

NOVEMBER 2010



AMY SCHAUB

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Heart Failure Team Expands Services to West Chester Medical Campus

Heart failure is a complex condition that takes monitoring, testing and care from experts in the field.

Traveling to the proper place for appointments should be the least of a patient's worries.

That is why the UC Health Heart Failure Program in West Chester is such an asset, says Stephanie Dunlap, DO, director of the program.

"We provide a multidisciplinary team that cares for all of the patient's problems in one location; patients who live north of Cincinnati don't have to travel as far for cardiac care," she says.

Dunlap adds that heart failure specialists at UC Health in West Chester also offer a number of diagnostic tests that make receiving care a one-stop trip.

Some of the tests include:

- Echocardiograms
- Electrocardiograms
- Radionuclide angiography, evaluating the function of the right and left ventricles
- Dual isotope stress tests

"We also do metabolic stress testing, which involves a clip on the patient's nose," she says. "The patient breathes through a hose and sensors measure the amount of carbon dioxide they



Stephanie Dunlap, DO, with patient Aimee Brown

exhale. It is used to indicate the patient's prognosis over the next year."

Dunlap says that the same science-based medicine practiced in Clifton is also a part of the UC Health West Chester care plan.

"Patients have the same access to clinical trials and treatment options in West Chester," she says. "By providing necessary care closer to home, we hope to take some of the burden off of our patients and improve their quality of life." •

>> PATIENT APPOINTMENTS

To refer a patient or schedule an appointment, call (513) 475-7918.

A full list of UC Health cardiologists is available online at ucphysicians.com.

Stephanie Dunlap, DO, was recently appointed UC Health University Hospital project leader for the Robert Wood Johnson Foundation's Aligning Forces for Quality initiative. In this role, she will lead the hospital's quality initiative to reduce readmissions for major illnesses, including heart failure. "Heart failure is one of the leading reasons for hospital readmission—up to 25 percent a month after the patient is discharged—and is a huge public health expenditure issue nationwide," she says. "I will be working to collect data on this issue and determine why the readmission rate is so high and ways we can work to decrease it." •

Clinical Trials Office is Here to Serve You

COLLEAGUES,
As you read on Page 3, we're working on a more integrated, academic center-wide strategy to increase patient accruals through a centralized clinical



trials office (CTO). This is such an exciting development for our organization and represents yet another way we are strengthening clinical programs.

Although we're still in the early stages of development, I strongly encourage you to work with Mindy Muenich and her team in

the CTO. Mindy is a proven and resourceful leader with the management and program-building skills to accelerate the pace of clinical research at UC. We are confident that by employing

a deliberate and consistent approach to adult clinical trials, we will strengthen our entire clinical enterprise.

Clinical research is a key component of UC Physicians "innovation in health care" strategy. Research distinguishes us from other health care systems. Our patients deserve access to the latest diagnostics and therapies; a robust clinical trials program is a core part of providing that access.

But to do industry-sponsored research efficiently, effectively and safely, there must be institutional standards and guidelines. The CTO will provide those important checks and balances. The CTO will be in continual contact with industry to identify and bring new study opportunities to our clinical departments for consideration. The team will also provide important

marketing support for recruiting patients to trials and arrange for study coordinators for individual investigators or programs without this expertise in their research unit.

Clinical trials exist for all types and stages of disease—from new treatments for common skin problems and management of gestational diabetes to brain tumors and complex heart conditions. Keep this in mind as you are addressing your own care as well as providing guidance to loved ones.

As always, if you have questions, I'm happy to answer them at thomas.boat@uc.edu.

THOMAS BOAT, MD
Chief Executive Officer,
University of Cincinnati Physicians

We're all UC Health

Amy Schaub

Patient Billing and Revenue Cycle

Connected

Connected is a monthly publication for physicians and staff of University of Cincinnati Physicians. Send your comments and ideas to ucpmarketing@ucphysicians.com or call (513) 475-8006.

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Over the past 11 years, Amy Schaub has worked up the ranks in patient accounting. Initially employed as a biller/collector for the divisions of burn and vascular surgery, she will step into a new role as assistant director of revenue cycle this fall.

Until that transition is fully made, she will continue to serve as patient accounting manager for the department of surgery where she supervises a staff of about 20 people who perform pre-certification, coding/charge entry, accounts receivable follow-up and payment posting functions.

In the assistant director role, Schaub will report to Joe Fodor, director of revenue cycle, in the UC Physicians Patient Billing Office. The team now handles professional fee billing for the departments of

internal medicine, radiology, radiation oncology, neurology, pathology, ophthalmology, obstetrics and gynecology, psychiatry and physical medicine and rehabilitation.

Schaub has served on several key cross-functional work groups aimed at improving revenue cycle, including recent work with the payer contracting group and a taskforce charged with creating a new patient billing statement. She holds a bachelor's in business administration, a degree she obtained with tuition support from UC Physicians.

"UC Physicians has been extremely supportive of my career development. I really appreciate all of the opportunities I've had to grow," she says.

A resident of Kenton County, Ky., Schaub has been married to her husband, Bob, for 10 years and has

three children, Bobby, 11, Luke, 7, and Emily, 5.

When she's not at work, you can usually find her on the football field: Luke plays pee-wee football and Emily is a cheerleader for the same team. She also enjoys camping and hiking with her family, reading "just about anything but romance novels" and watching the Cincinnati Bengals. ●



Integrating and Streamlining Clinical Trials

Centralized team provides contracting, coordination and marketing support

A more integrated, academic center-wide strategy is behind the formation of the Clinical Trials Office (CTO) at University of Cincinnati Physicians.

Under the direction of Mindy Muenich, the CTO provides services ranging from marketing and business development to recruitment, contracting and budgetary assistance. Mike Spigarelli, MD, PhD, serves as the office's medical director and Jake Matig manages marketing and recruiting. Lona Joiner coordinates the contract review process and provides administrative support.

Muenich and Spigarelli, who serve in similar roles at Cincinnati Children's Hospital Medical Center, will focus their efforts on implementing best practices that have resulted in increased study enrollment and revenues. Hired this summer as part of the University of Cincinnati's Clinical and Translational Science Award, Matig is helping researchers throughout UC Health streamline their marketing and recruiting efforts. Joiner, Muenich says, "holds the team together."

"Lona's three years as a UC Physicians employee are an asset as we continue to learn about UC Health."

Since it was formed in July, the CTO has met with several departments and divisions and has begun providing marketing support for a number of studies. Muenich has been able to provide high-level budget reviews and Spigarelli, who has extensive knowledge of all phases of clinical trials, has offered planning support.

Muenich says future plans include the formation of a study coordinator network team that will meet on a regular basis to discuss studies and share best practices.



Left to right: Mindy Muenich, Mike Spigarelli, MD, PhD, Lona Joiner, Jake Matig

THE ULTIMATE CHARGE FOR THE CLINICAL TRIALS OFFICE, says director Mindy Muenich, is to provide the support necessary to conduct quality research and increase clinical trial revenue at UC Physicians.

"Our strategy for doing so is to make clinical trial processes much more efficient."

Plans for improving efficiencies include:

- **creating a new contracting process** (the office has contracted with an outside agency for contract negotiations),
- **hiring a budget and contract specialist** to assist with budget creation, negotiations, in-depth cost analysis and development of fee schedules,
- **improving electronic capabilities** to speed and streamline processes, and
- **developing consistent, brand-appropriate recruiting materials** and centralizing advertising and printing orders.

"An integrated clinical trials operation within UC Physicians is a critical part of the overall integration we have been working toward during the past few years," says Stephen Strakowski, MD, who oversees the CTO for the UC Physicians executive team. "Clinical trials and related research activities are a core UC Physicians mission." ●

>> FOR MORE INFORMATION
For more information or to arrange for a meeting with the Clinical Trials Office team, contact Mindy Muenich at melinda.muenich@ucphysicians.com.

From Opiates to Alcohol, Psychiatry Team Tackles Spectrum of ‘Addiction’ Disorders

With its potential to ruin lives, substance abuse is a major threat to the well-being of individuals and society as a whole.

UC Health psychiatry offers help through its addiction sciences division in the department of psychiatry and behavioral neuroscience, with nationally and internationally recognized programs in the treatment of addiction to opiates, tobacco and alcohol, along with co-occurring substance use and psychiatric disorders.

“We want to help people break the crippling cycle of addiction and re-



Anthenelli

enter society to lead health and productive lives,” says Robert Anthenelli, MD, director of the addiction sciences division of the University of Cincinnati (UC) psychiatry department.

“We want to *help people* BREAK THE CRIPPLING CYCLE OF ADDICTION AND *re-enter society* to lead healthy and *productive lives*.”

Robert Anthenelli, MD

Addiction services are available in three distinct patient care settings, with about 3,600 current patients:

- **Opiate Addiction Recovery Services (OARS)**

Launched in January 2006, OARS is a specialized addiction treatment program jointly owned by the Crossroads Center and UC. Its primary service is methadone maintenance treatment for adult and adolescent men and women addicted to opiates, such as heroin or oxycodone. Roberto Soria, MD, is the medical director. For information, call (513) 332-0350.

- **Addiction Specialists’ Treatment and Evaluation Clinic (ASTECC)**

Launched in fall 2009, it provides substance abuse evaluations and office-based medication-assisted treatment of drug and alcohol abuse and dependence in adult men and women. Thomas Nguyen, MD, is the associate medical director. For information, call (513) 558-5193.

- **The Cincinnati VA Substance Dependence Program (SUDEP)**

A division of the Mental Health Care Line at the Cincinnati Veterans Affairs Medical Center, it offers a full spectrum of treatments for a wide variety of problems accompanying substance abuse and dependence. Linda Bodie, PsyD, is SUDEP’s program director. To discuss or make a referral, call (513) 861-3100, extension 6367.

Anthenelli is also director of the Tri-State Tobacco and Alcohol Research Center (Tri-TARC), which conducts clinical trials on alcohol and tobacco dependence medications and continues to study new treatments. For information about clinical trials at Tri-TARC, call (513) 558-7179. ●



>> **FOR MORE INFORMATION**
For a full list of UC Health psychiatry specialists, visit ucphysicians.com.

Getting the Most Out of Your Doctor's Visit

Positive partnership between doctor and patient yields best results

A trip to the doctor for most people means the first step on the road to recovery.

But Kyle Kaufman, MD, a UC Health internal medicine and pediatric specialist, says patients should be prepared to help their physician do his or her job in order to make the most of their doctor's visit and possibly avoid repeat visits in the near future.

"Patients should take the time to express concerns or ask questions," he says. "Most doctors begin the interaction with an open-ended question. This is truly an invitation to the patient to speak his or her mind. And the facts

and details are important."

Kaufman says being vague can hinder a quick diagnosis or eliminate important information that may help in discovering other health ailments.

"Everyone has their own definition of a flu or cold," he says. "It's important to think about the progression of illness or symptoms—one can even discuss them with a family member or friend or write them down before their visit. Being at the doctor can be stressful, and patients frequently forget to ask certain questions or raise concerns," he adds.

Kaufman says the plan for treatment

should be done cooperatively.

"It's the doctor's place to make recommendations, but it's up to the patient to carry out those recommendations, to ask questions or make suggestions of their own," he says. "If part of the plan doesn't make sense, the patient should not feel bad asking for clarification.

"Doctors strive to minimize medical jargon and explain things in an understandable fashion, but that is not always successful. It is better for both the patient and physician to understand and agree on a plan of action, since they are a team working toward a goal of improved health for the patient."

Kaufman suggests that patients provide doctors with a "teachback" in which the patient recaps the diagnosis and plan to ensure that everyone is on the same page.

Kaufman adds that test results should be reported back to the patient in a timely manner. Common tests are usually back to the ordering physician in one to two days; the less common or more complicated the test, the longer the result takes to get back. ●

>> **PATIENT APPOINTMENTS**

Kaufman sees both children and adults at the UC Health Physicians Office in West Chester. To schedule an appointment, call (513) 475-7425. For a full list of primary care specialists, visit ucphysicians.com.

Kyle Kaufman, MD, suggests that patients provide doctors with a "teachback" in which the patient recaps the diagnosis and plan to ensure that everyone is on the same page.



Kyle Kaufman, MD

Fast tips for a productive doctor's visit:

- Write questions down in advance
- Be ready to give details about your symptoms and their progression
- Know your medical history and your family medical history
- Bring a list of current medications
- Ask questions if a medical explanation is unclear
- Don't delay recommended testing
- Follow the doctor's recommendations fully
- Check back with your doctor if things don't get better

in brief

UC Health Board Announced, UC Healthcare System Formed

UC Health announced the creation of a new board of directors. The board will have nine members, four more than the previous board reflecting expanded physician and community involvement. One appointment is pending. Board members will be:

- C. Francis Barrett, a current member of the University of Cincinnati (UC) Board of Trustees;
- Joseph Broderick, MD, research director of the UC Neuroscience Institute and chair of the UC department of neurology;
- Margaret Buchanan, also a current member of the UC Board of Trustees;
- Rev. Damon Lynch Jr., pastor of the New Jerusalem Baptist Church;
- Myles Pensak, MD, H.B. Broidy Professor and chair of the UC department of otolaryngology-head and neck surgery
- George Strike, president and CEO of Martinizing Dry

Cleaning, who will serve as chairman of the board;

- Creighton Wright, MD, president of Cardiac, Vascular and Thoracic Surgeons, Inc.; and
- Jeffrey Wyler, president and CEO of the Jeff Wyler Automotive Family.

UC president Gregory Williams, PhD, Andrew Filak, MD, interim dean of the College of Medicine, and Jim Kingsbury, president and CEO of UC Health, will serve as ex-officio directors.

The board will be responsible for oversight of the activities of UC Health, which includes University, West Chester and UC Health Surgical hospitals. UC Health is closely aligned with the UC College of Medicine and University of Cincinnati Physicians.

Additionally, the health care system on Oct. 15, 2010, legally changed its name from Health Alliance of Greater Cincinnati to UC Health with the completion of necessary filings with the state of Ohio. The entity will no longer use its former name.

UC Healthcare System, the

new parent company of UC Health, also has been formed. UC Healthcare System will be governed by a five-member board, with Strike serving as chairman of the board. Other board members will be Barrett; Judge Sylvia Sieve Hendon, First District Court of Appeals; Gregory Rouan, MD, Richard W. and Sue P. Vilter professor of clinical medicine at the UC College of Medicine; and George Schaefer Jr., former CEO of Fifth Third Bancorp.

Clinicians Win Geriatric Academic Career Awards

UC Health geriatricians Jeffrey Schlaudecker, MD, and Mandi Sehgal, MD, were awarded Geriatric Academic Career Awards (GACA). The grants, which each



Schlaudecker



Sehgal

total \$374,955 over five years, will support career development for academic geriatric specialists to help address the fast-growing 65-plus population, which is expected to almost double by 2030. GACA grants focus on chronic disease management, geriatric ethics, palliative care and health promotion. Award recipients also work with underserved and uninsured patients across many community settings including acute, ambulatory and long-term care.

Clinicians Win 'Forty Under 40' Awards

Three UC Health physicians—neurologists Alberto Espay, MD,



Espay



Neel



McPherson

and Robert Neel, MD, and neurosurgeon Chris McPherson, MD—were recently recognized as among the best and brightest among young professionals in Greater Cincinnati as part of the Cincinnati Business Courier's *Forty Under 40* awards program. The award program recognizes the area's "next generation of young leaders and innovators—people who have

already made a mark professionally and in the community." More than 420 nominations were submitted for this year's competition. A 20-member panel consisting of *Forty Under 40* alumni chose the 40 award winners, based on professional accomplishments and community involvement. ●

UC HEALTH PARTICIPATES IN DIABETES WALK



THANKS to everyone from UC Health who participated in the 2010 Step Out: Walk to Fight Diabetes, held Saturday, Oct. 16, 2010, at Great American Ball Park. Proceeds from the walk benefit the American Diabetes Association. UC Health staff pictured here include (left to right): Tom Ducro, Kristin Fontaine, Penny Elder, Rachael Epps and Michelle Pierson.

SERVICE EXCELLENCE

The following article is part of our ongoing efforts to stimulate employees to think about improving the patient experience in daily interactions.

Bring Your Best Self To Work

EARLIER THIS YEAR I arrived at the Holiday Inn Express in Hurricane, W. Va., at 9 p.m. to check into a room as I had a training session there the next morning. My client was traveling with me and we were told there were no reservations in our names. And, as luck would have it, they were sold out. After a few minutes Kristi at the front desk found two rooms that had not been cleaned. But that's it—nothing else. Things were not looking good.

At this point, Kristi and Lynn (the other front desk clerk) excused themselves for a “pow-wow.” Just as my client and I began to entertain thoughts of staying at the grungy-looking motel across the road, Lynn emerged and even though dressed up and in high heels said she would clean the two dirty rooms for us. Halleluia! She really surprised us with her willingness to step up. “I’ll make sure your rooms are clean,” she said, “even though I’ve never done this before.” At 10:30 p.m., grateful and amazed, my client and I were tucked away in our tidy rooms. And I’ve told this story at least 100 times.

Choice is at the core of every great customer experience. Kristi and Lynn chose to go out of their way to make sure we were accommodated even though it would have been easier to choose to turn us away. After all, it was not their fault that we did not have room reservations. We found out later that the client’s company had mistakenly cancelled our reservations.

Every day when we come to work we make choices. We choose whether to be pleasant or not. We choose to simply occupy space or make a difference. We choose whether to recognize or to ignore things that need to change and most importantly we choose to engage with our patients

or simply go through the motions.

Life can present us with some ugly surprises. Yet, remarkable people, people who bring their “best self” to work every day, make the choice to be fully present for their patients and co-workers in spite of what might be happening in their personal lives.

Your “best self” does not have to be a disposition like Pollyanna or Rebecca of Sunnybrook Farm. It is simply you with the self discipline to have a positive attitude. It is you willing to go out of your way to resolve a difficult situation even though you did not cause it. Above all, it is you showing empathy for the patient.

When we choose to bring our “best self” to work every day, we not only generate exceptional patient experiences, but great stories too. And these stories are told over and over again—maybe even 100 times. ●

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Recognize a Colleague for Service Excellence

On Jan. 1, 2011, UC Physicians will launch the WE CARE recognition program. Nominations are currently being accepted for individuals who exemplify the WE CARE philosophy by providing personalized service to patients. Each month a drawing will be held by the WE CARE recognition team and five winners will be announced. In order to qualify, recipients must have attended WE CARE training. All staff, physicians and managers are eligible to win various prizes.

>> Nomination forms are available under Faculty/Staff on ucphysicians.com or from your unit manager. Completed forms should be submitted to your unit manager for consideration. ●

Welcome New Clinicians



James Arden, MD, PhD
Anesthesiology



Sheital Bavishi, DO
Physical Medicine and Rehabilitation



Sadia Benzaquen, MD
Pulmonary and Critical Care Med.



Amy Burns, MD
Anesthesiology



Jessica Colyer, MD
Physical Medicine and Rehabilitation



Michael Hawryschuk, MD
Anesthesiology



Emily Leasure, MD
Hospitalist



Neetu Radhakrishnan, MD
Hem/Onc

HOW WE MAKE A DIFFERENCE

Emergency Protocol Helps Save Patient with Ruptured Aortic Aneurysm

Ma e Stewart knew something was wrong when she found her husband, David, lying on the couch on a sunny Saturday afternoon, his shoes abandoned in the yard. As she says: "It's not his style to lie around."

Mr. Stewart had been sidelined by pain extending from his groin up into his lower stomach. He shrugged off his wife's suggestion to see a doctor. By Sunday morning, the pain had become so excruciating that he agreed to go the emergency room.

They traveled to Harrison MediCenter, expecting a diagnosis of kidney stones. A CT scan revealed the true source of his pain: An abdominal aortic aneurysm (AAA)—a blood-filled bulge of the abdominal aorta, the main artery that carries blood away from the heart to the lower part of the body. Over time, the vessel wall can lose its elasticity and the force of normal blood pressure causes the aneurysm to burst unexpectedly. This can lead to severe pain, massive internal bleeding or sudden death.

Mr. Stewart's AAA was actively bleeding. The situation was critical.

Harrison MediCenter immediately contacted UC Health to arrange for emergency transfer to University Hospital, the only facility in the region set up to respond to emergency AAA cases 24 hours a day, seven days a week. In less than 30 minutes, UC Health Mobile Care was en route to get Mr. Stewart and the ruptured AAA protocol was put in motion.

"The protocol sets off a series of coordinating phone calls to prepare for the emergency care the patient needs upon arrival at the hospital: Connecting the referring physician with the vascular surgeon on-call, arranging transportation, readying the operating room (OR) and notifying other critical members of the care team—anesthesia, perioperative services, intensive care unit and blood bank," explains Joseph Giglia, MD, the UC Health vascular surgeon who cared for Mr. Stewart.

"Many patients with an actively bleeding AAA don't make it to the hospital—and for those that do, timing is absolutely critical for patient survival."



Giglia

Mr. Stewart was taken directly to a hybrid OR equipped to stabilize his blood loss under local anesthesia, a setup only found at tertiary centers like University Hospital.

"The initial goal is to control the blood loss and re-establish blood pressure before the patient becomes critically compromised," Giglia explains. "A balloon is inserted through the femoral artery to the ruptured area to control the blood loss. Once the patient is stable, we can step back and look at venous access, blood, fluid—whatever else is required to fully stabilize the patient before proceeding with the full repair."

The streamlined approach has made a dramatic improvement in patient survival, reducing mortality rates from 50 to 60 percent to 20 to 25 percent.

"It has also allowed about 75 percent of the AAA repairs to be done with minimally invasive techniques, as compared with the traditional open surgery," Giglia adds.

Just a few weeks after surgery, Mr. Stewart was back at work.

"I know I am lucky. If the medical team hadn't moved so quickly, I might not be here today. People at risk should get screened," says Mr. Stewart. ●

>>To schedule an AAA screening, call UC Health at (513) 558-3700.

AAA Risk Factors

- **Over age 60**
- **History of smoking**
- **High blood pressure**
- **High cholesterol**
- **Family history of the disease**



Angiogram showing Mr. Stewart's AAA after stabilization



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(513) 475-8000

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- BROWN COUNTY
- CLIFTON
- FAIRFIELD
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- HARPER'S POINT
- HARTWELL
- KENWOOD
- KETTERING
- MASON
- MONTGOMERY
- MT. AUBURN
- RED BANK
- SPRINGDALE
- TRENTON
- WEST CHESTER
- WESTERN HILLS
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