4 Reasons for a Physician Rights & Responsibilities Document

By Karen Zupko
1. The Document Sets Expectations.

Building a cohesive practice with a civilized, functional culture means that all physicians — from senior partner to junior physicians — know their role, purpose, and place in the practice constellation. Developing a physician Rights and Responsibilities (RnR) document facilitates this process faster than leaving it up to osmosis, chance, or leadership changes. The document has two sections: physician rights and physician responsibilities.
1. The Document Sets Expectations.

Here are a few items we commonly find included as physician *rights*:

- To be trusted.
- The benefit of their colleagues' opinions and assistance on cases.
- Respectful and courteous treatment from all staff.
- Monthly financial, A/R, and other reports that illustrate their performance.
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And here are a few examples of physician *responsibilities*, along with the reason for their value:

- Treat business and clinical staff with respect and courtesy.
- Maintain professionalism in front of patients and their families.
- Arrive on time.
2. It Codifies the Culture.

Culture is a squishy topic that "men of science" prefer to avoid. Yet, most of the practice break-ups we are called in to deal with are the result of cultural differences or lack of shared values. And most of the reasons for these break-ups could have been avoided had practice leaders spent more time explaining and/or fostering cultural norms. An RnR puts commonly accepted practice principles on paper and gives definition to the often nebulous subject of culture.
2. It Codifies the Culture.

A simple example is show up for meetings, which will reduce physician complaints about business decisions made when they weren't present. If referring physicians are the lifeblood of your medical specialty or surgical practice, "Respect referring physicians" is another responsibility to include, so that even the most irritating of them are treated with respect. "Refrain from derogatory name-calling based on ethnicity" is essential for creating a culture that doesn't tolerate racism or other violations of respect. And defining "Dress professionally" eliminates ambiguity.

Don't assume that because a young physician has finished medical school and survived a fellowship that he knows how to behave. The newest generation of physicians has a decidedly different outlook on work habits, collaboration, and organizational contribution than those before them.

Putting guidelines in writing not only establishes them—it's also a welcome roadmap for the junior partner, who will be looking to physician leaders for direction. Remember, your practice is his first job. The RnR also outlines what the physician must do to be a good practice citizen. For instance:

- Participate in the development of clinical protocols and outcome reviews.
- Agree to abide by documentation guidelines and document services accordingly.
- Complete all charge slips by the end of the day, correlating CPT and ICD-10-CM codes at all times.
4. It clarifies the commonly opaque.

Are physicians required to submit hospital charges within 48 hours? Follow the practice's sanctioned charity care and discount policy without going rogue with his or her own rules? Often, staff and managers just assume the doctors know these things. But why would they if you aren't clear? The RnR renders "I assumed" or "I thought" ineffectual.
4. It clarifies the commonly opaque.

For example:

• **Complete chart notes accurately, and dictate procedure reports within 24 hours.** We addressed this with a client last week. E/M services are audited as part of that practice's compliance plan, and not all physicians were completing their notes within the 24-hour rule.

• **Don't schedule elective cases without pre-certification and determination of benefits.** We suggest asking the billing staff to oversee adherence on this one, and letting the physicians know that they'll receive this feedback directly. If compliance is a constant issue, the feedback will be provided to the board.
In Conclusion:

In order to be effective, a physician RnR document must include details that are specific to your practice and culture. Add the development of this governance agreement addendum to the board's to do list. And ask that all physicians review and sign it when it's ready for implementation.