



ENDOSCOPY CENTER

of the North Shore, LLC

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"You don't need a colonoscopy, but I'm sending you for one because, quite frankly, I don't like you."

A Changing Landscape

- Drop in private practice
 - Increase in hospital owned practitioners
 - Less entrepreneurial competition
 - More complex patients
- ↓
- Decreased reimbursement per encounter
- ↓
- Need for other revenue streams

Answers?

- Increase volume = reduced quality
- Increase your distribution = quality of life
- More intensive services = still at mercy of Medicare
- Scale back but work *smarter*

Follow the Money

- Hospitals make a large percentage of money involved in outpatient endoscopic services
- Insurance companies
- Creating your own endoscopy center allows you to leverage both

Types of Facilities

- ASC
- In office
- Partner with hospital, healthcare system, payor, other doctors, other specialties, or private equity

In Office Endoscopy

- OBS is to ASC what an ASC is to the hospital
- No need for CON
- Economies of scale
- Increased efficiencies
- Degrees of ownership

How to Get Started?

- Pro forma, pro forma, pro forma
- Location
- Financing
- Buildout
- Planning ahead – revenue streams, expansion, and competition





Procedure Room



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EXIT





Revenue Streams

- Direct billing for procedural and professional fees
- Tray fees
- Preps, probiotics, labs, dietician, weight loss
- Pathology
- Anesthesia
- Infusions
- Build equity

Equity!

- Freedom
- Quality of life
- Leverage
- Value
- Partnerships: PE, hospitals, junior assoc
- Your mileage may vary!

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