



Revenue Cycle Seminar

February 20, 2020

8:30 am – 9:30 am | Course RC2001

Hospital Billing (Best) Practices When Treating Motor Vehicle Accident Victims

CPE Credits: 1.0 | CPE Type: Specialized Knowledge | Level: Basic | Prerequisites: None

Program Content: Recent litigation in the state has increased focus on hospital billing practices when treating patients who have been involved in motor vehicle accidents. This presentation will outline current legal challenges involving the use of the Medical Lien Statute, provide suggested practices to determine whether to bill a patient's health insurance or an automotive insurance company, and discuss the appropriate circumstances to file a Medical Lien.

Learning Objectives: After attending this session, participants will be able to:

- Understand the state of the law regarding the use of the Medical Lien Statute.
- Gain familiarity with recent lawsuits involving the Medical Lien Statute.
- Understand best practices for situations where patients request their automotive insurance company be billed.
- Understand best practices for situations where patients request their health insurance not be billed, as there is another at-fault party.

Amie K. Alexander is an attorney with FRIDAY, ELDREDGE & CLARK, LLP in Little Rock, Arkansas. She earned her law degree from the University of Arkansas at Little Rock William H. Bowen School of Law. Her practice is focused in the area of healthcare where she works primarily on various corporate and compliance matters. She drafts and reviews policies to ensure compliance with federal healthcare regulations such as HIPAA, Stark I and Stark II, Anti-Kickback and Medicare/Medicaid reimbursement. Amie's clients include hospitals, physician groups and other medical service providers. Prior to joining the firm, Alexander developed a professional policy background while working with various organizations such as the National Agricultural Law Center, the Association of Arkansas Counties and the United States Department of Agriculture, Foreign Agricultural Service.

9:40 am – 10:55 am | Course RC2002

Conquering Denials: How to Win the War

CPE Credits: 1.5 | CPE Type: Specialized Knowledge | Level: Basic | Prerequisites: None

Program Content: This presentation covers the complex and often times overwhelming task of denial prevention. As long as there has been insurance, there have been insurance claim denials. Through ever-changing government regulations and insurers tightening their belts, what once was a much less complex denial process has become a challenge for healthcare providers of all sizes.

Learning Objectives: After the session, participants will be able to

- Understand the common ways denial rates are calculated.
- Understand national average denial rate, and what the most common denials are so you can gauge how well your denial prevention program is working.
- Learn how to organize, categorize and understand the root cause of your denials.
- Leave with simple concepts to engage all parties that influence denials. Denial prevention is a full revenue cycle initiative.

Cassie Wise is the Executive Director of CBO Services with Healthcare Resource Group. Her healthcare career began as an afterschool job at a rural hospital in the Inland Northwest. Nearly 20 years later she is leading the largest Division at HRG and possesses extensive experience with multiple Health Information Systems, clearing house softwares, and EHRs. Cassie's division provides CBO services to multiple facilities nationwide including: PPS, CAH, LTAC, LTC & Inpatient Psych along with many Clinics, and Indian Health facilities. She and her team provide their CBO partners with the AR tools and economic stability needed to focus on what is really important....caring for their communities. Cassie's healthcare career began as an afterschool job at a rural hospital in the Inland Northwest. Nearly 20 years later she is the leading the largest division at Healthcare Resource Group. Her role overseeing the central business office functions has

given her the opportunity to work with nearly all of the Health Information Systems, clearing house softwares, and hospitals and clinics of all sizes.

11:00 am – 11:50 am | Course RC2003

CDI Pitfalls

CPE Credits: 1.0 | CPE Type: Specialized Knowledge | Level: Basic | Prerequisites: None

Program Content: In this session, we will take a look at the documentation requirements for CC's and MCC's and how they affect the DRG assignment. In doing so, we will review notorious conditions which tend to attract auditors' attention and common mistakes made when choosing the ICD-10-CM codes.

Learning Objectives: After attending this session, participants will be able to

- Understand the documentation requirements for common MCC/ CCs.
- Identify how to use the assigned DRG as a way to quickly feel confident about the code assignment.
- Define how documentation and coding can affect the DRG Assignment

Heather Greene is a Managing Consultant with the Health Care Performance Advisory Services division of BKD. Heather has nearly 20 years of experience in the healthcare industry, with extensive experience working in a variety of key healthcare information management (HIM) roles. She assists hospitals in evaluating and improving their clinical documentation integrity (CDI) programs. She also helps hospitals and physician practices in increasing their net revenues and lowering denials through improved clinical documentation and coding integrity. She provides coding and documentation consulting and training to improve clinical documentation integrity and coding accuracy. Heather is a graduate of Eastern Kentucky University, with a B.S. in Health Information Management and has a Master of Business Administration from Midway College. She is a Registered Health Information Administrator (RHIA), Certified Inpatient Coder (CIC), Certified Documentation Improvement Professional (CDIP) Certified Professional Medical Auditor (CPMA), and Certified Professional Coder (CPC). She also holds designations of Approved CDI and ICD-10-CM/PCS Trainer.

12:20 pm – 2:15 pm | Course RC2004

Financial Assistance Policies: Know What Data to Collect and Capture to Position Your Organization for Success

CPE Credits: 2.0 | CPE Type: Specialized Knowledge | Level: Basic | Prerequisites: None

Program Content: Uncompensated care extends across your organization to finance, tax, compliance, and reimbursement. In this session you will learn that it takes a broad approach to ensure your organization has captured the right information to minimize financial implications for your hospital. Our providers told us they wanted to simplify the process of assimilating federal and state regulations in their appeal process.

Learning Objectives: After this presentation, participants will be able to

- Understand S-10 requirements and impact on reimbursement with DSH and outlook on 340B.
- Identify Tax implications and 501(r)(4) and Financial Assistance Policy: Language, Publication, and Other Compliance Guidelines.
- Learn the variations between Medicare, IRS, and GAAP regulations in relation to financial assistance policies and uncompensated care.

Laura Gillenwater, CPA is a senior manager at HORNE with nearly ten years of experience dedicated to healthcare reimbursement & advisory. She works closely with her clients to optimize reimbursement and serves entities that span the entire health care continuum. Laura specializes in medical education reimbursement (IME/DGME) and serves as HORNE's in-house IRIS database expert. Other services include cost report preparation and review, assistance with MAC desk review and audit, wage index review, amendments, re-openings, and the S-10 review process. Laura also assists hospitals with Sole Community status, Geographic Reclassification applications, Medicare bad debt audits and related issues. She works extensively with DSH survey preparations in Mississippi, Georgia and Louisiana, as well as related DSH examination in those states. Laura's influence as a speaker in the industry continues to grow. She addresses audiences on topics such as telehealth reimbursement and Medicare bad debt.

Amie Whittington, CPA is a tax senior manager in HORNE LLP's healthcare services practice and is leader of HORNE's firmwide tax nonprofit practice. She has 10+ years of experience providing tax and consulting and focuses on serving nonprofit and healthcare entities, including hospitals, doctor groups and physicians. She is known for working with taxable and tax-exempt healthcare entities, including consolidated, multi-state corporate returns.

Kade Moody, CPA, CHFP is a healthcare partner at HORNE LLP and serves as the leader of HORNE's healthcare assurance services. He is also the firm's Audit Quality Partner as designated by the Governmental Audit Quality Center and a member of HORNE's Board of Directors. Kade also serves on the firm's Belonging at HORNE Steering Committee. Kade joined HORNE in 2002 after beginning his career with an international accounting firm. He has more than 25 years of experience in public accounting providing assurance and advisory services to governmental, nonprofit and tribal organizations, as well as large, privately-held corporations. He has extensive experience with financial reporting requirements, including those required for complex financing arrangements, as well as expertise with merger, acquisition and affiliation transactions. He also has primary responsibility for the firm's services to the pharmaceutical industry. Kade draws on his broad experience to provide anticipatory vision of financial and operational risk for his clients.

2:30 pm – 4:30 pm | Course RC2005

Provider Contracting and Insurance Reform: Updates from the 2019 Legislative Session

CPE Credits: 2.0 | CPE Type: Specialized Knowledge | Level: Basic | Prerequisites: None

Program Content: The 92nd General Assembly brought significant change for providers in the passage of the Healthcare Contracting Simplification Act and other Acts, which bring great changes in relationships between providers and healthcare insurers. This presentation will focus on the major changes that went into effect in 2019.

Learning Objectives: After this presentation,

- Participants will understand updates prohibiting certain anticompetitive practices by a healthcare insurer.
- Participants will gain familiarity with updates to Arkansas Law in 2019 that affect healthcare providers.

Lynda M. Johnson is a partner with FRIDAY, ELDREDGE & CLARK, LLP in Little Rock, Arkansas. She has practiced in the health law area since 1986 representing a wide variety of healthcare providers including hospitals, physicians, physician groups, nursing homes, and home health agencies. Her practice includes issues involved in Stark I and II and Anti-Kickback compliance, HIPAA Compliance, Medicare/Medicaid reimbursement, corporate compliance issues, physician and hospital organization issues, managed care, health care and hospital law, long term care, and home health. She is a frequent speaker before affiliate groups of the Arkansas Hospital Association on areas of regulatory healthcare compliance and has written for the Healthcare Financial Management Association's national publication "hfm." Selected for inclusion in the "Best Lawyers in America" in Health Law, Ms. Johnson received her Bachelors of Professional Accountancy degree from Mississippi State University and her Juris Doctorate from the University of Arkansas at Little Rock School of Law.

LOCATION: Arkansas Hospital Association, 419 Natural Resources Drive, Little Rock, AR 72205
(maximum seating 60, registration will stop at that point)

LUNCH: Box lunch will be served at 11:50 am – 12:20 pm

BREAKS: 10, 5, 15-minute breaks at 9:30am, 10:55am, 2:15pm

PRESENTATION HANDOUTS: All speaker presentations will be emailed to registered attendees within 72 hours of the meeting. Please download and print if you would like handouts for the actual session.

EDUCATIONAL CREDITS



Health Care Financial Management Association-Arkansas Chapter is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: www.NASBAregistry.org

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Prerequisites and advance preparation are not required unless otherwise indicated.

A maximum of 7.5 CPE credits is available. All courses are instruction method GROUP LIVE.

All sessions will incorporate an element of participant engagement, and there will be time for questions after each session.

PLEASE REGISTER ON-LINE

Go to: www.arkansashfma.org then click on Education & Events

Or go to:

<https://cvent.me/3ERDyD>

***Registration Fee:** \$75 AR HFMA Member
 \$150 Non-HFMA Member

***Deadline for registration and payment is February 17, 2020.**

REFUNDS AND CANCELLATIONS

If cancellations are received after February 17, 2020, the registration fee is not refundable.

Registrants who do not cancel or fail to attend must pay the entire fee. Substitutions, however, are permitted. Registration forms and cancellations must be emailed to address below. Phone and voicemail are not valid forms of communication for cancellations. For more information regarding administrative policies such as complaint and refund, please contact Tami Hill at 501-316-1229 or arhfma@arkansashfma.org.