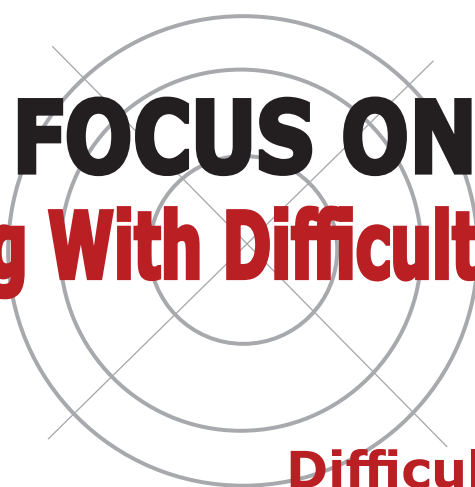


A large, light gray target graphic with concentric circles and a central bullseye, overlaid with a white 'X' that divides the target into four quadrants. The text is centered within this graphic.

FOCUS ON:
Dealing With Difficult People

From the Editors at Medical Office Manager

A graphic of a target with three concentric circles and a crosshair, centered behind the main title.

FOCUS ON: **Dealing With Difficult People**

Managing Staff

How to deliver bad news to 3 kinds of underperforming employees

Managing Staff

Got troublesome staff? Five easy rules for making the manager's job easier

Difficult People

How to handle a rude dude

Staff Problems

Managing the blamer, the crier and the poor listener

Managing Patients

How to handle and angry patient



FOCUS ON:
Dealing With Difficult People

Copyright © 2022 Medical Office Manager

Managing Editor
Barbara Manning Grimm

Layout & Design
JG Pearmain

Sales & Member Services
Andrea Stowe
andrea@plainlanguagemedia.com

Medical Office Manager is a 2022 copyright of Plain Language Media, LLC, 15 Shaw Street, New London, CT, 06320. All rights reserved. Distribution, translation, or reproduction in any form is forbidden without written permission.

Opinions expressed are not necessarily those of Medical Office Manager. Mention of products and services does not constitute endorsement. Advice given is general, and readers should consult professional counsel for specific legal, ethical, or clinical questions.

MANAGING STAFF

How to deliver bad news to 3 kinds of underperforming employees

The talk of management isn't easy. Here are three especially difficult conversations to be prepared for: the poor performance discussion, the no-raise-for-you discussion, and the we're-having-layoffs discussion.

Business consultant, corporate trainer, and psychotherapist **Linnda Durre**, PhD, of Winter Park, FL, outlines what to say, and what not to say, to get the message across and at the same time keep the peace, protect morale—and ensure safety.

1. THE POOR PERFORMANCE TALK

First is the conversation about a staffer's poor performance.

What the manager has to do at this point, Durre says, is to improve the performance and at the same time keep the staffer's morale up. To do that, follow two rules.

The first rule is be sensitive. Don't be mean, don't be cruel, don't be cold. "Everybody has an ego and feelings," she says. Recognize them.

Do otherwise and expect a tough payback. A hurt employee "will wait in the bushes" to sabotage or make a fool of the manager, Durre explains. And people hold long grudges, she says. It's not uncommon for an employee to wait years to get back at a manager who was mean or nasty.

The second rule is be specific. It's not enough to say only that the performance isn't up to standard. Explain what isn't up to standard and what it should be and how to get there.

How to say it? "Be sincere, genuine, and specific," Durre says. A good approach is to start out with a positive statement about the value the employee brings to the office or to the patients.

Then go to the criticism, but don't term it such, Durre says. Far better is to refer to it as feedback.

Also, don't transition to it with the word but. "That acts like a giant negator. It cancels out all the positive words that come before it," Durre says.

Use the word and instead. That keeps the thinking positive. She gives the example of, "I love my job and it's stressful." Both of those elements are true, and there's no negative implication given.

End the conversation on a positive note. Say that the manager wants to see the poor performance corrected because the staffer is a valued employee.

Durre gives this example:

Staffer A, I always appreciate your teamwork and your positive attitude.

What I experience is that your reports are late, and that has a domino effect in your department. You do the initial work that everybody depends on, so when you get behind, the others get behind as well.

If you can't make the deadlines, I will have to discuss it with the doctors. I would rather not do that. I am hoping you will make changes in your time management so you can get your work done on time.

Thank you so much, Staffer A.

Have specific examples ready, and bring them out if the staffer doesn't understand the issue.

"Many people are clueless about what they're doing wrong," she says. Others are in denial. They think, "I don't do that! I'm not like that!"

So instead of saying only that reports are often late, be prepared to point to specific reports and tell how late they were.

If there's no proof of what's being done wrong, there's no reason to be talking to Staffer A in the first place, she says.

What's more, without examples, all the manager is saying is, "You are terrible." The message that needs to be conveyed is, "You are a good person; you are just late meeting your deadlines."

2. THE NO-RAISE-FOR-YOU TALK

Next is the conversation where a staffer asks for a raise or promotion.

Whenever a manager is caught off guard, the best response is to turn the table, Durre says. In this situation, ask, "Why do you deserve a raise (or promotion)? Tell me what you have done for our office that warrants it."

Then let the staffer do the proving.

The staffer may not be able to give any justification for the request, and if so, don't be rude. Use the conversation to give that person what Durre refers to as "motivation, hope, and drive." Explain how to earn the raise or promotion: "When you can do X, we can revisit this."

On the other hand, what if the staffer can justify the request but the manager knows the practice isn't in a position to grant it?

Don't reject it flatly. That's only going to generate hard feelings.

Show support for the request. Tell the staffer "I will take this under consideration. There is merit here. And I will have to check with the doctors."

Once again, don't use the word *but*. Use *and* instead.

Then talk with the doctors and come back with their decision plus a good reason for it plus some more support: "I would like to give you a raise, but the doctors say that because of cutbacks, we can't. I want you to know this applies to everyone, not just you."

When the decisions are made, give the news and send the laid-off staffers immediately on their way.

What the staffer hears is that the manager recognizes the value of the request, has gone to bat for the staffer, and has brought back the best response possible.

Durre points out that truth is essential. Hide behind an excuse that no raises are forthcoming and then give somebody else a raise, and expect to have to deal with an unhappy staffer.

3. THE TALK ABOUT LAYOFFS

Then there's the conversation where the manager has to announce that layoffs are on the horizon. Following that are the conversations with the unlucky staffers who have to leave. And with those conversations, there's the possibility of violence, Durre says, because even the mildest-mannered employee can react strongly to being let go.

Her advice is to give at least two weeks' notice of the possible cuts. That gives staff time to talk with their families, brush up their resumes, think about other job possibilities, accept what may take place—and calm down. Some employers don't give any notice, she says, but people "need time to adjust to the fact that there are layoffs and that they may be the next to go."

When the decisions are made, give the news and send the laid-off staffers immediately on their way.

Some employers approach it the other way around. Instead of giving the entire staff two weeks' notice about the possibility of layoffs, they lay people off unannounced and tell them they can stay on the payroll for two weeks. A mistake, she says. Let a laid-off staffer continue

working "and the office has a paid enemy on staff."

Fairest is to give everybody warning, Durre says, and safest is to lay people off and immediately "escort them kindly and humanely out the door."

As to what to say, be brief and also be as positive as possible. Compliment the staffer on a job well done. Say, "Don't take this personally" and, "We wish we could keep you." Point out that other people are being laid off as well.

Don't get into the particulars of the why of it. Just say the layoffs are necessary because of the economy or lower reimbursement or whatever. Then add, "I wish this didn't have to happen, and (once again, *and* instead of *but*) this is what we have to do."

One question to be prepared for is the standard, "Why are you letting me go and keeping Staffer B? I do a better job than Staffer B does."

Don't try to answer that. Just explain that there are factors affecting the decisions that people are not aware of, and if the staffer presses, say, "These are confidential issues. We can't disclose that information."

Layoffs can get emotional, Durre says. "People come back with guns, they delete hard drives, they send viruses. It can get nasty." For that reason, there are things besides the verbiage to consider.

One is timing. Don't lay anybody off until late in the afternoon. That allows people to leave with dignity and not have to face their coworkers—and explain what's happened—and start to get angry.

Another is to have security people in the office, she says, lest somebody "goes ballistic."

Another is to have the final paycheck ready and include in it any accrued vacation or sick leave pay. That eliminates any suspicion or complaint of "they aren't going to pay me."

Collect the keys and pass cards and any other

office property. Change the computer passwords and door entry codes. Escort the staffer to pick up personal belongings and don't leave that person's side until the door closes.

And for the manager's safety, as well as to support the documentation, have somebody else present at the termination discussion.

Linnda Durre is author of "Surviving the Toxic Workplace," a book on how to handle almost every type of negative personality in the office.

MANAGING STAFF

Got troublesome staff?

Five easy rules for making the manager's job easier

Here are five easy rules that will make the job of managing difficult people a little easier—or at least make it go more smoothly.

They are outlined by **Monica Wofford**, MBA, CSP, principal of Contagious Companies, a leadership training company, and author of “Make Difficult People Disappear.”

RULE #1: ADDRESS PROBLEMS CONSISTENTLY

Face the problem people. And don't be ashamed about not wanting to deal with them, Wofford says. Google any people term such as “office drama queen” and literally millions of sites come up.

Letting people continue on with unacceptable behavior damages the office in two ways.

One is that it drives the good performers away. They get tired of working around an unpleasant person. They also resent having to pick up the slack while some dud is allowed to carry on. What reward is there for doing a top job when the ne'er-do-wells sit around and gripe and do nothing yet still get paid?

And people issues aside, letting difficult behavior continue can generate legal problems, because it sets a precedent that the behavior is acceptable.

Suppose the problem staffer is a white male who's rude to everybody. The manager dreads confronting him and so ignores the issue to keep the peace. Then a good performer, a minority female whom the manager feels confident talking to, is disciplined for being rude in the same way. The office has just asked for a discrimination claim.

RULE #2: DON'T FOCUS ON POOR PERFORMERS

Don't give the poor performers excessive time and attention. Address their problems and help them improve, but don't coddle them and don't make a big deal about it when they do something right.

Many a manager sits with a losing employee day after day in hopes of encouraging better performance, and when the loser finally gets it right, the manager goes overboard with the praise.

Nothing good comes of that. “The manager is rewarding the wrong behavior,” Wofford says.

Staffer Zero learns that making mistakes is what gets the positive attention. Worse, the good staff resent not getting recognition for their consistently good work while the poor performer gets accolades for getting it right once.

Don't spend all the time with the poor performers, Wofford says. “Spend it with the ones who do well.” Then everybody learns that to win the manager's favor, they have to do things the right way.

RULE #3: RESPECT PRIVACY

Keep everybody's business private. Don't tell one staffer about an issue with another staffer.

That rule often gets broken by new managers who have been promoted from within, Wofford says.

The newly promoted manager has a problem with Staffer A and goes to Staffers B and C who are friends and former peers to ask for advice.

This can create a “gang-up” situation. Staffers B and C see no reason not to go to the problem

staffer and try to solve the issue. And the logical response is why did the manager talk with them instead of addressing the issue directly? What could have been solved by a private conversation has just become a complex problem.

Along with that, talking with staff about management problems damages the boss's credibility because staff expect their manager to be able to handle the office issues. They don't respect a manager who doesn't have the strength to do so.

RULE #4: DON'T JUMP INTO A FIGHT

When a staffer gets emotional, don't respond in kind.

Suppose a staffer, who is having a bad day, comes in complaining angrily about another staffer or about the office or even about the manager.

If the manager is also having a bad day, "the natural response is to pop right back," Wofford says, and now the staffer has just succeeded in engaging the manager in a fight.

No matter how infuriating the comment, don't take the bait. The best response is simply "allow me some time to think about this."

That's disarming, "because what a difficult person is looking for is a sparring partner," Wofford explains. Stay disconnected, "and the enthusiasm wanes," she says. That angry staffer has no choice but to focus the attention elsewhere.

RULE #5: MAKE BOUNDARIES OFFICIAL

Draw up a professional conduct policy for the office.

This sets boundaries the manager can enforce with nonperformance issues such as attitude and gossiping, Wofford says.

She recommends covering "all the difficult-

Without a policy, the manager has no basis for disciplining the vague and hard-to-describe behaviors that annoy any manager.

to-measure behavioral problems." Include the things that have come up in the past or that could come up, such as how to express anger, how to resolve conflicts with another staffer, how to criticize another staffer, and how to disagree with the boss respectfully.

"Be very specific about what to do in each situation," she says. Don't leave it at merely "act professionally." Tell what people are supposed to say and do.

Wofford recommends having staff help draw up the policy. Talk with them about the types of situations that occur and ask for their suggestions on the proper conduct for each one.

If they help create the policy, they'll support it. "People don't argue with their own data," Wofford says.

Without a policy, the manager has no basis for disciplining the vague and hard-to-describe behaviors that annoy any manager. But with it, there's a solid discussion approach: "Staffer A, our professional conduct policy tells how to handle conflicts with coworkers. I need to talk with you about it, because yesterday you had an argument with a Staffer B in the reception area, and that is in clear violation of our policy."

Being able to cite a policy takes any personal aspect out of it, Wofford says. "It makes everything objective and measurable."

DIFFICULT PEOPLE

How to handle a rude dude

As a medical office manager, you interact with a lot of people. There are staffers, contract workers, patients, sales reps, clinicians, and physicians, as well as service technicians, building and maintenance workers, and others.

Given that you are in contact with so many people, you are bound to come across a type of person that, unfortunately, is common to the human species: the rude dude.

RECOGNIZING THE DUDE

This person may have characteristics of the proverbial wolf in sheep's clothing. He may look friendly, and even initially talk the polite talk. Indeed, the rude dude often comes across as a nice guy—at first.

Somewhere along the line, though, a shift occurs and zap, you are stung by a remark or a series of what can only be called nasty comments.

If you haven't encountered a rude dude, count yourself lucky. Truth be told, too many of them walk among us. And here's the thing. They hold jobs you'd least expect.

Take sales, for instance. A salesperson, at least a good one, is usually friendly, accommodating, and even jovial.

A physician, meanwhile, is ideally supportive, concerned, and pleasant to patients.

Yet both of these descriptions play to stereotypes rather than reality. Most people can cite at least one experience where a physician's so-called bedside manner was lacking. As for the perfect salesperson, well, anyone with experience in purchasing will tell you that not every rep fits the mold.

So what do you do when you encounter rude behavior as you happily go about your job?

ASSESSING THE SITUATION

Much will depend on the degree of rudeness, and how it affects the practice. It also depends on who wears the "rude dude" label.

However, if it constitutes harassment, it must be addressed immediately, no matter who the rude dude is. And yes, this includes practice physicians.

Assuming it isn't harassment and "just" rudeness, you will want to assess the situation and decide if action is warranted.

For example, if a maintenance worker who shows up annually to check the heating system is rude, you may want to shrug it off, knowing that he and his attitude will soon be gone. Likewise with the brilliant techie who occasionally services the practice's computer system.

On the other hand, if a staffer, particularly one who interacts with patients, is rude, you should not ignore the behavior. Similarly, if a physician is rude to staff and/or patients, you have an obligation to let the doc know how her behavior impacts the practice.

RESPONDING TO RUDENESS

It's important to recognize the difference between a one-time slight and chronic rudeness.

A person may be having a bad day and inadvertently take out her frustration on others. If this becomes a pattern, it's a problem. A one-time occurrence doesn't a rude dude make, and the behavior doesn't warrant action, unless it was particularly egregious.

A rude dude, by contrast, acts as if he is entitled to treat others however he chooses. If this person is a staffer, you must counsel him on the importance of teamwork and getting along with others. It sounds elementary, but some people don't get it.

"When you experience rudeness, it makes rudeness more noticeable. You'll see more rudeness even if it's not there."

—Trevor Foulk

When speaking with the staffer, be sure to give examples of rude behavior and point out the effect it has. When talking to him, don't be condescending but make sure you're clear. Also let him know what's expected in terms of workplace and patient interaction.

A conversation with a physician, admittedly, is more difficult. You might take the approach that you are interested in improving workplace morale and have found the best way to do this is to model positive behavior, which happens to be true.

Here's the thing about rudeness: like other forms of negativity, it's contagious. But, unlike contagion where behavior tends to be overt, contagion associated with rudeness is subtle.

In fact, encountering rude behavior at work makes people more likely to perceive rudeness in later interactions, a University of Florida study shows.

"When you experience rudeness, it makes rudeness more noticeable," says lead author **Trevor Foulk**, a doctoral student in management at the University of Florida's Warrington College of Business Administration. "You'll see more rudeness even if it's not there."

The study findings, published in the *Applied Journal of Psychology*, also provide the first evidence that impoliteness spreads in the workplace. Those who experience rudeness firsthand are more likely to spread it to others, research shows.

"Part of the problem is that we are generally tolerant of these behaviors, but they're actually really harmful," Foulk says. "Rudeness has an incredibly powerful negative effect on the workplace."

And he offers advice for managers: "It isn't something you can just turn your back on. It matters."

STAFF PROBLEMS**Managing the blamer, the crier, and the poor listener**

Here are three all too common management problems along with their solutions.

They are outlined by **Stewart L. Levine**, an Oakland, CA, attorney who is also a consultant and trainer in conflict resolution.

IT'S NOT MY FAULT!***Addressing poor performance with the staffer who blames everybody else for it.***

"Like a good lawyer, be ready to prove the case," Levine says. Come in with indisputable facts—a clear description of what the staffer has been doing plus examples with the dates and times.

Hold the discussion in a formal meeting. In an informal atmosphere, people tend to take a cavalier attitude toward what's said. The staffer is apt to throw out a few lame excuses and leave thinking all is well.

"Be clear, strong, and forceful," Levine says. Once both parties are seated, pause and look the staffer straight in eye. That little pause and look say "this isn't just a passing conversation."

The more direct the eye contact and the more serious the tone, the less chance the staffer has "to weasel out of it, because it's difficult to lie to someone's face," he explains.

Lay out the problem and be ready to respond to the blaming with "here's what happened."

Also be ready to bring in whoever is being blamed. Suppose the excuse is, "I couldn't finish because So-and-So didn't send me the numbers." Come back with "Let's call So-and-So. We need to get to the bottom of this." Then ask that person if the request was made and if the information was actually sent.

Once the case is proved, don't let the wrongful blaming pass. Address it firmly with "So-and-

Insensitive as it may seem, uncontrollable crying has to be addressed as a performance issue.

So didn't cause your problem. You need to take responsibility for your actions and not blame other people."

Make it clear that more blaming will bring disciplinary action—and possibly termination.

OH, BOO HOO! BOO HOO!***Addressing poor performance with the staffer who blames everybody else for it.***

Never let tears interfere with management.

While there's nothing wrong with taking a softer approach toward someone who tends to cry, don't let crying give anybody a way out. Performance is performance.

For the genuinely tear-prone staffer, there are effective tactics for keeping the meeting dry, Levine says.

One is humor. Smile, sigh loudly, and say, "I have a difficult situation to talk about with you, so I've brought a box of tissues."

The best tactic, however, is to state the problem and immediately shift the conversation to how to develop a solution. If the problem is meeting a deadline, for example, shift to "let's look at your schedule and see what's going on." Or if it's chronic tardiness, "I realize you are emotional, but maybe there's something going on that keeps you from getting here on time."

Because the shift is unexpected, it helps the crier get beyond the emotions of the moment.

What about the staffer who can't help falling apart?

Insensitive as it may seem, uncontrollable crying has to be addressed as a performance issue. Explain that some people "are just wired" so they react with tears, but "it's just not acceptable behavior at work."

Put things into perspective: "This problem has nothing to do with you as a person, and your emotions aren't helping you solve it."

Then move on to helping the staffer cope with the crying. Explain that in an egregious situation tears can be an acceptable reaction, "but this is not an egregious situation, and some learning needs to happen here. You need to learn how to stave off this behavior."

Levine notes that some people use tears deliberately to avoid having to deal with issues. If that becomes apparent, the manager simply has to say that deliberate crying won't be tolerated in the office.

HUH? WHAT DID YOU SAY?

Giving directions to the staffer who has difficulty paying attention.

It's not what the manager says that counts; it's what the staffer hears. And whether there's an attention difficulty or not, Levine says, the best way to give directions is with what he terms "three-way communicating," or communication that includes hearing, speaking, and writing.

First, hearing. Give the directive: "Staffer A, I want you to do X, Y, and Z."

Second, speaking. Ask for a paraphrase. "Tell me in your own words what I'm asking you to do."

And third, writing. If the understanding is wrong, correct it and ask the staffer to paraphrase the corrected version, but this time in writing.

If there's still concern, follow up with an email asking for yet another written restatement. Three-way communicating is something a manager should use often, he says, because it ensures people know what to do.

He adds that just as it's the speaker's job to make sure the listener hears the message, it's the manager's job to make sure staff understand what they are supposed to do.

MANAGING PATIENTS

How to handle an angry patient

In a medical practice, an angry patient—and sometimes a really angry patient—is apt to appear any time.

In a business such as a fast food restaurant, anger is minimal, because the customers don't have high expectations to begin with, says **Bob Rose**, PhD, of the Rose Porterfield Group, a Dallas business consulting and industrial psychology organization.

But when it comes to medicine, "people are passionate" about their expectations, he says. The services they get affect their lives, and as a consequence, handling anger and high emotion is part of the manager's job.

Here's how to handle the angry patient, and possibly stave off a malpractice claim.

TAKE THAT VENOMOUS CALL

When the receptionist says "Patient Smith is calling and he's really angry," take the call.

Any manager's first reaction is to say "tell him I'm not in," and call back a few hours later, hoping Smith will have calmed down by then. But the brushoff only exacerbates the situation. Now the caller is angry about two things—the original problem and getting ignored.

Deal with Angry Patient Smith immediately, Rose says. Don't dodge the confrontation. The real reason he's calling is to solve a problem, and when there's no response, he loses faith in the manager as well as the doctor's skills.

BEG OFF FOR 10 MINUTES

Time can cool that caller off, however. About 10 minutes is enough, and there's an easy way to buy it.

Take the call, but maintain a pleasant tone and say "I understand you're upset, and I

apologize for that. I need to look at your record (or appointment book or specialist referral or whatever) to give you a full answer. If you can give me 10 minutes to get it, I'll call you right back."

The 10-minute request is believable, because anybody knows it takes a little time to locate papers. It's also flattering, because the manager (or physician) is stopping everything to deal with the patient's problem.

The little delay does two good things. It gives the patient time to cool down, and it tells the patient the manager is concerned about the issue and is trying to find a solution.

Thus, by call-back time, the manager has moved from a defensive posture to a proactive one. Now instead of an argument, there's a conversation where "we are both working together to solve a problem"—and the manager is in control of it.

FIND SOMETHING TO APOLOGIZE FOR

Neutralize the anger further with an apology.

That doesn't mean the manager has to admit to any wrongdoing. It means instead that the manager has to be sympathetic to the patient's feelings and find something to apologize for, even if it's no more than the patient's frustration.

An apology gives an angry person a graceful way to back down, Rose says.

Suppose the doctor told Patient Smith last Friday that test results wouldn't be in until Wednesday. Smith forgets, calls Tuesday for the results, and gets angry that they aren't available.

It's easy to respond to that with "I told you last week the results wouldn't be back until Wednesday." But it's not going to resolve the issue. It's only going to embarrass the patient and spur on the anger.

Stay calm. Be sympathetic. And come up with something to apologize about: "I'm sorry. I know you must be frantic to get those results. You may not remember, but I told you last week that it would be Wednesday before we could hear anything. I apologize if I didn't make that clear."

On the other hand, he says, if the patient is right, take responsibility for being wrong. When somebody is angry and rightfully so, 'fess up to it, says Rose.

The patient may not be pleased, but the alternative is worse. When somebody denies an obvious mistake or broken responsibility, the anger can reach the boiling point—and a malpractice suit.

SIDLING UP TO THE PATIENT

When the angry patient is in the office, just a change in the seating can often stop the fray.

Suppose there's a disagreement about a bill. More than likely, manager and patient "are sitting across the desk from each other," Rose says. They're also glaring at each other.

Instead of getting into a staring contest, walk around, pull up a chair next to the patient, and sit down to discuss the situation.

Sitting side by side does just what the words say—it puts both persons on the same side. It quiets the emotion. Now the two are on the same page trying to solve the same problem.

He cites a time in his own office when a client who was sitting across from him got angry to the point of pounding his fist on the table. Rose walked around the table, sat down in the chair next to the man, and said "what needs to happen here? What do we need to do to solve this problem?"

The goal at that point is to find out exactly what that other person is upset about and figure out a way to take care of it.

THE RULE OF TWO E-MAILS

Anger often comes from communication errors, Rose says. And the place where communication most easily falters is email.

When somebody calls and says "I didn't get X from you," the other person can voice "what?" in a way that shows genuine concern. But in an e-mail, that's likely to be written as "WHAT???" and the other person may well read it as a rude "you're wrong" answer. And the fight is on.

To keep emails civil, follow "the two-email rule." When someone expresses even a minor concern in an email, respond no more than twice. If the matter isn't resolved at that point, it's time to stop writing and start talking.

Send a final email of "we're getting off on a wrong tangent here. I think we need to stop emailing about this and arrange a time to talk."

TWO MORE POINTS ABOUT ANGER

Rose adds two more elements about managing a patient's anger.

First, rarely is somebody's anger caused by a single issue. Almost always, it's been building up over a number of issues, and what the patient mentions is just the tip of the iceberg.

Any display of anger is a sure indication that the patient is and has been dissatisfied with a lot of things for a long time.

And second, there's a good side to getting a call from an angry patient. Somebody who says "I didn't like the way you did this" was angry before making the call. Take that statement as a fire alarm: the bad news is that there's a fire; the good news is that now the manager knows about it and can put it out.

Far more damaging is the patient who seethes in silence and then just doesn't pay the bill—and maybe calls an attorney.



TM



PREMIUM MEMBERSHIP BENEFITS



FREE Registration to ALL Webinars. Join Leading Medical Office Management Experts for “How-to” Help on Critical Topics.



MOMDaily. This eNewsletter Keeps You Up-to-Date on the Latest News, Trends & New Developments in Medical Office Management.



Medical Office Manager Newsletter. Practical Medical Office Management Help Delivered to You Every Month (available in digital, print, or both).



Discounts on Products & Services For Medical Office Managers.



Hundreds of “How-to” Articles on Medical Office Management. Organized & Searchable by Topic.



Medical Office Policy Center. Ready-to-Use, Legally-Compliant Medical Office Policies You Can Download & Modify to Fit Your Needs.



Healthcare Laws. Regulations, Court Cases & Legal That affect Your Medical Practice, Searchable by Topic.



Medical Office Toolbox. Download Model Forms, Checklists & Other Practical “Working Tools”.



Special Reports & White Papers. Practical, Fast-Reading Overviews of New or Urgent Medical Office Topics & Issues.



Call **888-729-2315** for more information on how *Medical Office Manager Premium Membership* can help you enrich your career.