

On the Move

Two Former Carraway Physician's Advice on Moving

By JANE ERHARDT

"It's a real pain," says Hugh O'Shields, MD, about moving. He's now with Medicine/Montclair at Trinity Medical Center, but last fall he was part of the forced exodus of physicians from Carraway when it closed.

He starts a litany of moving responsibilities: "You have to make sure your employees are taken care of, try to find jobs for those who need help, physically move charts. And regardless of notification, patients are always surprised that you've moved. Rescheduling is always an adventure."

Besides relocating his private practice, O'Shields had to find new jobs for all 27 of Carraway's internal medicine residents. But the upside to this duty was that the hospitals he contacted enquired about his job status as well.

O'Shields, who had been at Carraway for just two years, was at the hospital right to the end. "You hate to see that sort of thing," he says. "It's awful. Everybody lost. But we all knew it was tenuous, and everyone knew there were potential problems."

Longer-term Carraway physicians held a different view. "You didn't want to



Dr. Adams consults with a patient.

believe it might happen," says George W. Adams, Jr., MD, an urologist at Norwood Clinic at the time and at Carraway for almost 40 years. "Carraway had been bankrupt before and you just felt like it would come through. Everyone got nervous though. You've got to make a living."

When Norwood started putting out feelers to other hospitals, the courting began. "Norwood had a huge number of patients, so they recruited us," Adams

says. But Adams left Norwood in October to become head of research with the state's largest urology group, Urology Centers of Alabama. "I was going to be 65 and I wanted to slow down," he says. "The beauty of this position is I'm not on night call, I don't have to go to the emergency room, and my weekends are free. But I still get to see patients."

O'Shields, on the other hand, gave up his private practice and sought out a

didn't want to join a practice where he'd need to invest all over again. "It's going to be a 'must' for every practice," he adds.

Both agreed that physicians should seek well-equipped modern hospitals with a wide array of subspecialties to refer to. For urologists, says Adams, look at the surgical situation and ensure they have a robot.

For O'Shields, finding like-minded coworkers topped his moving list. "Be sure you have a good fit with the group that you're joining," he says. "You want people who have similar cultures of medicine, call patterns, and how things are to be done. I already knew the guys I was joining."

O'Shields knew Trinity had plans to move before he joined them. "Isn't that lovely? Moving again," he says with a

hospital. He found his place at Trinity. "I wanted to be an employee so I wouldn't have the six month lag in cash flow," citing the motivation of two kids in college and two more coming right behind.

He notes that his patients don't notice the difference between seeing him at the hospital and his old clinic. Ninety percent of his 2,500 patients followed him to Trinity. "Some complained about the longer drive, particularly those from the northern part of the county, but that was all," he says.

For physicians on the move, O'Shields advises finding your new space first, so you can establish your Medicare billing address quickly. Otherwise it can mean a six-month delay in reimbursements versus a likely four months or less. "So sock away plenty of cash, because employees want to be paid from day one," he says.

Adams recommends looking for a place with electronic medical records (EMR) in place, or plans for it and the necessary financing. "I'd already invested money in Norwood for their EMR and I still had a portion to pay off when I left," he says. "I don't begrudge that, but I didn't know I was going to leave or that Carraway was going to close." So he

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laugh. "But I knew it was two to three years away, and I thought that was doable." He says the transition to Trinity has been smooth overall. "There was an ease of integration. The administration has been very helpful. I'd even worked with most of the Trinity people a few years ago and I still remembered their names."

For Adams, it's been "very bitter-sweet. Norwood was a close-knit group. We worked well together. We didn't hesitate to call each other, and they'd pick up and talk to you." He recently had dinner with his two old urology partners who had been close friends, as well as colleagues. "We were at different ages with different needs," he says, "so we all went different ways. And I had the good fortune to take this position. I'm very happy."