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How to Talk to Physicians about Standardized Scheduling

Physician Executive Talking Points for Common Physician Pushback



This cheat sheet is designed to help physician leaders discuss standardized scheduling with frontline physicians.

Use this cheat sheet to anticipate and address common pushback that you might encounter in physician meetings and in one-on-one performance conversations.

1 “My practice staff know my schedule and can fill it up so I’m the most productive.”

- **Standardized scheduling gives us greater visibility into your (and the group’s) productivity.** According to Advisory Board benchmarks, physician schedules are only 88% full in primary care, meaning that you’re missing out on visits and productivity. By standardizing schedules, we can better understand when you have available appointment slots and schedule patients into them. Not only does this mean that you’ll be more productive, but eventually, this will allow us to think more holistically as a group to get patients in sooner, benefitting us all.
- **There’s data backing these scheduling standards.** We’ve landed on these uniform templates because, based on our analysis, they’ll maximize the group’s efficiency. While practice staff may feel like they know how to fill up your schedule, these standards are proven to make you as productive as possible without burning out. For example, at one organization, leaders optimized schedules so physicians could see at least one more patient per day—without working more hours.
- **It makes backfilling easier.** While your practice staff may know the ins and outs of your schedule, right now it falls on you to make sure schedulers know your preferences. Codifying standards makes it easier to hire, train, and redeploy schedulers so that they can work across practices more efficiently—and you don’t have to manage them.

2 “I don’t want to give up control over how I spend my day to someone else.”

- **We need our providers to commit to the group’s access strategy.** According to Advisory Board, on-demand access is the #1 most important attribute to patients when selecting a primary care provider. In order for our group to grow and remain competitive, we need to commit to providing timely, convenient access to care. To make this happen, you may need to give up ownership over some decisions for the sake of the group, such as customizing visit types and lengths, when you put blocks on your schedule, determining how many new patients you see, etc.
- **But you can still retain control over important parts of your schedule.** We know it’s essential for you to have input into how you spend your day so we can proactively carve out areas where you have complete autonomy, such as deciding when you want to see certain types of patients, when schedulers can double book, the hours you work, etc. We can also set up a process for you to request changes to your schedule if any group standards aren’t working for you. While any major changes will need to go through our leadership team for approval, we want to hear from you on what works best for you and your patients.

Source: Primary Care Access Benchmarks for Medical Group Leaders, Advisory Board, 2019 Updates in Primary Care Consumer Preferences, Advisory Board, Advisory Board analysis.

3 “Patients and call center staff are going to book the wrong appointment types.”

- **We will streamline visit types to the most common reasons patients come in for care to reduce errors.** Patients and call center staff often book the wrong appointments because visit types are too specific and there are too many to choose from. In order to make it easier for people to pick the right appointment, we need to reduce and simplify visit types, increasing the likelihood that patients and staff book the right ones. For example, many organizations have less than ten broad visit types per specialty (e.g., new patient, established patient, wellness exam, etc.), and usually these types account for the vast majority (80-95%) of visits typically seen.
- **We will allocate more resources to establish an appointment confirmation process for new patients.** We know that physicians are often most worried about this with new patients because there are so many unknowns and their visits often require more time. To make sure that new patients booked the right appointment type, we can allocate staff to call these patients before their visit to confirm that they’re scheduled for the right visit and gather appropriate medical history.

4 “I’m not going to have enough time with my patients.”

- **Standardization means more consistency—not less time.** Standardized scheduling will make your daily schedule more predictable, which is better for you and your patients. It also means that your visits will be more uniform in length, and as a result, more efficient. This doesn’t necessarily mean shorter visits. We’ve landed on what we believe is the right length for each visit to balance efficiency, your personal preferences, and patient care.
- **It’ll free up time for you to complete administrative tasks.** According to Medscape, physicians spend 15.6 hours per week on paper work and administration—on top of time spent seeing patients. We know that schedules often don’t account for this work, meaning that it often spills over into evening hours and personal time. By making schedules more standardized, we can proactively build in time for administrative work into your day-to-day.