Meet Our New Neurosurgery Team Members

Sandra Narayanan, MD
Q: What do you think of Detroit?
A: Very friendly people. I like our neighborhood-young, fresh, and acceptably noisy.
Q: Where are you coming from, and what will you miss the most?
A: Emory University Hospital in Atlanta. I will miss the fantastic restaurants, especially the Korean and Vietnamese gems on Buford Highway. I will also miss Linda Donoff, the administrative assistant in interventional neuroradiology at Emory (the Jewish mother I never had).
Q: What do you enjoy doing in your spare time?
A: Reading, traveling, and board games.

Jay Jagannathan, MD
Q: Where are you joining us from?
A: I grew up in the Washington DC area, but I was most recently at the University of Virginia.
Q: Your initial impressions of our department?
A: The residents and staff are friendly and cohesive. It’s a very well-organized department with a great variety of cases.
Q: Any interesting hobbies?
A: Working out, running, and traveling.

Neena Marupudi, MD
Q: Where are you making a transition from?
A: I’m originally from Amarillo, Texas, but I did my schooling on the east coast, at both Johns Hopkins and Penn State.
Q: What is the most interesting thing about Michigan?
A: Motown! Stevie Wonder and the Jackson 5 are some of my favorites. I’ve enjoyed the culture and art at the Ford Museum and the DIA. I cannot wait to explore all the eclectic restaurants of Detroit.
Q: Your favorite free-time activity?
A: Dancing with my fiance Louis, choreographing dance routines, music, rock climbing, vacations to Hawaii provided by my frequent flyer miles, and sleeping!
Neurosurgery Outreach Month was created by the American Association of Neurological Surgeons in 2007 to bring awareness to the global impact of neurosurgery. The focus for 2009 is international innovation in the field. See http://www.neurosurgerytoday.org/what/ for more details.

Coding In-Depth:
Providing Location & Complexity Brings Greater Intracranial Aneurysm Surgery Approval

Information from Neurosurgery Coding Alert, 10 (7), 49-50

Without specifics regarding intracranial aneurysm surgery, denials and lost revenue can be just around the corner. However, with a couple of pointers, chances for approval greatly increase.

1. Document where the aneurysm occurred. Make sure that the aneurysm is described as starting either in the carotid or vertebrobasilar circulation. Each has its own specific code, which also depends on:

2. Document the complexity of the aneurysm. Once location is determined, complexity must also be reported for successful reporting. A quick way to determine this is to use the following list of determinants:
   - Is the aneurysm larger than 1.5 cm (15 mm)?
   - Did the aneurysm involve calcification at the neck of the aneurysm?
   - Does the aneurysm incorporate normal vessels into the neck of the aneurysm?
   - Does the aneurysm surgery require any of the following: vessel occlusion, trapping, or cardiopulmonary bypass?

If the answer is no to any of these questions, the aneurysm must be classified and coded as simple.

The four codes for these surgeries are:
- **61697:** Surgery of complex intracranial aneurysm, intracranial approach, carotid circulation.
- **61698:** Surgery of complex intracranial aneurysm, intracranial approach, vertebrobasilar circulation.
- **61700:** Surgery of simple intracranial aneurysm, intracranial approach, carotid circulation.
- **61702:** Surgery of simple intracranial aneurysm, intracranial approach, vertebrobasilar circulation.

The Red Flag Is Coming: Are You Ready?

FTC Implements New Standards to Fight Identity Theft

On November 1, 2009, new rules are being imposed by the Federal Trade Commission for financial institutions and creditors, in an attempt to combat identity theft. Hospitals and physicians offices who are often creditors to patients will also be under these regulations. UPG is working on a plan which will be distributed as soon as it is finished.

Medical identity theft is taking someone’s identity to:
- receive medical care
- make false medical claims
- add false information to a person’s medical record

This identity theft can lead to:
- future denials of insurance coverage
- false claims that count towards a lifetime maximum
- false diagnoses
- unsafe or deadly care

By keeping a lookout for items like this, identity theft can be more easily fought and stopped. For more information on the Red Flag Rule, check out the following web sites from the FTC:

http://www.ftc.gov/redflagsrule
http://www.ftc.gov/bcp/edu/pubs/articles/art11.shtm

Did you know?

On a given day, our clinics can generate 40 new folders on Docushare for our patients. That means we have roughly 600 new folders a month.

With an average of 4 files per folder, that’s 2400 unique files that medical records needs to look at and verify before a Physician views it on Docushare.

The students in the second phase of our summer purge project merged over 10,000 folders. WOW!
What’s on Your Mind?
Results from Last Month’s Contest

If you remember last issue, we asked a question for our contest, which was, “What are the five steps you should take when the OIG comes knocking on your door, and what are the three rights an employee has?”

Staff members that provided responses were:

Pamela Campbell, Andrew Johnson, and Sheena Williams

The correct answers, which could have been found on one of our department badge placards (available from Marie if you need one) are:

1. Ask if there is a search warrant, and validate the document if presented.
2. Request the identification of the agent, and ask the nature of the case.
3. Obtain the names and / or business cards of the inquiring agent(s).
4. Contact Patti, the Practice Administrator & Compliance Officer, at 313.319.7679
5. Contact the UPG Compliance Officer at 810.624.6049
6. The employee has the right to speak or not speak with the inquiring official.
7. If a subpoena is presented, the employee must speak with the inquiring official.
8. The employee may have an attorney present when communicating with an inquiring officer.

Brain Food for the Month
Some Obscure Phobias

Anuptaphobia: the fear of staying single.
Automatonophobia: the fear of wax statues.
Counterphobia: seeking out what one fears, instead of avoiding it.
Ergasiophobia: a surgeon’s fear of operating.
Hippopotomonstrosesquipedaliophobia: the fear of long words.
Lepidopterophobia: the fear of butterflies and moths.
Nosocomophobia: the fear of hospitals.
Paraskavedekatriaphobia: the fear of Friday the 13th.
Phronemophobia: the fear of thinking.

Effective Workplace Communication Skills

In today’s fast-paced work environment, it is helpful for all of us to use effective communication. Here are a few pointers that even the best communicators need to be reminded of:

Listen carefully. This means not thinking about what you are going to say next or interrupting. Take a minute to truly listen to what is being said by the other person.

Try to see their point of view. By seeing both sides, you may better understand your own. This can help end work disagreements and arguments.

Use “I” instead of “You.” This helps the other person better understand your point of view. This, as we just learned, helps end office disagreements.

Respect personal time. Don’t overload someone with work-related conversation during breaks, lunch, or off-time. If you do so, you may push them away from wanting to converse with you at all.

We’re all adults. So we should talk to each other as such. This also helps garner respect between individuals.

Upcoming Dates of Interest:
08.22.09: Ramadan Begins
09.07.09: Labor Day
09.11.09: Patriot Day
Eve of 09.19.09: Rosh Hashanah Begins
09.22.09: Autumnal Equinox
Eve of 09.28.09: Yom Kippur Begins

Ten Great Customer Service Tips
1. Provide prompt service.
2. Stay upbeat and friendly.
3. Give customers your attention.
4. Be accurate and organized.
5. Communicate clearly.
6. Always show courtesy and respect.
7. Keep up-to-date on what you provide.
8. Provide solutions.
9. Always keep your word.
10. Always ask what else you can do.

The annual department picnic, which celebrates our graduating resident, was held on 06.27.09. Honored this year was Chaim Colen, M.D., PhD.

The weather was great and so were the festivities.

Thanks to everyone who attended!


Front Row: Todd Francis, David Hong, Hazem Eltahawy, Saroj Mathupala.
On the Brain for August....
Crossword Puzzle: WSU, Neurosurgery and You.

Across
3. A gland for growing.
5. A growth of cells that may lead to many problems.
6. When your brain gets no blood, this is often the result.
7. _____ State University
10. "Sometimes I wonder if there's a brain in Brandon's _____.”
11. What you find in the Lande Building.
13. Here in #930, we often have to state it's across the hall.
15. Many now call it the D, but I prefer this proper name.
16. Something our physicians do every day.
17. Someone in a sub-specialty training program.
18. Take a billion of these, and you’ve got some feeling.
19. A man-made tube often used in surgery.

Down
1. These can be fused together when needed.
2. We see these people every day.
4. A bulge in your blood vessels.
6. Try to imagine your back without one!
8. Water on the brain.
9. "Sometimes I wonder if there's a ______ in Brandon's skull.”
12. Our university mascot.
14. They make up the house staff.

The first person to return a correct, printed copy of this crossword to Brandon receives a free lunch at the Detroit Institute of Arts (with Brandon, of course).