



BEST Practice

A Publication for Saint Barnabas Health Care System Physicians' Office Administrators and Staff

GO GREEN

A greener workplace can mean a lighter ecological footprint, a healthier and more productive place to work and good news for the bottom line, says Planet Green, a Web site produced by the Discovery Channel. Beginning in this issue of *Best Practice* is an ongoing series devoted to creating a low-impact workplace by opting for green office supplies, beginning with paper.

Paper is the lifeblood of many businesses, but the process of creating it is one of the most ecologically harmful things in industry. Few items in the standard office have the environmental impact of paper. The average U.S. office worker is responsible for an entire tree per year in paper use. Purchasing 100-percent post-consumer recycled fiber papers that are also chlorine free can make a difference. Compared to using virgin wood, this paper uses 44 percent less energy, produces 38 percent less greenhouse gas emissions, 41 percent less particulate emissions, 50 percent less wastewater, 49 percent less solid waste and "of course" 100 percent less wood.

There are a host of on-line office suppliers offering 100-percent recycled chlorine-free paper. To learn more, visit planetgreen.discovery.com/gogreen-work.

Annual Coding Program Spotlights CPT Changes

Changes made each year to CPT codes affect reporting and reimbursement for physicians and other health care providers, and the Saint Barnabas Health Care System is committed to providing the latest coding information to the Saint Barnabas Office Managers Association.



From left, Edna Diaz Perez, Sandra Bacai, Donna Smith and Agnes Monta review course materials during the recent CPT coding workshop.

As a part of this commitment, Jean Buble, R.N., C.P.C., a compliance expert with the Saint Barnabas Health Care System, presented her annual update of new CPT codes and the rationales for the changes during two recent Saint Barnabas Health Care System Office Managers' Association programs.

Through CPT Coding Updates held February 3 and 4, Buble brought clarity to some of the most confusing elements in

the guidelines by providing deeper insight and more hands-on practice applications of the 2010 changes. Addressing new, deleted and revised codes in anesthesia, medicine, radiology, pathology and surgery, she also provided an overview of updates to category II and III codes, as well as an evaluation and management CPT update. CPT changes have an impact on coding practices, according to Buble, who notes that it can be a daunting challenge to keep up with all of the coding changes.

"It is so important for office managers and their staff to be aware of new and revised CPT codes and guideline instructional changes, and be able to assign the appropriate codes for services provided," says Buble, who offered subsequent CPT coding workshop sessions for office managers. "Effective January 1, there are 118 new category I codes, as well as 142 that have been revised and 41 that were deleted."

Noting that there were also a host of additions, revisions and deletions to category II and III codes, she said changes include revisions made in several subsection instructional notes and that the CPT code grammar underwent changes and saw cross references added.

"Last year, instructions for the use of the CPT manual were revised to define the initial date on which application of guidelines are intended to become effective and to discourage retroactive application of revisions to the text of the CPT code book," she says. "Changes to the CPT code set are meant to be applied

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Program Launched to Help Physicians Find EHR Solution

The Saint Barnabas Health Care System has identified the opportunity to help our physician community with the selection and implementation of an electronic health record (EHR) and health information exchange solution for our physician's practices. The initiative is called the Saint Barnabas Physician Community Connect Program.

The goal of the program is to help our physicians find a meaningful, useful and beneficial EHR solution that complies with the meaningful use criteria of the American Recovery and Reinvestment Act (ARRA), allowing physicians to access up to an additional \$44,000 in Medicare reimbursement over the next four years.

To learn more about this initiative, we encourage you to visit our dedicated Web site at www.saintbarnabas.com/physicianconnect, which includes a link to subscribe to e-mailed updates about the program.

CPT Changes *continued from page 1*



Among those attending a recent CPT coding workshop hosted by the Saint Barnabas Office Managers Association are, from left, Mary Mason, Vanessa Samuels, Charlene Waddell, Joanne Gutierrez and Chris Twibill.

In fact, the definition of a consultation was updated and clarified, she said, and now reads: "A consultation is a type of evaluation and management service provided by a physician at the request of another physician or appropriate source to either recommend care for a specific condition or problem or to determine whether to accept responsibility for ongoing management of the patient's entire care or for the care of a specific condition or problem."

prospectively from the effective date, which is January 1."

Beginning her presentation with a discussion of changes to the evaluation and management services section, she said extensive revisions — including 10 revised codes — were made to the guidelines for consultations and office or other outpatient consultations. In



Jean Buble, assistant vice president, compliance, for the Saint Barnabas Health Care System, leads a workshop session during the annual CPT Coding Update for the Saint Barnabas Office Managers Association.

HIPAA /Compliance Corner

Is the HITECH (Health Information Technology for Economic and Clinical Health Act) tied to HIPAA as it relates to electronic medical records (EMR)?

Yes, in the transmission of information. Encrypted PHI has become very important and helps to eliminate or reduce penalties if disclosed.

The Health Information Technology for Economic and Clinical Health Act (HITECH) is concerned with defining the requirements for being compatible with the security and privacy regulations of the Privacy Rule. The Privacy Rule lays down the standards that should be followed to become HIPAA-compliant but it is the HITECH Act that elaborates on the criticality of following these norms and lays down enforcement, accountability, penalty and persecution-related guidelines for those involved in sharing or accessing PHI.

The HITECH Act is committed to the cause of seeing that health care facilities

and practitioners adopting electronic medical records methodologies do so within the realm of the HIPAA Privacy Rule regulations aimed at maintaining the sanctity of PHI.

HITECH also facilitates the expansion of HIPAA standards that aid in electronic exchange of health information on a national basis to make medical care more organized and transparent. It is also concerned with putting forth incentives for covered entities that adopt Electronic Medical Records (EMR). With HITECH setting new benchmarks for clarifying the requirements to become HIPAA-compliant, those who choose to be non-compliant have become more vulnerable to civil penalties. Further, non-compliance with HIPAA Privacy Rule almost, entirely excludes covered entities

from receiving any kind of financial incentive for adopting EMR.

The HITECH Act can be understood as a regulatory measure that has been introduced in anticipation of the sudden rise in the volume of health care practices adopting EMRs due to lucrative financial incentives offered by the ARRA. Due to the implementation of the HITECH Act, all health care facilities and covered entities who consider themselves eligible for receiving these financial incentives are ensuring that they are in full compliance with the HIPAA benchmarks or they face the risk of not only losing out on the financial rewards, but attracting civil or criminal liabilities.

Source: whatishipaa.org/hitech-act.php

Regarding Medicare and Medicaid patients, Buble noted that the CMS has now eliminated billing for consultation services in most situations.

"CMS proposes to implement the rule in a budget neutral manner by increasing the relative value units (RVU's) associated with new and established office visits by 6 percent and with initial facility visits for hospitals and nursing homes by 2 percent," she said. "The elimination of consultation codes will effectively eliminate the reimbursement advantage for physician specialists providing consultation services, which historically have been paid at a higher rate"

In March, the Saint Barnabas Health Care System Office Managers Association once again presented Buble, who offered workshop sessions on advanced evaluation and management coding.

To view the coding changes presentation, visit www.sbofficemanagers.com and click on the link to download the PDF.

About Workforce Development Grants

New Jersey's Workforce Development Partnership (WDP) Program was established in 1992 by the State of New Jersey Department of Labor and Workforce Development. Applications for funding are customized to meet specific business needs, with an emphasis on training front-line workers. In accordance with the WDP law, most of the individuals receiving customized training will be trained primarily for work in the direct production of good and services, including health care. New Jersey employers may apply for competitively awarded Customized Training Grants to fund training programs that enhance workers' skills. Employers from all industries are invited to apply for grants under this Notice of Grant Opportunity. To learn more, visit lwd.dol.state.nj.us/labor/ui/aftrfile/grants.html.

Ask the Practice Management Experts

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

Tell us about your practice's transfer to electronic medical records (EMR).

A year ago we upgraded our Sage health care software to allow us to transfer our paper medical records to EMR. When we first started looking into the transfer to EMR we looked at the costs and wondered if we could afford it. We learned about state grants that were established to promote practices transferring to EMR, and applied for a Workforce Development Grant. The grant reimbursed us for the cost of training with Sage to implement the transfer to electronic files, and we've been doing electronic medical records for a year.

Are you happy with the transfer?

It really has changed the manor of workflow in our office practice and we're at the stage now where we ask, how did we ever live without it? It interfaces with the lab, and results come electronically, and we have a flow sheet on every patient. It really is amazing. And one of our physicians, who at first was hesitant about the changeover, loves it.

What advice would you offer to office managers who are anxious about being prepared for new government regulations concerning EMR?

I would tell them that switching to EMR can help their office run more efficiently, reduce costs and improve quality of care. I know that, aside from the cost, there also is a fear of the amount of work it will take to change over to electronic medical records. You really need a plan, and for us, it helped to have a good consultant who helped us with implementation. The first couple of months were difficult,

Our Expert:



Betsy Guerrero is the Practice Administrator for the Belleville-based Essex Gastroenterology Associates, a practice comprising physicians Robert S. Spira, M.D., and Joseph R. DePasquale, M.D., as well as a physician assistant, and oversees a staff of approximately 10 people. She has managed the practice for 29 years and began her career in health care working in the GI department at St. Michael's Medical Center in Newark, where she worked for 14 years until she was recruited by the physicians. Certified in coding and medical management, she majored in business at Rutgers University.

but by the third month, we were all comfortable with the system.

As far as the cost, there are a number of grants available to offset the cost. I'm on a Medical Managers Committee at Clara Maass Medical Center, and they were approved for a grant to pilot an EMR project. For practice managers looking to get started, I would suggest checking with the company they currently use for their medical records. Ask the sales representative for advice on electronic EMR transfer. This transfer is going to eventually be mandated, and the sales reps should be able to guide them to available money and other resources to help them implement EMR. They can also advise them on the status of incentives, such as those included among the upcoming provisions of the HITECH Act.

Save the Date!

Legal Issues and the Physician Practice

Tuesday, June 8

JACK BAKER'S LOBSTER SHANTY
Channel Drive, Point Pleasant

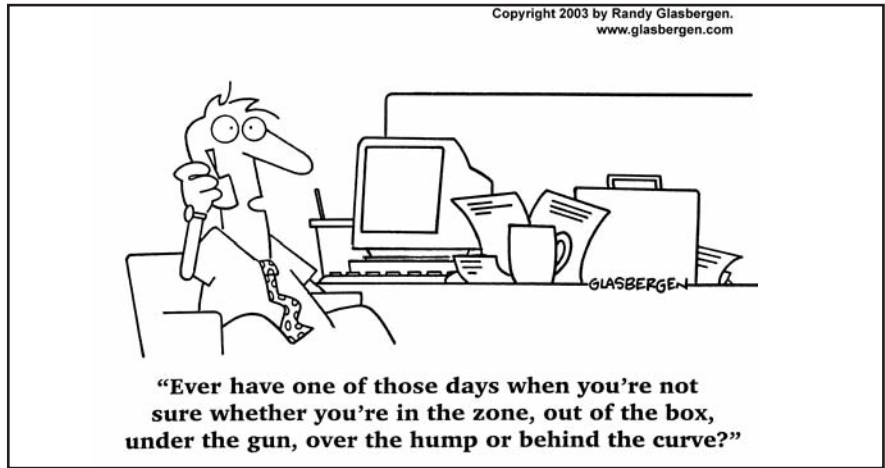
Thursday, June 10

FOREST HILL FIELD CLUB,
9 Belleville Avenue, Bloomfield

The program will run from 11 a.m. to 1 p.m., and lunch will be provided.

For more information, visit our Web site at www.sbofficemanagers.com.

For SBHCS Office Managers Association members only. To register or for membership information, please call 1.888.724.7123, and press option 4.



Follow SBHCS on Twitter

The Saint Barnabas Health Care System is now on Twitter, the popular internet social messaging and microblogging site currently serving more than 7 million users. This free service allows people to stay in touch and exchange information in real time. By posting short messages called tweets, SBHCS is using Twitter to update its followers on news, programs, classes, special events, health tips, wellness information and more. To follow Saint Barnabas on Twitter, go to www.twitter.com/saintbarnabas.

Members, let us know what you would like to see in upcoming issues of Best Practice by calling 1.888.724.7123, and pressing 1.

- Directors of Physician Services
The Saint Barnabas Health Care System provides physicians and their office staff with a direct link to our hospitals through the directors of Physician Services.
- ❖ **Lauren Burke** Cardiovascular Physician Liaison973-926-2623
 - ❖ **Fran Monteleone** Clara Maass Medical Center 973.450.2997
 - ❖ **Audrey Petersen** Community Medical Center732.557.3940
 - ❖ **Alyssa Ruby-Mako** Kimball Medical Center732.557.7168
 - ❖ **Cheryl Wittek** Monmouth Medical Center732.923.7523
 - ❖ **Patricia Gillen** Newark Beth Israel Medical Center973.926.5534
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 - ❖ **Judy Webster** Saint Barnabas Ambulatory Care Center973.322.7345
 - ❖ **Shari Beime** Saint Barnabas Behavioral Health732.914.3805
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