

# Speaker Session Descriptions

## **General Session – No-Fault Auto Changes with Attorney, Stephen Sinas**

Effective July 1, 2020, the new Michigan No Fault Automobile Insurance Law went into effect. This law is very complex to begin with and is now in a state of reform. Attorney Stephen Sinas will present information on SB01 and HB4397 reforms and how they will affect the care and treatment available to auto accident victims. He will also share valuable insight to how medical billers can recover payments for services in the wake of this no-fault reform. It is imperative that we, as professionals working in the medical field and we, as Michigan residents hear this information. You will be surprised by these changes and how drastically they will impact our lives!

## **2021 E/M Coding – Jill Young**

It's been 25 years since there were changes to Office Evaluation and Management code descriptors from the AMA and documentation requirements from Medicare. Was it worth the wait?

- Is less documentation, less work for providers?
- The Who, How and Where of Validation of chart documentation for physicians
- Do you understand the NEW definition of time for office E&M services?
- Medical Necessity – Is it still important?
- Administrative Simplification – what it means to your bottom line

Form your own opinion on what these changes mean to your practice.

## **Coding vs. Auditing & the Link to Medical Necessity - Shannon Deconda**

Coders are taught very strict guidance and rules of code selection look-up, proper order of selection, and linking codes correctly, but the art of abstracting medical necessity from the documentation is oftentimes not taught until one reaches the world of auditing. This creates problems in that coders typically assign the codes prior to claim submission which may mean that medical necessity is not evaluated. During this session, we will explore this difference and how to ensure that medical necessity can be extrapolated through all areas of coding and auditing.

In this presentation, NAMAS President Shannon Deconda will define medical necessity, outline the fundamentals along with the myths and misconceptions of medical necessity, and provide attendees with take away steps of how to ensure proper development and implementation of these concepts within their own team.

### **Compliance—How to Cover your Assets - Shawn Weiss**

Compliance in coding and billing is all about one's ability to establish "Medical Necessity". This session will focus on those aspects of your compliance plan tied to "Medical Necessity" and how payors (Federal, State and Commercial/Private) define the term and how to create Standard Operating Procedures / Policies to ensure compliance.

### **BCBSM, Priority Health and Medicaid (MDHHS)- Updates on Current Issues and Concerns**

Don't miss out on this opportunity to attend a session with Blue Cross, Priority Health and Medicaid; three of the payers we work with daily. Each payer will present updates and will share valuable information. They may not be able to solve your billing questions, but offer you follow up to ensure the best information possible.

### **The Dark Side of the EMR and How to Live with it - Lori Ann Rickard**

An overview of EMRs; Identification of risk areas, including both external and internal risks poised to the EMR and protected health information; Relevant regulations; Documentation integrity; Auditing and what to do with your audit results; Q&A with Lori-Ann Rickard.

### **Credentialing - Jennifer Gamble CMRS**

Adding a Doctor to your private practice and don't know how to start? Come learn about the Provider Credentialing process and tackle this intimidating task with confidence, understanding, and tips to ensure provider reimbursement for medical services.

In our session you will learn:

- What is provider (MD, DO, NP, PA, etc.) credentialing?
- How to get started?
- Things to know about Credentialing
- What does the Credentialing process involve?
- Tips for Streamlining the Medical Credentialing Process

### **Best Practices for Improving Patient Collections - Garret Angelo**

Across the healthcare industry there is widespread acceptance that patients must be accountable for rising out of pocket costs. A higher touch overall patient experience in combination with a strategic approach to streamlining collection efforts will greatly impact patient collections and the bottom line. During this session, we will cover best practices for pre-registration and time of service collections, understanding why patients don't pay, skip tracing, technology and expectations of your third-party collection partner.

**ICD-10 Updates – Kathy Jo Uecker, Healthcare Consultant, CMPE, EFPM, NCP, CPC, COC, AAPC Fellow, CHSPA, CHSA**

"2021 ICD-10-CM updates: Looking ahead to October!

Just when you started to get comfortable with the 2020 ICD-10-CM changes, CMS has published their list of proposed diagnosis code updates for October. Is it really that time of year? Yes, it is! The topic of COVID-19 has dominated almost everything lately so this nugget of information may have passed by a lot of people. This seems like a great opportunity to talk about changes that may be on the horizon.

On May 11, CMS released information that proposed more than 550 ICD changes. Proposed changes include 490 code additions, 47 revisions, and 58 deleted codes that would go into effect October 1, 2020. We will be looking at some of the notable new, deleted and updated codes!

Great time to order your books so that you can make your changes right there during this session".