Coding Update 2016: Essentials and Controversies of Spine Care Coding
Friday, April 8-Saturday, April 9, 2016
Hotel Palomar
San Diego, CA

Coding Committee Co-Chair: R. Dale Blasier MD, FRCSC, MBA
Coding Committee Co-Chair: Scott I. Horn, DO
Coding Course Director: Donna M. Lahey, RNFA

Description
Recognized by spine professionals as one of the most comprehensive, informative, and interactive courses in the spine industry, the NASS coding course is essential to practices desiring to maximize reimbursement through proper coding while staying on the forefront of coding changes, payer policies and new government regulations. The course provides tools and instruction to increase your practice’s bottom line and propel it into the future, including ICD10, E&M coding, and CPT4 coding of surgical, medical, and radiologic procedures. Participants will leave this course with tips on how to navigate through the authorization and denial process, utilize Medicare NCCI edits, and properly document to receive reimbursement.

Participants will be given the opportunity to meet one-on-one with physician faculty who lead NASS’ CPT, RUC and reimbursement efforts; participate in “real op notes” hands-on coding sessions and be part of an interactive panel discussion with leading experts in the spine coding industry.

Objectives
Upon completion of this session, participants should gain strategies to:
- Become familiar with Coding Updates for 2016 including new CPT codes, modifiers, NCCI edits, and OIG work plan changes;
- 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;
- Take advantage of government incentive programs and avoid penalties (EHR, Value based payment modifier);
- Understand the accurate use of modifiers and their impact on reimbursement;
- Define coding issues which negatively impact reimbursement and trigger audits;
- 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.
Friday, April 8

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

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

8:05-8:30 a.m. Tips and Pearls for Codes and Bundling: The Inner Works
- 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
William Mitchell, MD

8:30-9:15 a.m. Politics and Policies
- SGR Repeal: What it Means to You
- Government Mandates EHR/PQRS/Value Based Modifier
- Penalties and Incentives for Government Mandates
- RUC/CPT Process
- SPINEPAC: Top Reimbursement Issues Addressed in 2016/ What Awaits Us in the Future
Charles A. Mick, MD

9:15-10:00 a.m. Surgical Modifiers
Christopher P. Kauffman, MD

10:00-10:15 a.m. BREAK

10:15-11:15 a.m. 63000 Series Codes
Gregory J. Przybylski, MD

11:15 a.m.-12:00 p.m. Coding 101
- HCFA 1500 Form Navigation
- The Authorization Process
- Carrier Specific Policies
- Ancillary Service Coding
- Appeals and Denials/Templates
Donna M. Lahey, RNFA

12:00-12:45 p.m. LUNCH

12:45-1:45 p.m. 22000 Series Codes
Christopher P. Kauffman, MD

1:45-2:00 p.m. BREAK

2:00-2:45 p.m. Real Op Notes Coding
William Mitchell, MD

2:45-3:15 p.m. Panel Discussion: Common Surgical Denials and How to Manage These Denials (An Interactive Discussion on Surgical Denials and the Appeals Process)
Moderator: Christopher P. Kauffman, MD
Panel: Gregory J. Przybylski, MD; William Mitchell, MD; Charles A. Mick, MD; Donna M. Lahey, RNFA
Saturday, April 9
7:30-8:00 a.m. Continental Breakfast
8:00-8:45 a.m. Tips and Pearls for Coding and Payment
- 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
  *Donna M. Lahey, RNFA*

8:45-9:30 a.m. Injections, Stimulators, and Pumps: Coding /Nuances/ Authorization Prerequisites/ Reimbursement and Documentation for Payment. Carrier Specific Policies
  *David R. O'Brien Jr., MD*

9:30-10:00 a.m. Interactive Panel on Medical Denials/Preauthorization Requirements
  Moderator: *William J. Sullivan, MD*
  Panel: *David R. O'Brien Jr., MD; Scott Horn, DO*

10:00-10:15 a.m. BREAK

10:15-11:15 a.m. Evaluation & Management Guidelines
  *Gregory J. Przybylski, MD*

11:15-11:45 a.m. E&M Scenarios
  *Gregory J. Przybylski, MD*

11:45 a.m.-12:30 p.m. Interventionsal
- Coding for Electrodiagnostic Procedures
- Intraoperative Monitoring
  *Scott I. Horn, DO*

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

1:30-2:15 p.m. ICD-10: The First Six Months - Tips and Tidbits
  *William J. Sullivan, MD*

2:15-3:00 p.m. Questions, Answers, Discussion: An Interactive Session with the Faculty
  *Faculty Panel (All Faculty)*

3:00 p.m. Adjourn