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## Moving Beyond Surgeon Preference:

The field guide to gaining surgeon buy-in for intraoperative neuromonitoring vendor consolidation that results in improved outcomes, decreased costs, and increased surgeon satisfaction.

How much a hospital spends on surgical supplies and staffing depends largely on their physicians, who drive 75-85% of all quality and cost decisions. Physicians who opt for non-consolidated, higher price products or services can have a detrimental impact on the hospital's bottom line.

Most improvement initiatives in the OR focus on supplies or processes, but the IONM professionals that support surgeons also influence value and outcomes. Skilled and competent staff can anticipate surgeon requests, improve procedure efficiency, and directly impact surgeon satisfaction. This trust between the IONM staff

and surgeon builds with time, and physicians often resist changing IONM partners due to these personal relationships.

Much like surgical supplies, IONM vendors have traditionally been left to surgeon preference. Therefore, it's not uncommon to have three or more intraoperative neuromonitoring providers supporting different surgeons within the same hospital. The high managerial costs involved with managing multiple IONM providers includes complex billing and scheduling processes, inconsistent quality management and reporting, and staffing challenges. In addition to increasing costs and reducing quality, these challenges

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also have a negative impact on surgeon satisfaction. Consolidating to a single provider is an attractive solution.

But making a decision to consolidate providers is not something that can be done without surgeon buy-in, and that could potentially require some difficult conversations. Much has been written about theoretical frameworks to engage physicians, but what hospital leaders really need are concrete tactics and talking points to drive successful dialogue specifically about IONM providers. How can OR leaders engage surgeons in the discussion? While each OR environment is unique, here are some best practices you may be able to adapt for your own needs.

### #1 STRATEGIZE

With this much at stake, OR leaders are faced with the challenge of how to initiate these types of potentially contentious conversations and gain buy-in from physicians. These are not discussions to rush in to – preparation is required.

**Know Your Environment:** Before beginning a discussion about potential change, obtain a strong understanding of the status quo. What IONM providers are currently represented in the group? What are the existing contract structures, and how long have they been in place? What is the general feeling in the OR about these IONM providers?

**Know the Players:** Identify potential physician champion(s) as well as potential blockers. Consider meeting with potential physician champions first so they can provide perspective that may aid in communicating to the larger group. It may also be a good idea to meet with potential resisters one-on-one in order to listen to their concerns and gain their buy-in prior to the larger group discussion.

**Investigate Current IONM Providers:** To ensure IONM partners are focused on putting the patient first, research any existing conflicts of interest or billing practices that may conflict with the organization's mission, such as:

- Greater focus on selling equipment, implants and technology rather than on IONM services, which can reduce the quality of the monitoring services
- Hidden service fees rolled into implant, instrument or equipment costs
- Billing practices that are detrimental toward the patient, such as submitting charges that don't count toward in-network deductibles/accumulators
- Unnecessary billing for items, such as disposables (needles, electrodes, etc.)
- Balance billing the patient
- Sending patients to third-party collections agencies
- Physician ownership with possible Stark implications

**Gather Data:** Talking points will not be enough to convince surgeons to modify their practice. Data that illustrates the need for change and demonstrates the impact on surgeon practice, hospital and physician revenue, and patients is a must. Make sure that your supporting data is not just about costs, as that may immediately disengage physicians. The problem is not just higher costs but rather the difference in costs between providers with similar or better clinical outcomes. Therefore, in addition to showing cost variation, be prepared to also show corresponding outcomes and metrics of operating room efficiency. Also, provide data about how the surgeon experience differs by IONM partner. Impressive sources include quarterly Quality Indicator (QI) reporting,

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case reviews, and benchmarking at the national, regional, and facility levels. Ideally, the data will tell a compelling story and clearly illustrate improvement opportunities. It's also always a good idea to spend some time double-checking research. The tendency is to immediately zero in on any weakness or inconsistency in the data, discrediting the overall message.

**Gather Stories:** Storytelling is a powerful strategy to influence change. Gather vignettes about patient struggles to illustrate talking points and support the data. Also, capture anecdotes about the surgeon experience that demonstrate the current challenges and potential personal benefits of consolidation IONM providers.

**Determine Your Timeline:** When communicating, be clear about timelines for evaluation and implementation to set appropriate expectations. It may be useful to offer multiple times and venues for discussions to accommodate schedules. But, most importantly, begin communications with surgeons as early as possible, even before the planning or evaluation process begins. This provides an opportunity to build trust and incorporate their suggestions into the final plan.

## #2 COMMUNICATE

With good planning, you'll enter into discussions with OR surgeons feeling more confident and prepared. Here are some tips to ensure discussions are successful:

**Set the Tone:** Communicate with words and demeanor that OR leadership's intent is not to force a decision on surgeons that impacts their clinical practice. Instead, leaders will share some findings and then listen to the surgeon's

perspective. Instead of framing it as a problem, introduce it as a challenge that can be overcome together, stressing their involvement in the decision-making process. While consolidating IONM vendors has demonstrated success at other facilities, leaders will seek surgeon expertise to determine how it will work for them.

**Start with Shared Purpose:** The first step is to establish common ground. The goal is not just about increasing revenue or cost cutting – it's ultimately about increasing value for patients through better outcomes AND increasing revenue. It's important not to communicate this as a standalone effort but rather as part of the organization's broader mission and ongoing partnership between physicians and leadership.

**Outline the Status Quo:** Describe the current state and ask for confirmation. Provide data that illustrates the opportunity for improvement and use storytelling to bring it to life.

**Discuss the Need for Change:** Data is rarely enough to change behavior on its own. It's important to clearly outline what is at stake. Leaders must communicate the benefits consolidating IONM providers as well as the consequences of not.

- **Patient Benefits:** Consolidating IONM vendors can significantly reduce direct and hidden costs, freeing up resources to improve patient care and potentially passing on savings to patients as well.
- **Surgeon Benefits:** With the right provider, surgeons can rely on the most highly qualified IONM professionals, improving their surgical outcomes while increasing their general job satisfaction. Streamlined staffing also increases availability and flexibility.

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- **OR Leadership Benefits:** When one vendor is used across the OR, scheduling and billing are vastly simplified in addition to quality management and reporting. The time spent onboarding, and credentialing neurophysiologists is also vastly reduced, freeing up management time to focus on other priorities and improving the financial security of the organization.

**Prepare for Resistance:** As with any potential change to a surgeon's clinical practice, resistance can be expected and is normal. Surgeons have trusted relationships with their existing IONM providers and may feel anxious about changing them. There may also be personal considerations that make a surgeon reluctant to adopt another IONM partner. However, ultimately, improving patient care is more important than preserving the status quo for a single physician. Be prepared to address concerns and redirect conversations as needed.

- **Higher Costs but Better Outcomes:** Some surgeons may argue that their higher costs are justified by better outcomes. Be prepared to back up your stance with data that demonstrates cost variability with similar (or better!) patient outcomes and also inquire what data physicians are monitoring from their provider that support their stance. Consider suggesting that surgeons shadow one another to learn how different IONM providers impact their practice.
- **Lack of Understanding About Costs:** Physicians may argue that their higher costs are negligible compared to the revenue they bring to the organization or push leadership to simply negotiate better pricing. In general, clinicians lack awareness about

the cost of care and even less awareness about how costs relate to outcomes. To overcome this objection, help them understand true costs and their impact on patient care.

- **Loss of Mutual Benefits with Current Provider:** It's possible that staff members and their current IONM provider in some way support one another by making or influencing referrals for them or their client facilities. Therefore, resistance could stem from business or financial implications which need to be addressed.
- **Discrediting the Data:** Physicians may focus on the issues with data when they feel it is not accurately describing their perspective. As long as you are confident in the data, this may be a sign of another underlying concern.

### #3 EVALUATE

It's true that consolidating IONM vendors can result in significant benefits to patients, surgeons, and hospitals, but it must be the RIGHT partner. The right partner can provide greater efficiency, quality control, and managerial control, but the wrong partner can result in just the opposite.

Once surgeons buy-in to the reasoning behind vendor consolidation, involve them in the vendor evaluation process. Encourage them to participate in the process to ensure that the best partner is selected for their team's needs.

Facilitate the process by providing a framework that can be used to evaluate potential partners objectively:

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Vendor Requirement	Partner A	Partner B	Partner C
<p><b>Staff Credentials:</b> Validates that their IONM staff have advanced training and education, as well as ongoing education throughout their careers in the latest techniques to improve patient outcomes and increase OR efficiency.</p>			
<p><b>Size:</b> Demonstrates necessary staffing to accommodate absences and peak times, as well as sufficient team size to expand clinical experience and encourage knowledge-sharing.</p>			
<p><b>Terms of Coverage:</b> Offers a coverage guarantee (that doesn't financially penalize the hospital!) to ensure reliable coverage during unexpected times.</p>			
<p><b>Additional Fees:</b> Provides cost transparency and does not charge hidden or unnecessary fees.</p>			
<p><b>Quality Data Reporting and Collaboration:</b> Offers high quality data across a number of measures that demonstrates that they are well-equipped to continuously improve their program and improve patient outcomes.</p>			
<p><b>Clinical Leadership:</b> Shares their research with the industry by joining panels and committees, conducting lectures, and publishing research.</p>			
<p><b>Billing Model:</b> Follows best practice industry standards for consistent and transparent billing, allowing the hospital to better budget and plan for neuromonitoring costs.</p>			
<p><b>Joint Commission Certified and Accredited:</b> Demonstrates a focus on providing outstanding patient outcomes by becoming certified and accredited.</p>			
<p><b>Compliance:</b> Assists in complying with applicable federal and state regulations that reduce the risk of fraud, waste, and abuse allegations. Demonstrates a comprehensive compliance program that helps minimize the financial risks and reputational damage that can be caused by non-compliant service providers.</p>			



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With careful preparation and skillful facilitation, surgeons can become engaged in the process of evaluating and identifying the best consolidated provider. Once a leading vendor for potential consolidation has been determined, consider implementing a trial period to further increase physician buy-in. The end rewards will be improved patient outcomes, decreased OR costs, and increased surgeon satisfaction.

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