



# Agenda:

Registration: .....	7:30 to 8:00
<b>Education Session:</b> .....	8:00 to 10:00
<b>FACT vs. FICTION:</b> The real Medicare regulations for Parts A and B, and where to find them	
<b>MEDICAL NECESSITY:</b> Providing necessary and reasonable rehab services	
<b>“TO B” or “NOT TO B”:</b> Appropriate use of Part B services	
<b>WHAT AM I DOING HERE???:</b> Individual vs. concurrent vs. group therapy	
Break .....	10:00 to 10:15
<b>Education Session:</b> .....	10:15 to 12:00
<b>MDS &amp; RUGs:</b> Current and future	
<b>WHAT’S IN A RUG??:</b> Determining appropriate RUGs categories for maximum legal reimbursement	
<b>RESTORATIVE NURSING:</b> Acceptable programs, providers and rehab’s involvement	
<b>Lunch (on your own)</b> .....	12:00 to 1:00
<b>Education Session:</b> .....	1:00 to 3:00
<b>WRITE RIGHT:</b> Documentation that meets Medicare guidelines and makes reviewers and therapists happy	
Break .....	3:00 to 3:15
<b>Education Session:</b> .....	3:15 to 5:00
<b>MEDICAL REVIEW:</b> MACs, RACs, ZPICs and CERTs (Oh My!)	
<b>TOP 10 REASONS FOR DENIAL:</b> What they are and how to fix them	
<b>BACK TO THE FUTURE:</b> Making plans for your practice setting	
Questions and Answers	
<b>Adjourn</b> .....	<b>5:00</b>

## Getting It Right From The Start

**Medicare Made Easy**  
**A Survival Guide for Rehab Services in SNF**  
**Charlotte, NC - March 12**  
**Dallas, TX - April 16**  
**Atlanta, GA - May 14**

**Other Locations**  
**Dates To Be Determined**  
**Norfolk, VA**  
**Houston, TX**  
**San Antonio, TX**

**Visit our website for locations in other regions**

**Presented By Your “Medicare Advisors”**  
**Pauline M. Franko, PT or Danna D. Mullins, PT**  
**Answering Your Medicare Questions**  
**for Over 10 Years**

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If you want to maximize your legal reimbursement for Medicare service,  
**YOU CAN’T AFFORD TO MISS THIS COURSE!**

### Program Highlights

- 1. RACs, MACs, and AUDITS:** TOP 10 REASONS for *DENIALS* and how to *FIX* them.
- 2. MDS 3.0 & RUG-IV:** Obtain maximum legal *REIMBURSEMENT*.
- 3. FACT vs FICTION:** *REAL Medicare RULES* and where to *FIND* them.
- 4. “TO “B” or NOT TO “B”:** Determining medically necessary services for *PART B Medicare services*.
- 5. WRITE RIGHT:** Documentation, coding & billing strategies that make *REVIEWERS* and *THERAPISTS HAPPY!*
- 6. BACK TO THE FUTURE:** *PLAN CHANGES* to your practice with information learned.

## Presenter:

### **EITHER: Pauline M. Franko, PT, MCSP**

Pauline is president and CEO of Encompass Consulting & Education, LLC. She also co-authors the "Medicare Advisor" columns for the Advance newsmagazines.

She graduated from Physiotherapy School in Coventry, England in 1966. Her experience has always been in the area of geriatrics, including SNF, Home Health, CORF and long term care rehabilitation administration.

As a LTC Regional Manager she was a Task Force Member for both Restraint Reduction and Restorative Nursing.

She is a member of the APTA and its Geriatric section. She also acts as a resource for the respected Eli Reports including the "MDS Alert".

### **OR: Danna D. Mullins, PT, MHS**

Danna is the principal associate and lecturer with Encompass Consulting & Education, LLC. She also co-authors the "Medicare Advisor" columns

She earned her both of her degrees from Washington University in St. Louis, Missouri. She has been a physical therapist for over 30 years, primarily in the areas of orthopedics, geriatrics, rehabilitation administration and education and is a practicing therapist.

In 1990 she was certified as a Zenger-Miller Frontline Leadership Instructor providing Management Training for Health Care Companies.

## Course Overview:

This highly interactive course provides participants with everything they need to know about delivering therapy services to Medicare beneficiaries in the SNF setting.

Topics include medical necessity of Medicare services; "skilled" care; individual vs. concurrent vs. group care; documenting services to assure reimbursement without overwhelming therapists; MDS 2.0/3.0 and RUGS III/IV; appropriate use of Part B services; utilization and supervision of non-therapist staff; RACs, MACs, ZPICs and CERTs and Medical Review along with the top reasons for denials and the solutions to help fix the problems.

Case studies are utilized to provide participants with fuller understanding of the regulations and their impact on reimbursement.

Time is spent in helping participants plan changes that they must make to be compliant with Medicare rules while achieving the maximum legal reimbursement for their therapy services.

## Course Objectives:

Upon completion of the program, the participant will be able to:

**1. Discuss** Medicare regulations governing medical necessity of rehabilitation services under Parts A and B, and apply them to their work setting.

**2. Participate** appropriately in the completion of the parts of the MDS 2.0 / MDS 3.0 that directly impact rehabilitation reimbursement, including selection of the Assessment Reference Date (ARD) and determination of the appropriate RUGS III / RUGS IV category for any given patient.

**3. Outline** regulations governing restorative nursing programs and explain the appropriate role of the rehab department in the delivery of restorative nursing services.

**4. Appropriately** document therapy services to justify medical necessity; obtain maximum legal reimbursement; and assure successful Medicare Medical Review. This includes certification; evaluations and plans of treatment; daily notes; progress reports and discharge summaries.

**5. Compare and contrast** coding and billing requirements between Part A and Part B services.

**6. Explain** Medicare Medical Review audits for both Parts A and B including the roles of the Medicare Administrative Contractor (MAC); Recovery Audit Contractor (RAC); Zone Program Integrity Contractor (ZPIC); Comprehensive Error Rate Testing (CERT) Contractors and how to prepare for an audit.

**7. Determine** those areas in his/her practice that need to be revised to be compliant with Medicare rules and regulations, including the Top 10 Reasons for Denials, and develop a plan of action for his/her work setting.

## Who Should Attend:

Physical and Occupational Therapists

Speech-Language Pathologists

Rehabilitation Directors

Physical and Occupational Therapist Assistants

Directors of Nursing

MDS Coordinators

Administrators

## REGISTRATION: Medicare Made Easy

This course has 7.5 contact hours.

For further information on course approval visit: [www.encompassmedicare.com](http://www.encompassmedicare.com)

**Early price is valid up to 2 weeks prior to seminar**

**Group Price: is per attendee registering together**

### Early Price

( ) Individual .....\$199

( ) Group of 2 or 3: per attendee ..... \$179

( ) Group of 4: per attendee .....\$159

### Regular Price

( ) Individual .....\$219

( ) Group of 2 or 3: per attendee ..... \$199

( ) Group of 4: per attendee .....\$179

**Call for prices on larger groups**

**Attach a separate registration for each attendee**

**\*\*PLEASE PRINT CLEARLY\*\***

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

\*Seminar Location: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

Name for certificate with professional title: \_\_\_\_\_

**The following required for credit card payment only.**

Credit Card: ( ) Visa/MasterCard ( ) Amex

CC Number: \_\_\_\_\_

Expiration Date: \_\_\_\_\_ / \_\_\_\_\_

Signature: \_\_\_\_\_

Please include your check or money order along with your registration form if not paying by credit card.

**Cancellation Policy:** All cancellations must be submitted in writing and received 2 week prior to seminar and will be subject to a 20% cancellation fee. No refunds will be given for cancellations less than 2 week but registration fee will be applied to an alternative date.