



## Like Super Good Written, Verbal and Non-verbal Communication and Stuff

■ JOHN SHUFELDT, MD, JD, MBA, FACEP

Who could forget this memorable exchange in the movie *The Sure Thing*? Gib, (John Cusack) is discussing his chances for dating a fellow classmate:

**Gib's friend:** Forget her; I hear she only likes intellectuals.

**Gib:** So? I'm intellectual and stuff.

**Gib's friend:** You're flunking English. That's your mother tongue, and stuff.

I will begin this short essay by admitting that I am not always the best or most appropriate in terms of my style or manner of communication, which is no news to my two relatives who make up half the readership of these articles.

I have also learned over the years to take most things with a grain of salt (particularly if it is followed by a shot of tequila and a slice of lime), so I don't get too worked up over much of anything that is directed my way.

That said, I have learned a thing or two about how not to communicate and what not to say or write, mostly from experience.

What follows are styles of communication which, at best, do little to further the intended discourse or outcome. At worst, they convey the wrong message entirely, insult the other party, or reflect poorly on you.

### Non-verbal Communication

- Standing up while taking a history from a patient (conveys dominance which is not reassuring when you are sick).
- Talking with your arms folded across your chest or with your

fists clenched at your side (conveys aggressiveness).

- Blowing your nose or wiping your mouth and then shaking someone's hand (I am not sure what this conveys, but it is disgusting).
- Rolling your eyes when someone is speaking to you. (My children will tell you that this is a sure way for me to tell them, "The last thing I want to do is hurt you, but it's still on the list.")
- Talking over your shoulder while walking out of a room or away.
- Crossing your legs and folding your arms while sitting (conveys that you are hiding something, or that you are cold).
- Snapping gum or chewing with your mouth open (conveys that your parents were first cousins).
- Shifting eyes or shifting back and forth while standing (conveys that you are being deceitful or have to urinate).
- Working, reading, texting, writing, or watching TV while someone is trying to have a conversation with you.
- Not making eye contact while speaking directly to someone or shaking their hand and not looking at them.

### Written Communication

- Frequently misspelling words or writing in different tenses.
- Spelling someone's name incorrectly despite it being part of the correct email address that you just spelled correctly. (This one always amazes me; example: "Dear Mr. Schoefelt" sent to [jshufeldt@shufeldtconsulting.com](mailto:jshufeldt@shufeldtconsulting.com).)
- Using excessive legalese in a document (heretofore, etc.).
- Using email or written communication to convey important information that should be communicated in person (for example, telling a close friend, not-for-profit, or long-time business partner that you will be dissolving your relationship).
- CAPITALIZING EVERY WORD IN AN EMAIL OR TEXT MESSAGE.
- Using multiple exclamation points or adding extra letters to a word. ("I was sooooo drunk last night!!!!!!")



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## HEALTH LAW

- Using shortened, text message versions of words or phrases in a business email (e.g., proly, lol, ur, OMG, IDK, lol, lmaorotf, eieio...).
- Multiple smiley faces, frowns, or any other kind of word art in a business email. ☺
- Creatively interchanging to, too, and two; your and you're; its and it's; and their, there, and they're.
- Excessively long sentences without any punctuation really drive me crazy almost more so than anything else even chewing gum with an open mouth or swearing in a meeting or one time at band camp this guy like really thought he was cool and then started drinking OMG he was so drunk that his parents were called and then he like vomited twice right before he passed out in front of I
- Using "I" and "me" interchangeably. ("Him and me went to the tractor pull and drank some beers.")

### Oral Communication

- Like saying "like" like every few words. (I for one don't like it.)
- Using threats; "If you don't do XXX, then I will do YYY!" (The conversation can only go in one direction from here and it is rarely positive since you leave the recipient no out.)
- Speaking in the third person about yourself or the person you're speaking to (although this is really fun, me saying "John's getting angry!" is like super annoying).
- Mumbling, low-talking, or talking into the hand. (Sadly, I used to silently mouth words to my grandmother to see if I could make her tap her hearing aid. I'm sick, I know).
- Saying "Whatever!" whenever something is annoying.
- When someone asks a legitimate question, responding with, "I can't believe you didn't know that!" (Conveys that you believe that they are stupid.)
- Saying "Trust me" and then proceeding to say something completely untrue.
- Trailing off in mid-sentence and waiting for someone else to finish your sentence. ("In 1930, the Republican-controlled House of Representatives, in an effort to alleviate the effects of the...anyone, anyone? Great Depression. Passed the...anyone, anyone? The tariff bill? The Hawley Smoot tariff act? Which? Anyone, anyone? Raised or lowered...? Anyone, anyone?") ("Bueller? Bueller?")
- Interrupting while the other person is still speaking.

For the vast majority of individuals, none of the above is rocket science. However, for an infuriating few, these tidbits may be the difference between a successful career and a continuing march toward abject mediocrity.

All joking aside, effective communication is an art which must be practiced and I, like many others, must continue to train. Ancaro imparo; "I am still learning." ■

## CODING Q & A

- **V2799**—Vision service, miscellaneous.
- **Morgan Lens: V2797**—Vision supply, accessory, and/or service component of another HCPCS vision code.
- **Fluid: J7120**—Ringers lactate infusion, up to 1000 cc (code once per liter or part of liter used).
- **IV Tubing: S1015**—IV tubing extension set (not for Medicare).

It should be noted that, if you are coding for a hospital, many hospitals use Morgan lens irrigation as a criteria for a level 5 E/M code on the facility billing UB-04. If you are not billing on the UB-04, you should ignore this comment. Morgan lens irrigation does not affect the physician E/M that is billed on the CMS-1500.

**Q. Our hospital has an off-site urgent care office that uses the same tax ID number as the affiliated hospital. We are having problems getting our facility fee reimbursed. We are currently filing the claim on a UB-04 with revenue code 456 and CPT 99202. Do you see any issues with this billing method? Should this be filed on a HCFA 1500 instead?**

- Jessica Easterwood

**A.** If you performed separate contracting for the urgent care, you may have contracted as a physician office, in which case the payors will not reimburse on the UB-04.

Many payors will reimburse hospitals (even for off-site urgent care centers) for the facility fee on the UB-04. You might find that the payor is expecting a different revenue code. Although some make more sense than others, possible revenue codes might include:

- 0456 Urgent Care
- 0516 Urgent Care Clinic
- 0519 Other Clinic
- 0520 Free-Standing Clinic
- 0523 Family Practice Clinic
- 0526 Urgent Care Clinic
- 0500 Outpatient Services.

I would recommend that you contact each payor to see what they expect. Don't be surprised, however, if the rep you call is unable to help you, as many times the payor is not sure itself what codes are expected in the edits of their software. ■

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