BE Simple

STAFFING

FREE INDUSTRY PLAYBOOK

The medical practice answering playbook

A briefing document for clinics and small medical groups that want appointment calls answered, after-hours messages routed correctly, and no one on the desk giving clinical advice.

besimplestaffing.com

A briefing document for operators. No invented statistics.

Why clinic calls still need a written protocol

In a medical practice, patients still call — for appointments, prescription-refill requests, directions, and after-hours messages. When the front desk is checking people in, or when the clinic is closed, those calls often go to voicemail, to a clinician's cell, or to a shared answering service that can take a name and still lose the context a complete message would have captured.

Message-taking is better than nothing, and a shared after-hours service — including one built around nurse triage — can be the right buy when you need clinical triage. It is a weaker fit when you want one person who knows your providers, your templates, and how you schedule in Athenahealth, eClinicalWorks, Modernizing Medicine, or a similar system.

This playbook helps you write those rules down. It does not invent "patients recovered" statistics, and it is not medical advice.

Decide what "answered well" means

- Take a complete message and send it to the front desk the next morning.
- Book, confirm, or reschedule an appointment in your practice system, with the right intake questions.
- Route an urgent after-hours message to the on-call clinician, with a clear notification path.

Those are three different services. Mixing them up is how a clinic buys a cheap plan and still wakes a clinician for a refill request — or fails to pass on something that should have reached the on-call number.

How a dedicated agent should work

A dedicated answering agent represents your practice, not a generic call center. At BE Simple Staffing the agent works from our Prishtina office on the hours you purchase, including US evenings and weekends when that is when the line rings.

Before they take a live call they should know: your locations and providers, appointment types and buffers, message categories, fees or instructions the agent may mention, and the exact line between information-gathering and clinical advice.

On a routine call

- Greet in the practice name and identify the right provider or location.
- Take the request and complete the questions on your approved form.
- Book, confirm, or reschedule if your rules allow, or take a complete message for the front desk.
- Set only the expectations you have approved — timing, what to bring, what happens next.

On an after-hours or urgent call

- Follow your written protocol, not improvisation.
- Record the information you require and notify the on-call clinician the way you specify.
- Stay on the line for a warm handoff if that is your rule.
- Log what was promised, to whom, and when.

The agent does not interpret symptoms, recommend treatment, or tell a caller whether they should go to the emergency department. If a question is not in the playbook, they take a complete message and route it to your staff.

Protected health information is a separate decision. Our standard agreement does not allow agents to be given PHI unless the Order Form addresses it and any extra agreement — typically a Business Associate Agreement — has been signed. We will not claim a HIPAA certification we have not earned. Until those documents are in place, limit the desk to work you can scope without PHI access.

Coverage, briefing, and pricing context

US business hours coverage is $1,995 a month per dedicated agent, with a one-agent minimum and no setup fee. After-hours or 24/7 seats are $2,395 a month; true 24/7 coverage uses four agents. There is a three-month term, then month-to-month. Founding clients receive 50% off the first month. Most teams are live in two to four weeks. Full detail: besimplestaffing.com/pricing.html.

A dedicated seat costs more than a small bundle of answering minutes. It also does more, if you use it for complete messages and scheduling rather than as a voicemail substitute. If you only need overflow message-taking, a shared service may be enough.

Briefing checklist. Locations and providers; appointment types, buffers, and what the agent may book; after-hours definition and on-call path; refill, records, and billing message rules; a hard rule that agents never give clinical advice; a decision on PHI access and whether a Business Associate Agreement is required before any chart login; software access; and a short sample of “good” and “bad” call outcomes.

Next step

To talk through a dedicated practice desk, write to Jon Kludt at jon.kludt@varosity.com or use besimplestaffing.com/contact.html. Mention your specialty, the software you schedule in, whether you need after-hours coverage, and how the phone is handled today. If the work would involve protected health information, say so up front.

The longer public page is “Medical practice answering service,” at besimplestaffing.com/use-cases/medical-practice-answering-service.html.

BE Simple Staffing is a San Diego company with our own office in Prishtina. This playbook is a briefing aid, not a contract and not medical advice, and it does not invent proof of appointments kept or lost.