According to Jean Buble, R.N., C.P.C, Vice President of Case Management and Health Information Management at RWJBarnabas Health, the most recent changes to current procedural terminology, also known as CPT Coding, can be described as “exciting.”

Each year, the American Medical Association (AMA) makes changes to CPT Coding based upon the latest scientific and technological advances in medical, surgical and diagnostic services available to mainstream clinical practices. These guidelines describe medical services and procedures provided by physicians and other health care providers to create uniform communication and language among physicians’ offices and health care facilities, patients and payers.

The annual changes affect reporting and reimbursement of health care services. The accuracy and quality of code assignment in physicians’ offices directly impacts reimbursements from payers. Without utilizing the updated codes, providers will face denials of claims from payers.

As part of RWJBarnabas Health’s ongoing commitment to providing the latest coding information to the Office Managers Association, Buble hosted two seminars to help practice managers learn and effectively implement the new changes. This year’s workshops highlighted 148 new codes, 81 deleted codes and 498 revised codes included as part of the 2017 CPT Coding updates.

Among the most noteworthy, according to Buble, are the codes that address telemedicine.

“In general, many of the changes this year speak to the advancements in technology and how it is being used to provide medicine,” says Buble. “CPT Coding is keeping pace with changes in technology and changing times.”

Jean Buble, R.N., C.P.C, Vice President of Case Management and Health Information Management at RWJBarnabas Health reviews this year’s changes to CPT Coding.

Jean Buble with OMA members at one of the recent CPT Coding Update workshops.
Staying Healthy at Work

Most Americans spend a significant portion of their waking hours at work. The environment and habits developed in the office can have a profound impact on the life and health of employees. For example, recent research has linked excessive sitting with a short lifespan and an increased risk for heart disease, diabetes and some cancers.

Healthy habits shouldn’t stop when you enter your office. Through small, mindful steps, you can stay healthy inside and outside of the office.

1. **Get moving.** Exercise is key to staying healthy and in shape. Take a short walk at lunch time to burn calories and get away from your desk for a mental break. Rainy weather? Take a few trips up and down the stairs to get blood moving.

2. **Drink enough water.** Staying hydrated has big benefits for health. In addition to fighting a host of ailments, including high blood pressure, allergies and asthma, drinking water can help combat fatigue, which is especially helpful during the dreaded afternoon lull. Timers and apps for cell phones and internet browsers are available to keep track of your water intake and remind you when it’s time for your next sip.

3. **Trade the candy bowl for a fruit bowl.** Colleagues’ birthdays and other workplace goodies can cause problems for even the healthiest eater. Rather than hitting a co-worker’s candy dish, reach for a piece of fruit or replace the candy dish with a bowl of apples, pears or plums.

4. **Take a break.** Stress – over the long-term or short-term – can seriously hamper attempts to get healthy. A few minutes spent outdoors or away from the task at hand can provide the necessary time needed to recharge and refocus.

5. **Clean your desk.** It may be a no-brainer, but just like door handles and light switches, your computer keyboard, mouse, phone – even the copy machine – can be home to all kinds of germs. Make sure all surfaces are clean to avoid spreading viruses during cold season and all year long.

CPT Coding continued

“We’re beginning to see a structure put in place to allow for the ability to provide telemedicine,” she says. “There are still many questions that need answers, including how a physician can complete a hands-on exam, but it’s exciting that we’re starting to see the AMA lay the groundwork for this service.”

The requisites for utilizing the new telemedicine modifier include providing the service via both real-time interactive audio and video. However, Buble notes it’s still unclear if and how providers will be paid for providing telemedicine services.

Additionally, surgical codes saw a number of changes, with many relating to cardiology.

“As in years past, we’re seeing these updates because there have been many advancements in cardiac care.

Services are more interventional and less invasive so the codes must be revised to reflect that,” says Buble.

While the presentations focused on the CPT Coding updates, Buble received questions from attendees relating to the status of patients and billing for observation services while in the hospital.

“Ensuring patients are in the right status when receiving treatment has a direct impact on how billing is done, and can ultimately impact patients,” she says. “If a provider believes he or she admitted a patient but the status was identified incorrectly, billing will be an issue.”

According to Buble, the proper status of patients is more important than ever with the new Medicare Outpatient Observation Notice, also known as MOON, which requires hospitals to notify patients who receive observation services as outpatients for more than 24 hours.

“Not only do we now need to notify a patient, but under observation, a patient’s deductible and co-pay may kick in and they may end up with more out-of-pocket costs. Patients cannot be arbitrarily placed into observation,” she stressed.

“Understanding the impact of these new regulations is of the utmost importance.”

**OMA members have access to a wide variety of training opportunities on CPT Coding and more through the association. For presentation materials or more information on the CPT Coding Program please visit www.barnabashealthofficemanagers.org.**
Unconscious bias, also known as implicit bias, is a fact of life. Unlike conscious or explicit bias, in which an individual knowingly has beliefs about social and identity groups, unconscious bias are thoughts and feelings that we are unaware of and happen outside of our control. In addition to racial bias, a number of characteristics are subject to bias, including age, gender, weight, gender identity, physical ability, religion and sexuality, among others.

Believed by researchers to have helped early humans survive – aiding in the ability to distinguish friend from foe – these quick assessments of others are influenced by our background, environment and personal experiences. But, they are also the foundation for stereotypes, prejudice and discrimination.
Addressing Unconscious continued

In health care, there is extensive evidence and research that finds unconscious bias can lead to differential treatment of patients by race, gender, weight, age, language, income and even insurance status. However, there are steps employers and organizations can take to identify and address unconscious bias.

✦ Resist the temptation to defend the stance that you are already taking on personnel moves and consider other talent selections.
✦ In your professional and personal life, build more relationships with people who are different. Get to know them or their culture. This helps to loosen “associations” that might be negative and unconscious.
✦ Create project teams that are diverse by design.
✦ Frequently speak about diversity and inclusion, but more importantly act, so that those in your office will know that it is important to you.
✦ Challenge others who might be making knee-jerk selections in hiring so that they can think differently before concluding.
✦ Constantly challenge yourself to see if your assumptions about someone or a situation might be incorrect. This will often only be seen by asking for honest feedback from a diverse set of people.

To learn more about any unconscious bias you may have, check out Project Implicit, a non-profit organization and collaboration between researchers interested in implicit social cognition. Project Implicit offers a number of tests at https://implicit.harvard.edu/implicit/takeatest.html. You can take many of the Implicit Association Tests (IATs), but understand that the data might not make sense because it represents things operating in the unconscious.