

## Putting a Face With a Name

### An Inside Look at the "Meet Your Insurance Rep" Fair

There is no greater frustration for the billing departments of physicians' offices than submitting paperwork to the insurance company only to be told that additional documentation is needed, the procedure codes are wrong or even worse, the claim has been denied. For the past five years, the RWJBarnabas Health's Office Managers Association (OMA) has taken steps to help make this process a bit easier, by putting a face to a name of the insurance representative and building mutually beneficial relationships.

The RWJBH Office Managers Association "Meet Your Insurance Reps" Fairs at Jack Baker's Lobster Shanty and the Cedar Hill Golf & Country Club included representatives from AmeriHealth, Cigna, Evicore, Horizon Blue Cross Blue Shield, Horizon NJ Health, Multiplan, Oxford, Qualcare, UnitedHealthcare Community Plan and UnitedHealthcare. Nearly 200 RWJBH OMA members had the opportunity to speak with insurance representatives on a one-on-one basis, leave behind materials for future conversations and schedule additional



RWJBH staff were also on hand to answer any questions from OMA members.

time to discuss specific cases, if needed. In addition, staff from RWJBarnabas Health, including representatives from Surgical Services, Behavioral Health, Breast Center, Sleep Lab, Radiology, Pathology and Cardiology were also on hand to answer any questions from OMA members or the insurance companies.

As a first-time attendee, Carmela Fleischman, a medical assistant for Dr. Richard Pizzano and Dr. Donato Colavita, found the event extremely beneficial. "My role is to serve as the patient advocate with the insurance companies so the opportunity to meet someone in person rather than just talking to them over the phone or through a computer screen is invaluable. We need to build relationships with the insurance companies, so that we can provide a better understanding of our doctors' philosophies, why they order the tests that they do and make sure we are all on the same page when it comes to patient care. I welcome having these events."

The "Meet Your Insurance Rep" Fair was an initiative suggested by key members of some of the local Office Managers Advisory Councils and implemented five years ago in the southern part of the state. The Fair was introduced this year in the north because of how well it had been received and the mutual benefit to both the insurance companies and physicians' offices.

"With all the technological advances in healthcare, it is easy to do most of your work on the computer or the telephone limiting the opportunities for in-person interaction," said Alyssa Mako-Ruby, Regional Director, Physician Relations.



Nearly 200 OMA members attended the "Meet the Insurance Rep" fairs.

"The ability to meet face-to-face, find common interests and build a rapport between the insurance companies and the physicians' office staff is invaluable for future communication."

Margarida Pereira, a Senior Provider Advocate for UnitedHealthcare, added, "I have attended a number of "Meet Your Insurance Rep" Fairs over the years and they all have been a great success. The office managers can ask questions and provide feedback on their experiences with UnitedHealthcare. We provide education on products, policies, tool and resources that are available to help make working with UnitedHealthcare a more efficient experience. It's also an opportunity for UnitedHealthcare to share best practices and continue to build collaborative relationships with the provider community."

# Ask the Practice Management Expert

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

**Q: What are some of the traditional benefits offered to employees in physicians' offices and what do you offer?**

**A:** University Urology Associates of New Jersey offers several "traditional" benefits including health, dental, and vision insurance (after a brief waiting period), two weeks vacation with increased time after three years as well as time off for all statutory holidays. What makes our practice a bit unique is some of the additional benefits offered to our employees like a 401k plan, bereavement leave, employee payroll advances, uniform expenses and our recently implemented tuition reimbursement plan for those who want to further their education in the medical field.

**Q: As hospitals are trying to actively recruit ancillary and support staff, what can individual practices do, aside from increasing salaries, to make them more attractive for employment?**

**A:** Hospitals have unique advantages that afford them the ability to provide higher pay scales and, as a result, individual practices often times have a difficult time competing. With the increased workforce, hospitals are able to offer attractive benefits like childcare assistance and flexible hours. That being said, we have found that with the benefits package we offer and creating a culture that favors quality of life over profitability, we are able to attract high-caliber employees that are emotionally invested in our practice. While we may not have the luxury to work alternate work schedules like hospital employees do, by allowing our employees the opportunity to grieve without worrying about missing a day of work, or an abbreviated schedule to attend a child's school function, we breed loyalty. Employees will never forget how their employer made them feel when taking into account life events over the bottom line.

**Q: By offering additional benefits do you find that employees are likely to stay longer and/or work harder?**

**A:** I believe that our employee retention rates are higher than some other offices because of the culture we have created. Simply put, happy employees will think twice before leaving.

**Q: High staff turnover in offices can have significant financial implications? Does the added costs of these enhanced benefits off-set the time and productivity loss when a staff member resigns?**

**A:** Like most medical practices, there is a big learning curve in our office to reach "full stride". I have calculated the cost of benefits, even the additional costs like tuition reimbursement and 401k plans, and I have found that in our case benefit costs are 15 to 20 percent lower than that of a revolving door of employees which would require costs associated with recruitment, training and assimilation.

**Q: The importance of employee retention is even more critical now due to the looming shortage of healthcare workers. Can providing added benefits have a ripple effect in attracting new employees and retaining current staff?**

**A:** Showing individuals that they are valued and integral to the overall success of the office are the keys to attracting and retaining employees. Aside from the benefits we have discussed, we also try to create an inclusive environment. I feel that employees need to feel that they are part of something bigger than themselves. Simple acts like asking employees their opinion on office policies goes a tremendous way in not only gaining useful information, but also promoting overall pride in the workplace.

**Q: Is there any advice that you would give to Office Managers who may be in smaller practices or not have the resources to provide added benefits like tuition reimbursement, etc.?**

**A:** The size of the company or the resources available should have little effect on office culture. I feel the most important factor in retention is the office culture and that the Office Manager should serve as a leader in developing a culture of growth. Kindness and understanding are fundamental traits in being a good leader. A leader fosters achievement in those who report to them. A leader helps to guide, is approachable, and can help everyone around them feel better about solving a problem. A good leader will make every mistake and achievement a learning experience. Employees appreciate (especially those who have experienced poor managerial leadership) working in an environment that fosters growth.

## Our Expert

**Moazam "Mo" Gazi, MBA**  
Administrator, University  
Urology Associates of  
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Toms River/Freehold/Howell



Precision in the medical field is first nature to Mo Gazi, having started helping out in his physician mom's office when he was still in high school. Over the last 20 years, Mo has sharpened these management skills as an executive, consultant and administrator. He has overseen medical offices in Florida, Maryland, Indiana and now New Jersey. In addition to managing private practices, Mo has also served as the Director of Medical Management for Sierra Military Health Services, the former administrators of health services for the U.S. Department of Justice and as a Chief Administration Officer for a major IT company in Dubai. Mo is a member of several national and international organizations including the American College of Healthcare Executives.

*In Best Practices Winter 2018 issue, the OMA talked about the importance of "Attracting and Retaining Office Staff". The OMA decided to delve a little more into this topic by getting a first-hand perspective of the importance of making employees feel like they are an integral component to the overall functioning and ultimate success of the office with our expert, Mo Gazi.*



# How Safe is Your Office?

Most Sunday evenings, employees in all professions mentally prepare for the coming work week thinking about their upcoming schedule, the tasks to be accomplished and the people they will help. While thoughts of safety while at work should not be a consideration, it has become a reality for healthcare professionals who have become one of the most vulnerable groups to workplace violence and are taking steps to combat the rising statistics of incidents.

The National Institute for Occupational Safety and Health (NIOSH) defines workplace violence as “violent acts” including physical assaults and threats of assault, directed toward persons at work or on duty.” Even if no physical injury takes place, threats, abuse, hostility, harassment, and other forms of verbal violence can cause significant psychological trauma and stress – and potentially escalate to physical violence. According to the Occupational Safety and Health Administration (OSHA), from 2002 to 2013, the rate of serious workplace violence incidents (those requiring days off for an injured worker to recuperate) was more than four times greater in healthcare than in the private industry on average. OSHA states that healthcare accounts for nearly as many serious violent injuries as all other industries combined.

As a way to combat these alarming statistics, in April of 2018, the International Association of Healthcare Security and Safety (IAHSS) released new guidance that hospitals can take to better prepare their facilities for the potential of violence. While created for hospitals, these steps can also be used by physicians’ offices to help formulate their own plans. They include:

- Developing a Disruptive Patient/Patient Visitor Plan, a set of internal policies to identify and manage violent, threatening or disruptive behavior. That process may include:
  - ▶ A system of identifying risks based on specific escalating behavior and well-defined response procedures
  - ▶ Utilizing electronic health records (EHR) to flag behavior and gain historical context of a patient and their visitors
  - ▶ Deciding who within your office can initiate a flag
  - ▶ Establishing behavioral expectations with patients and visitors in the flag system
  - ▶ Identifying medical factors or other circumstances that may contribute to concerning behaviors
  - ▶ Establishing a review process to consider removing or downgrading flags with behavior changes over time

- Establishing criteria for terminating patient care due to violent or inappropriate behavior in accordance with any applicable patient rights and abandonment laws
- Changing care plans for violent or disruptive patients when terminating care is not an option. Risk mitigation options may include:
  - ▶ Changing the treatment room to remove all hazards and unnecessary equipment and furnishings
  - ▶ Implementing patient search protocols that may include metal screening or removal of patient belongings including clothing; securing and inventorying personal property
  - ▶ Increasing observation and response capabilities with additional care providers or security officers
  - ▶ Establishing ways to alert other staff members of the concern, including those without access to the patients EHR
    - ▶ Communicating and reinforcing behavioral expectations with the patient and/or patient’s family members or visitors
    - ▶ Medically-approved patient restraints
- Developing processes to restrict visitor/patient access to certain or all patients, other rooms or the entire medical office
- Creating training programs and attendance expectations with all office personnel to address the prevention, recognition, avoidance, diffusion, response and reporting of threats, acts of aggression and other behaviors of concern

It is the responsibility of the physicians, and by extension their staff, to enforce strict zero-tolerance policies against violence and create environments that discourage both physical and verbal assaults for themselves as well as for fellow patients. Staff need to feel safe – safe to come to work, safe to perform their duties and safe to report a volatile environment.

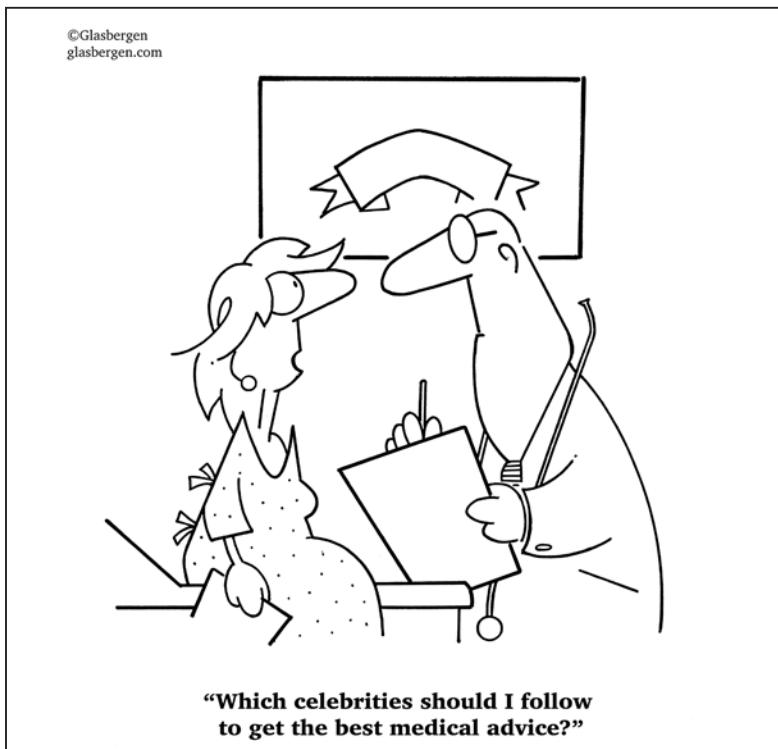
A safe environment may require some physical changes like better lighting in certain spaces and regular security patrols in areas like parking lots. Some additional tactics may be more administrative like reducing crowding and wait times, developing workplace violence response teams and policies, reviewing entry and ID procedures and having the means to call for help, if warranted.

For additional resources on mitigating workplace violence, please visit <https://www.osha.gov>, <https://www.cdc.gov/niosh/about/default.html> or <https://www.iahss.org/>.



FLAG	SUGGESTED ACTION PLAN
<p><b>Level 1</b> – Awareness for behaviors such as repeated loud cursing, verbal threats, intimidation, and precursors to violent behavior.</p>	<p>Staff should be aware and utilize healthcare facilities verbal de-escalation techniques where appropriate. Patient informed of consequences of continued inappropriate behavior.</p>
<p><b>Level 2</b> – Threat of immediate assault – physical assault, possession of a weapon on premises, other assault or physically dangerous crime on premises or significant/repeated documented verbal threats.</p>	<p>Staff alerted to heightened concerns of patient and encouraged to initiate a safe patient treatment plan. Contact immediate supervisor and/or on-site security.</p>
<p><b>Level 3</b> – Termination from Care – This flag is implemented on a case-by-case basis for higher level physical assaults, multiple assaults or other significant criminal activity.</p>	<p>Staff should refer patients attempting to make appointments to designated staff member/department. Contact on-site security or local police for patients on premises. If in emergency care setting, on-site security or local police should be notified for standby while care occurs.</p>

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## Save the Date

Thursday, November 1  
12th Annual Office Managers  
Association Celebration  
4 to 7 p.m.

**APA Hotel Woodbridge**  
120 Wood Avenue South  
Iselin, New Jersey

Cocktail/Networking Reception, including  
RWJBarnabas Health Vendor Tables  
**4 to 5 p.m.**

Followed by  
Dinner, Raffle Prizes & Entertainment

Featuring Spotlight Awards  
Entertainment of the Year

### **“The Water Coolers”**

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Take on Work and Life*