HEALTHCON

2022

— VIRTUAL —

Search, Solve, & Spring Ahead!

March 27–30, 2022

HEALTHCON
30 YEAR
ANNIVERSARY

HEALTHCON 2023

NASHVILLE, TN

Refine. Refresh. Reconnect.

Bring Your Crazy Heart to Nashville!

AAPC is pleased to announce HEALTHCON 2023 — the most fun you'll have keeping yourself up to date on changes and best practices in the healthcare business. Earn up to 18 CEUs. Refine your knowledge and knowhow. Refresh your toolkit. Reconnect with colleagues. Expand your professional network and have some fun in the process.

Nashville is a vibrant city with plenty of fun in store. In addition to some wild conference events, you can grab a few colleagues and hit the town for delicious local cuisine and live shows as we come together in the heart of the country. Don't miss out!

May 21-24, 2023 | Gaylord Opryland Resort & Convention Center

Stay Tuned — More to Come!

Table of Contents

Dear Attendees,

On behalf of all of us at AAPC, I'd like to welcome you to our 30th annual HEALTHCON. Due to continued uncertainty with the COVID-19 pandemic, we have made the decision to hold this year's HEALTHCON as a 100 percent virtual event.

This year, we're pleased to offer a virtual platform for you to update your industry knowledge, get up to speed on best practices, and come together with the AAPC community. We have much in store this year, with 65+ speakers and 80+ educational sessions to choose from, including:

- A legal trends panel (always very popular) will provide insight into today's and tomorrow's most pressing legal concerns for medical practices and facilities

- Our E/M panel will update us on the ongoing changes to E/M guidelines

- An outstanding keynote speaker, Gail R. Wylensky, Ph.D., will hold a discussion on the future of Medicare

- Specialty breakout sessions for cardiology, ophthalmology, pathology, orthopedic, behavioral health, outpatient facility, inpatient facility, and much more

- Sessions covering CDI best practices, denial resolution to improve revenue, population health, auditing best practices, and lessons in leadership
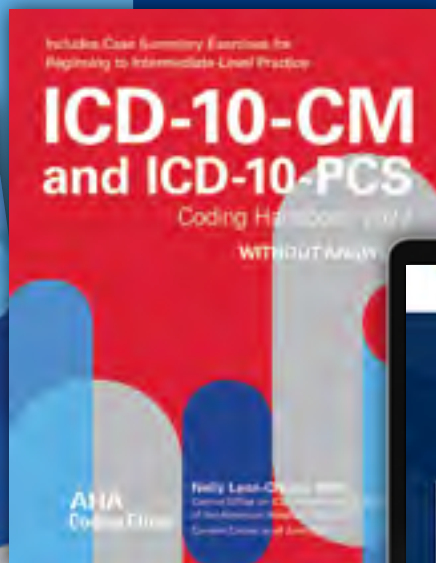
In addition to sessions, we have an excellent lineup of vendors in our virtual exhibit hall, showcasing the latest industry technologies and services. We've packed a lot into these four days, and I encourage you to fully immerse yourself. Attend as many of the sessions as you can. Ask questions and provide feedback. Catch up with colleagues and make new connections in our virtual chat wall and café. Participate in contests and games to win prizes. Whatever you do, we hope you make the most of it and enjoy the conference.

Sincerely,

Bevan joined AAPC in 2007 and serves as its chief executive officer. Prior to AAPC, he spent a decade in the high-tech industry where he excelled at web marketing and technology-based product development. He grew up in Northern California, was educated at Brigham Young University, met his wife in Alaska, and has settled down to raise his four boys on a small lake in the mountains of Northern Utah. He enjoys family, water sports, cycling, traveling, and work – in that order. He is blessed to work with an amazing group of professionals within AAPC who both collectively and individually are relentless in their drive to make AAPC and its members successful.

General Information

CONFERENCE TIME

The conference schedule is listed in Eastern Time. Please be aware if you are in a different time zone. The AAPC conference app will list the session time and your time for reference.

SLIDE PRESENTATIONS

Following the conference, slide presentations will remain available for two weeks. You can find them in the AAPC conference app or by logging in to your My AAPC account at www.aapc.com.

SESSION CHANGES

Once you download the AAPC conference app, you can make session changes directly in the app. Under the sessions tab, where you will see the schedule listed by day, add the plus sign on the right-hand side of your preferred sessions to add them to your schedule. You can then select "My Agenda" at the top of the screen to see only your selected sessions.

RECORDING OF CONFERENCE SESSIONS

This conference is being recorded through Zoom. As an attendee, you will receive access to all 80 session recordings. You will not be able to earn CEUs from the recordings as they are only for reference for educational purposes. The recordings will become available 30 days after the conference ends and will be accessible for one year.

EARNING CEUS

Registration for HEALTHCON does not guarantee you will receive continuing education units (CEUs). You must attend sessions live to receive CEUs. Most sessions are worth 1.25 CEUs, although some general sessions are worth less. At the end of each session, the speaker will provide a CEU code. This CEU code activates your CEU tracker in your member area at www.aapc.com.

CEU CARD

The CEU card is found at the back of this program. Fill in each session you attend with its corresponding CEU code given by the presenter at the conclusion of the session. You need only submit a copy of the CEU card if selected for renewal verification. Please retain your own copy with the codes filled in. AAPC is not responsible for lost cards.

SPECIALTY CREDENTIAL CEUS

Specialty CEUs for each session can be found online at www. HEALTHCON.com on the agenda tab under session information or will populate in your CEU tracker when you enter the index codes.

CERTIFICATE OF ATTENDANCE

You will find an electronic version of this certificate in your My AAPC account at www.aapc.com. This certificate is proof of attendance only and is not accepted by AAPC for CEUs.

Exhibiting Hours

Don't forget to pop in and see the Virtual Exhibit Hall and all that our great vendors have to offer. We appreciate their support and could not present our conferences without them. The Virtual Exhibit Hall is open during dedicated hours, so you can visit all of the vendors during break times.

SUNDAY, MARCH 27

Welcome Reception . . . . 4:30pm – 6:30pm

MONDAY, MARCH 28

Start Your Day With Exhibitors . . . . 8:00am – 9:00am
Lunch With Exhibitors . . . . 12:00pm – 1:00pm
Afternoon Break With Exhibitors . . . . 2:15pm – 2:45pm

TUESDAY, MARCH 29

Start Your Day With Exhibitors . . . . 8:00am – 9:00am
Lunch With Exhibitors . . . . 11:45am – 12:45pm
Last Chance To Visit With Exhibitors . . . . 3:45pm – 4:15pm

PRODUCT STORE

Stop by the virtual product store to purchase AAPC logoed merchandise that can be shipped to you. Show your AAPC spirit with a new AAPC accessory!

National Advisory Board Officers (2022-2025)
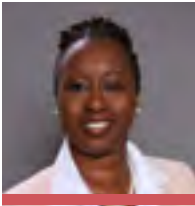
**Astara Crews,
CPC, CPEDC**
Career
Advancement
Officer

**Colleen Gianatasio,
CPC, CPCO, CPC-P,
CPMA, CRC, CPC-I**
President
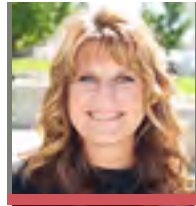
**Rhonda Buckholtz,
CPC, CDEO, CPMA,
CRC, CENTC, CGSC,
COBGC, COPC,
CPEDC, AAPC
Approved Instructor**
President-Elect
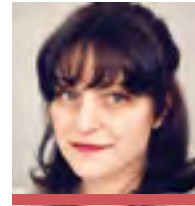
**Stephanie
Sjogren, COC,
CPC, CDEO,
CPMA, CPC-I**
Exam and
Certification Officer
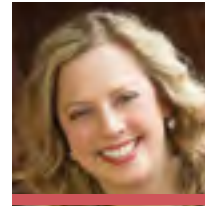
**Stephanie
Thebarge, CPC,
CPB, CPMA,
CPPM, CEMC,
CHONC**
Member Relations
Officer

National Advisory Board Members (2022-2025)

**Amy Waller,
CPC, CPCO,
CPMA, CRC**
Risk Adjustment,
Compliance

Andrea Faber
HIM
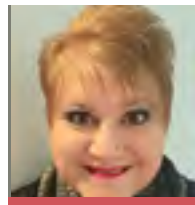
**Becky Strom,
COC, CPC,
CPCO**
Coding, Document
Quality Assurance
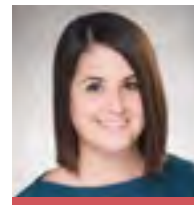
**Bridget Toomey,
CPC, CPCO,
CPB, CPPM,**
RCM, Project
Management
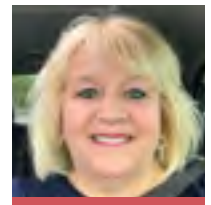
**Catherine
Butterfield,
CPC, CRC**
Project
Management

**Corella Marie
Lumpkins, CPC,
CPCO, CPB,
CPPM, CPC-I**
RCM, Provider
Education/
Compliance

**Donna Malone,
CPC, CRC,
AAPC Approved
Instructor**
CDI, Risk
Adjustment

**Gabriel Aponte,
COC, CPC, CDEI,
CDEO, CIC,
CPMA, CRC,
CCC, CHONC**
HIM
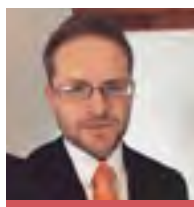
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Swartzwelder,
CPC, CRC, CEMC,
AAPC Approved
Instructor**
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Risk Adjustment,
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**Jennifer Lavoie,
CPC**
Revenue Integrity

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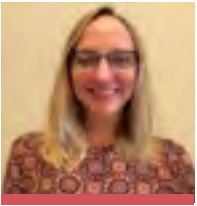
Jessica Halliday, CPC
Journalism, Social Media
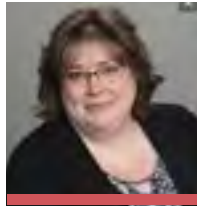
Jessica Miller-Dobbs, CPC, CPC-P, CGIC
Coding, Billing Educator
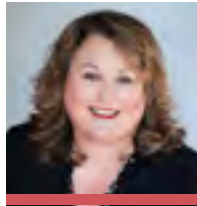
Karen Bowman, CPC, CPMA
Practice Management

Lisa Livingston, CPC, CPMA
Nurse Consultant
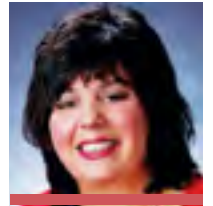
MariaRita Genovese, CPC
RCM, Practice Management
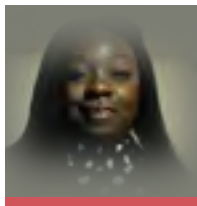
Sandra Sapp-Aubin, MHA, CPC
Coding, Billing Educator

Stephanie Tam, CPC, CPCO
Practice Management, Compliance

Legal Advisory Board Members

Timothy Blanchard,
MHA, JD

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CPC, CPCO, CPMA, CASCC, CCPC, CUC
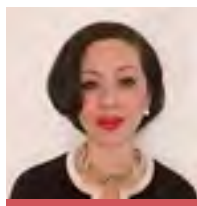
Karina Johnson, Esq,
COC, CPC, CPCO, CDEO, CIC, CPB, CPMA, CPPM, CRC, CPC-I, CANPC, CCC, CCVTC, CEMC, CGSC, CHONC, COBGC, COSC, CPCD

Stacy Harper,
JD, MHSA, CPC
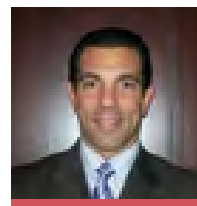
Christopher Parrella,
JD, CPC, CHC, CPCO
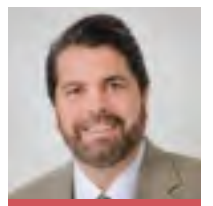
Robert Pelaia, Esq,
CPC, CPCO

Local Chapter Association

REGION 1 - NORTHEAST

Robin Goudy,
CPC, CPMA, CRC –
Vice Chair
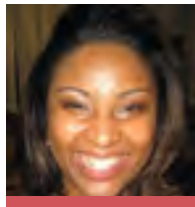
Dara Hill,
CPC

REGION 2 - ATLANTIC

Brenda Stevens,
COC, CPC, CDEO,
CPMA, CRC, CPC-I
– Chair

Victoria Moll,
COC, CPC, CPMA,
CRC, CPRC, AAPC
Approved Instructor

REGION 3 - MID-ATLANTIC

**Samantha
Patterson,**
CPC, CRHC
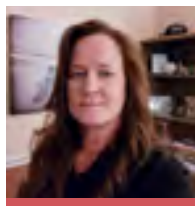
Nicole Snyder,
COC, CPC,
AAPC Approved
Instructor

REGION 4 - SOUTHEAST
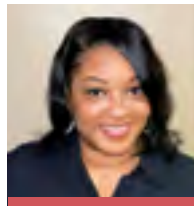
Kim Stevens,
CPC, CDEO,
CPMA, CRC, AAPC
Approved Instructor
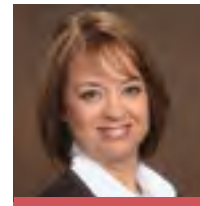
**Kimberly
Espinosa,**
CPC, CPMA, CRC,
CPC-I

REGION 5 - SOUTHWEST

April Boyce,
CPC

**Rhonda
McCaskill,**
COC, CPC

REGION 6 - GREAT LAKES
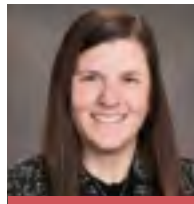
Denise Garrett,
COC, CPC, CPCO, CIC,
CPMA, CPPM, CGSC,
CSFAC – Treasurer

**Tammy
Vannatter-Berger,**
CPC – Secretary

REGION 7 - MOUNTAINS/PLAINS

Tabitha Iverson,
CPC

Tricia Tuttle,
CPC, CPB, CRC,
CEMC, AAPC
Approved Instructor

REGION 8 - WEST

Debbie Deprest,
CPC, CPC-P, CPB,
CPC-I
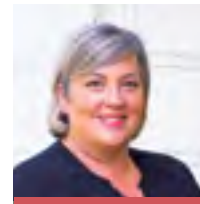
Julia Mitchell,
COC, CPC, CDEO,
CRC – Meeting
Coordinator

Past Conferences and Acknowledgements

NAB PAST PRESIDENTS

2018-2021	Michael D. Miscoe, JD
2015-2018	Jaci Kipreos
2013-2015	David Dunn, MD
2011-2013	Cynthia Stewart
2009-2011	Terry Leone
2007-2009	Deborah Grider
2005-2007	Cindy Parman
2003-2005	Jeri Leong
2001-2003	Georgette Gustin
1999-2001	Susan Garrison
1996-1999	Janet McDiarmid
1996	Gay Boughton-Barnes
1993-1995	Nancy Maguire

AAPCCA PAST CHAIRS

2020-2021	Heather Allen
2019-2020	Cynthia Stephenson
2018-2019	Ruby Woodward
2016-2017	Linda Martien
2015-2016	Candice Fenildo
2014-2015	Barbara Fontaine
2013-2014	Brenda Edwards
2012-2013	Angela Jordan
2011-2012	Melissa Brown-Caperton
2009-2011	Jill Young
2009	Linda Hallstrom
2007-2009	Terry Fletcher

LOCAL CHAPTER OF THE YEAR

2021	To Be Announced
2020	Jefferson City, Missouri
2019	Billings, Montana and Minneapolis, Minnesota
2018	Garden City, New York
2017	Winston-Salem, North Carolina
2016	Tulsa, Oklahoma
2015	Monmouth, New Jersey
2014	Albany, New York
2013	Spartanburg, South Carolina
2012	St. Louis West/Minneapolis
2011	Springfield, Missouri
2010	Columbia, South Carolina
2009	Chapel Hill, North Carolina
2008	Savannah, Georgia
2007	Charlottesville, Virginia
2006	Loma Linda, California
2005	Kansas City, Missouri
2004	Nashville, Tennessee
2003	Madison, Wisconsin
2002	Atlanta, Georgia
2001	Omaha, Nebraska (Metro Omaha)
2000	Atlanta, Georgia
1999	Peoria, Illinois
1998	Little Rock, Arkansas
1997	Honolulu, Hawaii
1996	Birmingham, Alabama and Honolulu, Hawaii

HEALTHCON LOCATIONS

2022	Virtual
2021	Dallas
2020	Virtual
2019	Las Vegas
2018	Orlando
2017	Las Vegas
2016	Orlando
2015	Las Vegas
2014	Nashville
2013	Orlando
2012	Las Vegas
2011	Long Beach
2010	Jacksonville
2009	Las Vegas
2008	Anaheim/Orlando
2007	Seattle
2006	St. Louis
2005	Salt Lake City
2004	Atlanta
2003	Honolulu
2002	Washington, DC
2001	Las Vegas
2000	Minneapolis
1999	Anaheim
1998	Dallas
1997	Orlando
1996	San Diego
1995	New Orleans
1994	Nashville
1993	Bahamas Cruise

Conference Notes

Schedule at a Glance

Start Time	End Time	Event Type	Event
Saturday, March 26, 2022			
8:00am	4:00pm	Pre-Conference	Teach the Teacher
Sunday, March 27, 2022			
8:30am	10:30am	Pre-Conference	Local Chapter Officer Training
11:30am	12:30pm	Pre-Conference	AAPC Wants Thought Leaders — That Means You!
1:00pm	1:45pm	Pre-Conference	HEALTHCON Rookies – Learn the Ropes
2:00pm	3:00pm	General Session 1	Conference Welcome
3:15pm	4:30pm	General Session 2	E/M Panel
4:30pm	6:30pm	Exhibit Hall	Welcome Reception With Exhibitors
Monday, March 28, 2022			
8:00am	9:00am	Exhibit Hall	Demos With Exhibitors
9:00am	10:15am	General Session 3	Keynote: Future of Medicare
10:45am	12:00pm	Breakout Session 1	10 Sessions
12:00pm	1:00pm	Exhibit Hall	Lunch With Exhibitors
1:00pm	2:15pm	Breakout Session 2	10 Sessions
2:45pm	4:00pm	Breakout Session 3	10 Sessions
4:15pm	5:30pm	Breakout Session 4	10 Sessions
Tuesday, March 29, 2022			
8:00am	9:00am	Exhibit Hall	Demos With Exhibitors
9:00am	10:15am	General Session 4	Legal Trends Panel
10:30am	11:45am	General Session 5	AAPC International and Review With Global Trends
11:45am	12:45pm	Exhibit Hall	Lunch Break
12:45pm	2:00pm	Breakout Session 5	10 Sessions
2:00pm	2:30pm		Break
2:30pm	3:45pm	General Session 6	Telemedicine Panel
3:45pm	4:15pm	Exhibit Hall	Last Break With Exhibitors
4:15pm	5:30pm	Breakout Session 6	10 Sessions
Wednesday, March 30, 2022			
8:00am	9:00am		Networking Breakfast
9:00am	10:15am	General Session 7	2022 E/M Lessons Learned
10:45am	12:00pm	Breakout Session 7	10 Sessions
12:30pm	1:45pm	Breakout Session 8	10 Sessions

Conference Notes
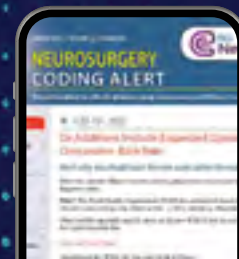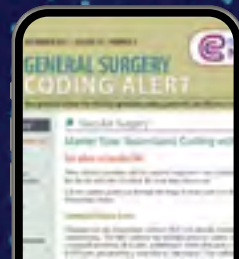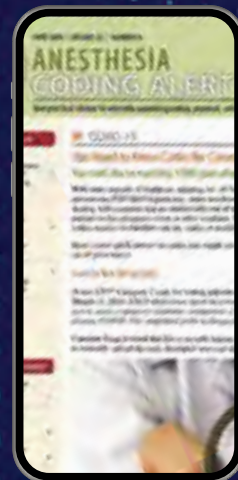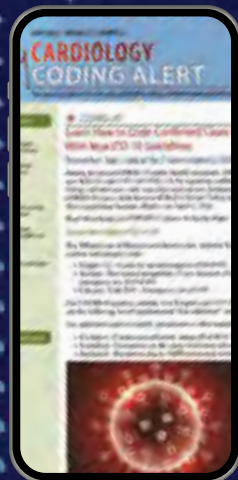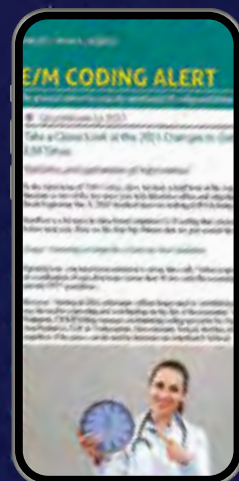
2023 Books Now Available for Pre-Order!

AAPC

AAPC books have become the industry gold standard for CPT®, HCPCS Level II, and ICD-10 medical coding books. What makes them so? It's simple. They are designed by coders, for coders.

Layouts are optimized for speed and accuracy with quick-find codes and code indicators, annotations, reference tables, color illustrations, Medicare Pub 100 and *AHA Coding Clinic®* article references, step-by-step flow charts, and more bonus tools than you'll find in any other books.

Get it All:

- *AAPC's monthly code update newsletter*
- *Exclusive AAPC coding tips*
- *Adhesive tabs for faster look-up time*
- *Spiral bound (lays flat for easy use)*

Pre-order your books today and be ready when the new year rolls around!

Just visit aapc.com/medical-coding-books

Schedule: Saturday, March 26, 2022

8:00 AM – 4:00 PM | 8 CEUs & CTUs

Teach the Teacher

Kris Taylor

PRE-CONFERENCE

This workshop provides certified instructors with tools to improve their teaching and communication skills. This is also a great opportunity to network with other instructors. Earn 8 CTUs or 8 CEUs for participation in this workshop.

Schedule: Sunday, March 27, 2022

8:30 AM – 10:30 AM | 2 CEUs

Local Chapter Officer Training

Marti Johnson

PRE-CONFERENCE

All officers are invited to join us for this two-hour interactive leadership workshop to discuss professionalism, presentation, setting up breakout rooms by region for leadership building activities, and workshop activities on leadership.

11:30 AM – 12:30 PM | 1 CEU

AAPC Wants Thought Leaders – That Means You!

Leesa Israel, CPC, CPPM, CEMC, CUC, AAPC Approved Instructor

PRE-CONFERENCE

Share your knowledge — learn how to become an AAPC content contributor from AAPC's Head of Publishing, Leesa Israel.

Healthcare is a vast and everchanging area, and we are all continually learning. The best way to learn is from each other! Each AAPC member has knowledge and experience from which other members can benefit – including you! If you have news or know-how that can benefit other healthcare business professionals, share it with AAPC's 200,000 members by becoming an author for *Healthcare Business Monthly* or the AAPC Knowledge Center. Along with the satisfaction of helping your peers, authoring an article is a great way to raise your professional profile. And, it can earn you CEUs to support your AAPC credentials. You don't have to be an experienced writer: Our editors will work with you to translate your ideas to the page and screen. Leesa will tell you how! Join this pre-conference session to learn more and start your journey as an AAPC content contributor.

1:00 PM – 1:45 PM | 0.75 CEU

HEALTHCON Rookies – Learn the Ropes

Alex McKinley

PRE-CONFERENCE

Is this your first HEALTHCON? Then this is the session for you! This session will be as informative as it is interactive. Learn about using our app, logging CEU codes correctly, networking best practices, and other information that will help you get the most out of your HEALTHCON experience.

2:00 PM – 3:00 PM | 1 CEU

Conference Welcome

Bevan Erickson, AAPC CEO

GENERAL SESSION 1

Join Bevan Erickson, AAPC's CEO, for his State of AAPC address. He will cover exciting new and upcoming developments within your organization, why we're moving in these directions, and how these evolutions will impact your daily life, both inside and outside of work.

3:15 PM – 4:30 PM | 1.25 CEUs

E/M Panel

Samuel Le Church MD, MPH, CPC, CRC, CPC-I;
Jaci J. Kipreos, COC, CPC, CDEO, CPMA, CRC, CPC-I, CEMC;
Raemarie Jimenez, CPC, CDEO, CIC, CPB, CPMA, CPPM, CPC-I, CANPC, CRHC

GENERAL SESSION 2

During this session, an expert panel made up of a physician, coder, auditor, payer, and representative from the AMA will answer audience questions regarding the 2022 E/M guidelines for office visits.

4:30 PM – 6:30 PM

Welcome Reception With Exhibitors

EXHIBIT HALL

Conference Notes

CERTIFIED CODERS EARN MORE.

And More Certifications = More Pay.

Your First Certification

Our studies show that AAPC certified coders earn an average of $10,000 more per year than their uncertified peers. Also, students who train with AAPC are 3 times more likely to pass their exams.

Additional Certification

Many of our members will differentiate themselves by earning additional certification(s) for a specific skill set or specialized area of medicine, Studies show that typically, more certifications amount to higher pay.

AAPC offers a wide range of courses, each designed to get you certified and well prepared to thrive in your field. Our options are flexible --- train on a set schedule with a live instructor or 'on demand' at your own pace. Either way, why not start today?

Learn more at **aapc.com/training**

Schedule: Monday, March 28, 2022

Demos With Exhibitors

EXHIBIT HALL

Keynote: Future of Medicare

Gail R. Wilensky, Ph.D.

GENERAL SESSION 3

Gail R. Wilensky, Ph.D., is an economist and senior fellow at Project HOPE, an international health foundation. She also co-chairs the Bipartisan Policy Center's initiative on the future of healthcare. She directed the Medicare and Medicaid programs, served in the White House as a senior adviser on health and welfare issues to President GHW Bush, and was the first chair of the Medicare Payment Advisory Commission. Her expertise is on strategies to reform healthcare, Medicare, comparative effectiveness research, and military healthcare.

10:45 AM - 12:00 PM | 1.25 CEUs
Breakout Session 1

1A: Do You Really Understand the "With" Guideline?

Kathleen Tierney, CPC, CPC-P, CPMA, CRC, CPC-I, CEDC, CEMC, CGSC, COBGC

The ICD-10-CM Official Guidelines state that: The word "with" or "in" should be interpreted to mean "associated with" or "due to." The classification presumes a causal relationship between two conditions linked by these terms in the index. Many coders do not understand the significance of this rule. This presentation covers the most common coding errors that overlook this guideline.

1B: Increase Revenue With Correct Cardiac Intervention Coding

Ignatia Julie Agus, COC, CPC, CPMA, CRC, CPC-I, CCC

When your provider decides to perform another cardiac intervention after cardiac catheterization, it can be confusing trying to determine whether the catheterization can be billed together with the intervention. Mastering the hierarchy of the coronary interventions and add-on codes based on several coronary artery diseases can certainly add to revenue. Mastering the guidelines concerning when to report other coronary interventions can also add revenue that you do not want to miss. This presentation will address correct diagnosis reporting that links to correct procedural codes to help you avoid denials.

1C: A Deep Dive Into Shoulders

Ruby Woodward, CPC, CDEO, CPB, CPMA, CPC-I, COSC, CSFAC

Coding for surgical procedures performed on the shoulder is one of the most challenging areas for many orthopedic coders. In this presentation we will review the anatomy of the shoulder and put the pieces together to accurately code surgical procedures. We will incorporate both NCCI guidelines and CPT® changes, as well as discuss controversial procedures such as reverse total shoulder, remplissage procedure, and superior capsule reconstruction.

1D: How to Stay Ahead of Trends as Medicare Repeals the Market-Based Inpatient Payment Methodology.

Angie Audler

CMS began collecting market-based (rather than charge-based) data in FY 2021 for use in the methodology for calculating inpatient hospital payments in 2024. Readiness and preparation are keys to mitigating the threat to provider revenues. This session will help you learn how to assess your facility's current state and plan next steps in preparing for changes within your organization. It will include detailed illustrations of core concepts with examination of practical examples.

1E: Injection and Infusion Coding

Jessica Lee Trefethen, CPC, CPMA

Come with me as we explore all that goes into correct injection and infusion coding. With their own hierarchy and set of rules, these 'little' services can add up to big money and big problems if not captured correctly!

1F: How to Negotiate Payer Contracts Like a Pro

Marcia Brauchler, MPH, CPHQ, COC, CPC, CPC-I

What are your peers doing with their payer contracts? In this session we will walk through numerous actual contract negotiations from real-life practice success stories and you will learn to advocate for your practice using proven techniques from a veteran contract negotiator. Most physician practices focus on cutting expenses instead of improving their revenue from non-governmental payers. A little focused effort on negotiating payer contracts can create much-needed money for your practice.

1G: Medical Necessity Denials – When and How to Appeal Them

Holly Ridge, CPC, CPMA

Medical necessity denials continue to increase in volume for both professional and hospital services, and it is estimated that only approximately 20 percent of claim denials are appealed. In this presentation you will learn how to address and appeal these denials successfully while improving your coding, A/R, and ROI. A multifaceted approach is required and involves evaluating opportunities to avoid denials upfront but also learning how to fight them when the denial is unavoidable.

1H: Auditing Behavior Health Notes – More Than Words on a Page

Susan Marie Roelant, CPC, CPCO, CPMA, CEMC

This interactive auditing class will discuss the documentation requirements for psychology services, including the use of the crisis code. We will explore the CMS requirements for these services and look at some examples from recent TPEs. This is a great way to help your behavior health providers create better documentation that will support the CPT® and CMS guidelines.

1I: Maintain Compliance During Physician Vacancies

Maryann Palmeter, CPC, CPCO, CPMA, CENTC

The COVID-19 pandemic taught us that even physicians get sick and have to take leaves of absence on occasion. This presentation will address how to handle physician vacancies while maintaining compliance with Medicare reassignment rules. You will learn the difference between locum tenens arrangements, reciprocal billing arrangements, and long-term leasing of employees from temporary agencies. The presentation will also cover proper billing and documentation, time limits, and the impact on patients.

1J: CMS 2022 Physician Fee Schedule Final Rule

Kemberly Tolliver

Each year, the healthcare industry awaits the CMS Physician Fee Schedule Final Rule to have a blueprint of what to expect in regulatory changes, reimbursement modifications, and coding guidance. 2022 will usher in new regulations for telehealth delivery and direction on pathways post-public health emergency. In this session you will analyze the key outcomes of the final rule to develop organizational strategies for incorporating these new findings into internal strategic plans.

12:00 PM - 1:00 PM

Lunch With Exhibitors   **EXHIBIT HALL**
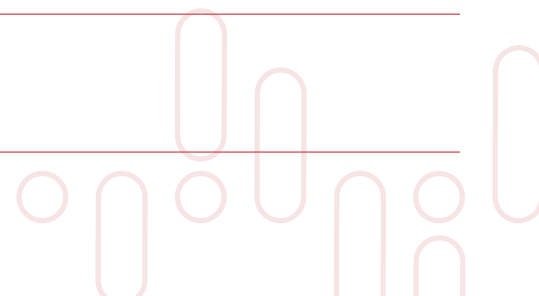
Breakout Session 2

2A: Which Cut Is the Deepest?

Jennifer McNamara, CPC, CPMA, CRC, CPC-I, CGSC, COPC

In this session we will discuss integumentary coding guidelines as they relate to lesion excision, debridement, and wound repair. We will cover the differences and the reimbursement issues faced. We will learn how to apply the proper modifiers and become familiar with the LCD policies for coverage by many insurance payers.

2B: Jumpstart Your Heart – The Electrophysiology of Your Heartbeat

Linda Martien, COC, CPC, CPMA, CRC, CPC-I

Discussion and analysis of the heartbeat, including anatomy, terminology, and pathophysiology, are the focus of this session. In addition to the electrical pathway of the heartbeat, we will examine normal and abnormal rhythm EKG strips to help explain these conditions. Heart disease, including women's heart health, will also be presented.

2C: Orthopedic Procedure Coding in the Office

Angela Clements, CPC, CPMA, CEMC, CGSC, COSC, AAPC Approved Instructor

This presentation will break down coding and documentation for office procedures commonly performed in the office setting. It will include discussion of when it is appropriate to bill an E/M service with modifier 25.

2D: The Ins and Outs of Inpatient Clinical Documentation Improvement

Marianne Durling MHA, RHIA, CCS, CDIP, CPC, CPCO, CDEI, CIC

This session will focus on understanding the inpatient clinical documentation improvement process. We will review common trouble areas, as well as discuss how to develop a good clinical documentation improvement team and workflow.

2E: Proper Coding and Billing for OT, PT, and SLP Services

Monica Wright, CPC, CPCO, CPMA

Therapy coding has experienced major changes over the past few years, and the changes continue to come. This session will review the proper selection and documentation of therapy evaluation codes. It will also discuss the new payment reductions for OTAs and PTAs in 2022 and the future of telehealth for therapy practitioners. In addition, we will review how to properly bill for timed therapy services and bill timed and untimed services on the same day.

2F: Conflict Resolution in the Workplace

MariaRita Genovese, CPC

Conflict resolution strategies allow you to increase workplace productivity by mitigating conflict when it first occurs. They also help you to improve morale and teamwork within the workplace. In this session you will learn to develop the skills you need to master the process of resolving conflicts.

2G: Turn Denials Into Dollars

Karlene Dittrich, CPC, CPMA

In a rapidly changing and unstable healthcare reimbursement environment, protecting insurance revenue has never been more vital or challenging! Claim submittals following proper billing guidelines do not always result in the claims payment expected. This session offers valuable resources and takeaways that help equip and empower revenue cycle and billing teams with practical ways to combat claim denials and offsets that do not align with applicable federal and state laws. This interactive session is designed to leave you inspired to address denial tactics.

2H: Lessons Learned From the Road – "Don't Make My Mistakes!"

Jaci Kipreos, COC, CPC, CDEO, CPMA, CRC, CPC-I, CEMC

In this session we will discuss experiences from audits gone awry and look back to find a better way. This is an opportunity to note practices that make for complete, compliant audits with fewer problems and setbacks. We will also discuss when to say no to an audit.

2I: Understanding Release of Information – Mental Health and Substance Abuse

Laurie Bouzarelos, CPC & Stacy Nicole Harper, JD, MHSA, CPC

Mental health and substance abuse services have specific exceptions under HIPAA and the 21st Century Cures Act regarding release and/or disclosure of protected health information specific to mental health and substance abuse diagnosis and treatment information. This session will help you understand providers' obligations under privacy laws, how and what information may be released in an audit or payer review, and key policies to consider in your practice to protect patient information.

2J: We Are AAPC! A Reminder of Our Code of Ethics

Beth Schleeper, COC, CPC, CPCO, CDEO, CPB, CPMA, CPPM, CRC, CPC-I, CANPC, CEMC

We will identify, review, and break down the AAPC Code of Ethics in this session, focusing on why the Code of Ethics is important and why we need to adhere to it both personally and professionally. We will discuss the importance of ethics in our billing and coding roles and define the difference between ethics and professionalism.

2:45 PM - 4:00 PM | 1.25 CEUs
Breakout Session 3

3A: What Exactly Is a Significant and Separately Identifiable E/M?

Jeffrey Lehrman, CPC-A, CPMA

This session will help coders to determine when what has been performed and documented by a provider substantiates a significant and separately identifiable E/M. The National Correct Coding Initiative policy manual will be used as a reference to help make this determination without ambiguity. Not only will this content help coders appropriately review documentation already performed, but it will also help providers document properly proactively.

3B: Coding for Spine Procedures

Deni Adams, CPC, CPB, CPPM, CEMC

This presentation will review spine anatomy and terminology as it relates to code selection. We will discuss the different fusion and laminectomy codes and when to use each, along with clarifying when to use excision vs. osteotomy vs. corpectomy codes. Practice examples will round out our session to solidify understanding throughout the presentation.

3C: Laboratory: Who Gets the Money?

Heather Greene, CPC, CIC, CPMA

In this session we will go over general laboratory billing guidelines and discuss governmental regulatory guidance such as PAMA and how to handle billing on the UB-04 and CMS-1500 forms. We will also discuss some of the top questions concerning laboratory billing and compliance.

3D: Charting the Way – Improve Your Review of Inpatient Records

Kathryn Williamson, CPC, CDEI, CIC

This session is designed for inpatient coders as well as CDI professionals who want to increase their understanding of documentation review. Your ability to increase the quality of provider documentation begins with providing a quality review. Together, we will work through case scenarios and pinpoint areas to improve clinical documentation, identify query opportunities, and ultimately improve the accuracy of code assignment.

3E: ED Facility Leveling Explained

Tammy Vannatter-Berger, CPC

Facility E/M leveling is very different from professional E/M leveling. This presentation will go over CMS and the 2009 OPPS Final Rule guidelines in developing your own leveling model. We will review the differences between professional and facility E/M leveling requirements, as well as review the different models used by various emergency departments, such as ACEP's model, a points system, and developing your own model. You will experience coding scenarios and examples using these various models. We will then venture into the payer denial trends of facility E/M leveling and discuss recommendations to overcome these denials.

3F: Achieving Operational Excellence

Rhonda Buckholtz, CPC, CDEO, CPMA, CRC, CENTC, CGSC, COBGC, COPC, CPEDC, AAPC Approved Instructor

In this session we will delve into essential strategies to sustain growth and stay ahead of the competition, as well as work on problem-solving techniques, leadership, and goal setting. All of these are needed for us to achieve operational excellence. We are even going to sprinkle in some best practices and tips.

3G: Breakdown Billing for New Drugs

Stephanie Thebarge, CPC, CPB, CPMA, CPPM, CEMC, CHONC

Do you struggle with drug billing? Drug denials? Drug reimbursement? In this presentation I will break down the billing of novel therapies, unscramble the alphabet soup of acronyms, and provide you with a step-by-step process to ensure proper coding, billing, and reimbursement for drugs. I will include best practices, share reimbursement strategies specific to oncology drugs, and review prior authorization workflows that may work for you.

3H: Working With Legal Counsel to Prevent or Defend Audits

Courtney Tito

This session will focus on how to prevent audits from federal and commercial payers, and if necessary, how to respond to records requests and various audits from them. Integral in this presentation will be best practices for working with legal counsel to create and manage this process internally and with the auditors.

3I: Potential Liability of Billers/Coders in Healthcare Fraud Prosecutions

Robert Walton Liles, CPC

Law enforcement officials around the country are actively investigating and prosecuting allegations of healthcare fraud. Unfortunately, practice billers and coders are increasingly finding themselves under the government's microscope. In this session we will discuss the current enforcement environment facing billers and coders. We will also discuss the steps you should take if you find yourself the focus of a government investigation.

3J: How to Get Hired – Job Searching Dos and Don'ts

Colleen Gianatasio, CPC, CPCO, CPC-P, CPMA, CRC, CPC-I

Getting hired for your first job in the field or when transitioning jobs requires skills in several areas. This session will discuss the keys to successfully land your next position. We will discuss resume, interview, and networking tips.

Conference Notes

Breakout Session 4

4:15 PM - 5:30 PM | 1.25 CEUs

4A: Modifiers: A Risky Business

Pam Vanderbilt, CPC, CDEO, CPB, CPMA, CPPM, CPC-I, CEMC, CFPC

To modify or not to modify, that is the question. Using modifiers inappropriately can create a huge compliance risk for providers. Unfortunately, when we learn to code, we are introduced to modifiers but not always taught their compliant use in depth. That all changes in this session! We will take a deep dive into some risky modifiers — the unbundling modifiers. At the end of this session, you will understand when E/M modifiers 25, 57, and 24 can correctly be reported. You will also learn the correct use of global surgery modifiers such as 58, 59, 78, 79, and more. Join in and let's explore how to avoid the risky business of modifiers together.

4B: Peripheral Vascular Procedures

Caren Lampitoc, COC, CPC, CPB, CPMA, CRC, CPCD, AAPC Approved Instructor

Let's take a look at peripheral revascularization, bypass, and thrombolysis. This course will be an overview of codes and guidelines, as well as dissecting notes for documentation of these procedures.

4C: Sight Seeing in DC

Shannon O'Tyson DeConda, CPC, CPMA, CPC-I, CEMC

Teaching a session on the codes for ophthalmic services might pale in comparison to an E/M session — although they are essentially the bread and butter of an ophthalmology practice. Teaching when to use eye versus E/M codes can be tricky and a gray area topic to approach. There are variations and disagreements amongst the payers, so what do you do? In this session, we will explore best practices and how to create an optimum compliance path for your practice.

4D: Common Inpatient Audit Findings and How They Impact Your Facility

Brett Randolph

This presentation will cover the most common audit findings and how they impact your facility. We will discuss findings related to principal diagnosis selection, CC/MCC selection, and how it impacts the DRG. Discharge patient status and how it impacts the payment to the facility is also covered, as are patient safety indicator findings and what that means for the facility and 30 days readmission/mortality measure opportunities.

4E: Overview of Outpatient Facility Coding and Overview of 2022 HOPPS Changes

Shannon Carla Cameron, MBA, MHIIM, CPC

This session will cover a general overview of outpatient facility coding, as well as a deep dive into common conundrums with outpatient surgeries. A review of the new 2022 Hospital Outpatient Prospective Payment System (HOPPS) will also be included with a focused look at the impact of the rising number of procedures that have moved from inpatient to outpatient.

4F: Understanding Why Population Health Is so Popular Now
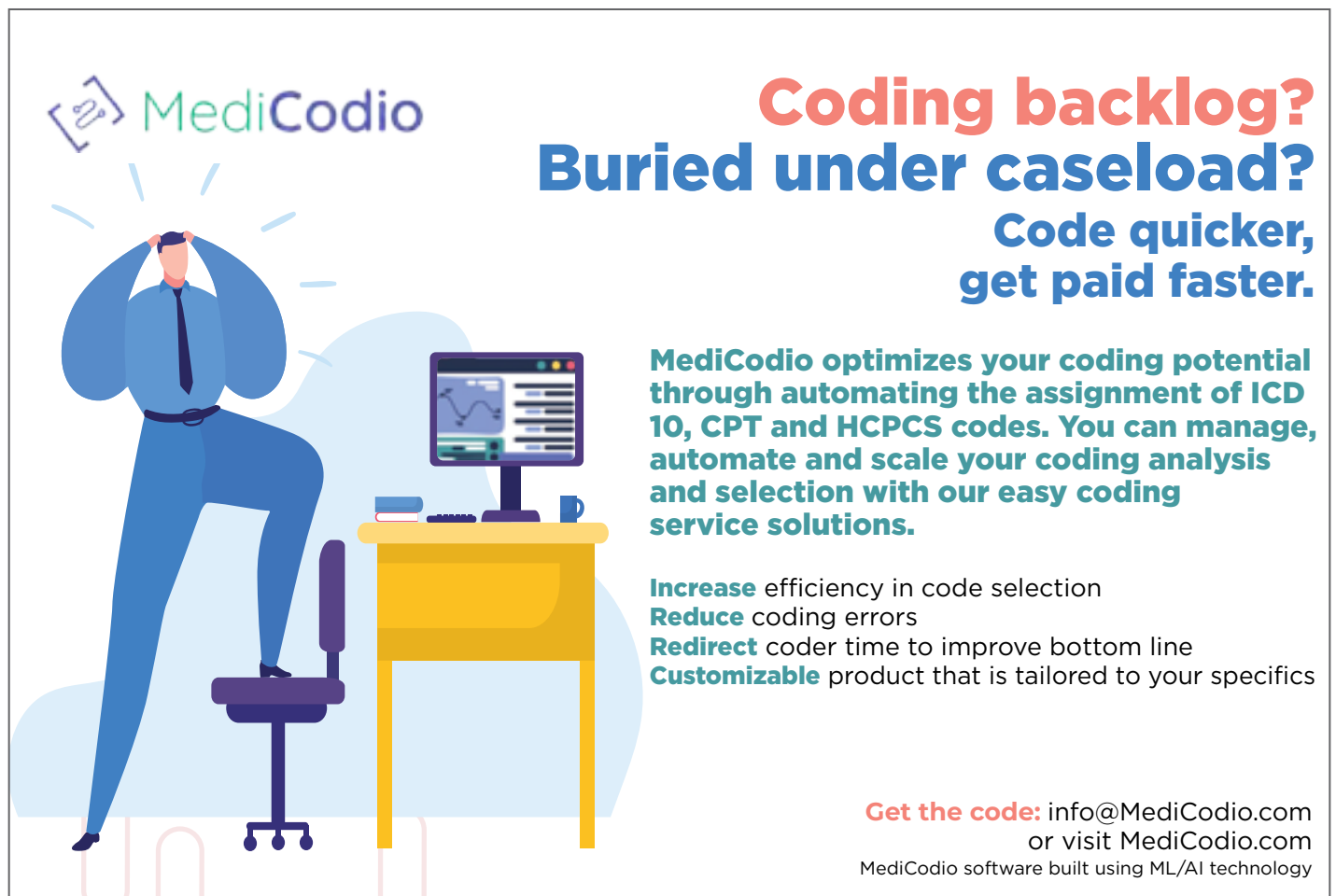
Marianne Durling MHA, RHIA, CCS, CDIP, CPC, CPCO, CDEI, CIC

This session will focus on understanding the increase in popularity of Population Health programs and their place in value-based care and ACOs. The session will review the fundamentals of Population Health and the coding and billing implications.

4G: The Magical World of Oncology Billing

MariaRita Genovese, CPC

Oncology billing can be challenging. This session will highlight common denials, authorization processes, place of service issues, and new chemotherapy medication procedures.

4H: Compliance Audits vs. Forensic Audits – Understanding the Difference

Michael Miscoe, Esq, CPC, CPCO, CPMA, CASCC, CCPC, CUC

When asked to perform an audit it is important to understand the type of audit you have been asked to perform, and on that basis, how you characterize and communicate the results. Forensic auditing differs substantially from risk auditing based on the criteria that can be applied and the significance (from a disclosure perspective) of the results. This program will outline the differences between these two types of audits and clarify the types of criteria, how to delineate conditions of participation from conditions of payment, as well as the difference between coding and reimbursement rules, and how these differences influence your audit conclusions.

4I: Collection Issues: Best Practices, Tips, and Traps

Kelly McIntosh-Freeman

This session will answer some questions and clarify misconceptions about collection issues, and will highlight suggested practices. Covered topics areas include payment policies; legal and practical considerations in collecting from patients, government payors, and private payors; and collection processes from the time of service through formal collection actions.

4J: APP Documentation and Billing

Suzan Berman Hauptman, CPC, CEDC, CEMC

Your practice is hiring a nurse practitioner, or perhaps a physician assistant. How can their services be coded? What can they do? How should they document? These and other questions will be answered in this informative and lively educational session. Don't miss your chance to hear from one of our former national board members, Suzan Hauptman, as she speaks on one of her favorite topics.
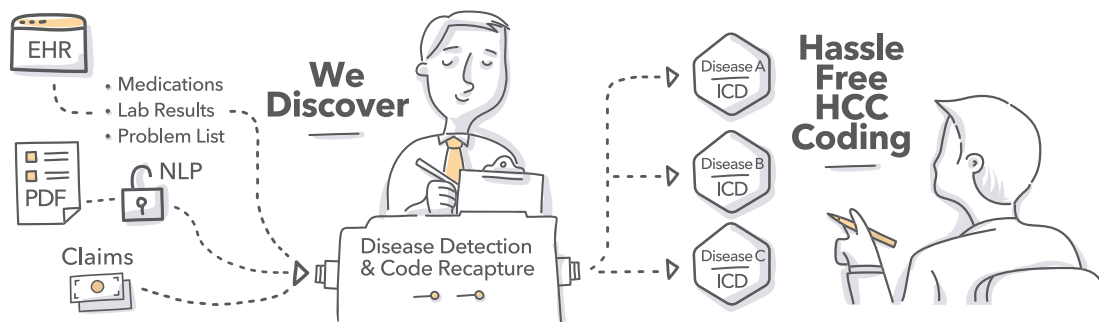
Visit the AAPC Booth
– Featuring, Live Humans!

Come pay us a virtual visit at the AAPC booth. We're here to answer any questions you might have, whether it's about the conference, coding, or...corrugated boxes. We'll be doing live demos of Codify, eBooks, and Practicode during the networking sessions and we'd love to see you on our screens. We might even have a few discounts for you!

Where to find us
On your conference app, select "Exhibitors" and click on "AAPC Booth" where you'll find the "Virtual Demo Room." Just click in and get connected live with a staff member.

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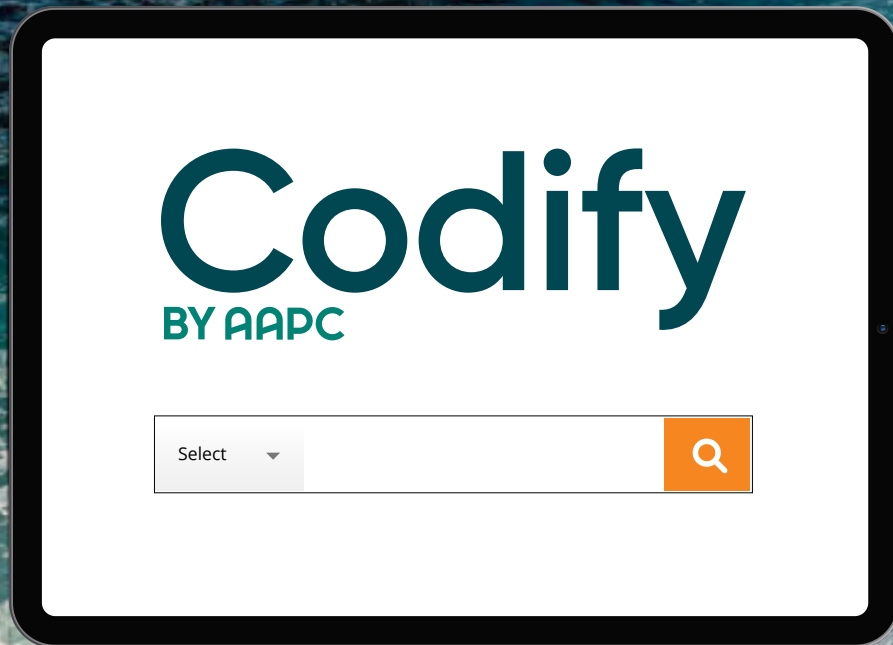
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Schedule: Tuesday, March 29, 2022

8:00 AM – 9:00 AM

Demos With Exhibitors

EXHIBIT HALL

9:00 AM – 10:15 AM | 1.25 CEUs

Legal Trends Panel

Panelists: Robert Pelaia Esq, CPC, CPCO;
Stacy Harper, JD, MHSA, CPC;
Karina Johnson, Esq, COC, CPC, CPCO, CDEO,
CIC, CPB, CPMA, CPPM, CRC, CPC–I, CANPC,
CCC, CCVTC, CEMC, CGSC, CHONC, COBGC,
COSC, CPCD;
Michael Miscoe, Esq, CPC, CPCO, CPMA, CASCC,
CCPC, CUC;
Timothy Blanchard, MHA, JD; & Christopher
Parrella, JD, CPC, CHC, CPCO

GENERAL SESSION 4

This panel discussion, led by AAPC's Legal Advisory
Committee, offers insights into today's and tomorrow's most
pressing legal concerns for medical practices and facilities
facing increased financial scrutiny and regulation. Join us for
this perennial favorite!

10:30 AM – 11:45 AM | 1.25 CEUs

AAPC International and Review With Global Trends

Dan Schwebach, MHA, CPPM;
Paula Daibert, MD, MBA, Msc;
Hamad Alhuzami

GENERAL SESSION 5

This session will provide an overview of AAPC's international
activities and discuss healthcare and medical coding
trends from a global perspective. In addition, the session
will highlight two case studies exploring the transformation
of Saudi Arabia's and Brazil's healthcare systems, which are
currently undergoing sweeping changes, and the journey of
health information management and medical coding.

11:45 AM – 12:45 PM

Lunch Break

EXHIBIT HALL

12:45 PM – 2:00 PM | 1.25 CEUs
Breakout Session 5

5A: Guidelines for Sequencing
Sharon Jane Oliver, CPC, CDEO, CPMA, CRC, AAPC
Approved Instructor

Sequencing ICD-10-CM codes has always been problematic for
novice coders, but it must be mastered in order to understand its
proper use in our everyday work. Many claim denials are due to
improper sequencing, which leads to CPT® codes being linked to an
incorrect diagnosis pointer. Even with electronic billing software, if
the ICD-10-CM Alphabetic Index and Tabular List are not adhered
to correctly, a clean claim will not be submitted, causing non-
payment or improper payment rightfully due to the provider or
facility. This presentation is designed to provide awareness of the
guidelines and how the respective diagnosis code is impacted.
Often the first code looked at is the only one used, which can lead
to in-depth research, to ensure the claim submission is correct, not
being completed. Most importantly, we, as coders, are responsible
for reporting an accurate diagnosis for a patient and not reporting
a diagnosis for them that they don't actually have.

5B: Emergency Department Coding Complexities

Hamilton Lempert, MD, FACEP, CEDC

The emergency department (ED) is a unique practice environment where clinicians care for a wide variety of conditions with varying levels of severity. Coding these visits poses its own unique set of challenges. This session will cover the practical side of how to best code enigmatic situations. Attendees will leave with an understanding of ED evaluation and management (E/M), critical care, and observation codes; the documentation required when working with other clinicians; codes and vital documentation for common ED procedures; and how to resolve many coding conundrums.

5C: 2022 CPT® Updates for Everything Endovascular

David Zielske, MD, COC, CIRCC, CCC, CCVTC

In this session we will review the 2022 updates for endovascular procedures, including new codes and changes in guidance from various societies over the past year.

5D: ICD-10-PCS in Pieces, Breaking Down Obstacles in Inpatient Coding

Kathryn Williamson, CPC, CDEI, CIC

The goal of this presentation is to help strengthen inpatient coders' understanding of the difficult aspects of ICD-10-PCS coding, such as obtuse procedures or commonly misunderstood aspects of ICD-10-PCS coding, to bolster their coding abilities. By breaking down specific areas identified to cause trouble, coders can strengthen their ICD-10-PCS coding skills.

5E: Outpatient CDI

Colleen Gianatasio, CPC, CPCO, CPC-P, CPMA, CRC, CPC-I

Outpatient CDI is the hottest new topic in the business of healthcare today! This session will discuss how outpatient CDI differs from previous approaches to improving documentation and coding. Participants will learn some dos and don'ts of provider engagement and a comprehensive understanding of how to compliantly query a provider. This will be an energetic discussion of this exciting new field so be prepared to interact, share your experiences, and ask questions!

5F: Benchmarking for Practice Success

Tracy Bird, CPC, CPMA, CPC-I, CEMC

This presentation provides an introduction to benchmarking. Change is always occurring. Do we ignore it or use a thoughtful approach? In this session, we will define benchmarking and review warning signs of what is changing in healthcare and measures to consider for your practice.

5G: Bringing Consumerism to the Patient Financial Experience

Eric Wixom

At the turn of the century, the banking and financial services sectors were finishing a monumental shift in their industry — consumerism. With the emergence of better-informed consumers that demanded transparency and a greater range of options, banks and financial institutions had to adapt or die. Thirty years and one pandemic later, consumerism is hitting healthcare. We are left with those same options: adapt or die. In this session, Wixom weaves history, analytics, and experiential frameworks together into an engaging and action-oriented presentation.

5H: Using Regulatory Guidance to Support Audit Findings

Pamela Brooks, COC, CPC

One of the most challenging and critical components of an effective healthcare audit is the ability to provide regulatory guidance references to support audit findings. This session provides an overview of the most relevant and impactful regulatory guidance that can be used by auditors for both physician and facility-based audits. In addition to reviewing 42CFR, Medicare Manuals, CPT® guidance, *AHA Coding Clinic*, and Local and National Coverage Determinations, this presentation will provide attendees with real-life scenarios and explanations on how to appropriately cite these references in an executive summary.

5I: Performing a Compliance Program Effectiveness Review

CJ Wolf, MD, MEd, CHC, CIA, COC, CPC

Developing a compliance program from scratch — where do you start? Get your board onboard with compliance and learn how to perform a compliance program effectiveness review.

5J: Understanding Current Cyber Threats, What You Can Do About It, and the Role HIPAA Plays in Your Cybersecurity

Jeff Mongelli

It may seem like cyberthreats never end and it's the same attacks repeating themselves, but it's not. The threat landscape is changing rapidly. In this session, we'll discuss recent attacks, how they happened, and what you can do to prevent them or, at least, reduce your risk. We'll also talk about the role that HIPAA plays in your overall cybersecurity profile. Hint: It may not be what you think.

2:00 PM – 2:30 PM

Break

2:30 PM – 3:45 PM | 1.25 CEUs

Telemedicine Panel

Leonta Williams, CPC, CPCO, CRC, CEMC, CHONC;
Marianne Durling MHA, RHIA, CCS, CDIP, CPC, CPCO, CDEI, CIC, Approved-Instructor;
Stephanie Sjogren, COC, CPC, CDEO, CPMA, CPC-I;
Colleen Gianatasio, CPC, CPCO, CPC-P, CPMA, CRC, CPC-I

GENERAL SESSION 6

During this session a panel of experts representing the provider, facility, and payer perspectives will be discussing best practices for navigating the ongoing changes with telemedicine and telehealth regulations. There are so many changes occurring it is difficult to keep up. The panel will answer questions from the audience.

3:45 PM – 4:15 PM

Last Break With Exhibitors

4:15 PM – 5:30 PM | 1.25 CEUs
Breakout Session 6

6A: COVID Regulations Pre- and Post-pandemic

Stephanie Sjogren, COC, CPC, CDEO, CPMA, CPC-I

This session will cover telehealth, facility and provider rules that will stick around post-pandemic, and some regulations that will be temporary for the next few years. We'll focus on compliant billing for COVID tests, vaccines, monoclonal antibody infusions, labs (including CLIA certifications required), correct revenue codes, and types of bills for facilities. Note, this presentation will be fluid as the pandemic changes.

6B: Let's Talk About Feet

Ruby Woodward, CPC, CDEO, CPB, CPMA, CPC-I, COSC, CSFAC

Coding for procedures performed on the feet is one of the most challenging areas for many coders. In this presentation, we will review the anatomy of the foot and ankle, followed by putting those pieces together to accurately code surgical procedures. In the end, you will be as passionate about feet as the speaker.

6C: Livin' la Vida Gastro

Jessica Miller, CPC, CPC-P, CGIC

In this session, we will discuss advanced gastroenterology coding challenges, including procedures such as colonoscopy, endoscopic ultrasound (EUS), esophagogastroduodenoscopy (EGD), perioral endoscopic myotomy (POEM), and endoscopic retrograde cholangiopancreatography (ERCP). We will discuss payer issues, the

documentation needed to support medical necessity, billing errors, CCI edits, proper use of modifiers, and Local and National Coverage Determinations applicable to this specialty. We'll also talk about the issues with colonoscopy screenings and the pre-visit for screening. This presentation will cover both adult and pediatric conditions.

6D: Root Operations for ICD-10-PCS

Leonta Williams, CPC, CPCO, CRC, CEMC, CHONC

What is the difference between excision and resection? What is included or should be considered for an incision and drainage (I&D) procedure? What qualifies for coding a device? Physicians generally do not document for the purpose of code assignment. This can be very problematic when clinical documentation and ICD-10-PCS coding guidelines do not match up. It is vital to establish the objective of the procedure when assigning codes; not doing this may lead to potential revenue loss for your facility. If you are new to inpatient coding or struggling with some of the procedural concepts, join us as we define some of the most challenging root operations.

6E: CPT® Coding for Electrophysiology Procedures

Srivalli Harihara & Leigh Poland

Electrophysiology (EP) is a specialized area of cardiology. EP procedures include those that identify the source of cardiac arrhythmias and treat them using a variety of methods. It is also used to determine if a patient is at risk for sudden death, in which case, a defibrillator may be placed. Pacemaker and defibrillator implantation and many of the maintenance procedures for these devices are performed in the EP lab. While coding EP studies might appear daunting at first, understanding the key terms and what services are separately reportable makes the task easier.

6F: Mental Health and the Opioid Crisis – What Do We Code?

Heather Greene, CPC, CIC, CPMA

In this course we will look at chapter five, concentrating specifically on the substance abuse categories. We will delve into documentation requirements of top diagnoses and how the coding guideline "with" can affect the principal/first-listed diagnosis. This class is for all levels of coders.

6G: Coding and Billing for Psychiatry and Outpatient Mental Health Providers

Laurie Bouzarelos, CPC

Mental health services bring with them distinct documentation and coding requirements to support accurate billing. This session will help attendees understand the codes and guidelines for psychiatric services, psychological testing, health behavior assessment and intervention, applied behavioral analysis, and Screening Brief Intervention & Referral to Treatment (SBIRT) codes. We'll review key psychiatry evaluation and management coding concepts, including relevant add-on codes. Outcomes from recent Special Investigations Unit (SIU) psychiatry-specific commercial payer audit experiences will be incorporated to emphasize the importance of understanding coding guidelines and payer reimbursement policies.

6H: Peer Review Audits and Escalation of Medical Necessity

Amy Pritchett, CPC, CDEO, CPMA, CRC, CPC-I, CANPC, CASCC, CEDC, AAPC Fellow

In this session, we will review the definition of medical necessity as it relates to Medicare, Medicaid, and commercial insurance carriers. The objective of this course is to "relearn" the meaning of medical necessity and how working with physicians promotes greater insight. During the presentation, we will discover resources for medical necessity guidance and regulations. We will also discuss peer review and how this relates to medical necessity within the healthcare field.

6I: Don't Be Scared of Shared Billing

Maryann Palmeter, CPC, CPCO, CPMA, CENTC

Medicare has covered shared billing between physicians and nonphysician practitioners for years. The Centers for Medicare & Medicaid Services temporarily removed the guidelines from the Medicare Claims Processing Manual and significantly changed the way shared services must now be performed, documented, and billed. Attendees will learn the new way to bill shared services and what needs to be documented to support a shared service, where a shared service may be performed, and under whose provider number the service may be billed.

6J: The Power of Networking

Darlene Frances Helmer, CPC, CPC-I & Kemberly Tolliver

This session will tell the story of two women who used networking to move themselves up in the healthcare field from medical assistant/receptionist to owners of their own consulting businesses. This presentation is meant to inspire attendees as well as give them the tools to assist in skyrocketing their careers to the next level and above. When exiting the session with a handful of contacts, they will be working towards the future.

The Next Chapter of Your Career.
It Might Be Right Around the Corner.

AAPC local chapters are an invaluable member resource — all sharing one common goal; to connect and inspire medical coding professionals in their communities. They provide a great way to grow your local professional network and get the support you need.

AAPC Local Chapters Manager Marti Johnson was recently asked, "What is the most significant benefit for members?" Here is her answer:

"Don't get caught in the mindset that chapter meeting attendance is only about CEUs and education. The most significant benefit is the opportunity to network. In the chapter setting, networking varies from association with contemporaries, to rubbing shoulders with those from whom we can learn, and ultimately leads to stepping up for those to whom we serve as mentors. There's a bond between those members and that's the real cherry on top."

Pop In and See for Yourself.
Find out why thousands of AAPC members stay involved with their local chapters. Find your local chapter today at aapc.com/findmychapter.

Schedule: Wednesday, March 30, 2022

8:00 AM – 9:00 AM | 1 CEU

Networking Breakfast

AAPC Staff

Join us to network with attendees on your last day of conference! This session DOES have a CEU and we'll be giving away amazing prizes for our challenge and networking winners, as well as doing some fun end of conference trivia where anyone can be a winner. This is a session you won't want to miss!

9:00 AM – 10:15 AM | 1.25 CEUs

2022 E/M Lessons Learned

Raemarie Jimenez, CPC, CDEO, CIC, CPB, CPMA, CPPM, CPC–I, CANPC, CRHC

GENERAL SESSION 7

In preparation for the implementation of the new 2022 E/M guidelines for office visits, AAPC conducted many provider and coder trainings. In this session we will discuss comments questions and lessons learned along the way.

10:45 AM – 12:00 PM | 1.25 CEUs

Breakout Session 7

7A: The Neoplasm Table – Six Columns of Confusion

Jill Young, CPC, CEDC, CIMC

The six columns in the Neoplasm Table in ICD-10-CM coding are frequently misused and misunderstood. There is much confusion over how to use the unspecified and uncertain columns in particular. This session will cover the documentation needed, basic use of the table, and the tough question of when the table is no longer used and history codes are assigned. Anyone who codes will learn something in this fun and fast-paced lecture.

7B: Coding for Plastic and Reconstructive Surgery – Medical Necessity

Tyler Griffeth, CPC, CPRC

This session offers an in-depth look at plastic and reconstructive surgery coding with a focus on what needs to be included in documentation in order to meet the CPT® requirements of services and medical necessity. We will also discuss some of the high-dollar procedures that can be reported to payers (both government and private insurers), and in which situations. Attendees can expect to learn ICD-10 coding typically associated

with cosmetic and medically necessary plastic surgery; some relevant payer expectations regarding these codes (including some pre-authorization tips); national coding guidelines that affect the way these codes can be reported; a greater understanding of these codes and the work they represent; and documentation recommendations for fulfilling medical necessity.

7C: Coding for Dignity in Death

Margaret Wallace, CPC–A

When coding for hospice, choosing the code may seem rather obvious. However, the principal diagnosis can have a drastic impact on the patient's hospice experience, either granting or barring the treatments available. Just because someone is on hospice, it does not mean they are left to die, only that they forgo life-extending measures. Hospice patients still receive treatment, and depending on the code chosen, a patient might have access to dialysis or even physical therapy. These code choices can fundamentally change a person's last days and are arguably the most important codes used throughout the patient's lifetime.

7D: Keys to Creating an Empowered Team and Optimized Organization

Adrienne Lloyd, MHA, FACHE

Being a healthcare leader is more challenging than ever. You need an empowered team to help you find success as both an individual and an organization, all while managing issues that inevitably pop up along the way, with clarity and confidence. This course

will teach you how to build a culture that grows and retains high performers. You'll learn how to clarify your vision, foster your teams' confidence, build strategies so everyone is on the same page, and identify where people may be out of alignment so you can optimize your systems and processes for continuous growth.

7E: The ABC's of ASC's

Amy Pritchett, CPC, CDEO, CPMA, CRC, CPC-I, CANPC, CASCC, CEDC, AAPC Fellow

In this session, we will discuss the history of ambulatory surgery centers (ASCs). We will conquer the caveats of billing and coding in an ASC along with reimbursement guidelines. We will also delve into the nuances of Medicare, Medicaid, and commercial insurance payers' requirements and changes to the Medicare inpatient-only list for fiscal year 2022.

7F: Maximize Revenue Growth: Analyzing E/M Procedures

Jeffrey Stuart Newsome, CPCO

Accurate reporting of evaluation and management (E/M) services drives reimbursement. However, coding these services is still a major cause of confusion for many provider types. In 2020, Medicare's projected total of improper payments for E/M codes was over $3.2 billion and accounted for 11.9 percent of all improper payments. This session will pinpoint the areas in which administrators should focus internal process reviews to ensure compliance and, therefore, maximum reimbursement such as proper documentation, medical necessity requirements, and internal audits to prevent under- and over-coding errors.

7G: Best Practices for a Healthy Revenue Cycle

Yvonne Dailey, CPC, CPB, CPC-I

With all the constant changes in our healthcare system, it's important to understand how each insurance carrier functions and how their rules and/or guidelines affect your revenue cycle. During this session we will review the entire revenue cycle to discuss steps to keep it healthy and the cash flowing. We will learn to identify common errors along with types of reports we should generate to ensure.

7H: Counting of Data

Leonta Williams, CPC, CPCO, CRC, CEMC, CHONC

We are now more than one year into the new evaluation and management (E/M) guidelines for office and other outpatient services. Even with the time-lapse, there are still some pressing questions and remaining ambiguity around assigning data points

for medical decision making (MDM). Join us as we discuss some of these pain points: Does my test include interpretation? When should I assign credit for a lab order or review? What happens if the review takes place on a different date from the encounter? How much weight should I give to the "Data" MDM element if my other two categories are minimal or low risk? Get answers to your questions by fully understanding all the definitions around data and how to communicate these definitions to providers.

7I: FBI Healthcare Fraud Unit

Gregory Heeb

This presentation will provide an overview of the FBI's Healthcare Fraud Program, including emerging threat trends and a case study.

7J: Eating Disorders

Pamela Brooks, COC, CPC

Eating disorders impact nearly 30 million men and women nationally. This presentation is designed to provide information about the symptoms and treatment methods around a variety of eating disorders and will also discuss the healthcare finance issues surrounding these devastating diseases. Attendees will have the opportunity to take a direct look at one of the most challenging mental health conditions today in a straightforward and compassionate approach.

12:30 PM – 1:45 PM | 1.25 CEUs
Breakout Session 8

8A: CMS Changes to Reporting Shared Services

Christopher Chandler, CPC, CGSC

CMS recently proposed important changes that will significantly impact billing shared services between physicians and nonphysician practitioners. These will be finalized by the time HEALTHCON commences and will be crucial updates that attendees need. In this session, we will review these changes including clarification on where shared services can be billed, requirements regarding who should bill for the shared services, and updates about what types of services can be billed as shared services.

8 B: ENT Procedures, Surgery, and Hot Topics

Michelle Mesley-Netoskie, COC, CPC, CPMA, CPPM, CRC, CPC-I

This session will encompass a review of coding an office visit with a procedure on the same day and use of modifier 25. Then we will explore coding for surgical interventions using steroid implants and stents, nasal cryoablation, and nasal wall implants. In addition, we will tackle other hot topics such as diagnostic scopes, eustachian tube dilation, and hypoglossal nerve stimulation, followed by a look at the global surgical package in relation to functional endoscopic sinus surgery (FESS), septoplasty, and post-op debridement. Lastly, we'll discuss cerumen removal and how documentation can make all the difference.

8 C: Coding for Women's Health

Peggy Stilley, CPC, CPB, CPMA, CPC-I, COBGC

Knowing payer policies can help you identify common coding issues and ease the denial process. In this session, we will discuss services and procedures commonly performed in a gynecology office such as colposcopy, preventive services, contraception management, and office visits.

8 D: Pharmacy Coding and Charge Capture

Nancy Reading, RN, BS, CPC, CPC-P, CPC-I

This session will address the many nuances of pharmacy coding and billing. We will look at the different methods of capturing medication charges, what is and isn't billable, modifiers, dose calculations for correct charge capture, and drug taxonomies used for both pharmacy billing and in ICD-10-CM.

8 E: Outpatient Coding Compliance Missteps to Avoid

CJ Wolf, MD, MEd, CHC, CIA, COC, CPC

In this session you'll learn the answers to the following questions: Which modifiers are commonly misused, resulting in enforcement and penalties? What are the common medical necessity issues? What steps are necessary when overpayments are found?

8 F: Lessons in Leadership

Rhonda Buckholtz, CPC, CDEO, CPMA, CRC, CENTC, CGSC, COBGC, COPC, CPEDC, AAPC Approved Instructor

Let's learn about growth plans and how they can help you fast-forward your career. We will learn about the different personality types and how to effectively communicate with each member of your team, helping you achieve the most productive use of your time. If you are already a leader in business this session will help you grow your teams as well. Learn how to be consistent and motivated, maximize your growth strategies, increase your capacity, and learn skills on how to grow to elevate your career.

8 G: Clinical Denials: A Step-by-Step Approach

Srivalli Harihara & Leigh Poland

Denials have increased significantly as the electronic billing and remittance process has become increasingly sophisticated. Claims have less human contact. Computer-based payment algorithms search for key information according to payer contract requirements. The average cost to rework a claim is $25 (Healthcare Financial Management Association), and failing to rework denials results in a loss of revenue that supports your MTF's operation and maintenance budget. A 10-step process we share in this presentation will enable you to successfully appeal the most common types of denials that you see from payers.

8 H: Let's Audit! From Sample to Report

Shannon O'Tyson DeConda, CPC, CPMA, CPC-I, CEMC

Attending a solid review of audit fundamentals is essential, whether one is new to auditing or a seasoned professional. In this session, we'll discuss identifying who to audit, report analysis for sample identification, review of the notes, development and creation of reports, and effectively delivering feedback.

8 I: Human Trafficking – It's Everywhere. Would You Recognize a Patient Victim?

Dorothy Steed, COC, CPCO, CPMA, CPC-I, CEMC, CFPC

This presentation will cover common signs of victimization, including how victims are recruited. Do you have an internal policy if trafficking is suspected? Coding for human trafficking patient victims may attempt to alert you to their situation. Do you know your state requirements for reporting suspected victimization?

8 J: Understanding Principle Care Management and Changes to the Care Management Code Family

Samuel Le Church, MD, MPH, CPC, CRC, CPC-I

This session will introduce you to the newest code set in the care management code family. PCM facilitates non-face-to-face care by the healthcare team for patients with at least one high-risk condition. While PCM will typically be provided by subspecialists, the new codes may be used by any specialty. In addition to review of program requirements, we will review several case examples along with best practices for documentation and coding.

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With over 200,000 members and growing, AAPC is the world's largest training and credentialing organization for the business of healthcare, with members worldwide working in medical coding, billing, auditing, compliance, clinical documentation improvement, revenue cycle management, and practice management.

Through our career training, continuing education, coding tools, and networking events, we provide countless opportunities for industry professionals to enhance their learning and advance their careers.

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AHA Coding Clinic for ICD-10-CM/PCS and AHA Coding Clinic for HCPCS, published quarterly by the AHA Central Office, provide expert guidance supporting coders, auditors, and insurers with coding advice. Visit www.CodingClinicAdvisor.com for detailed information on AHA Coding Clinic, Coding Handbooks, and Webinars.

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COLUMBIA SOUTHERN UNIVERSITY

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For healthcare organizations looking to succeed in the evolution to value-based care delivery models, ForeSee Medical is a specialized software platform designed to increase the profitability of Medicare Advantage risk contracts. Using AI including NLP and machine learning, ForeSee Medical perfects HCC risk adjustment scores, empowering providers to positively influence health outcomes.

GHR REVCYCLE WORKFORCE

Formerly the HIM Division of HCTec, GHR RevCycle Workforce focuses exclusively on revenue cycle improvement solutions for hospitals and healthcare organizations across the country, providing qualified personnel, streamlined processes, and program management for coding, clinical documentation improvement (CDI), and case management challenges.

HCPRO DECISIONHEALTH

For over 34 years, HCPro has specialized in providing the latest healthcare regulatory information through industry-leading publications, continuing education, online coding platforms, instructor-led training, events, consulting services, and more to deliver consistent training, achieve compliance, and maximize workflow efficiencies, resulting in measurable performance and financial improvements.

DecisionHealth is the industry's leading source for home health agencies and medical practice facilities to receive the latest news, analysis, and regulatory guidance on Medicare coding and reimbursement, benchmarks, payments, and HIPAA compliance through its flagship publications as well as a wide selection of coding books, educational events, and online tools.

MEDICODIO

MediCodio optimizes your coding potential through automating the analysis of patient data and assignment of ICD-10, CPT, and HCPCS codes. Our digital automation provides seamless integration with your coding case load. Using the latest innovations in AI, machine learning, and robotic process automation, you can manage, automate, and scale your coding analysis and selection.

OS2 HEALTH SERVICES

It's true, good things come in small packages. Specializing in coding and revenue cycle management for 17 years (and counting), we've delivered amazing results in our clients bottom lines to assist in improving patient care. Since 2014, OS2HCS team of coders have coded over 500,000 home assessments, Medicare and commercial risk adjustment charts. Boasting over 95% accuracy, OS2 can offer your practice exclusively on-shore total Revenue Cycle Management. When it comes to our clients, we offer per-chart and percentage payment options, as well as 24/7 access to a Client Relations Manager for any concerns you may have. By becoming familiar with your practices EHR/EMR, we operate from our headquarters on your systems so you can maintain a watchful eye on our progress and productivity - allowing you to have the control of in-house staffing operations without the overhead.

OZARK INSTITUTE

Ozark Institute Powered by Oncospark is disrupting education by tailoring education driven by data and our subject matter experts in virtual and onsite formats for coders, administrators, and physicians. Our team conveys relational education based on the industry rules, guidelines, and principles. Our work with professional societies/organizations and healthcare's policy makers including CMS, MACs, CMMI, and payers ensure we have the latest

information as well as what is being proposed. Our team ensures you and your team have accurate information and training to increase standardization that decreases delays in revenue and unintended audits. In addition to on-site and virtual, full education courses via our leaning management system are available. Our team has experts in orthopedics, general surgery, oncology, home health, ophthalmology, plastics, and many more. We also offer coders courses on data manipulation, analytics, and mining. We are your single source for accuracy and optimization.

RCM HEALTH INFORMATION MANAGEMENT

RCM Health Information Management (HIM) offers U.S. based revenue cycle consulting and staffing solutions by providing local, remote, and travel professionals to healthcare organizations nationwide. RCM's customizable services include medical coding, clinical documentation improvement (CDI), 3rd party

coding audits, provider education, and interim HIM staffing. We help clients thrive by leveraging our in-depth industry knowledge, client centric customer service, a partnership approach, and a proven track record of success spanning 40+ years.

UNIFY HEALTHCARE SERVICES

Unify is complete RCM/medical billing services. We provide the following services:

- Insurance Verification
- Authorization/Re-Auth
- Demo Entry/Charge Entry
- Payment Posting/Credit Balances
- Accounts Receivable/Denial Management
- Audit Review
- Patient Collection Calls

Conference Notes

CEU Code Card

To receive CEUs at the 2022 HEALTHCON conference, complete this form, including the session, title, and CEU code for each session you attend. You will receive the corresponding CEUs for every session you attend once you enter the code in your CEU tracker.

AAPC is not responsible for lost or stolen cards.

Session	Title	CEU Code	CEUs
Pre-Conference	Teach the Teacher		8.00
Pre-Conference	Local Chapter Officer Training		2.00
Pre-Conference	AAPC Wants Thought Leaders – That Means You!		1.00
Pre-Conference	HEALTHCON Rookies - Learn the Ropes		0.75
General Session 1	Conference Welcome		1.00
General Session 2	E/M Panel		1.25
General Session 3	Keynote: Future of Medicare		1.25
Breakout Session 1			1.25
Breakout Session 2			1.25
Breakout Session 3			1.25
Breakout Session 4			1.25
General Session 4	Legal Trends Panel		1.25
General Session 5	AAPC International and Review With Global Trends		1.25
Breakout Session 5			1.25
General Session 6	Telemedicine Panel		1.25
Breakout Session 6			1.25
Networking Breakfast			1.00
General Session 7	2022 E/M Lessons Learned		1.25
Breakout Session 7			1.25
Breakout Session 8			1.25
Name:			
ID Number:		**Total**	

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Announcing AAPC's 2022 Conference Lineup:

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A Clinical Documentation Improvement Conference

April 26-27, 2022
12 CEUs | Virtual

RISKCON

A Risk Adjustment Conference

June 22-23, 2022
12 CEUs | Virtual

HEALTHCON Regional 2022

August 3-5, 2022
Denver, CO
15 CEUs | In-Person & Virtual

Collaborative Compliance Conference

Presented by AAPC & AHLA

August 30-31, 2022
12 CEUs | Virtual

AUDITCON

A Medical Auditing Conference

November 3-4, 2022
12 CEUs | Virtual

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