



2018 Kentucky Rural & Community Health Clinical Documentation & Coding Bootcamp

Become A Rural or Community Health Coding & Billing Specialist (RH-CBS) (CH-CBS)
*** Approved For 11 Continuing Education Units By The AAPC and ARHPC***

How confident are you?

- Do your clinical providers know the documentation rules related to capturing the valuable services they provide? What type of training do they have on the differences between coding and billing?
- Does your facility have a full record of each service provided (CPT/HCPCS-2 codes) and why they were done (ICD-10-CM codes)?
- Do your patients only see what their insurer pays for or do they get a complete record of what they received?
- Are you generating all of the revenue that you are entitled to when billing non-Medicare/Medicaid payers?

Why attend?

- As of last year - Rural Health Clinics (RHC) had to start listing all CPT/HCPCS-2 codes performed on claims to Medicare for the first time in decades. Many RHCs are still working to get this done while balancing its AIR (per diem) system of getting paid with the variation in rules when billing commercial carriers.
- With the requirement by CMS in 2015 to require FQHCs to provide HCPCS code-level detail (CPT and HCPCS-2) - it has never been more important to make sure you are documenting and coding for 100% of what is done. If you aren't documenting and coding correctly you may not be capturing everything that is done and some revenue may be left on the table!
- We will present a detailed review of the AMA's 2018 CPT Professional Edition from the perspective of rural and community health focusing on the services typically provided by RHC's, FQHCs and look-alikes.
- We will focus on the guidelines that appear before and after key coding sections that rarely are accessible to providers and coders/billers in their EHRs and encoder software.
- We will limit the review of codes that will rarely or never be performed in your facility setting - but will review the CPT cover to cover including guidelines, appendices, and modifiers with focus on level of visits and preventive services.
- We will be careful to point you to over a dozen vital resources (including chapters from the CMS Benefits and Claims manuals) that outline the unique approach rural and community health needs to be aware of to stay compliant!

Date: September 13 - 14, 2018

Day 1: 8:30 am - 4:30 pm

Day 2: 8:30 am - 12:30pm

Cost: \$399

Early Bird Registration

Buy 1 get 1 Free if you register by June 8, 2018

Meeting Location:

Perkins Conference Center
Richmond, Kentucky

Register Online:

Training Calendar

<https://bit.ly/2GVQzw0>

Register by Phone:

404-937-6633 Option 1

Questions?:

info@RuralHealthCoding.com

Who is the class for?

This class is designed for clinical personnel (MD, DO, NP, PA, RN), coders, billers, EHR professionals, and facility managers that work in RHC's, FQHCs and look-alikes.

What is being taught?

The Rural/Community Health Clinical Documentation and Coding portion will be taught live from 8:30 a.m. – 4:30 p.m. on the first day and 8:00 am to 12:30 pm on the 2nd day over the course of September 13-14, 2018. The Rural/Community Health Billing portion will be taught via 2 webinars and must be completed prior to taking the optional examination. Each webinar session will last 1-1.5 hours and slides will be provided for reference and can be accessed via phone/tablet/computer by registered attendees.

Earning the Rural or Community Health Coding and Billing Specialist (RH-CBS or CH-CBS) Certification

Upon completing both sections of class (as verified by registration information maintained by ARHPC) authorized attendees will be able to take either the Rural and/or Community Health 100 question online examination. If a score of 75% is achieved, a certification of Community Health Coding & Billing Specialist (CH-CBS) or Rural Health Coding & Billing Specialist (RH-CBS) will be provided by the Association for Rural & Community Health Professional Coding. Full attendance includes the live training sessions, a 90-day ARHPC membership (one year if you pass the optional exam), the 2 billing webinars, and the optional testing fee.

After you pass the optional examinations

A certificate suitable for framing will be provided along with annual CEU renewal requirements and membership dues based upon the date of the class they attend. If the test is not passed the first time a free re-test is available. The test must be taken within 60 days of the last day of class or a fee of \$75 will be charged. To maintain the certification, CEU requirements must be met along with payment of membership dues payable one year after the date of the class attended.

Agenda

Day 1 – Training and Hands-on Exercises

8:00 a.m. – 8:00 a.m. - Registration & Continental Breakfast

8:30 a.m. – 12:00 p.m. Introduction and Testing Details Coding vs. Billing, Orientation to CPT, HCPCS-2, ICD-10, E/M Guidelines & Chart Auditing Principles

12:00 p.m. – 1:00 p.m. Lunch on Own

1:00 p.m. – 2:00 p.m. Determining E/M Level of Service (cont'd), Review Key E/M categories (e.g. Preventive vs. Sick Visits), Chronic Care Management & Advance Care Planning

2:00 p.m. – 4:30 p.m. Surgical Package Guidelines (CPT vs. CMS), CPT and HCPCS-2 Modifiers

Day 2 – Training and Hands-on Exercises

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

8:00 a.m. – 10:30 a.m. CPT and HCPCS-2 Modifiers (cont'd)

10:30 a.m. – 12:30 p.m. Review of community health procedural codes

Radiology, Pathology, Medicine, HCPCS-2

Questions? Email: info@RuralHealthCoding.com or Call: 404-937-6633 Option 1