

## Part B Insider (Multispecialty) Coding Alert

### SCHEDULING: Cover More Educational Ground, Give More Support With Group Visits

#### Patients show higher satisfaction with group visits.

Patients showed higher satisfaction with group appointments than individual appointments, even when they were seeing the same doctor as before, reports **David Bronson**, chairman of the **Division of Regional Medical Practice** at the Cleveland Clinic.

Some 85 percent of patients with shared follow-up medical appointments wanted their next visit to be a shared visit, and 79 percent of them marked "excellent" for over all visit satisfaction in a survey, according to an article Bronson co-wrote for the Cleveland Clinic Journal of Medicine. In particular, the patients received more education as well as moral support.

In most cases, the patient can have the whole history, physical exam and medical decision-making in front of the other patients, says **David Hooper**, VP of clinical operations with the **Palo Alto Medical Foundation**. For example, a diabetic patient may only need his feet or the blood vessels in his neck examined, but if a patient needs a pelvic or rectal exam, that can happen in a private exam room while the other patients receive counseling or education from a nurse or expert.

"Patients typically report feeling more relaxed than during a regular appointment," reports the Cleveland Clinic Journal. "It's surprising how willing they are to discuss personal health problems in front of a group."

You should make sure to obtain informed consent from patients taking part in group appointments, especially now that HIPAA privacy rules are in place. Patients need to understand that what they hear in the group stays in the group. And your group's privacy policies should mention the possibility of patients hearing other patients' problems in the group. Patients should sign off on those policies, say experts.

The Journal article mentions a few group-appointment pitfalls to avoid. If the number of patients in the group drops too low, the shared appointment can become less efficient and helpful. The key is to promote them heavily, and make it clear they're "enhanced care, not less care."

Also, make sure physicians know they're still providing individual visits, not running a "class." Select patients who are appropriate for group visits, and avoid ones with hearing or cognitive difficulties. Finally, allot enough support staff, including administrators and behaviorists, to make the shared visits work, the Journal advises.