6 mistakes to avoid when starting your private practice

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Anticipating pitfalls is a fundamental part of the clinical side of medicine and a physician just starting should apply that same thinking to establishing a private practice. Find out what it’s like from a doctor who has done it.

The thrill of opening an independent private practice in less than a year—and the speed bumps along the way—are still fresh memories for emergency medicine physician Tyeese Gaines, DO. She is the CEO and medical director of NOWmed Walk-In Urgent Care, in Jersey City, New Jersey. She treated her first patient there in December 2018.

The AMA supports physicians in pursuing the practice arrangement that best suits them individually as they deliver high-quality care to their patients. The AMA offers in-depth resources to consider all practice options and step-by-step guidance for those physicians who want to be their own boss, including the e-book “Starting, Buying, & Owning the Medical Practice.”

Dr. Gaines was already better prepared than most. Here’s a partial list why: medical office manager before medical school, emergency department chair, urgent care center medical director, chair of the AMA Minority Affairs Section and established entrepreneur—her own media training company. Oh, and an MBA too.

Nevertheless, she found herself “very surprised by how many things needed to be done.” It’s doable,” Dr. Gaines added, but get ready to adjust your expectations. “So, if you think it’s going to be 20 things on your to-do list, it’s probably 40.”

Here, with insights from Dr. Gaines, is how not to get tripped up on the way to opening a practice.

**Organization—you’ll need a lot more than sticky notes.** “I had a paper planner where I wrote down things daily. I used a project-management tool to keep all the tasks and subtasks together and classified.” That tool helped her keep track of finance, operations, human resources, insurance and other essentials—including a 3,700 square foot build-out. Also, Dr. Gaines “kept meticulous notes on every conversation” she had about the startup.
Documentation—get everything in writing. “Communicating via email has saved me so many times in the last six to eight months,” compared with phone or face-to-face conversations that lack a paper trail. Expect that sometimes contracts have to be canceled for nonperformance, refunds requested or terms renegotiated—and, at that moment, vendors’ recollections about promises will get vague. What gave Dr. Gaines the edge is that she “could prove dates, times and responses via email.”

Time—budget for delays you can’t control. “Give yourself a cushion.” No matter how well organized you are, others won’t be—be it for a city permit, health plan network enrollment or other practice essentials. Simple tasks can be tedious when navigating automated systems. “You can’t even get a human on the phone anymore.”

Trust—just because a deal is made doesn’t mean the work will be done. “As horrible as it sounds: trust no one.” Don’t expect others to be as engaged with the process of opening the practice as you are. The solution: “You have to be meticulous about checking behind everybody, every vendor, every company that you outsource to, no matter how big or how small, because all of these things affect your timeline and all of these things affect your approvals.”

Knowledge—yours has gaps that must be filled. “Anytime you’re an entrepreneur, regardless of what you are starting or in what industry, you have to be mindful of what you don’t know.” Research, especially gaining the insights of physicians already in practice, will reduce expenses, frustrations and delays later on. “Talk to as many people as you can who have done this before. Figure out what lessons you can learn from them before you start shelling out a bunch of money on things like electronic medical records, billing, insurance and credentialing.”

Self-preservation—your most important asset is you. “When you are working for yourself, there is a tendency to think that everything is about that project and we start to neglect everything else. It’s important to remember not to do that.” As a practice-management matter, that involves budgeting and hiring the team. Dr. Gaines is the solo physician at NOWmed, but she supervises physician assistants who also see patients. “If you are the captain of the ship, if you go down the whole thing goes down.”