MANAGED CARE AND REVENUE CYCLE EDUCATION SESSION
Sheppard Pratt Conference Center
March 8, 2013

8:00-8:30 REGISTRATION AND CONTINENTAL BREAKFAST

8:30-9:15 HOT TOPICS IN ANNAPOlis
Speaker: Pegeen Townsend, Vice President Governmental Affairs, MedStar Health.

- Learn the issues being discussed during the legislative session that impact payers and providers

9:15-10:15 PHYSICIAN/HOSPITAL REVENUE CYCLE INTEGRATION
Speaker: Brad Cording, Senior Director Healthcare Business Insights, Revenue Cycle Academy

- Learn trends in how hospitals and health systems across the country are managing the physician component of their revenue cycle operations
- Examples and considerations to keep in mind when developing a revenue cycle and business office governance model (e.g., consolidated business office)
- Review a physician/hospital revenue cycle integration success story
- Other customer-centric strategies healthcare providers are employing in order to enhance the patient experience, while still keeping an eye on costs and efficiency

10:15-10:30 BREAK

10:30-11:30 GLOBAL PRICING: MEDICARE’S NEW PAYMENT MODEL – OPERATIONS REQUIREMENTS TO EFFECTIVE GLOBAL PRICING MANAGEMENT
Speakers: Trisha Frick, Johns Hopkins, Marty Brutscher, McBee Associates

- Learn some of the key aspects of Bundled Payments
- Identify data required to manage a bundled payment contract
- Outline day to day operations requirements for effectively managing bundled contracts
- Explain how to set up a system to manage bundled payment contracts

11:30-12:30 ALIGNING PAYER ARRANGEMENTS WITH CARE TRANSFORMATION
Speaker: Danielle Lloyd, Vice President Policy Development & Analysis, Premier HealthCare

- Apply lessons learned from 100 accountable care readiness assessments in diverse markets across the country;
- List six target markets for ACO-type partnerships other than Medicare, and describe the benefits of creating each partnership; and,
- Provide examples of models that have alignment based upon new payor and delivery models.
12:30-1:30  LUNCH

Learn the Value of an HFMA Membership

1:30-2:30  IMPACT OF BEHAVIORAL HEALTH REPORTING CHANGES ON MARYLAND HOSPITALS (Panel Discussion)

Moderator: Charlotte Kohler, Kohler HealthCare Consulting, Inc.
Panel: Rachel Schaaf, Maryland Hospital Association, Lauren Rose, Director, Rates & Reimbursement, MedStar Health, Inc., Marc Reiner, CEO, ValueOptions-Maryland

- Outline significance of the changes in psych service coding and reporting
- Discuss how the HSCRC expects current reporting
- Identify challenges faced for the July 1 conversion
- Internal operational changes to implement the changes
- Provide insight from those who have worked through the process

2:30-3:30  TAKING CONTROL OF EMTALA DENIALS, REDUCTION AND RECOUPMENT


- Outline Hospital & Payer Obligations Under EMTALA
- Understand How to Analyze ER Utilization & Denials Data
- Learn How to Successfully Appeal ER Denials
- Understand Process Improvement Actions that Impact ER Denials

3:30-4:30  DO IT YOURSELF REVENUE CYCLE ASSESSMENT, BE YOUR OWN CONSULTANT

Speaker: Mary Carpenter, FACHE, Principal, Insight Health Partners

- Identify the components of a Revenue Cycle Assessment and the steps necessary for assessment initiation
- Evaluate their organization’s Patient Access Services, Patient Financial Services and Account Life Cycle and successfully assess their current state
- Execute a Revenue Cycle assessment, uncover any operational weaknesses using the “Be Your Own Revenue Cycle Consultant” spreadsheet-driven tools (provided at no cost to attendees via web location during the presentation) in order to take steps to improve revenue cycle performance using the insights these tools provide