



Checklist for Practice Move

<u>Lead Time</u>		<u>Whom</u>	<u>Done?</u>
12 weeks	Moving Company	_____	_____
	<ul style="list-style-type: none"> • interview several companies and get estimates; • are they experienced in moving sensitive equipment; • are they available when you need them; • evaluation of all high priced equipment (medical equipment, computers, phones, etc.) should be owned by specialized (vendor) movers; • confirm/arrange new location to have high speed internet access for billing, data transmission, etc.; call phone company. 		
12 weeks	Telephone	_____	_____
	<ul style="list-style-type: none"> • plan to switch over phones on least busy day of the week 		
	Answering Service	_____	_____
	<ul style="list-style-type: none"> • Coordinate with telephone service changes 		
12 weeks	Payors		
	<ul style="list-style-type: none"> • Medicare • Medicaid • Contracts (HMO, PPO) • Commercial Carriers • Other 	_____	_____
	_____	_____	_____
	_____	_____	_____

12 weeks	Printed Materials – place order		
	<ul style="list-style-type: none"> • Appointment Cards • Prescription Pads • Brochures • Stationary, Envelopes • Checks, deposit slips • Other 	_____	_____
		_____	_____
		_____	_____
		_____	_____
		_____	_____
		_____	_____
		_____	_____
8 weeks	Contract Computer Vendor about move, new location, etc	_____	_____
8 weeks	Periodicals	_____	_____
	Other subscriptions	_____	_____
	Medical associations	_____	_____
4 weeks	Notify Insurance Carriers:		
	<ul style="list-style-type: none"> • Office/Business policies • Health/Dental policies • Malpractice policies 	_____	_____
		_____	_____
		_____	_____
4 weeks	Notify Equipment and Supplies		
	<ul style="list-style-type: none"> • Suppliers (medical) • Suppliers (business) • Maintenance contracts 	_____	_____
		_____	_____
		_____	_____
4 weeks	Contact Outside Services:		
	<ul style="list-style-type: none"> • Payroll Service 	_____	_____

- Janitorial Service _____
 - Biohazard Removal Service _____
 - Postage Machine _____
 - Other _____
- _____
- _____

4 weeks Contact all Referral Sources:

- Physicians _____
 - Ancillary Referrals _____
 - Office Managers _____
 - Other _____
- _____
- _____

4 weeks Notify (by mail) Advisors:

- Attorney _____
- Consultant _____
- CPA _____
- Banker _____

2 weeks Arrange Change of Address for Each Physician:

- State License _____
- DEA License _____

2 weeks Post Office Notification/Forwarding/Holding of Mail _____

1 week Hospital Medical Staff Office _____

Notes:

1. Allow time to test and re-calibrate equipment and systems
2. When confirming appointments, notify patient of new office location
3. When scheduling patients, notify them of new office location
4. As patients check out and re-schedule, inform them of the new office location
5. Place signs re-directing patients to new location

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