JOB TITLE: PRACTICE MANAGER/ NURSE PRACTITIONER

CONFIDENTIAL – DO NOT CONTACT ANYONE OTHER THAN DR RUTCHIK BY CELL OR EMAIL!

My practice is focused on neurology and occupational medicine workers compensation consultation and treatment; and evaluations (QME and IME); nerve conduction and EMG testing; non industrial accident treatment, Disability IME and expert personal injury consultation/IME to plaintiff and defense attorneys in 5 locations in the SF Bay area; but no more than 3 clinical days per week. I also teach students, nurses and medical residents and trainees at UCSF, sometimes within my practice.

The ideal candidate would be a nurse, nurse practitioner or physician assistant with both clinical and administrative management experience in the California workers compensation system with a strong desire to manage an administrative staff and be involved in the three days per week clinical work days caring for follow ups and assisting with intake for new patients as well as further development of this presently thriving medical practice. This person would have no less than 5 year’s experience and have experience with electronic health records.

This person would present confidence, maturity and professionalism and consistency of behavior.

THIS POSITION MAY BE ONE, TWO OR THREE PERSONS. One person may choose #1 and 2 or an NP or COHNP may choose number 2 and 3. One person may choose all 3 positions. Salary would be dependant on this.

I AM LOOKING FOR A PERSON OR PERSONS TO:

1. Practice manager. Manage supervise and organize off shore administrative staff for scheduling sending reports and communications with adjusters, attorneys and patients. Manage website, patient portals, questionnaires and faxes and mail. This could be entirely virtual or in Mill Valley or Richmond where JSR has offices that are available with internet. Presently this would be in Mill Valley where mail is received and mail reception and scanning would be a part of this position, possibly supervised. Potentially mail may be diverted to another location and this would not be a part of this position.
2. Clinic location manager, scribe, RN, NP or COHNP to assist the primary provider for new patient visits on the doctor’s clinical days. This will include managing patients in lobby, doctor schedule and patient issues that arise, contractors (NCV technicians) schedule, office rental property relationships and supervisor and accomplish pre schedule organization, advance templates and questionnaires, assist with new patient visit history and physicals and act as a scribe for reports. This would be 3 days per week on various locations as above. **An RN or NP or COHP may see new patients unsupervised in another room.**
3. NP, or COHNP to perform independent clinic work without the provider present, in 5 locations 1-2 days per month; and supervise advance templates and communications, and post patient visits administrative work that are follow ups for Industrial Injury patients in 5 locations, San Francisco, Richmond, Petaluma, Sacramento and Arcata on days that the primary provider is not visiting. This would be 1-2 times per location per month.

The following description pertains to the PRACTICE MANAGER issues.

This candidate would manage off shore staff administrators via phone and virtual EMR for the day to day phone calls from patients, adjusters, nurse case managers and attorneys; administrative tasks including collection of records and workers compensation information for scheduling consults, follow ups, QME and AME, Disability IME and lien patients, obtaining patient questionnaires by mail and or portal on EMR, sending records to a record review team, template preparation for all types of patients, quality assurance for grammar and correctness, sending reports and managing the physical locations and logistics of contracted staffing, such as record reviewers, psychologists and nerve conduction technicians and maintaining contact with book keeper and billers to ensure best practices and efficiency.

This person will be the advance person for the clinical day of the doctor and the quality assurance and responsible party for sending reports on time to appropriate parties. All faxes and information coming into the office is the responsibility of this person. All items and calls going out also would this person’s responsibility. Administrative staff will support this ideal candidate.

This person would mirror the clinician in 5 locations or work virtually or work in a non clinical setting depending on the work day or work load, 3 days per week San Francisco, Richmond Petaluma, once per month for 3 days Sacramento and once per quarter Arcata, CA. This is 9-12 days per month on average.

On nonclinical days, this person would work virtually and also supervise a mail collection person in a physical office whose job it is to scan every item received. Non clinical days would also be those when the provider is traveling or on vacation. Those items scanned will be supervised by this person such that information is routed correctly for new patients, treatment patients, QMEs and QME supplemental reports. QME and QME supplements are due in 30 and 60 days and this deadline would be the responsibility of this manager candidate.

Four rooms are available in all locations. With growth, hiring and management of other providers such as another NP, PA or physician to perform treatment and or EMG and NCV may occur and if so, more facility space may be necessary, and this candidate would ideally be responsible for obtaining other space.

Communication with billing and human resources person would be mandatory and routine.

The ideal candidate would be interested in growth of this position and with business growth, salary and benefits would increase.

This person would be interested in marketing for QME and AME, Subsequent Injury fund evaluations, disability IME, Expert consultation and website marketing and marketing with listing services.

Salary is negotiable. In addition, the candidate would be entitled to vacation when the office matters are stabilized, a stipend for health insurance and after one year period of tenure, 401K benefit package as well as possible percentage of growth with tenure more than 2 years.

PERTAINS TO THE INDEPENDENT NP OR COHNP

Work independently in the 5 locations to perform follow ups and some new patients and then in the future help hire and manage other providers and when necessary be involved in obtaining physical spaces to accommodate them.

For example, Dr Rutchik rents San Francisco every Tuesday but most months visits 2-3 times at most leaving at least one day per month where the office is available. This is the same for all offices. The NP or COHNP would visit these locations independently 1-2 times days per month, per location, a total of 10-20 days per month.

Part of the pre visit tasks would be to make a template from the prior report, review all correspondence, support administrative staff to make sure referrals and RFAs were sent and that any denials were appealed and billed. Also calls to adjusters, lawyers and patients may be made. Checking on authorizations and approvals and referral assistance to patient and admin staff would be performed. Reports would be completed and processed to billing and appropriate billing time and codes would be used.

Patient volume would be 3-4 per hour of industrial medicine follow ups.

This NP, RN or PA may have the opportunity of learning nerve conduction velocity testing technique and certification for the development and security of the practice over time. The PA or NP may perform procedures to be determined depending on skills for patients in treatment such as trigger point injections, Botox injections or other TBA procedures.

This would be an independent contractor position, with potential discussable benefits based on tenure.

PERTAINS TO MEDICAL ASSISTANT, SCRIBE, NP or COHNP ROLE

On clinical days, a medical assistant, NP or COHNP would be responsible for collecting and bring encounter forms to location site, visiting with the doctor to assist in patient clinical work with advance for new patient scheduling for efficient patient flow and reorganizing and tweaking scheduling, lobby management, advance for template supervision, questionnaires and patient portal assistance for questionnaires, and acting as a scribe for the provider for all but QME and IME patients. This would be 3 days per week in San Francisco, Richmond and Petaluma on local weeks; and Sacramento 3 consecutive days once per month and Arcata, once per quarter for two days. One half to one full day per week of administrative would be appropriate. An RN, NP or COHNP would be able to see new patients unsupervised in another room also improving efficiency and volume.

This would be an independent contractor position, with potential discussable benefits based on tenure.

Together, all three or possibly two of these positions together may be a full time role with salary negotiable with benefits including 401K and stipend for health care.

Combining a independent and assistant clinical role this would be approaching 20 days per month.