

PDGM

Are you Ready?

Patient-Driven Groupings Model: Billing and Revenue Cycle

September 11, 2019
12:30 p.m.—4:30 p.m.

&

PDGM: An Operational Guide to Success

September 12, 2019
8:30 a.m.—4:00 p.m.

REGISTER FOR
BOTH AND SAVE



MICHIGAN
Home Care
& Hospice
ASSOCIATION



Patient-Driven Groupings Model: Billing and Revenue Cycle

The Patient Driven Groupings Model (PDGM) will go into effect January 1, 2020. This is the most massive change to the home care industry reimbursement structure since the introduction of the current Prospective Payment System (PPS) in October 2000. The new payment model dramatically impacts agency operations, processes and performance. Agencies must develop and implement plans to successfully transition to PDGM. This workshop will discuss key areas, strategies and processes in preparing an agency for PDGM. This workshop will have a focus on changes to the 30-day payment model which will bring significant back office changes, specific to the claims processing and collections, including payment adjustments and proposed implementation of the Notice of Admission.

September 11, 2019

12:30 p.m.—4:30 p.m.

Location:

Michigan HomeCare & Hospice Conference Room

2140 University Park Drive, Suite 220

Okemos, MI 48864

517/349-8089

Fax: 517/349-8090



Melinda A. Gaboury is co-founder and Chief Executive Officer of Healthcare Provider Solutions, Inc. (HPS). Melinda Gaboury and Mark Cannon founded the company in April 2001 to provide financial, reimbursement, billing, operational and clinical consulting to the home care and hospice industries.

With more than 27 years in home care, Melinda has over 17 years of executive speaking and educating experience, including extensive day-to-day interaction with home care and hospice professionals. She routinely conducts Home Care and Hospice Reimbursement Workshops and speaks at state association meetings throughout the country.

On-Site Seminar will Address

- Summarize key areas of agency operations affected by PDGM.
 1. Provide guidance on evaluating an agency's current preparation status.
 2. Outline implementation actions in each key area
 3. Discuss necessary modifications to the intake and referral process under PDGM
 4. Review Order Management
- Identify data to assist in determining financial impacts of PDGM on an agency.
 1. Outline the new requirements for billing RAPs and Final Claims
 2. Review HIPPS code structure and the plan for reconciling payment differences
 3. Review strategies for improved physician interaction to ensure timely 30-day billing
- Review the complexity of determining LUPA thresholds under PDGM.
 1. Review visit count details related to LUPA adjustments & reimbursement rates
 2. Review Partial Episode Payment Adjustments (PEP_)
 - ☐ Review Outlier Calculation

Workshop Fees:

Before August 23, 2019

MHHA Member	\$80.00
Additional MHHA Member	\$70.00
Non-Member	\$160.00

After August 23, 2019

MHHA Member	\$100.00
Additional MHHA Member	\$80.00
Non-Member	\$200.00





September 12, 2019

8:30 a.m.—4:00 p.m.

On-Site Seminar will Address

- PDGM philosophies—what do the changes meant?.
- OASIS Accuracy—Developing Clinical Profiles Required for PDGM
- Managing ADLs for PDGM Accuracy
- Rehab Control under PDGM.
- Case Conferences—Are they relevant under PDGM?
- Assuring Skilled care control for audit-proof PDGM claims
- Back office rewiring for PDGM success.

PDGM: An Operational Guide to Success

Patient Driven Groupings Model (PDGM) is the CMS Home Health reform slated for January 1st, 2020, with the goal of better aligning reimbursement with patient needs while addressing payment incentives in our current system. The changes for Home Health Providers are significant, and require not only technical updates, but wholesale modifications to traditional care production, delivery and management protocols. William Dombi, President of the National Association of Home Care & Hospice (NAHC), states “This (PDGM) will revolutionize how home care operates”. PDGM changes include splitting the 60-day certification period into two 30-day segments, removing therapy visit totals from the reimbursement formula, and altering the RAP, LUPA, and ADL scoring as it relates to rehab. PDGM value changes are also paired with additional HH reforms slated for installation over the next few years, including VBP expansion, Pre-Claim Review, and Post-Acute PPS.

At this progressive seminar, Home Health Providers seeking success in the value reform era will learn care production and management models which, if installed, will produce improved clinical and financial results under PDGM when compared to current outcomes under the HH PPS model. By replicating care processes employed outside of Home Health, Providers can continue on their path of keeping Medicare patients safe in their homes. This seminar will identify the new care processes required for PDGM while demonstrating how to install them in your agency

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After August 23, 2019

MHHA Member	\$375.00
Additional MHHA Member	\$350.00
Non-Member	\$750.00

Nursing CEs:

Michigan HomeCare and Hospice Association is approved as a provider of continuing nursing education by the Ohio Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. (OBN-001-91)

Criteria for Successful Completion:

In order to receive contact hours you must sign in at the beginning of class and sign out at the conclusion of the program. You must stay for the entire workshop and complete an evaluation form in order to receive your certificate. Late arrivals beyond 30 minutes after the published start time for this education training event will not be eligible to receive the contact certificate. No exceptions!

Conflict of Interest:

The planners and faculty have declared no conflict of interest.

Meet Your Faculty:



Arnie Cisneros, P.T., President of Home Health Strategic Management, is a leading and national speaker in the areas of healthcare reform and clinical programming. His legacy of clinical delivery, adaptation of care protocols, and progressive care modeling have established his voice regarding Affordable Care Act Reforms, and he currently serves as Post-Acute Consultant for multiple Pioneer ACO systems. He was awarded a CMS Innovation Center Bundled Payment for Care Improvement (BPCI) Pilot Program in 2012 for Lower Extremity Joint Replacements, and has managed Episodic Bundling of these patient programs. The HHSU Utilization Review program, SURCH, delivers improved care programs for Home Health Providers through a PPS – compliant, acuity based care model, producing the care episodes required for future success.



Kimberly McCormick, RN/BSN, a highly accomplished nurse consultant in the Home Health industry, is Executive Clinical Director for Home Health Strategic Management. Her 24 years' experience in Home Health, 8 spent as Administrator of a Home Health Agency, has given her the experience and the knowledge to provide unrivaled insight into the homecare arena. Kimberly served as an Associate Consultant with Home Health Strategic Management for 2 years, during which she has established herself as an expert in the area of Utilization Management of Home Health services. During her time as Administrator, she achieved deficiency-free surveys by The Joint Commission, deficiency-free Department of Health & CMS surveys, and a 0.42% error rate on an ADR audit. Kimberly authors the HHSU nursing newsletter and is presenting nationally on homecare topics and care models proposed by CMS and MedPac for the future of the Home Health industry.

Registration/Cancellation Information:

To Register, complete the attached registration form and return it with payment to : Michigan Home Care & Hospice Association (MHHA), 2140 University Park Drive, Suite 220, Okemos, MI 48864. Payment must accompany registration. To receive a refund, MHHA must be notified in writing of cancellation 10 business days prior to the workshop date. A \$40.00 administrative charge will be assessed to all cancellations. No refunds will be issued after September 2, 2019. Please advise MHHA in writing of any substitutes in advance of the workshop.

Patient-Driven Groupings Model: Billing and Revenue Cycle
September 11, 2019
&
PDGM: An Operation Guide to Success
September 12, 2019

Name: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Vegetarian

September 11 2019

September 12, 2019

Before August 23, 2019

MHHA Member	\$80.00
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Non-Member	\$160.00

Before August 23, 2019

MHHA Member	\$350.00
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Non-Member	\$700.00

After August 23, 2019

MHHA Member	\$100.00
Additional MHHA Member	\$80.00
Non-Member	\$200.00

After August 23, 2019

MHHA Member	\$375.00
Additional MHHA Member	\$350.00
Non-Member	\$750.00

MHHA Members—attending both September 11th & September 12th (Before August 23, 2019) \$400.00

MHHA Members –attending both September 11th and September 12th (After August 23, 2019) \$450.00

Payment Method: _____ Amount Enclosed: _____

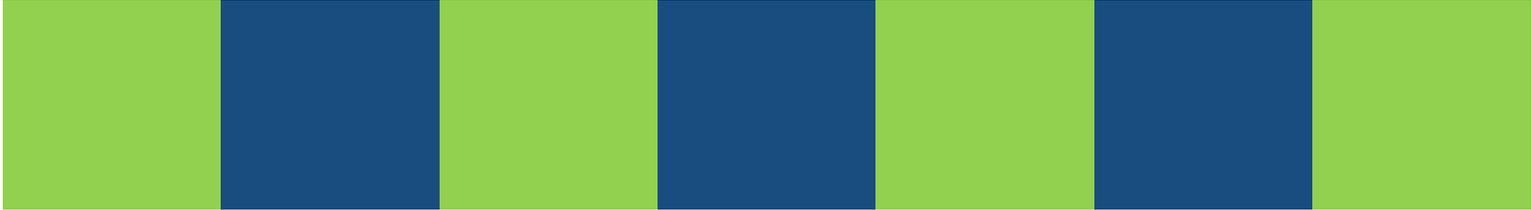
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