

# BEST

# Practice

A PUBLICATION FOR PHYSICIANS' OFFICE ADMINISTRATORS AND STAFF

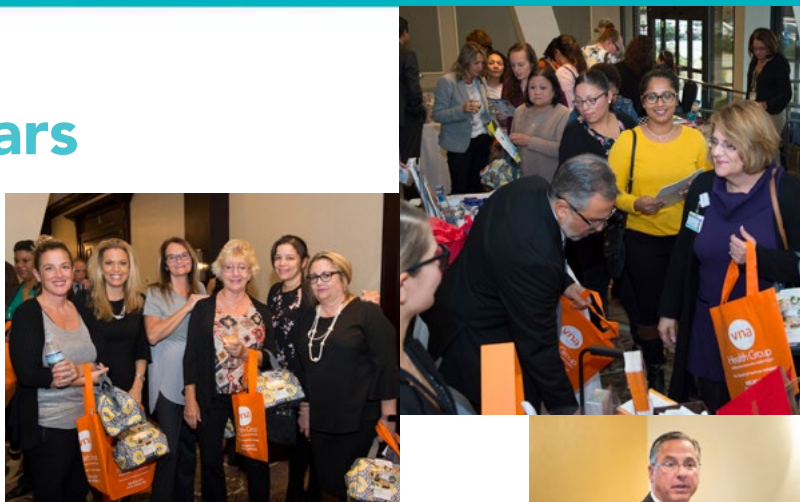
## OMA Celebrates 12 Years

Twelve years of celebrations were commemorated during the RWJBarnabas Health Annual Office Managers Association gathering this year. With more than 200 members in attendance, guests reminisced about a return to the inaugural gathering location of the first OMA event that took place at the same venue, the APA Hotel Woodbridge, which had operated under different ownership. OMA members also networked with their peers and corporate leadership, enjoyed good food and learned to not only survive, but thrive in work and life, courtesy of the high-energy, uncommonly funny musical act, The Water Coolers.

Alyssa Ruby-Mako, Regional Director, Physician Relations, RWJBarnabas Health kicked off the evening's festivities with a recap of the nearly 50 programs held this year, thanks to the OMA's efforts, including a newly introduced Meet the Insurance Reps program for the Northern Region and an Active Shooter presentation in the Southern Region. Both programs were met with overwhelming success with plans to expand next year. See page three for more information on the Active Shooter presentation.

The festivities continued with Tom Biga, President of Hospital Division, RWJBarnabas Health. Biga reflected on the exciting milestones achieved by RWJBarnabas Health this past year, especially the recently announced public-private partnership with Rutgers University to develop a widely renowned academic health system that drives medical innovations and groundbreaking clinical research to influence outcomes across the nation. Most notable to the OMA audience was Biga's messaging about the formation of a comprehensive medical group – the largest in the country – comprised of employed physicians and other care professionals from both organizations that will have a unified clinical mission that complements high-quality standards of teaching and research excellence.

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# Ask the Practice Management Expert

"Ask The Experts" is a question-and-answer forum featuring leading practice management experts.

**Q: The implementation of Electronic Health Records (EHR) began in earnest approximately five years ago. Why did your office start to use them?**

**A:** We have been using an EHR-centered system since July 2013 to communicate with patients (via a secure patient portal) and send reports to referring physicians. We customized commercially available software for insurance billing and patient scheduling system and added in our own new-patient questionnaire and other allergy-specific forms. Our EHR-based software enables us to submit prescriptions, order blood work, and receive lab reports electronically. Our software also has a vaccine inventory which reports to the State (New Jersey Immunization Information System) each time the physician gives a vaccination which has helped us meet the government's criteria for Meaningful Use of EHR.

**Q: Are there specific components of EHR-centered system your office utilizes that made the transition from paper to digital worth it?**

**A:** Converting our old office forms to writable-PDFs helped ease the transition from paper to EHR. Our EHR records now include everything from school letters to breathing test results. All are available on the patient portal. The biggest asset of our EHR system is the patient portal for everything from messages and appointments to printing immunization records and school forms. The portal is also available to new patients, so they can complete most of the paperwork before coming to the office – a time saver for the patient as well as our staff. The biggest challenge is getting patients to sign on for the first time. Once they sign in and see what is available, they are amazed.

**Q: What are some of the challenges keeping the EHR current and organized?**

**A:** The EHR has a health maintenance section which allows us to update vital signs like height, weight and blood pressure; record dates of mammograms, colonoscopies, pneumonia and flu shots; and screen for depression and fall risk. The doctor also uploads recent health-related articles for educational purposes. The success of the EHR is dependent on our ability to keep the information current.

**Q: Over the years, you have enhanced your EHR system to assist in compliance with PQRS/MIPs, the MACRA dashboard, state registry for vaccinations, etc. Can you explain further what you did and why?**

**A:** Receiving a weekly 'report card' was invaluable for meeting the requirements of PQRS, Meaningful Use and MIPS. The report card monitored over a dozen aspects of practice management and notified us immediately of any needed improvement. Each day our system generates a list of any information we need to gather from patients coming in that day. For example, if they need a depression screen, we add the appropriate questionnaire into the system. Most forms are designed for the non-typist—selecting answers. We can then bill for this service.

**Q: How does the TCPI keep your patients engaged in their healthcare?**

**A:** Two years ago, we started working with NJII (New Jersey Innovation Institute) on TCPI (Transforming Clinical Practice Initiative). NJII required us to write up job descriptions and office referral policies, administer employee job satisfaction and patient satisfaction surveys, design a practice workflow diagram and have "staff huddles" to discuss any office problems we need to make time to discuss. We now have many helpful community resources for our patients through this program:

- **Ask Aunt Berta** which helps with community resources
- **Ask Me 3** helps the patient ask questions about their own healthcare
- **Choosing Wisely** brings them to resources for their healthcare
- **Help123** which gives help with community resources.

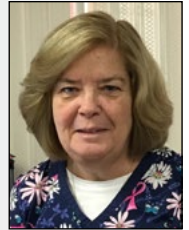
These items are uploaded into our system and can be printed in their encounters and are available on the portal in both English and Spanish. They are also posted for all to see in the office.

**Q: Do the benefits of having a digital system outweigh the risks, especially during the transition period?**

**A:** It amazes me how much we can now do with our EHR system. I have been with this busy, solo practice for over 25 years and have used a few different systems over those years – starting in 1991 with a paper schedule, super bills, and prescriptions. Yes, we still have paper charts but they remain in the cabinets (no more filing!) until the internet fails us. Having an EHR is definitely an Improvement Activity in itself. Every day there is something new we can add to better our practice and pass on to our patients.

## Our Expert

**Mary Ellen Fabula**  
**Office Manager for**  
**Susan Hagen Morrison,**  
**M.D., boarded in Allergy,**  
**Immunology and Pediatric**  
**Infectious Diseases**



A valued office leader for the past 27 years, Mary Ellen Fabula joined Dr. Susan Hagen Morrison's office staff in 1991. In her role as office manager, Mary Ellen is responsible for overseeing the EHR System, office billing, insurance credentialing, staff training, coordinating and submitting MIPS statistics, ordering supplies/vaccines, and monitoring the patient portal. Prior to joining Dr. Morrison, Mary Ellen spent 14 years as an administrative assistant at the Federal Reserve Bank of New York. The wife of a Jersey City police officer for 39 years, Mary Ellen is devoted to her two children and her precious granddaughter.

# For What It's Worth

How would you respond if an armed individual entered your office? This was the very question posed to more than 75 attendees on October 10 as the RWJBarnabas Health Office Managers Association, Southern Region, hosted an Active Shooter Presentation for its members. As OMA members settled in, the opening lines of Buffalo Springfield's iconic protest anthem of the 1960s "For What's It's Worth" was played to get the audience thinking about situational awareness:

**There's something happening here  
But what it is ain't exactly clear  
There's a man with a gun over there  
Telling me I got to beware  
I think it's time we stop  
Children, what's that sound  
Everybody look – what's going down?**

Former Chief of Detectives for the City of Paterson and Former Advisor to the Special Agent in Charge of the Drug Enforcement Agency (DEA) James Buckley, along with retired FBI agents James M. Maxwell and William J. Tonkin, both retired FBI agents with over 30 years of service, emphasized the importance of having a plan. They asked attendees how well do you know your facility, where is the exit route, where will you hide and how will you protect yourself?

The FBI defines an active shooter event as one in which one or more persons actively engages in killing or attempting to kill people in a populated area. The FBI reports the number of active shooter events across the U.S. has grown rising from 6.4 events per year from 2000 to 2006 to 16.4 events per year from 2007 to 2013. Within that 13-year period, four (2.5%) of the shooting events occurred in a health care setting, according to a 2014 analysis by Texas State University and the FBI.

*Continued from Cover Story.*

Biga credited the OMA audience by stating, "It is important that we have a positive and compassionate presence in our communities. Much of that presence we owe to you. You are all ambassadors for us and play a vital role in our ability to help the individuals in the communities we serve. You are the ones who drive our messages and initiatives forward and share it with our patients on a community level."

After the speeches, the evening transitioned into some lighthearted fun including an original rendition of "I Will Survive," performed by The Water Coolers. OMA members, Jessica Chiu and Kelley Fairbairn also joined The Water Coolers on stage. See page four for the complete lyrics of "We Will Survive" or have a listen by visiting [www.rwjbh.org/omaiwillsurvive](http://www.rwjbh.org/omaiwillsurvive).

In her closing remarks, Ruby-Mako reminded the audience, "Remember, this room is filled with incredible women and men who work every day under enormous pressure to stay in the forefront of healthcare's changing regulations, advancements in technology and you have all survived. I am confident you will continue to survive and we are here to help. Know that all of us at RWJBarnabas Health support you and will do whatever we can to partner with you in providing the very best healthcare to those we serve."

"By nature, the healthcare profession is open and caring which can lead to an increased vulnerability," added Buckley. "The lack of screening due to the overall nature of servicing all people is an inherent weakness but one that can be managed with proper planning including an emergency response and action plan."

The U.S. Department of Homeland Security suggests, and was re-emphasized by the representatives from Buckley Peterson Global, Inc., to RUN, HIDE, FIGHT:

<b>RUN</b>
<ul style="list-style-type: none"><li>- Have an escape route and plan in mind</li><li>- Leave your belongings behind</li><li>- Keep your hands visible</li></ul>
<b>HIDE</b>
<ul style="list-style-type: none"><li>- Hide in an area out of the shooter's view</li><li>- Block entry to your hiding place and lock the doors</li><li>- Silence your cell phone and/or pager</li></ul>
<b>FIGHT</b>
<ul style="list-style-type: none"><li>- As a last resort and only when your life is in imminent danger</li><li>- Attempt to incapacitate the shooter</li><li>- Act with physical aggression and throw items at the active shooter</li></ul>

"After attending the active shooter presentation and based on recent current events, we will now be scheduling an active shooter presentation for our staff, as well as, taking steps to better secure our offices and protect our employees," stated Sheryl Paton, Director of Marketing, Reproductive Science Center of New Jersey who attended the presentation with her executive director. "The presentation really made us think about what we would do in these types of situations and the importance of having some sort of plan."

While the best approach to is to run or hide until the danger has passed, Buckley Peterson Global, Inc. provided de-escalation tips as a last resort. They include:

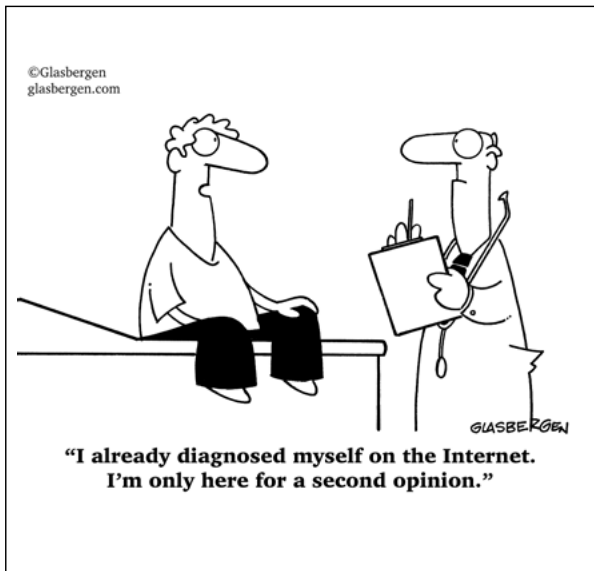
- Be empathetic and non-judgmental
- Respect personal space (1.5-3 feet)
- Use non-threatening, non-verbals and keep tone neutral
- Avoid overreacting – remain calm, rational and professional
- Focus on feelings, listen carefully for real message
- Ignore challenging questions and bring focus back to working together to solve problems
- Set limits and be clear by simply speaking and offering positive choice first
- Choose wisely what you insist upon, if possible offer options and flexibility
- Allow silence for reflection – silence can be a powerful communication tool
- Allow time for decisions, stress rises when rushed so allowing time brings calm

Nearly 50 years later, in these uncertain times, Buffalo Springfield's words still ring true.

**We better stop, hey, what's that sound  
Everybody look what's going down**

## Physician Management Team

- ❖ **Alyssa Ruby-Mako**  
732.272.7772  
Monmouth Medical Center  
Monmouth Medical Center,  
Southern Campus
- ❖ **Ashley Esposito**  
732.923.7523  
Monmouth Medical Center  
Monmouth Medical Center,  
Southern Campus
- ❖ **Nicole Tassinaro**  
848.303.0897  
Monmouth Medical Center  
Monmouth Medical Center,  
Southern Campus
- ❖ **Shari Beirne**  
732.914.3805  
Barnabas Health Behavioral  
Health Network
- ❖ **Fran Monteleone**  
973.450.2997  
Clara Maass Medical Center
- ❖ **Lindsay DiGiacomo**  
201.400.4106  
Saint Barnabas Medical Center
- ❖ **Diane Sirna-Miller**  
862.400.6709  
Barnabas Health Ambulatory  
Care Center & North Wing
- ❖ **Noelle Roller**  
973.985.0351  
Saint Barnabas Medical Center
- ❖ **Jamie Caamano**  
201.247.9539  
Barnabas Health Ambulatory Care Center
- ❖ **Corin Andrade**  
862.210.0123  
Saint Barnabas Medical Center
- ❖ **Brian Case**  
732.557.3427  
Community Medical Center
- ❖ **Holly St. Clair**  
732.232.6715  
Community Medical Center



**Members, let us know what you would like to see in  
upcoming issues of Best Practice by calling 1.888.724.7123.**

*Continued from cover story.*

**WE WILL SURVIVE  
(I WILL SURVIVE)  
PARODY LYRICS BY RAY BOKHOUR  
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AT FIRST I WAS AFRAID, I WAS PETRIFIED  
I THOUGHT THAT ALL THESE REGULATIONS HAD OUR  
BRAINS ALL FRIED  
YES, SPENDING ALL THOSE PRECIOUS HOURS DOING  
PAPERWORK'S THE WORST  
BUT WE WON'T CRUMBLE, WE'RE GONNA PUT OUR  
PATIENTS FIRST

BECAUSE WE CARE, THAT'S WHAT WE DO  
WE DEAL WITH ALL THESE FORMS AND FIGURES  
AND THE OSHA HEADACHES, TOO  
BUT IT'S ALL FOR JUST ONE THING  
THE HEALTH AND HAPPINESS WE BRING  
AND WHILE WE'RE AT IT, IF WE'RE CAREFUL, TRY LIKE  
HECK TO NOT GET DINGED

BECAUSE WE CARE, THAT'S WHO WE ARE  
WE GO TO MEETING AFTER MEETING, WE'LL DO  
A VERY WEBINAR  
CPT CODING IS A DRAIN  
IT DOES A NUMBER ON YOUR BRAIN  
IF YOU MISS ONE LITTLE DIGIT  
YOU MIGHT SAY SOMETHING PROFANE!

BUT STILL WE KNOW  
WE WILL SURVIVE  
OH, AS LONG AS THEIR INSURANCE PAYS,  
OUR BUSINESSES WILL THRIVE  
WE'RE THE RWJBARNABAS HEALTH O.M.A.  
AND WE'LL SURVIVE  
WE WILL SURVIVE,

IT TOOK ALL THE STRENGTH I HAD NOT TO FALL APART  
WHEN THEY TOLD ME 'BOUT THE FACEBOOK PAGE  
WE HAD TO START  
THEY TOLD ME GET AN ONLINE PRESENCE THAT'LL  
REALLY BE A HELP  
BUT NOW I'M ALWAYS ON THE LOOKOUT FOR ANY  
BAD REVIEWS ON YELP

BUT HERE WE ARE, YEAH WE DON'T STOP  
THERE MAY BE CRAZY ALL AROUND BUT WE KEEP  
PATIENTS UP ON TOP  
AND WHILE WE ALL MUST COME TO GRIPS  
WITH SUBMITTING PERFORMANCE DATA ON MIPS  
AT LEAST WE KNOW WE MAKE A DIFFERENCE AND WE  
WON'T LET OUR STANDARDS SLIP

LET'S TELL THE WORLD THAT WE'RE THE BEST  
WE'LL TELL THE WHOLE WORLD  
BUT PLEASE LET'S ALL USE TIGER TEXT  
AND WHILE WE DOCUMENT EACH TINY MOVE WE MAKE  
WE HELP OUR PATIENTS  
CUZ WE DO IT FOR THEIR SAKE

BUT STILL WE KNOW

WE WILL SURVIVE

OH, AS LONG AS THERE'S NO POP-UP INSPECTIONS,  
WE CAN LEAVE BY FIVE

WE'RE THE RWJBARNABAS HEALTH O.M.A.  
AND WE'LL SURVIVE  
WE WILL SURVIVE  
WE WILL SURVIVE