

CHAPTER 2

HEALTH CARE SETTINGS AND THE HEALTH CARE TEAM

Overview

Students learn to place themselves in the context of the health care team, recognizing the major medical management models and the wide range of health care professionals that medical assistants may come in contact with during their careers.

Students understand the differences between physicians, the allied health professions, integrative medicine, and other health care professions. Students gain a respect for the important role of the medical assistant as a vital link in the health care team, with an emphasis on professionalism, proper training, and appropriate behavior in patient communications.

Lesson Plan

- I. CHAPTER OUTLINE
 - A. Ambulatory Health Care Settings
 1. Sole Proprietorships
 2. Partnerships
 3. Professional Corporations
 4. Group Practices
 5. Urgent Care Centers
 6. Managed Care Operations
 7. “Boutique” or “Concierge” Medical Practices
 8. Patient-Centered Medical Homes (PCMH)
 9. Accountable Care Organization (ACO)
 - B. The Health Care Team
 1. The Title *Doctor*

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2. Health Care Professionals and Their Roles
3. Integrative Medicine and Alternative Health Care Practitioners
4. Future of Integrative Medicine

C. Allied Health Professionals and Their Roles

1. The Role of the Medical Assistant
2. Health Unit Coordinator
3. Medical Laboratory Technologist
4. Registered Dietitian
5. Pharmacist
6. Pharmacy Technician
7. Phlebotomist
8. Physical Therapist
9. Physical Therapy Assistant
10. Nurse
11. Physician Assistant

D. The Value of the Medical Assistant to the Health Care Team

II. REFERENCES

- A. Lindh, Wilburta Q., Tamparo, Carol D., Dahl, Barbara M., Morris, Julie A., & Correa, Cindy, *Comprehensive Medical Assisting: Administrative and Clinical Competencies, 6e*
- B. See References/Bibliography section at the end of the text, organized by Unit
- C. Any other teacher-preferred reference material

III. VISUAL AIDS

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- A. Computer access to identified Internet resources
- B. Any other teacher-preferred visual aids (PowerPoints, etc.)

IV. EQUIPMENT AND MATERIALS

- A. Computer, TV monitor, and Internet access
- B. Overhead projector
- C. Internet access for providers' and alternative therapy practitioners' listings
- D. Local M.D. and D.O. association directory for listing of specialties
- E. Handouts and brochures regarding various medical occupations
- F. See III: Visual Aids

V. SAFETY

- A. Basic classroom procedures
- B. Point out the importance of staying within the area of expertise or education
- C. Identify the steps necessary for certification and licensing requirements

VI. PREPARATION

- A. Arrange for visual aids equipment
- B. Collect materials
- C. Review Chapter 2 in the text, the Study Guide, MindTap and the Instructor's Manual
- D. Review handouts, brochures, and directories

VII. INTRODUCTORY REMARKS/ACTIONS

- A. Read Learning Outcomes in the text with students to introduce the chapter
- B. Ask students to list on the board specialists they have seen
- C. Ask, "Can anyone list the names of all the different medical practices?"

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- D. Write several titles of health care professions on the chalkboard. Ask, “Are these the only health care professionals who may be working with you when you become medical assistants?”

VIII. PRESENTATION

A. Ambulatory Health Care Settings

1. Individual and group medical practices (Figure 2-1)
 - a. Individual practices
 - (1) Also called the solo practice
 - (2) One primary provider sees and treats patients
 - (3) One provider holds exclusive rights to all aspects of practice
 - b. Group practices – partnership and professional corporations
 - (1) Two or more providers share costs
 - (2) Providers consult each other
 - (3) Patients may request the same provider for all appointments
 - (4) There is always a provider on call
 - (5) The majority of providers practice in a group
2. Urgent Care Centers
 - a. Usually private, for-profit, and walk-in clinics
 - b. Provide primary care, treat routine injuries and illnesses, and perform minor surgery during expanded hours, usually 10 AM to 10 PM
 - c. Providers are often salaried employees
 - d. Providers see a higher volume of patients, usually for a lower cost than a hospital emergency room

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- e. Often have limits of patient numbers to be seen, so not always available
3. Managed Care Operations
 - a. A health maintenance organization (HMO) provides a full range of services sometimes under one roof
 - b. A preferred provider organization (PPO) is a providers' network
 - c. An independent physician association (IPA) treats patients for an agreed-upon fee
 4. "Boutique" or "concierge" medical practices (see Critical Thinking box)
 - a. Sought by patients discouraged with insurance reimbursement
 - b. Provides immediate access to provider 24/7
 - c. Convenient, unhurried appointments
 - d. Unlimited email, fax, or phone consultations
 - e. Home/work visits as needed
 - f. Coordination of any specialist referrals
 - g. Set fee for services required for the exclusive service
 - h. Often do not accept any insurance; create an "elite" clientele
 5. Patient-Centered Medical Home (PCMH)
 - a. About 15% of PCP practices certified as PCMHs by NCQA.
 - b. Rigid standards required for costly recognition
 - c. Promises quality care and preventive medicine practices
 6. Accountable Care Organization (ACO)
 - a. Network of providers and hospitals

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- b. Agree to manage all health care needs for their patients
- c. Hopes to reduce costs, create incentives, and bonuses to PCPs

B. The Health Care Team

1. Primary care provider + specialists + allied health professionals = Team
2. CDC estimates that 38% of patients use CAM
 - a. Increasingly, primary practice and complementary practice merge into integrative medicine
 - b. See Patient Education Box
3. The Title “Doctor”
 - a. Physicians have earned a Doctor of Medicine degree (M.D.)
 - b. Other medical degrees include Doctor of Osteopathy (D.O.), Doctor of Dentistry (D.D.S.), Doctor of Optometry (O.D.), etc.
 - c. Nonmedical disciplines confer Doctor of Education (EdD), Doctor of Philosophy (PhD), and Doctor of Psychology (PsyD)
4. Health Care Professionals and Their Roles (see Table 2-1)
 - a. Doctors of Medicine (MD): Education includes 4 years of medical school after baccalaureate degree and 3–7 years of residency; must obtain license to practice from the state in which they will practice; and must earn CEUs every year to remain current (Table 2-1)
 - b. Doctors of Osteopathy (DO): Attend 4 years of medical school after a baccalaureate degree and can choose to work in any specialty area with 2–6 years additional training; similar to MDs, but also can perform osteopathic manipulation; must have a state license and earn CEUs every year

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5. Integrative Medicine and Alternative Health Care Practitioners
 1. Many carry the title “Doctor” and have specialized training
 2. Doctors of Chiropractic (DC): Pay special attention to physiological and biochemical aspects of body structure; adjust and manipulate the spinal column; are licensed in all 50 states; complete 4–5 years of chiropractic college
 3. Doctors of Naturopathy (ND): Attempt to remove the underlying causes of disease and stimulate the natural healing process; attend naturopathy colleges for 4 years; are licensed in 16 states as well as the District of Columbia, four Canadian provinces, Puerto Rico, and the Virgin Islands; may practice independently and unlicensed, or practice under direction of an MD
 4. Oriental medicine includes acupuncture, Chinese herbology, bodywork, dietary therapy and exercise; attempts to restore the energy flow in the body’s meridians; requires a bachelor’s degree and 3 years of specialty training. Nearly all states regulate practice of acupuncture and Oriental medicine
 5. Future of integrative medicine is predicted to continue to grow and see greater acceptance (See Table 2-2)

C. Allied Health Professionals and Their Roles

1. The Role of the Medical Assistant
 - a. The medical assistant performs both administrative and clinical functions

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- b. Serves multiple capacities: administrative medical assistant, secretary, bookkeeper, patient educator, insurance coder and biller, clinic manager
 - c. Screens patients when scheduling appointments
 - d. Maintains a positive attitude
 - e. Functions under supervision of professionals
2. Other allied health professionals and their roles (Table 2-3)
- a. Health unit coordinator (HUC)—performs nonclinical patient care tasks for nursing unit of hospital
 - b. Medical laboratory technologist (MLT)—physically and chemically analyzes body fluids and tissues (Figure 2-2)
 - c. Registered dietitian (RD)—trained in nutritional care of groups and individuals to regulate diets
 - d. Pharmacist (RPh)—prepares and dispenses medications and medical supplies related to medication administration
 - e. Pharmacy technician—assists pharmacists in preparing medications and billing customers (Figure 2-3)
 - f. Phlebotomist—trained in the technique of drawing blood for diagnostic laboratory testing
 - g. Physical therapist (PT)—assists in the examination, testing, and treatment of people with physical disabilities or challenges (Figure 2-4)
 - h. Physical therapy assistant (PTA)—uses and applies physical therapy procedures under supervision of physical therapist

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- i. Nurse—registered (RN), licensed practical nurse (LPN), nurse practitioner (NP); generally gives bedside care in a hospital setting; supervised by physicians
- j. Physician assistant
 - (1) Can perform diagnostic, preventive, and therapeutic health care services delegated by the supervision of a physician or surgeon
 - (2) May prescribe some medications; can supervise technicians and medical assistants
 - (3) Must complete formal education and pass the Physician Assistant National Certifying Examination

D. The Value of the Medical Assistant to the Health Care Team

- 1. Broad range of administrative and clinical skills very valuable to health care team
- 2. First to come in contact with the patient as communicator and liaison between provider, hospital staff, etc.
- 3. Directs, informs, and guides patient

IX. APPLICATION

- A. Use the Learning Outcomes at the beginning of Chapter 2 in the text as the basis for questions to assess comprehension
- B. See the Classroom Activities section below for numerous application activities
- C. Assign students to complete Chapter 2 in MindTap.
- D. Assign students to complete Chapter 2 in the Study Guide.

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- E. Arrange shadowing experiences for students in their areas of interest with professionals in the field for a day or evening
- F. Assign a report of the experiences

X. EVALUATION

- 1. Evaluate any assigned application materials
- 2. Evaluate manually-graded assignments, and review results from auto-graded quizzing in MindTap.
- 3. Grade responses to Chapter 2 in the Study Guide.

Classroom Activities

- 1. Allow Internet research time in class for students to use in becoming familiar with the many different types of medical practices in the area.
- 2. Give students lined index cards so that the names of the specialties can be printed on one side of the card and the definition on the other. Allow time for study and drill and then use the cards for an oral quiz. For a written quiz, clip numbers (1 to 5, or the numbers you wish) to the cards you select; on an answer sheet, have students either write a brief definition of the specialty of each card you display or spell correctly the practice you describe.
- 3. Assign or have students volunteer to write a one-page paper on a particular complementary/alternative health care practitioner or an allied health professional. Have them identify important points such as education, licensure/certification, scope of practice and responsibilities, and how that individual will relate to a medical assistant. Do not allow duplication of practitioners in reports. Have students give the report of their findings orally in class.

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4. It is always a good practice to have frequent spelling tests of the names of the different medical practices and related allied health profession fields.
5. Use a bulletin board to highlight a different medical practice or a related allied health field. Ask students to participate by bringing in articles, clippings from magazines, or ads from newspapers.

Answers to Critical Thinking Boxes

What is your opinion of the concierge type of medical practice? Would you feel comfortable working in such an environment? Why or why not?

Many students will struggle with the concept of a concierge medical practice because they feel it encourages an “exclusive” type of care, but students may be able to admit that working in a clinic where patients do not have a long wait to see their provider and where seeking prior authorizations and struggling with insurance returns is not an issue would be a delight. Some might say that concierge care creates a “haves and have nots” mentality for health care. Some may argue that all health care should be concierge care with no additional cost.

Discuss with a peer what action might be taken when patients refuse all opportunities to be a member of their own health care team. How might you encourage patients to take even a small part in their own health care? How would major decisions be made? Ask patients questions that encourage a response other than a simple “yes” or “no.” For instance, “Describe the pain you are feeling” requires a more involved response from the patient than the question “Is the pain constant?” Asking patients to describe how their medical problem limits their daily activity will involve them in the discussion. Always listen carefully to patients and allow enough time for them to

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formulate a response. Major decisions can be made in a similar fashion. If possible, options may be given to patients from which a choice is to be made regarding care.

Answers to Case Studies

Case Study 2-1

Refer to the scenario at the beginning of the chapter.

1. Where will you research additional information on being a physical therapy assistant?

Research “physical therapy assistant” on the Internet. Interview a physical therapy assistant. Student responses will vary greatly here due to location and patient demand for physical therapists.

2. Compare the working hours, rate of pay, contact with patients, required schooling, and job availability to those of the medical assistant.

The working hours may be quite similar to those of a medical assistant, and the pay may also be comparable. The physical therapy assistant will have direct and “hands on” contact with patients but will perform little, if any, administrative tasks. The physical therapy assistant will have close to the same schooling requirements and job availability as the medical assistant, but a physical therapy assistant must have an associate degree from an accredited program. Not all medical assistants earn associate degrees.

3. If other health professions discussed in the chapter are of special interest to you, answer the same questions. This review helps to clarify the position of the medical assistant for you.

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The many other health professions are too numerous to identify here again. However, points to keep in mind include the desire (or lack of) for direct patient contact, education required, work hours, and responsibilities.

Case Study 2-2

You are the medical assistant for a family-practice provider, Dr. Bill Claredon, who is close to retirement. He is much adored by all his patients, but he thinks alternative medicine is outright quackery. Marjorie Johns, a patient with debilitating back pain, tells you she is seeing an acupuncturist and is taking less and less of her prescribed medications. You quietly mention this to Dr. Claredon before he enters the examination room to see Marjorie. He glares at you with disgust at the information and is quite agitated when he enters the examination room.

1. Describe the discussion that you think will occur between Dr. Claredon and Marjorie.

Dr. Claredon seems “threatened” or distrustful of any alternative medicine, and sees none of them as complementary to his therapy procedures. He is apt to confront Marjorie about her acupuncture treatment. If he is willing to discuss her acupuncture treatment and what value, if any, it has for her chronic back pain, a step may be made toward integrative health care. If Dr. Claredon debunks the treatment, Marjorie is likely to withdraw, not mention it again, and even begin to distrust Dr. Claredon’s care for her condition. As the medical assistant, you can be very helpful to both doctor and patient if you are attuned to the patients’ expressions and attitudes when they leave an appointment.

2. If Marjorie is unhappy when she is ready to leave the facility, what professionalism skills can you use to help her?

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If Marjorie seems unhappy, you can tell her that you will speak with the doctor but that you are certain that Dr. Claredon is only concerned about her well-being. If Marjorie truly believes that she has been helped by the acupuncture, you might gather some materials for Dr. Claredon to read, suggest that he take a look at the statistics of the number of patients seeking alternative care, and ask what you might do to further facilitate quality care for Marjorie.

3. As the medical assistant, what attributes of professionalism can be utilized to ease Dr. Claredon's concern and help bridge this gap for Marjorie?

Refer to response in Number 2 above. Keep in mind that Dr. Claredon is your employer, so always remain supportive of his decision on whether to investigate any further.

Answers to Certification Review

1. c. Ambulatory care settings
2. a. Managed care operation
3. b. All health care settings
4. d. It includes physicians, nurses, allied health care professionals, patients, and integrative medicine practitioners.
5. a. It is increasingly accepted as complementary to traditional health care.
6. c. A phlebotomist
7. b. It allows patients special privileges in their health care.
8. d. Group or partnership
9. b. Diagnose and treat ailments
10. a. Acupuncture