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The Resilient Practice

Positioning the Practice for
Success Post-COVID-19

Module 2 | **January 2021**



AMERICAN ACADEMY
OF OPHTHALMOLOGY®

The Resilient Practice:

Positioning the Practice for Success Post-COVID-19

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What sets a practice on a steady path to successful recovery?

Great leadership skills.

The impetus for *The Resilient Practice* was to help practice leaders develop effective leadership skills and provide guidance on the most crucial recovery strategies. These modules highlight on-the-ground recovery strategies, leadership pearls and lessons learned from your Academy and AAOE colleagues. Robust learning resources are included for you to deepen your knowledge.

Leaders are not born; they are developed through study, practice and trial and error. The leadership skills of many physicians and administrators were newly forged during the pandemic crisis. Like you, these practice leaders quickly learned how to unite their eye care teams, lift morale, foster innovative problem-solving while continuing to provide excellent patient care and experience during the unprecedented outbreak of COVID-19.

Developing your personal leadership skills will take time but will be well worth the effort. We wish you success in your practice recovery.

—AAOE Recovery Task Force

Table of Contents

Module 1: Resilient Leadership in a Time of Crisis

Module 2: Assess, Manage and Grow: The Path to Financial Resiliency

Module 3: Enhance Your Patient Experience and Communication
(Coming Soon)

Module 4: Culture Matters: How Your Culture Drives Practice Success
(Coming Soon)

Module 5: Disaster Proof Your Practice: How to Plan for Business Continuity
(Coming Soon)

“Leadership is unlocking people’s potential to become better.”

—Bill Bradley
American Politician/Former
Professional Basketball Player

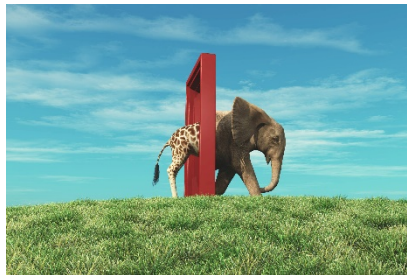
Module 2

Assess, Manage and Grow: The Path to Financial Resiliency

The financial impact of the pandemic on the ophthalmic practice is unprecedented. Over a short period of time, practices temporarily closed, elective procedures were postponed and employees furloughed. These decisions were extraordinary and the repercussions significant. As practices began reopening, the focus shifted to providing safe ophthalmic care in this new world.

A New Perspective

The path to financial resiliency starts with a new perspective. The world has changed, and so have patients, vendors, staff and physicians. Adapting is a necessity and now practices must evolve to ensure success.



In the wake of any crisis, restoration becomes a natural part of the recovery process. If your recovery plan only includes returning to your former ways in the current environment, obstacles will most likely arise. If vulnerabilities are not realistically identified, setbacks will occur. Achieving desired outcomes requires developing resilience, embracing transformation and setting realistic strategies for the path forward.

6 Key Steps to Financial Resiliency

You can build financial resiliency by taking these six crucial steps:

1. Revisit your business plan
2. Assess financial health
3. Manage and take action
4. Rethink operations
5. Reemerge and strategically grow
6. Embrace growth

The new post-COVID realities can easily overshadow the priority of assessing the financial health of the practice. In fact, the pre-COVID business and strategic plans, budgets and financial goals have become obsolete. The current state invites a reimagination of all aspects of the business of ophthalmology.

1. Revisit your business plan.

A business plan is a road map to guide business owners and entrepreneurs from start up to financial success. The components of the plan provide a comprehensive analysis and a series of strategies that concisely summarize *who you are, what you do, where you want to be and how you will implement your business plan.*

The business plan should include many assumptions, comparisons, projections and delegations, all of which may now be outdated in the COVID-19 era. Circling back to your practice business plan and considering the impact of the pandemic will provide you with new insights. Consider each component as if it were part of a new startup and redesign as appropriate.

Key Considerations:

- a. Assess your practice **goals** based on how modifications will impact the delivery of ophthalmic care.
- b. Update your practice **mission statement** to affirm a commitment to safety.
- c. Identify key **customers**, including patients and referring providers and their expectations in the current environment.
- d. Analyze the changing **market** and competitors and update strategies.
- e. Create a **competitive** advantage by implementing new or innovative solutions.
- f. Review your **organizational structure** for gaps and excess due to new roles and demands.
- g. Determine how your professional services or your **product** can provide value-added services or serve as a revised delivery model in the current environment.
- h. Create new **financial** projections based on revised assumptions.
- i. Outline a revised **executive summary** that encompasses your revised business plan.



ACTION
STEPS

2. Assess your practice's financial health.



"If you don't measure your key practice financial performance indicators or know the benchmarks for those measures, it is like going to your doctor and not having your blood pressure checked or knowing the normal range."

— Robert E. Wiggins Jr. MD, MHA
Former Academy senior
secretary for ophthalmic practice

What's a KPI?

Key Performance Indicators predict future financial success. Examples of key indicators include:

- Percentage of telephone calls answered in one minute
- Number of incoming referrals
- Number of referrals waiting to be appointed
- Number of patients seen per day
- Patient wait time from appointment creation to being seen
- Number of patients waiting for surgery scheduling

The path forward to stability relies on a comprehensive assessment of the vitals of your practice's financial health. This process — which is similar to reviewing a patient's vitals and a flowsheet analysis — includes the following:

ACTION STEPS

- a. A review of current vitals with comparative data
- b. Flagging normal and abnormal readings
- c. Tracking numbers over time
- d. Targeting the impact of treatment or lifestyle changes
- e. Setting goals for the unique case

When reviewing a patient's vitals, one isolated reading will not provide you with a full clinical assessment. Similarly, reviewing one financial report won't provide you with a comprehensive analysis, actionable items or uncover a concerning trend. Each individual financial analysis will require a "flowsheet type" assessment which should be used for the following:

- a. Current financial reports
- b. Comparative data
- c. Averages
- d. Benchmark ranges (internal and external)
- e. Variances due to change, action or threat

With this perspective, routinely monitor and analyze your financial health. To further aid your assessment, develop a dashboard of core financial data. This should be an essential part of your routine operations management and is even more crucial during a crisis.

See Figure 1 on the next page for a detailed explanation of the core data you should be using routinely to assess your practice's financial health.

2. Assess your practice's financial health. *(Continued)*

Six Core Data Elements for Practice Financial Health

1. Cash Flow

- Track and report the [daily receipts](#) of the practice.
- Calculate a rolling average and compare it to prior reporting periods.
- Monitor [bank balances](#) daily and track per account type.
- Identify fluctuations and contributing factors.
- Provide these snapshots to owners and senior management.

2. Production

Provided by month and year-to date, filtered by physician, location and compared to historic data. This includes:

- Appointment volume, including type (e.g. new patients, post-op, surgery)
- Charges, payments and adjustments
- Number of services per CPT code
- Totals per service type (office visit, surgery, tests) and total encounters

3. Relative Value Units (RVUs)

Fluctuations in charges or production numbers can be analyzed by RVUs to verify overall clinic output and target areas of concern. Look for:

- Total RVUs by practice, physicians, and locations
- Explore how RVUs can be used to track productivity during COVID-19 recovery:
AAOE Resource: *Relative Value Units: The Building Blocks of the Medicare Physician Fee Schedule* ([video](#))

4. Benchmarks and Key Performance Indicators (KPIs)

Use [AcadeMetrics™ Benchmarking](#) tool to calculate benchmarks and KPIs frequently to monitor performance. These measurements can be compared to industry standards and provide a consistent reading of financial health.

5. Revenue Cycle Management (RCM)

Managing RCM has historically been a focus in practice finance management. It has become even more crucial during the pandemic shutdowns and continues to be a priority on the road to recovery and beyond.

- Consistently produce accounts receivable aging reports.
- Calculate [A/R benchmarks](#) frequently.
- Identify outstanding claims and resolve denials.
- Continue the [A/R priority steps](#) managed during recovery.

6. Overhead

Report total practice overhead:

- Provide overhead ratio (total operating expenses / total collections)

Figure 1: Six Core Data Elements for Practice Financial Health

3. Manage and take action.

As you continue on the path to financial resiliency, a constant deep dive of your financial data is warranted. This analysis should be focused on uncovering vulnerabilities and the effects of the pandemic. The ongoing impact of the pandemic demands prompt identification of symptomatic problems followed by development of strategic solutions.

Consider a proactive approach to uncover root causes and respond with actionable steps and innovative changes.

For examples of strategic solutions to common pandemic practice challenges, check out the following case studies A-C on pages 9-12.



ACTION
STEPS

4. Rethink operations.

Increasing operational efficiency will positively impact your bottom line. However, to achieve sustained financial success, you'll need to implement multiple changes and monitor and continually improve them over time. This process requires an objective analysis of your practice operations and a practice culture that embraces change promptly. Keep in mind that improvements to operations that produce results will vary by practice, and solutions that were effective pre-pandemic may now be outdated.

Here are two Lean tips to help you rethink and transform your practice operations:

a. **Implement [lean management efficiency strategies](#).**

These proven strategies focus on decreasing waste and increasing profitability. The key is a team approach and an analysis of your practice operations based on actual observation and data collection. Lean puts patient satisfaction front and center and requires input from physicians and staff alike in developing ongoing practice solutions. As lean is implemented, the practice transitions to a culture of continuous quality improvement. During the COVID-19 pandemic, many processes changed dramatically. Your practice will benefit by using easy-to-use lean tools to improve operations and foster a practice culture that is resilient and able to pivot.

b. **AAOE Resource: [Spaghetti Mapping and 5S with COVID-19 Considerations](#)**

c. **AAOE Resource: [The Lean Practice: A Step-by-Step Guide to Running an Efficient and Profitable Ophthalmic Practice](#)**

4. Rethink operations. *(Continued)*

Successful practices will embrace new ideas and evolve during the pandemic. These changes will positively impact operations. Some will be permanent and may contribute to long-term financial resiliency.

Key Considerations:

a. **Explore digital transformation.**

The pandemic has accelerated a transition to digital solutions. Consider other industries — including restaurants and grocery stores — that have used improved apps and functionality to provide more efficient ordering and contactless delivery. For health care facilities, researching digital solutions and embracing transition builds efficiencies in addition to addressing the evolving expectations of customers. Implementing a mobile check-in system, [telemedicine](#) platform or online contact lens ordering system reimagines the practice in two ways: Not only is it COVID compliant but it will also accelerate the practice's competitive advantage.

b. **Encourage solution-focused teams.**

During the onset of COVID-19, ophthalmic practices developed teams that tackled the new safety protocols, increased communication and [daily huddles](#), and encouraged a team approach to problem-solving the daily challenges. These nimble teams demonstrated the ability for fast progress and successful implementation without bureaucracy. This culture of effective [teamwork](#) will continue to have a role in the ongoing path to recovery and beyond.

c. **Embrace new skills for a new era.**

Successful ophthalmic personnel will need expanded skills and traits due to the adoption of digital solutions, evolution of new processes and demand for cross-functional knowledge. Mastering soft skills — including communication, flexibility, adaptability and critical thinking — will be a necessary component of the ophthalmic superstar.

d. **Keep remote work as a viable practice option.**

Initially, remote work was part of a survival strategy at the onset of the pandemic. However, many months later those ophthalmic practices that quickly pivoted and embraced remote work recognized the value of this strategy. Based on job role, remote work may remain a beneficial long-term practice solution.

e. **Repurpose your office space.**

As a result of remote work, you may have more empty office space that could be converted into clinical space. This transition could jump start practice revenue and embrace growth. Alternatively, downsizing building occupancy or declining a renewal of administrative space may improve the bottom line.



**ACTION
STEPS**

5. Remerge and strategically assess.

The shockwaves of the pandemic will continue to affect ophthalmic practices for a long time. Initially, the crisis demanded reactive responses. As the changes occurred, leaders were able to stabilize their responses and focus on strategies for reopening and recovery.

During the recovery phase, extensive assessment and reorganization will be required to build a solid foundation for your practice's future. Ask yourself, "How well did my practice weather the storm?"

You can create future financial stability by realistically assessing your practice's vulnerabilities and strengths that were glaringly apparent during the crisis. Check out Figure 2 below which provides an example of this type of analysis.



Practice Assessment	Strengths	Vulnerabilities
Retained Earnings	Appropriate levels subsidized cash flow during the shutdown	Low cash reserves quickly impacted maintaining operations
Financial Management	Reports were monitored daily, communicated and necessary changes implemented promptly	Lack of financial reports caused unexpected cash flow issues and last-minute decision making
Vendor Relationships	Positive vendor, bank and landlord relationships provided support	Contracts or relationships limited deferrals or opportunities
Solution-Oriented	Small nimble teams were focused on rapid problem solving and decision-making	Unclear internal process for resolving problems promptly
Supply Chain	Appropriate inventory levels maintained for supplies, including PPE	PPE and supply shortage impacting clinic production

Figure 2: Example of Practice Analysis of Strengths and Weaknesses.

After you have assessed your practice's strengths and weaknesses, you should perform a series of scenario analyses and test each of the variables in your projections. Essentially, you would create individual plans for three potential scenarios: 1) your best-case scenario, 2) a scenario based on what you consider to be most likely, and 3) a worst-case scenario and assess how this would the impact your goals. From this exercise, you can identify areas that for which you must respond quickly with solutions and ensure that your practice will remain agile.

6. Embrace growth.

After reassuring the foundation of your practice is secure, consider any [unexpected business strategies](#) and strategically implement practice growth.

Key Considerations:

- a. **Ensure impeccable timing.**
With the financial data and projections you have prepared as the basis for your decision-making, you will need to implement your progress forward at the right time. This will require a conceptual view that considers both practice goals and the financial stability of the practice. The turbulent times of pandemic do not preclude growth opportunities — it just demands careful planning and ability to pause as appropriate.
- b. **Maintain a sense of urgency.**
Prompt decision making and building on progress with the same speed that you addressed initial days of the pandemic will be essential. Practices that recognize the new perspective of the COVID-era and embrace the paradigm shift promptly will have the strategic advantage.
- c. **Define your competitive advantage.**
Whether it is a focusing on a successful professional service line or refining patient service excellence, identify the strategies that will showcase your practice strengths. Partnered with updated strengths, weaknesses, opportunities and threats (SWOT) and political, economic, socio-cultural and technological (PEST) [analyses](#) and marketing plan, transform your practice with a new perspective.
- d. **Embrace safety protocols.**
Be sure to implement safety protocols in the optical shop and reimagine them as providing a “boutique experience.” Scheduled patients will be assigned a dedicated optician to provide specialized attention and a personal shopper experience. While keeping patients safe, the optical shop may produce higher sales with this approach with additional time leading to spectacle enhancements. Contactless pickup when the new sales arrive will emphasize the boutique experience and embrace COVID safety protocols.
- e. **Focus your service line.**
With declines in reimbursement and impact of the pandemic, it is crucial for physicians to focus their time in the most appropriate ways commensurate with their training.

Remember that routine eye care is a gateway to practice growth. Create a primary eye care team with optometrists to provide routine exams and allow expansion of the ophthalmology clinic and surgical schedules.

Merger of practices with multiple subspecialty care can expand patient referrals and geographic locations.



**ACTION
STEPS**

Case Study A

What's Happening:

Your practice appointment volume has decreased compared to the prior year.

Action Step 3

Manage and take action. *(See page 5.)*

Practice Scenario No. 1: A discussion with your scheduling team reveals that some patients are reluctant to come for in-office visits due to safety concerns.

Action Steps:

- Revise the scheduling script to confirm that safety protocols have been implemented.
- Create a video of the physician discussing infection control.
- Post the video and your practice safety protocols on your website.
- Physician(s) personally call patients concerned with scheduling an in-person visit.

Practice Scenario No. 2: Your home location has experienced decreased appointments, but your satellite appointments have increased and are backlogged.

Action Steps:

- Adjust your schedule templates to provide more clinic time at the satellite office.
- Review recall reports for home location.
- Call patients to schedule.

Practice Scenario No. 3: Your practice has a surgery backlog after reopening and slots for elective surgery are not available until next year.

Action Steps:

- Obtain additional surgery block time at an ambulatory surgery center or local hospital.
- Change half-day clinic schedules to surgery.
- Offset clinic backlog with telemedicine as appropriate.

Practice Scenario No. 4: Your consultation requests are declining from a referring provider.

Action Steps:

- Physician to call referring provider and discuss reopening efforts and inquire regarding any challenges with scheduling.
- Identify barriers to scheduling and resolve them (e.g., fax getting lost).
- Update your schedule templates with increased consult appointment types to accommodate referrals promptly.

Case Study B

What's Happening:

Your practice cash flow is inconsistent and below average, prompting frequent use of your credit line.

Action Step 3

Manage and take action. *(See page 5.)*

Practice Scenario No. 1: Your practice shutdown has impacted revenue.

Action Steps:

- Focus clinic production on service lines that are consistently reimbursed.
- Safely increase clinic production and adjust resources to maximize efficiency.

Practice Scenario No. 2: An internal audit identifies a payer is reimbursing at a lower rate than the actual contractual rate.

Action Steps:

- Review payer contract and confirm fee schedule.
- Contact the payer contract department for prompt resolution.
- Identify all claims affected by incorrect reimbursement.
- Continue to perform audits on all payer contracted fee schedules compared to actual reimbursement.

Practice Scenario No. 3: The payer contracted fee schedule is inadequate.

Action Steps:

- Negotiate a contract with the insurance payer.
- Use RVUs to prepare an analysis of the current fee schedule.
- Confirm the conversion factor on the current contract or if fee schedule is a percentage of Medicare allowable.
- Present the proposed contract increase to the payer.

Practice Scenario No. 4: Your debt-to-income ratio has been impacted by the pandemic.

Action Steps:

- Consider any opportunity to refinance loans and reduce payments.
- Discuss other options with the lender.
- Pause any expansions or capital purchases that may require loans.
- Confirm practice balance sheet solvency (e.g., total liabilities are less than the assets).

Case Study B

(continued)

What's Happening:

Your practice cash flow is inconsistent and below average, prompting frequent use of your credit line.

Action Step 3

Manage and take action. *(See page 5.)*

Practice Scenario No. 5: Your capital reserves were depleted promptly when the pandemic hit.

Action Steps:

- Discuss and confirm the necessary capital reserves for any additional shutdowns or to cover ongoing costs during periods of reduced patient volume.
- Consider establishing a three- to six-month reserve to maintain financial stability.
- Use the internal historical financial impact as well as the recovery impact to determine the actual amount necessary. Without a reserve, it will be difficult to cover ongoing expenses during periods of reduced patient volume.

Practice Scenario No. 6: Your A/R dashboard identifies underperforming KPIs.

Action Steps:

- Review reports by targeting A/R aging and identify outliers.
- Drill down on the data by payer, location and provider. Prioritize any projects to resolve any outstanding claims and denials.
- Promptly resolve any internal processes contributing to A/R decline (e.g., lack of prior authorization for surgery).

Case Study C

What's Happening:

Your practice overhead ratio percentage is increasing.

Action Step 3

Manage and take action. *(See page 5.)*

Practice Scenario No. 1: The cause of the increase in your practice overhead ratio is due to decreased revenue.

Action Steps:

- [Review budgeted expenses](#) for potential reduction or elimination and adjust them based on forecasted revenue and [cash flow projections](#).
- [Negotiate contracts](#) with all vendors.
- Consider consolidation of your work force and cross training staff.

Practice Scenario No. 2: Although your revenue is on track based on budget, your overhead is increasing.

Action Steps:

- Identify expense accounts exceeding budgeted goals.
- Monitor the expenditures and limit as appropriate.
- Implement a [zero-based budget](#) assessment to identify any unnecessary expense items.

Practice Scenario No. 3: Your employee efficiency benchmarking ratios are increasing.

Action Steps:

- Calculate and monitor staff payroll ratio (total staff payroll / total collections).
- Compare the ratio to: 1) the previous year, 2) prior to COVID, and 3) during reopening.
- Consider adjustments to staff size based on volume and revenue, as appropriate.

SPOTLIGHT

Digital Transformation in Action.

Culture of Change

Many years ago, our practice implemented lean principles, which emphasizes continuous process improvement. Adopting lean organically developed our practice culture into one that not only embraces change, but also actively seeks new ideas and digital solutions from front-line staff.

Many of the software solutions we had already implemented to improve efficiency prior to the pandemic enabled us to pivot quickly to increase our functionality. Even more importantly, our teams quickly identified solutions using our current technology and were able to transition to new platforms when we needed to streamline new processes.

When staff are included in the change, they are often quick to adapt and positive about the new processes. Given that we are always doing trials and running with new ideas, even in a pandemic, you become pretty agile with change.

Practical Solutions for a New Era

Many of the third-party software systems we had implemented prior to the pandemic provided functionality that supported our COVID-19 safety protocols. For example, one of our established systems provided a mass text message option that allowed us to message patients when the practice was closed due to inclement weather. We then used this same system for real-time communication with patients regarding COVID safety protocols or clinic changes.

Another example was our parking lot waiting room. We had the ability to send text message notifications through our software system, which was very efficient. Our kiosk system already provided contact-less payment functionality so this really increased its value to our practice and greatly improved our safety protocols. We were also able to implement automated digital solutions that complemented our telemedicine services by streamlining our scheduling and documentation process.

Furthermore, providing real-time digital solutions in the midst of these huge pandemic challenges lowered our overhead. Our teams have been strongly behind digital solutions because they provide efficiencies and safety all while supporting our physicians, staff and patients.



**Stephanie Collins Mangham,
MBA, COA, OCSR**

Chief Executive Officer
Austin Retina Associates
Austin, Texas
AAOE Board Member

Stephanie Collins Mangham has a philosophy that that guides her practice: “We should always strive to do things better.” This approach constantly leads the way at Austin Retina Associates, encouraging the entire team to transform workflows and embrace new technology.

SPOTLIGHT

Financial Resiliency in Action

Can-do Attitude

There is always a path to success. For us, we started with a “can-do attitude” versus “we can’t.” As new processes were developed and challenges were identified, we counteracted with, “How *can* we implement this?”

Transformation to Telemedicine

The first barrier we faced was when implementing telemedicine. We are a pediatric and oculoplastic practice, and the questions that arose quickly were: “How can we provide exams virtually? Will our patients embrace this new option?” By first determining the pieces of an appointment we *were* capable of delivering via telemedicine, we were then able to define which exams could be virtual. For our practice, we determined that nondilated visits for amblyopia, chalazion or ptosis evaluations were suitable for telemedicine.

With the support of our physicians, our patients embraced our new model. Implementing a platform that was integrated with our electronic health record system was efficient and user friendly for our physicians and patients.

Now that we’ve started utilizing telemedicine, we will not go back. We found that offering the telemedicine option freed up appointment slots and made the flow of the office better. This was extremely beneficial during reopening. Furthermore, telemedicine capabilities have definitely contributed to our practice’s financial recovery.

Focus on the Finances

Although our clinic quickly returned to full capacity (while also observing Centers for Disease Control and Prevention guidelines), we continue to closely monitor crucial KPIs. One area we focused on was clinic efficiency. After reviewing the tech time per encounter, we embraced a history pre-screening protocol that reduced the workup time and limited face-to-face time with patients. Other essential reports that we closely monitored were our daily receipts, snapshots per provider and the revenue cycle. Surgery revenue is key to our practice and monitoring that life cycle from scheduling to insurance payment was critical.

Prepared for the Future

We are back to normal volume, but we will not take that for granted. We have taken steps to protect the practice if there is a second shutdown, particularly for surgery. The practice has increased reserve funds and maintains a line of credit for emergencies. We



Heather Modjesky, COE

Senior Administrator
Conestoga Eye
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AAOE Content Committee
Member

During the onset of the pandemic and facing a temporary practice closure, Ms. Modjesky knew financial challenges were inevitable. With this new reality, she and her leadership team quickly prepared strategies to maintain financial stability.

took a close look at the bottom line and noted that, although supplies have increased, we are counteracting this expense with other efficiencies and eliminating unnecessary expenses to offset them. Our practice is prepared that, if there is another shutdown, we can promptly increase telemedicine, draw on reserves and implement reopening protocols as necessary.

AAOE Resources



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Articles

- [Best Practices for Assessing the Feasibility of New Business Opportunities](#)
- [Envision Strategies Your Road to Recovery](#)
- [Strategic Planning for the Ophthalmic Practice](#)
- [Unexpected Business Strategies During the COVID-19 Era](#)

Videos

- [An Introduction to the Benchmarks on the AcadeMetrics™ Report: What They Are, How They Are Used, and What They Tell Us](#)
- [Because Nice Matters - Customer Service in a Small Medical Practice](#)
- [Benchmark Case Study: How a Clinic Applied the Benchmarks to Drive Improvement](#)
- [Benchmarking - Use KPIs to Improve Practice Profit & Efficiencies](#)
- [Effective Strategic Planning](#)
- [Essential Data Tools for Leading a High Performance Practice](#)
- [Think Lean: Reduce Costs, Increase Profitability and Improve Patient Satisfaction](#)
- [Use RVUs to Quantify the Value of Your Clinic's Services](#)

Lean Resources

- [Applying the Science of Quality Improvement to the Ophthalmology Practice](#)
- [Going Lean: How a Simple Change in Thinking can Help Your Patients, Your Staff, and Your Bottom Line](#)
- [Spaghetti Mapping and 5S with COVID-19 Considerations](#)
- [The Lean Office](#)
- [The Lean Practice: A Step by Step Guide to Running and Efficient and Profitable Ophthalmic Practice \(print\)](#)
- [The Lean Practice: A Step by Step Guide to Running and Efficient and Profitable Ophthalmic Practice \(ebook\)](#)
- [The Lean Practice: Mastering the Art of Lean Ophthalmic Practice](#)
- [Think About Your Future State Worksheet](#)
- [Think Lean: Reduce Costs and Improve Profitability and Patient Satisfaction](#)

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