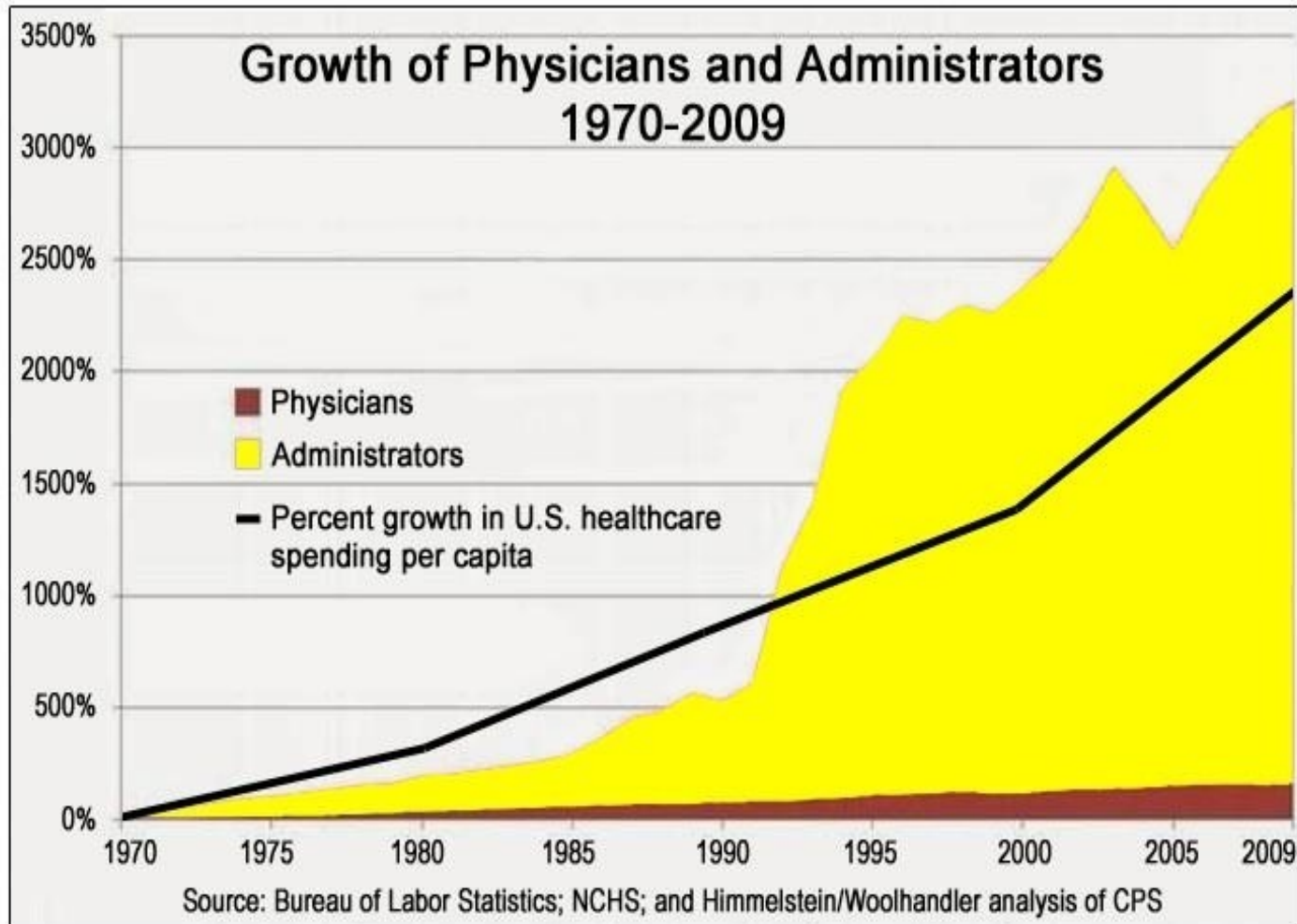


Lessons Learned From 15 years as a Solo Outpatient Physician

John C. Lipman, MD, FSIR
President & CEO
Atlanta Fibroid Center
Atlanta, Georgia

- “Aut inveniam viam aut faciam” I shall either find a way or make one !
- Bias: hospital administrators
- I have no financial disclosures

Sharp increase in Admin vs Physicians



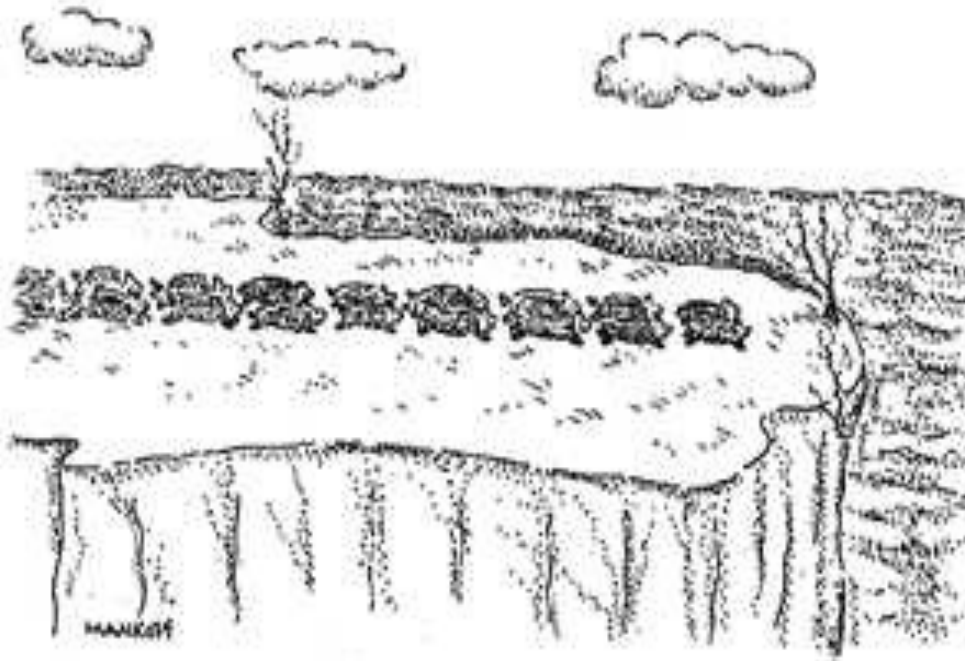
* 2300% increase in U.S. healthcare spending per capita between 1970-2009 (Source: Health Care Costs: A Primer, The Henry J. Kaiser Family Foundation)

Hospital administrator meeting



Background

- Following the herd:
- 2 roads; pick 1
- -Started in Academics
- -Moved to Community-based practice
- -Salary jumped, became Partner “comfortable”
- -No clinic space or time but even after yrs of battling for it (still had my portion of mamms, nucs, etc when done with clinic)
- -I didn't like the way I was practicing (no other model)-→burnout



"Look, I have my misgivings, too, but what choice do we have except to stay the course?"



Following My Own Path

- Became solo IR 15 years ago
- -Independent Contractor
- -Leased office space next to hospital
- -OP & IP IR services
- -Professional fees only

Challenges

- Professional fees not enough (needed access to technical fees)
- Couldn't get additional hospital privileges or hire any additional MD due to pseudoexclusive Radiology contracts.

Hospital JV

- Approached CEO of hospital with no IR services
- JV IR lab together
- -FMV for IR services
- -Net revenue split 50:50
- Revenue shored up
- Mission of hospital: box checked for IR vs. mine: Center of Excellence
- Marketing tricky

Office Based Lab: Employee/IC-→ Owner

- **Employee/IC:**

- -Lots of colleagues.
- -Align with the hospital's mission
- -Not efficient (share lab/OR)
- -Financial stability, but only keep small portion of generated \$
- -No control over personnel, process, marketing (can lead to burnout)

- **Owner:**

- -Work independently (NO Hospital Admins !)
- -My mission not the hospital's !
- -Extremely efficient (OBL am, Office pm)
- -Kept my revenue (minus expenses I control)
- -Salary increased while decreased hours worked
- -Answer to me and my patients, control entire experience, processes (can lead to incredible joy !)

Hospital Aligning Physicians

I'M GLAD WE'RE ALL ALIGNED.



OBL

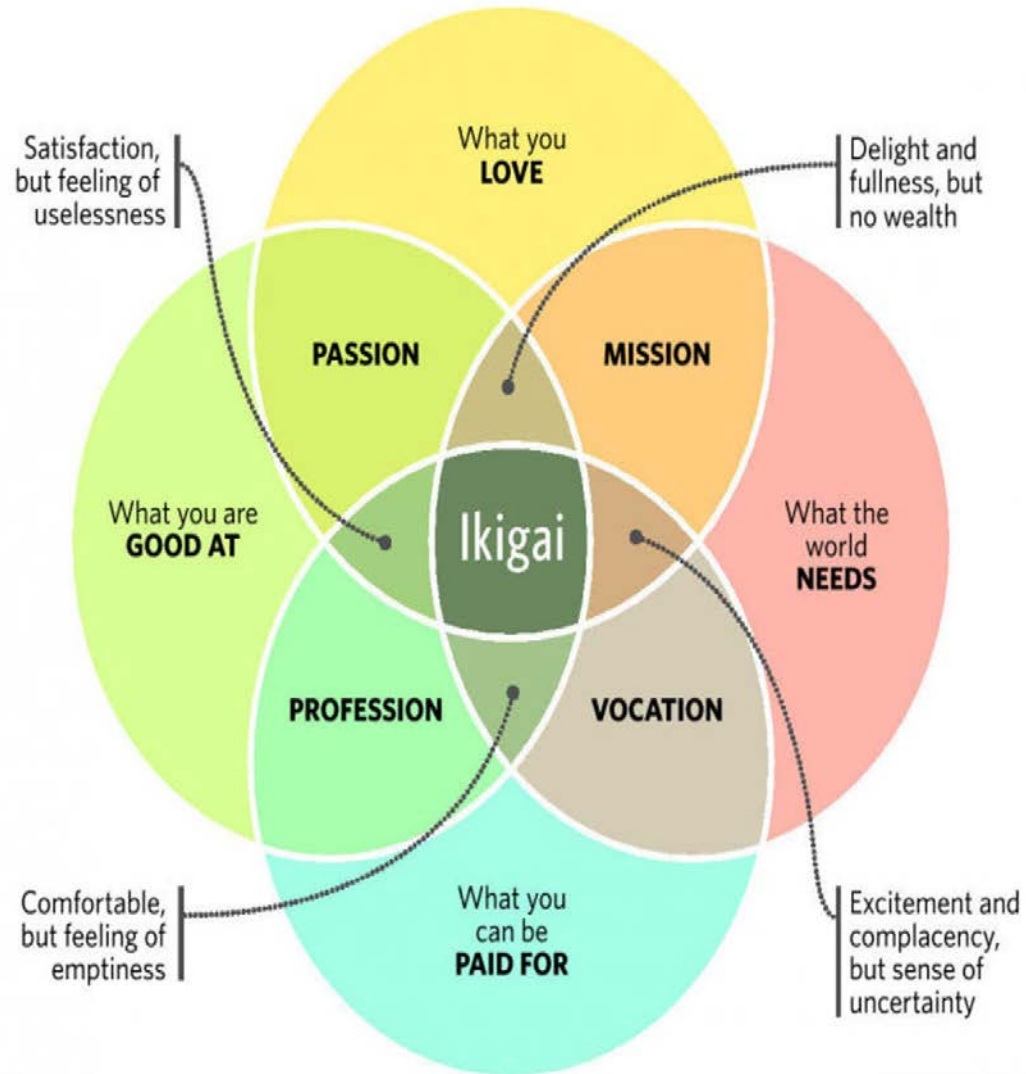
- Opened May 2015; over 3,000 UFEs
- No serious incidents
- 3 transfers for observation (2 left pm, 1 following am)
- **Staff:** Love the OBL, happy staff→happy patients→happy referring physicians-→happy Me
- (Happy Me-→better MD, better husband, better father, better person).

Do What You Love

- Self-Awareness: What are you good at, what do you love.
- Surround yourself c people believe your mission (people you work with/for not willing to work with you, look elsewhere).
- Become the Expert, “Go To Person”
- Metrics: better outcomes, happier patients

Ikigai

A JAPANESE CONCEPT MEANING "A REASON FOR BEING"



Conclusion

- ASC & OBLs are how we take back medicine from Administrators!
- Find the friction points and look to eliminate them. Think outside the box!
- Find what sparks joy, Find your Ikagi !
- Trust that the doctor you become when you're practicing in your most joyous state is exactly the type of doctor your patients want and deserve.