

New Practice Checklist

	To Do	Done
1. Evaluate possible location of practice Contact:		
- Census data	_____	_____
- Chamber of Commerce	_____	_____
- Medical societies	_____	_____
- Hospital administrators	_____	_____
2. Register with State Licensing board for medical license (DEA status?)	_____	_____
3. Evaluate needs for capital for start-up costs;		
- prepare budget	_____	_____
- pull estimated income	_____	_____
- estimate expenses	_____	_____
- personnel needs	_____	_____
- equipment and space needs	_____	_____
4. Arrange practice financing	_____	_____
5. Choose advisors (lawyer, accountant, insurance, banking)	_____	_____
6. Check possible locations for leasing/ buying office space	_____	_____
7. Evaluation of office and equipment leasing/ buying arrangement with attorney/accountant	_____	_____
8. Reserve phone numbers (office, private, cell phones, beepers, etc.) and advertising in local telephone directory	_____	_____
9. Develop office layout and design	_____	_____
10. Re-evaluate medical and office equipment needed	_____	_____
11. Order office equipment and layout and design	_____	_____
12. Apply for malpractice insurance, disability insurance, premise coverage, etc.	_____	_____
13. Apply for narcotics license	_____	_____
14. Apply for membership hospital staffs and medical societies	_____	_____
15. Apply for tax identification number; talk to attorney about choice of entity	_____	_____

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| 16. Apply for county and city occupational licenses | _____ | _____ |
| 17. Apply for Blues (Blue Shield, etc.) and Medicare numbers, complete universal Application and credentialing and send to all "other" payors | _____ | _____ |
| 18. Arrange for office and personal insurance | _____ | _____ |
| 19. Arrange for answering service | _____ | _____ |
| 20. Order filing system | _____ | _____ |
| 21. Order accounting systems | | |
| - accounts payable system | _____ | _____ |
| - computer (billing) system | _____ | _____ |
| - payroll system | _____ | _____ |
| 22. Order insurance forms (HCFA 1500) and clearinghouse for electronic remittance | _____ | _____ |
| 23. Open practice checking and savings accounts | _____ | _____ |
| 24. Order office signs | _____ | _____ |
| 25. Order announcements for new office, business card, office stationery and business forms | _____ | _____ |
| 26. Contact referring physicians, local agencies or community groups re: new location | _____ | _____ |
| 27. Develop office policy manual | _____ | _____ |
| 28. Develop preliminary office job descriptions | _____ | _____ |
| 29. Develop office fee schedule | _____ | _____ |
| 30. Recruit and hire office personnel | _____ | _____ |
| 31. Arrange newspaper announcement of office opening | _____ | _____ |
| 32. Write patient information booklet | _____ | _____ |

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