

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 <i>Donna M. Lahey, RNFA</i>
8:00-8:30 a.m.	What's On Your Mind? <i>Faculty Panel</i> 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 <i>William Mitchell, MD</i> 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 <i>Charles A. Mick, MD</i> 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 <i>Donna M. Lahey, RNFA</i> 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

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
OIG Work Plan: Identifying What Is On the Radar
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