

The Reluctant Networker (General Session)

Greg Peters

Straight from the pages of his book "Hello and a Handshake: The Reluctant Networker's Guide to Survival", Greg Peters shares a fun and energetic interactive workshop that is guaranteed to have all attendees eager to use his techniques. You'll walk away with tools to build, maintain and expand connections. And, as a bonus, each attendee will receive a complimentary copy of Greg's eBook.

SESSION 1

Medicare's Patients Over Paper: Reducing Clinical Burden - Part 1

Shannon DeConda, CPC, CPC-I, CEMC, CMSCS, CPMA® is the founder and president of the National Alliance of Medical Auditing Specialists (NAMAS) as well as the President of Coding & Billing Services and a Partner at Doctors Management, LLC. Ms. DeConda has more than 16 years of experience as a multi-specialty auditor and coder. Since founding NAMAS in 2007, Ms. DeConda has developed the NAMAS Medical Auditing Certification Training, written the NAMAS Medical Auditing Study Guide, and launched a wide variety of educational products and web-based educational tools to help coders, auditors, and medical providers improve their efficiencies.

We've heard CMS's proposals and the outcome for 2019. But what are the benefits and of these changes? How will they impact our practices and commercial payers documentation requirements? Come and hear what Shannon DeConda has to share on this vital information.

Cyber Security

Kathy Jo Uecker, CMPE, EFPM, NCP, CPC, COC, CHSPA, CHSA, has been working in healthcare practice management since 1989 and most recently joined the consulting staff of NetSource One through a merger of Medical Informatics Solutions. With a strong background in billing, coding, and revenue cycle management, she brings the expertise to the NSO/MIS team. Her past experience also includes medical chart auditing, development, and implementation of compliance programs including HIPAA, fee schedule analysis, insurance carrier contract negotiations, and practice management software conversions and implementation. Prior to joining NetSource One/Medical Informatics Solutions, Kathy was a Senior Healthcare Consulting Manager for Rehmann. She also served as the director of Reimbursement Services at HealthCare Midwest for 7 Years. Kathy is active in the Michigan Medical Group Management Association (MMGMA), Medical Group Management Association (MGMA), the AAPC, the MMBA, Healthcare Financial Management Association, and the American Academy of Medical Management. She currently serves on the Third Party Liaison Committee for the Michigan State Medical Society and the Third Party Payer Day committee.

Cyber breaches make the news all too often lately. Kathy Jo Uecker shares her insights and knowledge on this important aspect of healthcare and how it can affect us personally, as well as professionally. During this presentation, Kathy Jo will demonstrate methods to minimize your cyber breach risk.

Medical Decision Making

Kris Cuddy-Cummings, CPC, CIMC, CEMA, has 26 years of experience in the medical field. She is a healthcare compliance analyst for Michigan State University HealthTeam, provides independent consulting services, and has been a speaker and author for Michigan State Medical Society, The Coding Institute, SuperCoder.com webinars, and AAPC. Kris is a source for Eli's Coding Alerts, HIPAA Institute, and Part B News. She has been published in MedEd Portal. She has served as president, vice-president, and secretary of the Lansing, Mich., local chapter, is a member of WPS GHA Medicare Part B Provider Outreach and Education Advisory Group, a member of Michigan Society of Hematology and Oncology, and is adjunct faculty at Lansing Community College, also serving on their advisory board for their medical insurance billing and coding curriculum.

MDM is the driving force in all Evaluation and Management services. And unlike the history and physical examination elements, it can be the most challenging to quantify. In this valuable session, you will be provided with tips and strategies to better understand your provider's documentation. You'll also be able to assist your provider with tips to better translate their MDM to the chart.

SESSION 2

Prolonged Services

Shannon Deconda, CPC, CPC-I, CEMC, CMSCS, CPMA

This presentation will help to demystify the use of prolonged services CPT codes. Shannon will discuss the time thresholds for E/M services and how to document to support these codes. She will also explain who can report them and how shared services impact them.

Navigating NCDs and LCDs

Ellen Berra has over 35 wonderful years working in the Medicare Program. Ellen has been in many different departments over the years including claims entry, appeals, fair hearings, congressional inquiries and finally in Provider Outreach & Education. She co-chairs two Provider Outreach & Education Advisory Groups (POE AG) who provide suggestions, feedback, support, and dissemination for our educational activities

Whether you are a seasoned medical biller or new to the field, this session is very beneficial. Something new is taken away from Ellen Berra's presentation each time we attend. A definite "don't miss".

Show Me The Money – Using A/R Reports

Kathy Jo Uecker, CMPE, EFPM, NCP, CPC, COC, CHSPA, CHSA, has been working in healthcare practice management since 1989 and most recently joined the consulting staff of NetSource One through a merger of Medical Informatics Solutions. With a strong background in billing, coding, and revenue cycle management, she brings the expertise to the NSO/MIS team. Her past experience also includes medical chart auditing, development, and implementation of compliance programs including HIPAA, fee schedule analysis, insurance carrier contract negotiations, and practice management software conversions and implementation. Prior to joining NetSource One/Medical Informatics Solutions, Kathy was a Senior Healthcare Consulting Manager for Rehmann. She also served as the director of Reimbursement Services at HealthCare Midwest for 7 Years. Kathy is active in the Michigan Medical Group Management Association (MMGMA), Medical Group Management Association (MGMA), the AAPC, the MMBA, Healthcare Financial Management Association, and the American Academy of Medical Management. She currently serves on the Third Party Liaison Committee for the Michigan State Medical Society and the Third Party Payer Day committee.

You've submitted your claim and received a payment. But that is not the end of the story. Do you understand the reason codes? Was your claim correctly processed and reimbursed? Kathy Jo will share tips to ensure that you are collecting everything that is due to your provider.

SESSION 3

Creating a Culture of Compliance

Sean M. Weiss, Partner, VP and Chief Compliance Officer, DoctorsManagement, LLC
CHC, CEMA, CMCO, CPMA, CPC-P, CMPE, CPC

Sean has dedicated his career which spans more than two (2) decades to helping healthcare facilities reduce the risk of noncompliance and achieve measurable financial results. An accomplished and certified regulatory compliance and practice management professional, Sean has extensive knowledge of the inner workings of government agencies at both the federal and state level, including the Office of Inspector General, Department of Justice and The United States Attorney's Office. With specific focus on ZPICs/UPICs, RACs, MACs, MICs, and Special Investigative Units (SIUs), Sean's ability to successfully counter argue governmental and commercial payer audit findings has saved clients hundreds of millions of dollars over the past decade. Sean advocates and gives a voice to healthcare providers, medical and management societies, and integrated health systems on key regulatory and legislative issues. Through long-term relationships with members of congress and other governmental agencies, Sean has a direct path to those who can facilitate change and breakdown communication barriers to achieve transparency and drive workable, realistic solutions into an industry that is desperately in need of transformation.

As an accomplished certified regulatory compliance and practice management professional, Sean Weiss will lead attendees towards a culture of compliance. He will share laws and best practices to ensure that medical office staff can protect themselves and their patients.

The Future of Medicare

Ellen Berra

Join Ellen Berra, Senior Analyst, Provider Outreach and Education, WPS Health Administrators, as she shares a look into the future of the Medicare program. What changes will we see in patient benefits, claims and reimbursement? Learn how these changes will affect the providers' relationships with Medicare and its beneficiaries.

Front Office Strategies – Part One

Mickey Putman, Owner, Central Professional Credit Services

Ask any biller what the biggest challenges are in effectively collecting insurance and patient payments and they will point to your front office. Come and hear Mickey Putman share his expertise and tips on effective methods for collecting balances at point of service. Mickey will also share some real-life examples of "what not to do".

SESSION 4

Incident To & Split/Shared Visits

Jill Young, CPC,CEDC,CIMC Jill brings with over 30 years of medical experience. This includes a diverse background in all areas of medicine from clinical to billing and she has worked with many physician specialties. Her consulting company provides auditing and the usual consulting services but additionally provides both education and training from front office to back.

Jill Young will share a wealth of knowledge on these often-misunderstood services. She will describe the when, where and by who, documentation and reporting requirements. This is a great presentation for the new biller and experienced biller as well.

Medicaid Updates and CHAMPS Navigation

Amanda Phillips, Provider Consultant

Amanda Phillips, Provider Consultant, will share the latest news from MDHHS/Michigan Medicaid including the new Behavioral Health Initiative. Amanda will also guide attendees through CHAMPS navigation. You'll learn Medicaid Benefit Plan abbreviations, claims replacement vs. claims correction, benefits verification and TPL reporting. This is an excellent mix of new and old-but-valuable information.

Front Office Strategies –Part Two

Mickey Putman, Owner, Central Professional Credit Services

This is a continuation and conclusion of Mickey's presentation. He brings so much information that he could not fit it all in one presentation!

Payer Panel (General Session)

There is an awesome mix of payer representation at the ever-popular session. Payers will come prepared to present information and answer questions on contact preferences, credentialing, claims issues and website access