Coding Update 2018: Conquering Your Coding Hurdles

Monday, September 24-Tuesday, September 25
Los Angeles Convention Center, Room 403B

Course Director: Donna M. Lahey, RNFA; Scottsdale, AZ

Coding Committee
Chairs: Scott I. Horn, DO; Virginia Beach, VA
William Mitchell, MD; Mount Laurel, NJ

Faculty
Peng Bai, DO; Winston Salem, NC
R. Dale Blasier, MD, FRCSC, MBA; Little Rock, AZ
Christopher P. Kauffman, MD; Nashville, TN
Donna M. Lahey, RNFA, Scottsdale, AZ
Charles A. Mick, MD; Northampton, MA

William Mitchell, MD; Mount Laurel, ND
Gregory J. Przybylski, MD; Edison, NJ
Paul Saiz, MD; Las Cruces, NM
William J. Sullivan, MD; Denver, CO
Karin R. Swartz, MD; Milwaukee, WI

Description
Take the pain out of your practice and conquer your coding challenges by attending this timely and highly interactive course led by expert physician faculty who will provide comprehensive coding information you can immediately use to maximize your profits and minimize your losses. Coding Update will take you beyond the basics, covering the latest information on ICD-10, E&M coding, and CPT-4 coding of surgical, medical and radiologic procedures.

You will leave this course with the necessary knowledge and critical tips on how to navigate through the authorization and denial process, identify nuances that affect proper billing and cause rejected/delayed claims, utilize Medicare NCCI edits, and properly document to receive reimbursement.

Additionally, participants will have the opportunity to:
- Meet one-on-one with physician faculty who lead NASS’ CPT, RUC and reimbursement efforts;
- Examine real life cases and perform operative note dissection in the hands-on coding sessions;
- Participate in an interactive panel discussion with leading experts in the spine coding industry.

Credits
NASS designates this live activity for a maximum of 15 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The American Medical Association has determined that physicians not licensed in the US to participate in this CME activity are eligible for AMA PRA Category 1 Credits™.

This program meets AAPC guidelines for 15.0 CEUs. Can be split between Core A, CANPC, CASCC, CEMC, COSC, CPMA and CPCO for continuing education units.

What’s on Your Mind? Interactive breakout sessions with faculty to ensure that no stone is left unturned and all questions are addressed by the end of the course!

Managing Denials and Appeals: During an interactive discussion on surgical denials and the appeals Process, join us as we examine a payer policy on lumbar fusion and learn how to avoid unwanted denials, peer reviews and the murky appeals process. Both payer and provider perspectives will be presented, and the audience will then have time to ask questions to the panel and discuss issues relevant to their practice.
Objectives

Upon completion of this course, participants should gain strategies to:

- Improve cash flow by reducing denials and resubmissions;
- Identify problems which cause rejected/delayed claims;
- Correlate correct coding with practice reimbursement ensuring that every procedure is reimbursed at its highest allowable level;
- Recognize the relationship between proper diagnostic (ICD10) and procedural coding (CPT4) and how to link them to avoid denials;
- Learn the elements required for complete and accurate documentation for E&M coding and medical and surgical procedure notes;
- Know the accurate use of modifiers and their impact on reimbursement;
- Effectively and accurately code interventional injection procedures and neurologic testing;
- Utilize payer reimbursement policies and guidelines to avoid claim denials and obtain proper authorization;
- Effectively incorporate teachings of this course into their practice.

Monday, September 24

7:30-8:00 a.m.  Registration and Continental Breakfast

8:00 a.m.  Introduction  
*Donna M. Lahey, RNFA*

8:00-8:30 a.m.  What’s On Your Mind?  
*Faculty Panel*  
Interactive breakout sessions with faculty to ensure that no stone is left unturned and all questions are addressed by the end of the course!

8:30-9:30 a.m.  Tips and Pearls for Codes and Bundling: The Inner Works  
*William Mitchell, MD*  
- New Codes and CPT Changes
- Bundling: Meaning and Applications
- CCI Edits: Bundling and Unbundling
- Types of Codes: Primary/Add-on/Mod 51 Exempt
- Are All Codes Equal?
- Anatomy of and within CPT
- Code Vignettes

9:30-10:15 a.m.  Politics and Policies  
*Charles A. Mick, MD*  
- What Can We Expect with the New Administration?
- Government Mandates: MACRA: MIPS and APM’s Replacing EHR/PQRS/Value-based Modifier
- Penalties and Incentives for Government Mandates
- RUC/CPT Process
- SPINEPAC: Top Reimbursement Issues Addressed in 2017 - What Awaits Us in the Future?

10:15-10:30 a.m.  BREAK

10:30-11:15 a.m.  Coding Challenges  
*Donna M. Lahey, RNFA*  
- HCFA 1500 Navigation
- The Authorization Process
- Carrier Specific Policies: Distinguish Between Medicare and Carrier Specific Policies
11:15 a.m.-12:00 p.m.  Surgical Modifiers  
*R. Dale Blasier, MD, FRCSC, MBA*

12:00-1:00 p.m.  **LUNCH**

1:00-2:00 p.m.  22000 Series Codes  
*Christopher P. Kauffman, MD*

2:00-3:00 p.m.  63000 Series Codes  
*Gregory J. Przybylski, MD*

3:00-3:15 p.m.  **BREAK**

3:15-4:00 p.m.  Coding Dissection  
*William Mitchell, MD*

- Determine Where to Start When Coding an Operative Report: Key Components
- Examine Operative Notes, Submitted by Your Peers, for Correct Coding and Documentation

4:00-5:00 p.m.  Managing Denials and Appeals  
**Moderator: Gregory J. Przybylski, MD**

*Faculty Panel*

- An Interactive Discussion on Surgical Denials and the Appeals Process: With two sides to every coin, join us as we examine a Payer Policy on Lumbar Fusion and learn how to avoid unwanted denials, peer reviews and the murky appeals process. Both Payer and Provider perspectives will be presented and the audience will then have time to ask questions to the panel and discuss issues relevant to their practice.

Ask Those Burning Questions  
*Faculty Panel*

- Questions, Answers, Discussion: An Interactive Panel Session with All Faculty

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**Tuesday, September 25**

7:30-8:00 a.m.  Continental Breakfast

8:00-8:45 a.m.  Coding for Injections  
*William J. Sullivan, MD*

- Nuances
- Authorization Prerequisites
- Denials
- Reimbursement and Documentation for Payment: Carrier Specific Policies

8:45-9:45 a.m.  Physician Extenders  
Utilization and Billing  
*Karin R. Swartz, MD*

9:45-10:45 a.m.  Evaluation & Management  
*Paul Saiz, MD*

10:45-11:00 a.m.  **BREAK**

11:00-11:45 a.m.  Evaluation & Management Scenarios  
*Gregory J. Przybylski, MD*
11:45 a.m.-12:45 p.m.  Tips and Pearls for Coding and Payment
   *Donna M. Lahey, RNFA*
   - Coding Tools for the Everyday Practice
   - Site of Service Coding Issues: What Can I Do Where?
   - The Importance of Documentation for Reimbursement: Key Spine Issues
   - Appeals and Denials/Templates

12:45-1:30 p.m.  **LUNCH**

1:30-2:15 p.m.  Breakout Sessions
   - Session A: Advanced Physicians/Practitioners
   - Session B: Anatomy and Injection Review for Billers and Coders

2:15-3:00 p.m.  Coding for EMG/NCV/Radiographic Procedures
   *Peng Bai, DO*

3:00-3:15 p.m.  **BREAK**

3:15-4:00 p.m.  Alternative Payment Models: How to Survive in Today’s Healthcare Environment
   *Christopher P. Kauffman, MD*
   - Recent Changes to Bundled Payment Models

4:00-5:00 p.m.  Time To Ask Those Burning Questions
   *Faculty Panel*
   - Questions, Answers, Discussion: An Interactive Panel Session with All Faculty

5:00 p.m.  Course Adjourns