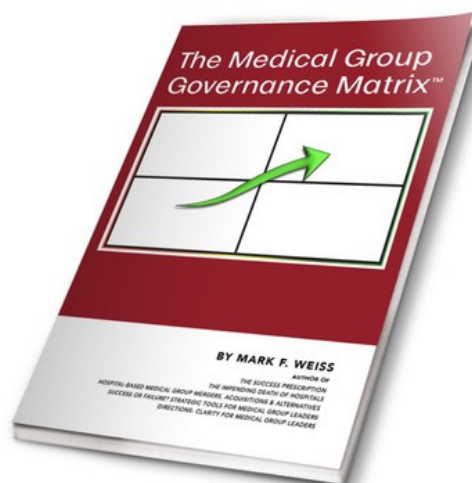
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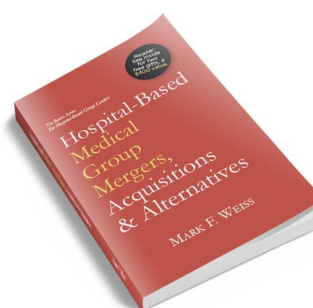
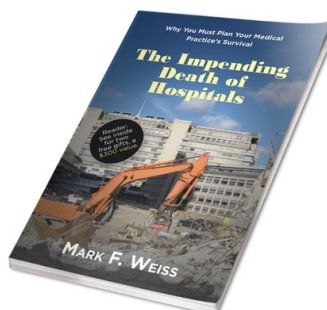
Published Articles

- [Popularity Contests and Disruptive Physicians: Avoiding the Death of Your Anesthesia Group](#), Fall 2021 Issue of [Communique](#).
- [You Have Enough Problems. Why Buy Compliance Risk?](#), Summer 2020 Issue of [MiraMed Focus](#)
- [Who Really Owns Your Anesthesia Group?](#), Summer 2020, [Communique](#)

Books and Publications



We all hear, and most of us say, that the pace of change in healthcare is quickening. That means that the pace of required decision-making is increasing, too. Unless, that is, you want to take the “default” route. That’s the one in which you let someone else make the decisions that impact you; you’re just along for the ride. Of course, playing a bit part in scripting your own future isn’t the smart route to stardom. But despite your own best intentions, perhaps it’s your medical group’s governance structure that’s holding you back. In fact, it’s very likely that the problem is systemic. The Medical Group Governance Matrix introduces a simple four-quadrant diagnostic tool to help you find out. It then shows you how to use that tool to build your better, more profitable future. Get your free copy [here](#).



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

1. Download a copy of The Success Prescription. My book, The Success Prescription provides you with a framework for thinking about your success. Download a copy of The Success Prescription [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, healthcare organization, university-sponsored, and private events on many 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, [drop us a line](#).

4. If You’re Not Yet a Client, Engage Me to Represent You. If you’re interested in increasing your profit and managing your risk of loss, [email me](#) to connect directly.