THE ATHLETIC TRAINER AS PHYSICIAN EXTENDER

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FINANCIAL DISCLAIMER

• No financial relationships to disclose.
OBJECTIVES

- Define what a Physician Extender (PE) is & does.
- Examine possible clinical duties & responsibilities of a PE.
- Review important qualities for a PE.
- Examine how ATs and PEs help a clinic run more efficiently, increasing patient volume & revenue.
- Unique AT physician extender functions.
SO WHAT IS A PHYSICIAN EXTENDER?

- A specially trained and licensed person who performs tasks that might otherwise be performed by a physician themselves, under the direction of a supervising physician.
**WHO IS A PHYSICIAN EXTENDER?**

• “The role of a physician extender in the orthopaedic setting has expanded in recent years to include nurse practitioners, physician assistants, physical therapists, and ATs.”
  • Carolyn Rogers, AAOS
ATs ARE PHYSICIAN EXTENDERS

• As ATCs we are nationally certified and state licensed health care providers.

• Everyday we practice under physician “guidelines & supervision”, standing orders etc.

• In the traditional settings we have always evaluated, treated, prevented & educated our patients/athletes.

• https://www.youtube.com/watch?v=MSEwiz5-4FQ
ATs POSSESS THE QUALIFICATIONS & SKILLS:

- Significant education & training
- Experienced in evaluating acute & chronic MSK problems
- Treat and triage MSK conditions
- Rehabilitation of MSK conditions
- Growing knowledge and experience in general medical conditions
- Communication skills
- Understanding of liability associated with caring for others and proper documentation.
- Dedication to profession and athletes for whom they care for.
HOW CAN AT’s SUPPORT MEDICAL PRACTICES?

• AT’s work as a liaisons & patient advocates
  • Between the Physician & the patient
  • Between the Physician & other staff members
  • Between other healthcare providers & patient
  • Between administrators & patient
  • Between insurance carriers & patient

• AT’s are clinicians who have the knowledge of MSK injuries & general medical conditions

• AT’s can provide optimal patient care by explaining injuries to patients and their expectations

• AT’s can improve cost effectiveness in clinic
WHAT DOES AT-PE OFFER THE MD?

• A highly trained professional who is a recognized health care provider

• A clinician who can provide optimal patient care and knowledge of general medical conditions, MSK injuries and concussions.

• Increase Physician efficiency in clinic, giving them the ability to see more patients & increase collections

• ATC can use PM&R codes and perform services “in incident to” the physician and can be billed for.
WHAT DOES A PE DO?

• Obtain problem focused history
• Complete problem focused physical exam
• Prepare injections apply/remove casts
• Document patient visits
• Teach HEPs, Gait Training, etc.
• Fit Durable Medical Equipment
• Code/Bill for office visits
• Patient Education
• 1st or 2nd assist in Operating Room
• Order diagnostic tests
• Increase efficiency & productivity
AT CLINICAL SKILLS

- Taking patient histories
- Performing complete physical exams
- Presenting findings to physicians
- Pre-operative instructions
- Scheduling surgeries
- Post-operative care
- Answering patient phone calls
- Completing patient paperwork
  - FLMA
  - Disability
- Electronic documentation of patient
AT CLINICAL SKILLS

• Patient medication reconciliation
• Scribing for physician dictations in EMR
• Understanding of radiological findings
• Teaching therapeutic exercises to patients
• Casting, splinting and brace fitting
• Wound care & suture or staple removal
• Coding and billing for AT services
  • “In Incident to service billing”
• Electronic Medical Records training and utilization
AT-PE ROLES AND RESPONSIBILITIES

• Office Operations
• Operating Room Assistance
• Coordination of Care
  • PT referrals
  • Diagnostic testing referrals
  • Follow-up visits
• Liaison for return to play/learn/work
  • Work accommodations
  • School accommodations
  • Communicating with High School & College ATs
  • Communicating with Nurse Case Managers & WC Claim Adjustors
OFFICE OPERATIONS

- Take History of Present Illness (HPI) & other pertinent medical/social history
- Facilitate diagnostic testing
  - X-rays, Ultrasounds
- Administer cognitive & vestibulo-cochlear testing
  - BESS, Impact, King-Devick, SCAT 3
- Present case to physician
- Paperwork and plan of care
COORDINATION OF CARE

• AT’s have the knowledge and education to speak to any healthcare provider about what kind and level of care patients need.

• AT’s also have the knowledge, education and understanding to facilitate quicker insurance authorizations for procedures, referrals, and continuity of care.
DAILY PRACTICE

• See new & follow-up patients
  • Initial history & Physical exam
  • Orders for x-ray, ultrasound
  • Join physician during assessment if available
  • Prep orders, referrals, & follow-up
  • Fit braces, and splints
  • Follow-up with patient
  • Return patient calls
  • Call other providers (ATCs, PTs, etc.) involved with care to communicate plan
  • Triage incoming patient phone calls
PRE VISIT PREPARATION

• Review Charts
• Review past notes to check plan of care
• Find &/or obtain updated records for visit
  • Progress notes from PT
  • Diagnostic testing reports
  • Lab results
• Anticipate special needs for the visit
  • PT referrals
  • Work notes
  • School notes
  • Specialty or sub-specialty referral
ANTICIPATING NEEDS OF THE VISIT

- Gather & Review
  - Lab results
  - PT Notes
  - Diagnostic testing results
  - Operative reports
  - Intra-operative pictures
  - Outside records & studies
  - Remove casts & splints
  - Remove sutures or staples
  - Order new x-rays for the visit
EVALUATE THE PATIENT

- Review patient intake form
- Take efficient problem focused history
- Solicit extraneous questions or concerns that they may be saving for the doctor
- Anticipate and satisfy any further needs for the visit
  - PT RX, MRI/CT orders, injections, etc.
PRESENT THE PATIENT

• What is the diagnosis
• Present your case with supporting facts
  • Pertinent history
  • Exam findings
  • X-rays
  • MRIs
POST VISIT FOLLOW-UP

- Review diagnosis and treatment plan with patient
- Clarify any questions about diagnosis and recommendations
- Patient education, handouts
- Notes for work, school
- Rx’s for therapy, MRI, medications
- Sign-up for surgery and provide post-op materials
- HEP, Gait Training
- Prepare injections
- Apply casts or other DME
SURGICAL 1ST ASSISTANT

• Skills
  • Patient position, drape, prep
  • Maintain sterile field
  • Suture
  • Cautery
  • Retraction
  • Suction
  • Hemostasis
  • Graft preparation
  • Dressing application
  • Brace/splint/cast
  • Cryotherapy
  • Drain and suture removal
  • Patient & Family education
  • Documentation
HOW DO WE AS ATC’S ACCOMPLISH THIS?
MULTI-CREDENTIALIALING

- Diversify & expand career opportunities
- Increase value to employers
- Expand professional knowledge & skills
- While equipping us to handle a wide variety of patients & concerns
- Potential accompanying credentials
  - OTC
  - OT-SC
  - OPA-C
WHAT IS AN OTC?

• **The Certified Orthopaedic Technologist (OTC)** is a specialized physician extender who is an expert in casting, splinting and immobilization techniques. OTCs work under the direct supervision of the orthopaedic surgeon to manage the care of the orthopaedic patient in the clinic and sometimes perform as first assistant in the operating suite.

• Certification of Orthopaedic Technologists (OTC) is handled exclusively by the National Board for Certification of Orthopaedic Technologists (NBCOT).

• The NBCOT is a separate entity from the National Association of Orthopaedic Technologists (NAOT).

• [http://www.naot.org](http://www.naot.org)

• [http://www.nbcot.net](http://www.nbcot.net)
What is a OT-SC?

• Orthopaedic Technologist-Surgery Certified
  • Entry level knowledge of:
    • Pre, Intra, and Post Operative Management
  • Functions & Responsibilities:
    • Position, prep & drape in order to prepare the patient for surgery
    • 1\textsuperscript{st} or 2\textsuperscript{nd} assist with all procedures such as, hemostasis, tissue retraction, suturing and closure of tissue planes, cutting of sutures, closing operative incision by using accepted surgical practices and techniques
    • Apply intraoperative dressings to surgical site
    • Assess surgical patient for postoperative complications
    • Provide discharge instructions to surgical patient.
  • Must complete an additional certification exam, focused on surgical skills
  • Must complete 1 year of surgical experience under an orthopaedic surgeon
  • Additional skills dictated by the hospital’s governing body
OTC & OT-SC FUNCTIONS & RESPONSIBILITIES

• Application and removal of all types of casts and splints
• Assist with history and physical assessment
• Assist with fracture and dislocation reduction
• Wound closure and care
• Patient education on care and plan of treatment
• Follow-up care
• Assist in the operating suite
• First-aid in emergency situations
• All duties are commensurate with education and experience, as determined by the supervising orthopaedic physician.
HOW DO I BECOME AN OTC OR OT-SC?

• To qualify to sit for the certification examinations, an orthopaedic technologist must meet one of the three criteria listed below:
  
  • A. Two-years of full time employment in Orthopaedics specific to Orthopaedic Technology and in accordance with the current Examination Breakdown, under the direct supervision of a Physician specializing in the musculoskeletal system.
  
  • B. Completion of an Orthopaedic Technologist (OT) Training Program that satisfies the requirements of the NBCOT Eligibility Route B Policy.
  
  • C. Certified/Licensed as an Athletic Trainer with a minimum of six months (1,040 hours) full time employment specific to Orthopaedic Technology and in accordance with the current Examination Breakdown under the direct supervision of a Physician specializing in the musculoskeletal system.

• The qualified candidate can sit for the OT-SC Certification Exam per the previous stated requirements. (What is an OT-SC?)
WHAT IS AN OPA-C?

• Orthopaedic Physician Assistant or Orthopaedic Assistant
  • A professional mid-level physician extender who works strictly in the field of orthopaedic medicine under the supervision of an orthopaedic surgeon.

• They are NOT specialty Physician Assistants.

• OPA-C’s work within the scope of practice as defined by their supervising physician.

• To be eligible to sit for exam candidates must have a solid background with a minimum of 5 years in orthopaedic medicine encompassing anatomy, physiology, pharmacology and knowledge of musculoskeletal disease process and treatment.

• Candidates also must have demonstrated proficiency with technical skills related to patient care, casting, bracing, splinting, and surgical assisting.
HOW ELSE DOES THE ATHLETIC TRAINER BENEFIT THE MEDICAL PRACTICE?
PHYSICAL MEDICINE & REHABILITATION

USABLE CLINIC BILLING CODES

- **97110/97530**: Therapeutic Exercise (15 min of education for one parameter of strength, balance, endurance, ROM, and functional activity)

- **97116**: Crutch training or gait training (training in the manner or style of walking or assistance of walking)

- **97760**: Orthotic fitting and training; upper or lower extremities (fitting and training of a patient to use an orthotic device or splint (brace) to facilitate stability or function)

- **97750**: Physical Prof tests/ measurements, 15 min. (KT 1000, Biodex, strength testing)

- **99211**: Non-Physician patient visit (Patient Education)

- **97005/97006**: AT Evaluation/Re-Evaluation
IMPROVED ACCESS

• Appropriate access
  • Identify inappropriate referrals
  • Request necessary documentation
  • Expedite urgent conditions
  • Triage & facilitate appropriate referral to other, more qualified healthcare providers

• Increased access
  • Appropriate patients are being seen
  • More patient appointment slots can be added if clinic is efficiently run
BETTER PATIENT CARE & SUPPORT

• Diagnosis
  • Appropriate scheduling
  • Time with patient
• Rehabilitation initiation
• Patient communication & education
• Documentation
• Results
IMPROVED PHYSICIAN PRODUCTIVITY

• Increased efficiency & productivity
• More patients and more surgeries in less time
• # of pts seen (x) E/M level billed=PRODUCTIVITY
• “One physician had a 13 percent increase in patient encounters when he went from working with a medical assistant to working with an ATC; the other had a 23.2 percent increase.”
  • John W. Xerogeanes, MD. Emory Sports Medicine Center
IMPROVED PHYSICIAN PRODUCTIVITY

• Analysis showed the use of a certified athletic trainer can increase a physician's productivity up to 22% and increase revenue by up to 42%.
  • Emory Sports Medicine Center

• “At Emory Sports Medicine the use of certified athletic trainers has allowed us to better leverage our non-operative physicians, thus increasing productivity and professional billings. Over a six-month study period, we have seen improvements in provider productivity, as measured by encounters, on the order of 22 percent.

• In addition, athletic trainers help enhance [our physicians’] communication with patients by serving as another source of expert information that patients can absorb. ATs are a key part of our sports medicine service delivery model.”
  • Mark Miller, Senior Clinical Administrator
IMPROVED PHYSICIAN PRODUCTIVITY

Studies have shown increases in patient throughput of between 15% and 30% when ATs are used in the physician extender capacity.

- "Whether they are athletes, recreational athletes, casual walkers or joggers, or simply a retired gardener, everyone who enters a doctor's office is having trouble doing something they want to do. Athletic trainers have the education, national certification and specialized skill set to make that happen as fast and as safely possible."
  - Thomas Kohl, MD Wyomissing, PA

<table>
<thead>
<tr>
<th>Patient Throughput Studies</th>
<th>Increase in PT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emory School of Medicine</td>
<td>23</td>
</tr>
<tr>
<td>St. Luke’s Health System, Boise, Idaho</td>
<td>20–23</td>
</tr>
<tr>
<td>University of Wisconsin Health</td>
<td>15–30</td>
</tr>
<tr>
<td>Orthopedic and Fracture Specialists (Portland, Oregon)</td>
<td>18</td>
</tr>
<tr>
<td>Children’s Hospital of Wisconsin</td>
<td>25</td>
</tr>
<tr>
<td>Heartland Orthopedic Specialists (Minnesota)</td>
<td>15–20</td>
</tr>
</tbody>
</table>

ATs, athletic trainers; PT, patient throughput.
IMPROVED PHYSICIAN PRODUCTIVITY

• Direct revenue from additional patient E/M visits as well as surgical case volume resulting from the larger patient volume can significantly increase revenue.

• Just as office visit volume increases will have a positive effect on the bottom line, so will an increase in surgical volume.

<table>
<thead>
<tr>
<th>Collections for Each Additional E/M per Day</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional E/M</td>
<td>E/M Rate ($)</td>
<td>Total ($)</td>
<td></td>
</tr>
<tr>
<td>1</td>
<td>88.21</td>
<td>12,702.24</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>88.21</td>
<td>25,404.48</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>88.21</td>
<td>38,106.72</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>88.21</td>
<td>50,808.96</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>88.21</td>
<td>63,511.20</td>
<td></td>
</tr>
</tbody>
</table>

Table 4. Total Volume Increase from Surgery and E/M

<table>
<thead>
<tr>
<th>Number of Patient E/Ms per 4-Hour Session</th>
<th>Increased Annual Throughput</th>
<th>Increased Annual Surgical Volume</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>506.88</td>
<td>56.4</td>
</tr>
<tr>
<td>12</td>
<td>760.32</td>
<td>84.6</td>
</tr>
<tr>
<td>16</td>
<td>1013.76</td>
<td>112.9</td>
</tr>
</tbody>
</table>

Table 5. Total Net Increase from Surgery and E/M

<table>
<thead>
<tr>
<th>Number of Patient E/Ms per 4-Hour Session</th>
<th>Net Increase from E/M ($)</th>
<th>Net Increase from Surgery ($)</th>
<th>Total Net Increase ($)</th>
</tr>
</thead>
<tbody>
<tr>
<td>8</td>
<td>44,711.88</td>
<td>78,284.95</td>
<td>122,996.83</td>
</tr>
<tr>
<td>12</td>
<td>67,067.83</td>
<td>117,427.42</td>
<td>184,495.25</td>
</tr>
<tr>
<td>16</td>
<td>89,423.77</td>
<td>156,569.90</td>
<td>245,993.67</td>
</tr>
</tbody>
</table>

*Based on Medicare dollars.
IMPROVED EFFICIENCY

• Efficiency results from the physician extender keeping the doctor doing only what the physician needs to do:
  • Seeing, diagnosing, educating patients

• The Physician Extender can:
  • Taking an initial H & P, and filtering through extraneous portions
  • Gathering and organizing clinical data
  • Reports, studies, op notes, PT progress notes
  • Assisting with paperwork
  • Patient handouts, PT Rx, Rx, sport release, work notes
  • Preparing for injections, procedures
  • Applying splints, casts, DME
  • Providing patient education
  • Assisting with documenting visits, coding, & billing
COST CONTROL

- ATs provide both obvious and subtle benefits to a medical practice.
- Athletic Trainers=Cost Effective
- ATs can generate approximately 50% of the cost of their salary and benefits through 3rd Party Reimbursement.
- Practices gain more patient care time for physicians and more revenue through reimbursement of CPT codes.
- In the world of healthcare reform the ATC is the perfect provider for:
  - Increasing efficiency
  - Increasing patient satisfaction
  - Decreasing overhead
ECONOMIC IMPACT OF AT’S AS PE’S

• By utilizing an ATC as a PE, sports medicine practices can add 3 or 4 patients per clinic day and increased collections by $200 to $1200 per day.

• INDIRECT
  • Clinical efficiency
  • Patient satisfaction
    • Trickle down referrals

• DIRECT
  • Clinical Billing
    • In incident to
  • Billing in OR
    • As modifier w/ surgeons
  • DME Business
    • Ancillary to clinic collections
VALUE TO ORGANIZATION

• Patient Satisfaction
• Consistent Referral Base
• Cost Effective Health Care Provider
• Expand beyond the clinic
  • 1st or 2nd assist in the OR
  • Concussion Management
  • Durable Medical Equipment
  • Orthotic Fitting
  • Administration
SO HOW DO I BECOME A PE?

- Career Development Experience
- Employment based educational experience
- Residency Programs
  - Have been around since 1993
- Good relationships with physicians
QUALITIES OF PEs

- Strong verbal and written communication
- Ability to Multitask
- Knowledgeable
- Accurate/thorough documentation
- Energetic
- Strong work ethic
- Organized
CHALLENGES THAT ATs FACE AS PHYSICIAN EXTENDERS

• Physicians lack of understanding of what an AT is
• How individuals perform in their roles
• Where ATs fit in the hierarchy of the clinic
• Use of proper terminology, title, credentials
  • i.e. medical assistant or nurse
SUMMARY

• Athletic Trainers as Physician Extenders
  • Can provide skills of multiple healthcare providers
  • Have an extensive musculoskeletal & concussion education
  • Can assist the physician in the clinic and the surgeon in the OR
  • Improve the business model for medical practices

• ATs can be incredible assets to physicians, clinics and healthcare organizations
  • Patient care and satisfaction improved
  • Increased throughput/access + cost control= profitability
  • Develop revenue generating streams to add to over all clinic collections
### Table 2. Different Roles of ATs When Working in the Physician Extender Position

<table>
<thead>
<tr>
<th>Role</th>
<th>Task Description</th>
<th>Additional Task</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient triage</td>
<td>Initial patient assessment, evaluation, and testing</td>
<td>Ordering diagnostic testing</td>
</tr>
<tr>
<td>Presentation of findings to the physician</td>
<td>Scheduling additional tests or procedures</td>
<td>Scribing or electronic dictation</td>
</tr>
<tr>
<td>Utilization and proficiency of EMRs</td>
<td>Patient education including pre- and postoperative instructions</td>
<td>Postoperative wound and dressing care</td>
</tr>
<tr>
<td>Brace fitting, casting, splinting</td>
<td>Home exercise program instruction</td>
<td>Gait and crutch use training</td>
</tr>
<tr>
<td>Rehabilitation of musculoskeletal injuries in an incident-to capacity</td>
<td>Assisting in the operating room (additional credentialing needed)</td>
<td>Community event medical care</td>
</tr>
<tr>
<td>Marketing representative for practice</td>
<td>Local high school, college/university, and club sport partnerships</td>
<td>Clinic management and administration</td>
</tr>
</tbody>
</table>

ATs, athletic trainers; EMRs, electronic medical records.
IF WE HAVE TIME FOR 1 MORE VIDEO???

• https://vimeo.com/94190603
REFERENCES

• There are many references & resources available through the NATA, NAOT & ASOA

• If you are interested in any, please email me and I would be happy to forward them on to you.
  • tewatson@nmsu.edu
  • tanya_watson@hotmail.com