

September 30, 2019

### Deteriorated Insulation From the Hassles of Running a Medical Practice

If you haven't read it already, take a look at my August 5, 2019, blog post, [Physician Discontent With Hospital Employment Beginning To Boil](#). In that post, I discuss the epidemic of discontent among hospital-employed physicians. Instead of seeing the outbreak as a negative, my post explores some of the opportunities that this trend presents.

In a subsequent email exchange, my friend Devona Slater of ACE ([Auditing for Compliance and Education](#)), commented that she, too, sees the exit of hospital employed physicians as an opportunity. But then she made a very interesting observation, which I've edited slightly for presentation: "It's just part of the cycle of 'the grass is always greener,' but, truly, there are weeds in every yard."

Many physicians opted for hospital employment, some straight from residency and others from independent practice, because they bought the line that hospitals fed them: "You didn't go to medical school to run a business. We'll run the business. You get to practice medicine!"

But the word "hospital" means "bureaucracy."

I'm seeing several interesting trends. Over the past four or five months, I've worked on four or five consumer focused medicine projects with physicians, both office practice and hospital-based, who were leaving hospital employment. And, I'm beginning to work with internal medicine physicians pulling out of hospital-affiliated clinic settings to establish rather unique group practices.

Certainly, some physicians will remain hospital employees and, for newly minted physicians with an employee mindset, it will continue to be a viable option. That is, until the worsening financial condition of hospitals renders them unable to support employed and affiliated physician groups.

But for most physicians, having to fill in requisition forms, attend moronic meetings, and report to the clinic medical director, who reports to the regional medical director, who reports to the chief medical officer, who reports to the CEO, isn't exactly hassle free.

Riffing off of Devona's "weed" analogy, the layers of bureaucracy that were supposedly meant to insulate the doctors from the "hassles of running a medical practice" out hassled the actual "hassles of running a medical practice." Go figure.



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It's not quite when Harry Met Sally.

## All Things Personal

And it just stopped right in front of me. A black Suburban with a bike on the roof rack and a “coexist” sticker on the bumper.

When there was finally a break in the traffic heading toward me on the two lane road, I pulled around the SUV. The driver's window was open and I came to a stop.

“Are you OK?” I asked.

“Yes,” she answered, face planted in her cell phone, “I’m just looking for directions.”

Do you have people working for you who are doing the same thing, metaphorically speaking? Have they simply stopped moving forward in their careers, dependent upon so much outside guidance that they are blocking others' progress as well?

Offer them some assistance. But if they continue to block traffic, just pull around them and leave them behind.

Sure, there are some alternatives, neither of which are acceptable: You can waste energy pushing them forward. Or you can just stop, too.



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