



A Publication for **Barnabas Health** Physicians' Office Administrators and Staff

BEST Practice

Annual Coding Seminars Highlight Changes to 2015 CPT

More than 300 office managers and practice administrators recently attended two workshops on the 2015 CPT code changes.

The programs, covering changes mandated by the American Medical Association to its current procedural terminology (CPT), help practice managers learn and effectively implement the year's changes.

CPT refers to the set of codes, descriptions and guidelines set forth by the AMA to describe medical services and procedures provided by physicians and other health care providers to create uniform communication among physicians' offices and health care facilities, patients and payers. The changes each year affect reporting and reimbursements. The accuracy and quality of code assignment in physicians' offices directly impacts reimbursements from payers.

Presented by Jean Buble, R.N., C.P.C., Vice President of Case Management and Health Information Management at Barnabas Health, the seminar highlighted the 266 new codes, 147 deleted codes and 129 revised codes outlined in this year's update.

"While it may look like there are more changes than in the past few years, the most changes this year are in the Surgery section and when broken down, individual specialties and subspecialties have a limited number of changes," says Buble.

In addition to changes in the Surgery section, the Pathology and Laboratory section saw a significant number of changes as well.

"The Path/Lab section underwent a lot of changes this year. While doctors will need to have some knowledge of these changes to order tests, they have a much larger impact on labs," says Buble.

Some changes for 2015 have a further reaching impact. For example, for the first time in the Evaluation and Management section, health care professionals are now directed to inquire about a patient's current or past military history as part of the social history element.

"A military history can be extremely important in determining what is going on with someone's physical and mental health," says Buble.

Additional wide-reaching changes in the Evaluation and Management section of this year's update are the addition of two new advanced care planning codes, the revision of prenatal guidance codes and the addition of chronic care management service codes. Significant changes to the Radiology section concern breast imaging and the bundling of radiology and radiation oncology code pairs identified as being performed together 75 percent of the time.

Overall, the CPT changes for the everyday doctor are not overwhelming

this year," says Buble. "The primary concern for many attendees continues to be the anticipated conversion to ICD-10, as well as questions on denials both related to coding and in general."

Buble reminds all of those involved in the coding process that is important to ensure the accuracy and quality of coding through verifying the intent of the code by referring to related guidelines and coding resources.

"The AMA CPT Assistant and a number of other publications resulting from collaborative efforts of the AMA with the medical specialty societies, such as Clinical Examples in Radiology, can be helpful in working with this year's updates," says Buble.

For presentation materials or more information on the CPT Coding Program please visit www.barnabashealthofficemanagers.org.



Jean Buble, R.N., C.P.C., Vice President of Case Management and Health Information Management at Barnabas Health

Dealing with Difficult Patients

Every aspect of the health care industry is different; however, there is one aspect that does not change – the patient. While most patients are appreciative of the work done by physicians, nurses and staff members, there are patients that may be – for a number of reasons – a bit difficult.

“It’s important to remember that most doctor visits are not happy visits,” says Jim Romer, director of emergency psychiatric services at Monmouth Medical Center. “Patients may be anxious about a diagnosis or about the cost of the visit. With this heightened stress level, personnel in medical offices are often on the front line.”

In preparing for the likelihood of difficult patients, whether they’re upset or dealing with mental illness, Romer advises all physicians and office managers to take a step back and create a safety plan.

“The first consideration when a patient is acting out of control is always safety – the safety of the patient, the safety of employees dealing with the patient and the safety of other patients in the office,” he says. “It’s important to think about what could happen, know who to call and prepare for the worst-case scenario.”

For patients who are upset at a long wait time or annoyed with news on their insurance, Romer recommends diffusing the situation by recalling basic customer service skills.

“There is the saying about humans having two ears and one mouth for a reason – to listen,” says Romer. “The key to de-escalating any situation is listening skills. Be patient and acknowledge the patient’s feelings,

explain why the doctor is delayed or whatever the holdup may be, but know that no magic answer exists that will appease the patient immediately. However, they should feel like they have been taken seriously and respected.”

While listening to a patient vent their feelings is a recommended tactic in calming a situation, should the patient cross the line and begin cursing, using racial epithets or making threats, office employees should be prepared to ask the patient to leave or even call 911 for police intervention, especially if safety becomes a concern.

In instances when the patient is acting out, behaving erratically or believed to be depressed, suicidal or is making threats to harm himself or others, Romer recommends contacting the county’s Crisis Screening Center and 911 if necessary.

“Every office should become familiar with the phone number for their local screening center,” says Romer. “Any person concerned about another’s mental state can call 24/7 for help.”

For example, in Monmouth County when an office manager calls Monmouth Medical Center, the county’s primary screening center, representatives will come to the medical office or visit the individual at their home to evaluate the patient and determine the appropriate services to get them help.

Romer recommends that in addition to creating a safety plan, all office administrators should contact their local screening centers to see how they can support the office, should the need arise.

For a list of the New Jersey’s Crisis/Screening Centers by county, visit <http://www.state.nj.us/humanservices/dmhs/services/centers/>. For any information about the Barnabas Health Behavioral Health Network programs and services call 1.800.300.0628.

What You Don’t Know About Medical Data Security

Earlier this year, Data Privacy Day was recognized. The international effort centered on “Respecting Privacy, Safeguarding Data and Enabling Trust,” occurs each year on January 28. Protecting the privacy of your patient’s data is an important job. Believe it or not, health care data and medical information is a prime target for cyber criminals and hackers.

A medical record is worth approximately 10 to 20 times more than a personal credit card number on the black market. The data for sale can include names, birth dates, insurance policy numbers, diagnosis codes and billing information, which can then be used for medical fraud. Fraudsters use this information to create fake IDs to buy medical equipment or drugs that can be resold. They may also combine a patient number with a false provider number and file made up claims with insurers. Barnabas Health as well as physician offices must take precautions in protecting our patients’ information to prevent these types of attacks.

What you can do:

- ▶ Use strong passwords for your accounts so they may not be easily guessed by hackers. A strong password contains at least 8 characters, with a mix of uppercase and lowercase letters, numbers and symbols.
- ▶ Keep your usernames and passwords confidential.
- ▶ Be cautious about discussing patient information in public areas or where you may be easily overheard.
- ▶ Always lock your computer screen when walking away from your work space.
- ▶ Be diligent about cyber security and privacy tips and updates so you can protect our patients’ privacy and safeguard your physician network from cyber-attacks.

Ask the Practice Management Expert

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

Q: Why is it important for a physician practice, like Bayside Orthopedics, to embrace technology?

A: I started with Dr. Larsen years ago and when he first opened Bayside Orthopedics, it was with the intent of incorporating electronic medical records and other means of technology into the practice. Since then, utilizing technology has been an important component of the practice's culture, especially as we work toward becoming completely paperless. When an office decides to incorporate more technology, it's important to be open to the experience and try new things. Every practice is unique and can use various forms of technology differently.

Q: In addition to standard technologies and programs found in a physician's office, you're using a number of free or inexpensive programs to increase efficiency in the office. Can you share a little bit more about the programs you're using?

A: We use a number of free and inexpensive programs in the office. Some of these include Google Calendars to provide reminders to Dr. Larsen or to employees to complete tasks. I can also send out reminders via text messages to per-diem employees to remind them of work schedules. Many people are unaware that you can turn cell phone numbers into email addresses simply by adding an extension to the end of the phone number. For example, you can email a Verizon cell phone number by adding "@vtext.com."

Additionally, programs like Adobe or NitroPDF allow us to complete a variety of forms and paperwork electronically. This allows us to fill out forms faster, and it's especially helpful with disability forms that we need to complete repeatedly. Flash Code, the Internet-based coding program we use, enables us to easily see what codes can be used together. Everyone in the office also uses Hot Keyboard, which allows you to set macros for commonly used words or phrases so you can type phrases or even a full paragraph with just one keystroke. Dr. Larsen regularly uses Hot Keyboard in his dictation to eliminate keystrokes.

Q: How does your staff feel about these programs? Do they embrace the technology or do you get resistance?

A: Our staff fully embraces all of the technology we use. If I install a program on one person's computer, other staff members end up requesting it be installed on their computer. New employees are usually surprised at what we can do with some of the programs, how quickly we can complete forms with programs that remember frequently used keystrokes. Even our long-term staff members really embrace the technology – they want to learn more.

Q: Are there other technologies that you use that may be a little out-of-the norm for a physician's practice?

A: Yes, we really use technology in every avenue that we can. We now take credit cards via an iPad simply by using a portable credit card reader and app. We have our computer network set up in such a way so that everything is scanned to a shared hard drive that every employee can access. A staff member can go to any computer in the office and find the information they are looking for on the drive – this is especially helpful with reference materials and cuts down on miscellaneous papers floating around. Additionally, all of our staff members have full access to the Internet. There are so many resources available via the Internet, especially when we have billing or coding questions or HIPAA changes. We actually have a low number of denials – likely due to the fact that we can check to ensure we are using the correct codes.

Our Expert

*Iris Roseman,
Administrator,
Bayside
Orthopedics*

Iris Roseman has served as administrator for more than 20 years and has significant experience in

ensuring that all aspects of a physician's practice run smoothly. A veteran of the health care field, Iris has extensive expertise in managing all aspects of a medical practice, from billing and transcribing to providing technical support for the office software and computers. Over the years, she has consulted for a number of offices to help increase productivity by utilizing technologies and software. Additionally, Iris is a long-standing member of the Barnabas Health Office Managers Association and the Office Managers Advisory Council at Community Medical Center.



Have a practice management question? Ask an expert! Call us at 1.888.724.7123.

Barnabas Health

95 Old Short Hills Road, West Orange, New Jersey 07052

Physician Management Team

- ❖ **Judy Carolan**
973.322.7345
Barnabas Health Ambulatory
Care Center
- ❖ **Sheana Ditri**
732.557.7125
Barnabas Health
Behavioral Health Center
- ❖ **Shari Beirne**
732.914.3805
Barnabas Health Behavioral
Health Network
- ❖ **Fran Monteleone**
973.450.2997
Clara Maass Medical Center
- ❖ **Brian Case**
732.557.3427
Community Medical Center
- ❖ **Karen Starr-Brady**
732.557.8161
Community Medical Center
- ❖ **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
- ❖ **Kristine Field**
862.345.4488
Home Care and Hospice
- ❖ **Kimberly Tennant**
973.322.4927
Home Care and Hospice
- ❖ **Dina Palmisano**
973.322.9942
Saint Barnabas Medical Center
- ❖ **Elysha Sodhi, MHA**
201.912.5165
Jersey City Medical Center

Outpatient Procedure Prescription Checklist

Ensure an outstanding experience when visiting a Barnabas Health facility for an outpatient procedure by making sure prescriptions are completed correctly.

The following information must be included and legible on all prescriptions for outpatient procedures:

State of New Jersey
PRESCRIPTION BLANK

FACILITY NAME
DOCTOR
SPECIALTY
STREET • CITY STATE ZIP
PHONE
NPI #

LICENSE # _____ DEA # _____
IF PRESCRIPTION IS WRITTEN AT ALTERNATE PRACTICE SITE, CHECK HERE ☐
AND PRINT ALTERNATE ADDRESS AND TELEPHONE NUMBER ON REVERSE SIDE

PATIENT _____ D.O.B. _____
ADDRESS _____ DATE _____

Rx

SAMPLE

This area should include:

- Order description
- Sign, symptoms or diagnosis
- Diagnosis code

Substitution Permissible _____ DO NOT SUBSTITUTE _____
DO NOT REFILL _____
REFILL _____ TIMES

SIGNATURE OF PRESCRIBER _____

Use a separate form for each controlled substance prescription
THEFT, UNAUTHORIZED POSSESSION AND/OR USE OF THIS FORM INCLUDING ALTERATIONS OR FORGE, ARE CRIMES PUNISHABLE BY LAW

- ▶ Patient's legal name
- ▶ Patient's date of birth
- ▶ Prescription order date
- ▶ Order description
- ▶ Signs, symptoms or diagnosis
- ▶ ICD 9 diagnosis code -
Beginning October 1, 2015,
physicians must use an
ICD 10 code
- ▶ Valid prescriber's signature -
Signature stamps and typed
signatures are not acceptable



BEST Practice

© Randy Glasbergen
glasbergen.com



"We're implementing new security standards in the office, so don't forget to use the ecret-say ode-cay!"

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