

Sessions

SUNDAY, SEPTEMBER 14

8:00am - Noon

Pre-Conference Workshops

Compliance: Risk Assessment; Investigations & Payor Contract and Rules

Celebrity 3

Melody W. Mulaik, MSHS, CRA, FAHRA, CPC, CPC-H, RCC, President, Coding Strategies

Laurie Desjardins, Director of Consulting, Coding Strategies, Inc.

This session will provide a high level overview of the key compliance concerns that impact billing companies, and their clients, in today's challenging billing environment. Billing company personnel must have knowledge of these issues so that they may appropriately advise their clients for mutual benefit. The OIG Workplan for Third Party billing companies, the OIG workplan and other key directives will be discussed with a real world perspective so that attendees can develop their own internal checklist of concerns to discuss within their own organizations. The overall goal of this session is to help attendees validate existing knowledge and/or identify areas of concern to mitigate risks for their clients and their own organizations.

Learning Objectives:

At the end of this session, participants will be able to:

- Outline an overview of the key areas of compliance concerns for billing companies.
- Describe how to appropriately respond to all levels of audits and investigations
- Analyze rules with payors and how to navigate challenging rules

Finance Workshop

Celebrity 2

Jud S. Neal, CHBME, MBA, Owner, JML Consulting

This pre-conference session will cover many vital components that are critical to financial success, including accounting principles, reporting and funding. Take a deeper look at important topics such as cash vs. accrual accounting, EBITDA, borrowing options, banking and cash management and more!

Learning Objectives:

At the end of this session, participants will be able to:

- Identify and explain various accounting principles
- Describe the different types of financial reporting

12:30pm - 1:45pm

Celebrity 1

CHBME Lunch with Keynote Speaker Deborah Walker Keegan, PhD, FACMPE

2:00pm - 2:30pm

Celebrity 4

President's Address

Jeanne Gilreath, CHBME, President, HBMA Board of Directors

2:30pm - 3:30pm

Celebrity 4

Keynote Address: Aligning the Revenue Cycle with Payment Reform

Deborah Walker Keegan, PhD, FACMPE, Healthcare Consultant, Keynote Speaker, Author, Medical Practice Dimensions, Inc.

Value-based purchasing, consumer-driven health plans, payer consolidation and accountable care are trademarks of the new payment reform landscape. As we transition from payment-for-volume to payment-for-value, we need to manage new revenue streams beyond the traditional claims and statement process. The financial engagement of patients in today's health plans also requires a new focus on front-end billing, to include price estimation tools, patient financial clearance and time-of-service collections.

Learning Objectives:

At the end of this session, participants will be able to:

- Express the impact of current changes on the revenue cycle
- Explain how to accelerate the revenue cycle
- Identify revenue streams to ensure revenue optimization

4:15pm - 5:15pm

Concurrent Sessions

Government Audit Alphabet Soup: RAC vs ZPIC and What These Audits Mean for Your Practices

Celebrity 1

Joan Gilhooly, MBA, CPC, CPCO, President/Consultant, Medical Business Resources, LLC

Both of these government audit programs address the issue of improper payments, but how do they differ? In this session, we'll address the key differences in each of these programs, the implications for billing services and their clients as well as how to stay on top of the process in the event one of these audits is initiated. We'll address the implications for recoupment and Medicare's appeal process in the event the provider disagrees with the government's findings. And we'll give you pointers on when to "go it alone" vs when to enlist outside help in this classic David vs Goliath confrontation that healthcare providers are facing all over the country.

Learning Objectives:

At the end of this session, participants will be able to:

- Identify the difference between a RAC audit and a ZPIC audit request.

- Describe the difference between automated RAC review and a complex RAC review
- State where the list of RAC audit topics for each jurisdiction can be found.
- List the recommended “next steps” when one of these audits occurs.

PQRS: Measuring Value Today and Tomorrow

Celebrity 2

Melody W. Mulaik, MSHS, CRA, FAHRA, CPC, CPC-H, RCC, President, Coding Strategies

This session will provide a high level overview of the PQRS program and the submission requirements. Billing company personnel must have knowledge of these issues so that they may appropriately advise their clients for mutual benefit. The reporting of quality measures will continue to be an important area of focus as the healthcare system continues to change at a rapid pace. Not appropriately reporting measures will result in decreased revenue and potentially adverse quality reporting for billing company clients. The overall goal of this session is to help attendees validate existing knowledge and/or identify areas of concern to mitigate risks for their clients and their own organizations.

Learning Objectives:

At the end of this session, participants will be able to:

- Explain the requirements of the PQRS system and the various submission methods and requirements.
- Specify key reporting measures to assist with the identification of appropriate client measures.
- Tell how PQRS and how quality measures and coding practices are intertwined.

Patient Portals: An Overnight Success 550 Years in the Making

Celebrity 3

Jorge Wong, HPMA CRCR Certified, Senior Product Director, Experian Health

Patient portals, the latest innovation in mass communication, take the next step through the use of bi-directional information flow, marketing and revenue cycle integration. This session will review the elements of a successful patient portal design and its impact on patient satisfaction, cash flow and workflow process. Additionally, meaningful use requirements and their influence on patient portals will also be discussed.

Learning Objectives:

At the end of this session, participants will be able to:

- List three characteristics of an effective patient portal.
- Name two Meaningful Use Stage 2 Core Objectives related to patient portals.
- Outline three of the major areas impacted by an effective patient portal.

5:15pm – 7:15pm

Celebrity 5-8

Opening Reception

MONDAY, SEPTEMBER 15

7:00pm – 7:45pm

Celebrity 5-8

New Member and First-Time Attendee Welcome Breakfast

7:45am – 8:15am

Celebrity 4

HBMA Job Board Presentation

John W. Howard, PhD, President, Performance Resources

A brief introduction to HBMA’s updated member benefit, a complete online recruiting, selection and hiring system. We will cover the features and benefits of the system, including the optional hiring assessments that have been customized for HBMA. Attendees will learn how the system will help them make better hires while saving both time and money, when compared to their current hiring practices.

8:15am – 8:45am

Celebrity 4

Introduction of the Candidates for HBMA Board of Directors

Get a front row seat to hear from the nominees for the 2015 HBMA Board of Directors!

8:45am – 9:15am

Celebrity 4

General Session: Servicing Physicians Employed by Hospitals

Angela Hickman CPC, CEDC, AHIMA ICD-10-CM/PCS Trainer, AHIMA Ambassador Senior Consultant Culbert Healthcare Solutions;

Amy M. Guay, CFO, Harvard Medical Faculty Physicians at Beth Israel, Deaconess Medical Center, Inc.

Join this dynamic interview style session with leading experts in the industry. Conversation will be focused on the role of HBMA members in the evolving marketplace of hospital employed physician groups as well as practice types and specific services that are going to be needed to serve those clients. There will be time for Q&A from the audience as well.

Sessions *(continued)*

10:15am - 11:15am

Concurrent Sessions

The Patient Centered Payoff

Celebrity 1

Joe Capko, Senior Consultant, Capko and Morgan

Practices are grappling with new demands that they become more “patient-centered” – a movement that is even impacting how they get paid. Practice management consultant Joe Capko of Capko & Morgan explains what the patient-centered movement is all about, how it all began, the ways that payers are getting on the bandwagon, and what it means for practices, their staffs and their billing teams.

Learning Objectives:

At the end of this session, participants will be able to:

- Describe the roots of the patient-centered movement.
- Identify the basics of patient-centered care.
- Explain how patient-centered initiatives are changing payer programs, and how that will impact billing.

Bundled Charges/CCI/LCD: Untangling the Conundrum of Edits

Celebrity 2

Melody W. Mulaik, MSHS, CRA, FAHRA, CPC, CPC-H, RCC, President, Coding Strategies

This session will provide a review of the current edits being utilized by governmental and commercial payors. Billing company personnel must have knowledge of these issues so that they may appropriately advise their clients for mutual benefit. There are different risks and challenges associated with bundling edits depending upon who is performing the coding function. Both primary coding models will be discussed to identify key areas of concern and strategies for addressing these concerns will be reviewed. The overall goal of this session is to help attendees validate existing knowledge and/or identify areas of concern to mitigate risks for their clients and their own organizations.

Learning Objectives:

At the end of this session, participants will be able to:

- Recognize the various types of billing edits currently utilized by payors.
- Identify strategies on how to address edits regardless of who performs the coding function.
- List the key steps to implement to ensure identification and ongoing compliance of modifier assignment.

Remote Workforce: Could It Work For You? Risk and Rewards!

Celebrity 3

Susan Childs, FACMPE, Evolution Healthcare Consulting
Michelle Durner, MBA, CPA, CHBME, President, Applied Medical Systems, Inc.

Do you currently have or are you considering having staff members work from their homes? Join this informative session to cover all of the bases to help determine if this is the best option for you and your clients. This hands-on, real life experience will help for a smooth transition from the office to the home office.

Learning Objectives:

At the end of this session, participants will be able to:

- Identify benefits and disadvantages of a remote staff member.
- Outline the process for creating successful transition from an office to a home office.
- Explain how to monitor and gauge staff performance for those in the home office.

11:30am - 12:30pm

Concurrent Sessions

LEAN and Revenue Cycle Efficiencies for Small and Medium Sized Billing Operations

Celebrity 1

Joan Gilhooly, MBA, CPC, CPCO, President/Consultant, Medical Business Resources, LLC

“Lean” is all the buzz in healthcare today. But what is LEAN – and how does it apply to the revenue cycle? We hear of large organizations having great success when using LEAN tools to create greater efficiency within their operations. But can LEAN be scaled to improve efficiency in small to medium sized billing organizations too? In this session, we’ll address these questions and more as we look at the principles of LEAN as well as the “tools” used in LEAN process improvement efforts. At the end of this session, we’ll provide you with practical ideas for you to take home to use in your business!

Learning Objectives:

At the end of this session, participants will be able to:

- Describe the steps in the PDAC cycle and explain why following the PDAC cycle is critical to the success of any improvement effort.
- Outline the steps in a 55 analysis.
- Describe the benefits of root cause problem solving strategies.

The Revenue Cycle Starts Inside the Practice

Celebrity 2

Laurie Morgan, Senior Consultant, Capko & Morgan

With superbills and claims increasingly driven by EHRs, and insurance trends making time-of-service collections more important than ever, the practice’s role in managing key pieces of its revenue cycle is growing – even for practices that rely on a professional billing service. The key to success is for practice staff and the billing service team to communicate effectively and work as a team. This means all players need to understand all of the moving parts that must

come together for efficient, timely and profitable billing and collections – including pre-authorization and coverage checks, proper calculation of patient responsibility, and effective use of the EHR and other tools for accurate coding and claims preparation. This presentation will spotlight some of the shifting roles and new needs – and help professional billers work more effectively with their clients so that the relationship is happy and productive and both sides achieve their goal: effective billing and collections!

Learning Objectives:

At the end of this session, participants will be able to:

- Identify mistakes and assumptions practice staff make when working with a billing service and how to help them correct them.
- List key trends in health plans that practices and billing services must work together to address.
- Outline how technology is changing the practice and billing service relationship.
- Describe key ways to reinforce the team connection between your billing service, practice staff and the provider team, to help everyone reach the goal of better collections and higher profitability.

Business Intelligence for Medical Practices

Celebrity 3

Nate Moore, Nate Moore Solutions, Inc.

Are your clients trying to run their practices like a business but struggling to get the information they really need to make good business decisions? Take advantage of three built in SQL Server Business Intelligence (BI) tools to really take practice analytics to the next level. Analysis Services summarizes large quantities of data into cubes that can be linked to Excel for powerful data analysis. Integration Services imports and exports data from a variety of practice sources to combine data from multiple datasets in one place. Reporting Services creates web pages, dashboards, and scheduled emails with the data you need when you need it. Combine all three SQL BI tools to analyze, combine, and distribute critical practice data throughout your practices in a variety of powerful and exciting new ways.

Learning Objectives:

At the end of this session, participants will be able to:

- Describe examples of data exploration using analysis services.
- Recognize sources of data to combine with integration services.
- Differentiate between pulling and pushing data with reporting services.

12:30pm – 2:15pm

Celebrity 4

Luncheon and Annual Business Meeting

Join us for the Annual Luncheon and Business Meeting as we honor the best and brightest in the HBMA community. The function starts off with the luncheon, followed by the

awards presentation and membership meeting where an update on overall state of business for HBMA will be presented.

3:15pm – 4:15pm

Concurrent Sessions

ACO's and PCMH Practices: Impact Considerations on the Practice's Revenue Cycle

Celebrity 1

Susan Childs, FACMPE, Evolution Healthcare Consulting

As billers and client advisors, we are required to be more than aware of physicians considering various models and maximizing revenue, such as when joining an ACO and PCMH certification. ACO affiliation, coupled with PCMH initiatives require reports and transactions to identify, track and benchmark revenue. This can help determine how to maximize profits and track adjustments that facilitate future forecasting with our clients. Approached from a biller's perspective, this session provides examples of essential accounts receivables reports, transactions and adjustment types to create and track.

Learning Objectives:

At the end of this session, participants will be able to:

- Identify basic ACO models and typical contract structures.
- List considerations of PCMH payment methodologies.
- Utilize reports that can help review and forecast financial profits.

Keep Calm and Collect the Money: Avoiding Rejection, Appealing Denials and Collecting Balances

Celebrity 2

Laurie Morgan, Senior Consultant, Capko & Morgan

As downward pressure on reimbursement rates continues, and the cost of everything else continues to rise, your practice clients are more focused than ever on getting every dime that's owed to them. At the same time, payers are more rigid than ever about denying claims that don't meet requirements to the letter. To keep your practices happy – and profitable – it's critical to stay on top of payer requirements, submit clean claims and be effective in collecting on the back-end.

Learning Objectives:

At the end of this session, participants will be able to:

- Explain how to keep claims flowing cleanly and on time to minimize rejection and denial risk.
- Describe how to present and manage appeals for maximum likelihood of success.
- Explain how technology can assist in preparing and analyzing claims.
- Identify solutions for working with your practice clients to create effective collection procedures.

“Do It Yourself” Dashboards: Conditional Formatting in Excel

Celebrity 3

Nate Moore, Nate Moore Solutions, Inc.

Microsoft Excel 2013 comes with a wide variety of tools you can use to make compelling, visually appealing presentations to physicians and administrators. Conditional formatting is a powerful way to have Excel automatically format cells based on the content of the cell. You can quickly highlight data that is too high, below average, contains certain text, and much more. We'll use conditional formatting to create dashboards that automatically change with new data. We'll also use conditional formatting to quickly analyze new data to highlight problems and spot opportunities. See several tricks to make your spreadsheets look more like dashboards and your reports more interesting and informative. The presentation will be a live demonstration using Excel 2013.

Learning Objectives:

At the end of this session, participants will be able to:

- Operate conditional formatting tools to automatically highlight critical data.
- Create spreadsheets more like dashboards with colors and icon sets.
- Analyze new data with conditional formatting rules.

4:30pm – 5:30pm

Celebrity 4

General Session: Operationalizing ICD-10 In Your Practice Workflows to Drive Billing Success

Angela Hickman CPC, CEDC, AHIMA ICD-10-CM/PCS Trainer, AHIMA Ambassador Senior Consultant Culbert Healthcare Solutions;

Amy M. Guay, CFO, Harvard Medical Faculty Physicians at Beth Israel Deaconess Medical Center, Inc.

The goals for this presentation are to share the strategies, discoveries and lessons learned as Harvard Medical Faculty Physicians launched its ICD-10 Implementation Project. Key concepts we will share will focus on the impact we found ICD-10 was going to have on the physicians workflows and the revenue cycle bottom line, and solutions we found to address and mitigate negative outcomes. This includes the need for CAC and CDI to support the goals, developing relationships with each department, and divisions within those departments, to find out their unique needs so that HMFP Finance could develop project plans that were going to address these differences and be able to provide the necessary resources to mitigate the gaps.

Learning Objectives:

At the end of this session, participants will be able to:

- Define key areas and key performance indicators (KPI's) that are used to track and measure the impact on the organization.
- Explain the unique challenges HMFP faces and how these

may be relevant in your own organization in order to implement a successful and practical plan.

5:30pm – 7:00pm

Celebrity 5-8

Exhibitor Hosted Reception

TUESDAY, SEPTEMBER 16

7:30am – 8:30am

Celebrity 4

Roundtable Discussion Session Based on Billing Company Size

Join an interactive roundtable discussion and network with your peers on the issues most affecting your business day to day. These discussions will be facilitated by experts in the industry and allow for you to gain valuable insight on how others are finding unique solutions to complex problems.

8:30am – 9:30am

Concurrent Sessions

CAQH CORE Operating Rules and CAQH Solutions: Adding Value to Your Client Relationships

Celebrity 1

Denise M. Buening, MsM, Director- CORE, CAQH

The session will focus on administrative efficiencies to be gained via use of the standards and CAQH CORE operating rules. An overview of the CAQH Solutions utilities such as Universal Provider Database© and EnrollHub© will provide practical information you can use to engage both existing and potential provider clients to add value to their business relationships.

Learning Objectives:

At the end of this session, participants will be able to:

- Identify the transactions, standards and operating rules used in healthcare administration.
- Identify the ways that use of standards and operating rules save time and money.
- List the CAQH Solutions tools that can help enhance your potential and existing client relationships.

Comparative Analytics: Benchmarking to Prevent Audits

Celebrity 2

Jared Krawczyk, Chief Product Architect, Fi-Med Management

In this session, we will explore multiple benchmarking techniques that can be used to profile provider's billing data to understand where greatest audit risk exposure

lies. Attendees will learn the specific formulas that are commonly used to identify statistical outliers as well as how to prioritize and plan the physician review process to proactively reduce your risk.

Learning Objectives:

At the end of this session, participants will be able to:

- Explain how to apply numerous actual payor benchmarking techniques to your billing data.
- Describe how to prioritize your review process based on measurable risk profiles.
- Explain how to leverage continuous benchmarking to track provider and coding changes.

No More Difficult People: A Three-Part Game Plan

Celebrity 3

Dana Lightman, PhD, Power Optimism

Healthcare billing and business practices are complex, and staff often function in situations that become highly emotionally charged. As a result, the work experience can be perceived as dealing with “difficult people,” leaving one feeling stressed, drained and burned out. The key to resolving these difficulties is to take charge of your responses. This workshop teaches tactics to get rid of your “hot button” reactions, techniques to effectively exert your influence, and strategies to prevent other people’s troubling behaviors from troubling you.

Learning Objectives:

At the end of this session, participants will be able to:

- Describe the role of reinterpretation in managing interactions with difficult people.
- List five types of emotional hijacks and two easy steps to manage them.
- Identify the key elements needed to function effectively from your influence zone.
- Recognize five POWER practices for choosing beneficial responses.

10:30am – 12:00pm

Celebrity 4

General Session: Washington Update

Bill Finerfrock, President, Capitol Associates, Director of Government Affairs, HBMA

Bill Finerfrock will be providing an update and overview of the latest developments in Medicare and healthcare reform and their potential impact on HBMA members and your clients. Will the SGR problem be fixed any time soon? How might the November House and Senate elections affect the legislative process and healthcare legislation through the remainder of 2014 and the next Congress? What’s the latest Congressional thinking on reforming how Medicare pays providers? Be sure to stick around to end of the Conference to get the latest and most up-to-date insights on what’s happening in our Nation’s Capital!

Learning Objectives:

At the end of this session, participants will be able to:

- Identify the latest court challenges of the Affordable Care Act
- Explain the implications of Affordable Care Act challenges on business owners and employees

12:00pm – 12:15pm

Celebrity 4

Closing Remarks

Jeanne Gilreath, CHBME, President, HBMA Board of Directors