



Michigan Home Health Association



ICD-9-CM Coding Workshop, Update, Testing & Certification

Tuesday, March 30, 2010 (Beginning)

Wednesday, March 31, 2010 (Intermediate)

Thursday, April 1, 2010 (Exam Study Session & Test)



Presenter:

Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C, is a home care veteran with over 23 years spent in home health and hospice, both as an RN and as an attorney practicing exclusively in home care. She is the owner of Selman-Holman & Associates, LLC, a full-service home care consulting firm and CoDR, a coding outsource and audit company. Lisa is on the Home-care Coding Specialist-Diagnosis (HCS-D) national advisory board for the Board of Medical Specialty Coding (BMSC), and is a BMSC-approved educator for the HCS-D certification exam. She is the editor of the Complete Home Health ICD-9-CM coding manual. She participated on the Exam Review Task Force for the OASIS Certificate & Competency Board (OCCB). Lisa has the following conflict of interest in regard to this program – she's a provider of consultative services to the home health industry.

Coding Fundamentals—A Basic Course for Home Care Professionals

Tuesday, March 30, 2010 (Beginning Coding Class)

9:00 a.m.—4:30 p.m.

Objectives -Program participants will be able to:

- ❖ Identify the relationship between assessment, coding and the Plan of Care;
- ❖ Apply specific sequencing rules to sequence common home care diagnoses;
- ❖ Identify case mix diagnoses used in the Prospective Payment System;
- ❖ Determine the correct use of V codes for patient encounters;
- ❖ Discuss the coding conventions, the OAISS items and particular sequencing rules to common home care diagnoses; and,
- ❖ Identify special sequencing rules for more complex conditions.

Coding for Coders—Competency in Diagnosis Coding

Wednesday, March 31, 2010 (Intermediate Coding)

9:00 a.m.—4:30 p.m.

- ❖ Discuss CMS guidance on sequencing;
- ❖ Discuss the relevance of OAISS C data items for diagnoses to payment;
- ❖ Prioritize diagnoses based on clinical assessment and planned interventions;
- ❖ Apply specific sequencing rules as required by the Official Coding Guidelines;
- ❖ Describe coding of diagnoses of infections, neoplasms, endocrine disorders such as diabetes, anemias, mental disorders, and the nervous system & sense organs;
- ❖ Describe coding of diagnoses of cardiorespiratory illnesses, cerebrovascular disease and GI & GU disorders;
- ❖ Identify the differences between different kinds of ulcers;
- ❖ Explain coding of diagnoses of the musculoskeletal system, injuries and poisonings;
- ❖ Describe the purpose and appropriate use of V & E codes; and,
- ❖ Demonstrate the use of the coding manual to find codes and sequence diagnoses for home care scenarios.

Coding Study Session for Exam

Thursday, April 1, 2010

9:00 a.m.—11:00 a.m.

Prepare for the Home Care Specialist –Diagnosis (HCS-D) certification exam by attending this comprehensive study session

ICD-9 Coding Exam

Thursday, April 1, 2010

12:30 p.m.—3:00 p.m. (Registration at Noon)

Participants must bring a current ICD-9 Coding manual to class!

Who Should Attend:

Nurses, Therapists, Clinical Supervisors, Administrators, Financial Managers, Quality Improvement and Billing Staff

Program Cost:**

MHHA Member for Full Day Workshop	\$185.00
Non Member for Full Day Workshop	\$370.00
MHHA Member Attending Both Days	\$345.00
Additional MHHA Member for Full Day Workshop	\$160.00
Additional MHHA Member Attending Both Days	\$320.00
MHHA Member Study Session (April 1st)	\$50.00
Non Member Study Session (April 1st)	\$100.00

****The cost does not include the exam. Registration for the coding examination is handled separately. Attendees interested in taking the coding examination on April 1, 2010 must register with the Board of Medical Specialty Coding at: www.medicalspecialtycoding.com to get a test outline, sample questions and answers and other helpful resources; (800) 897-4509, or see the attached registration form and information on the exam on April 1, 2010. Payment for the exam is made to BMSC (Board of Medical Specialty Coding). MHHA Members receive the state association rate. The Advanced day is approved for 6.5 CEUs toward the HCS-D designation.**

Michigan Home Health Association (OH-290, 3/7/2010) is an approved provider of continuing nursing education by the Ohio Nurses Association (OBN-001-91), an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

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 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 have declared no conflict of interest and the faculty has declared a potential conflict of interest since she is the editor of the ICD-9 Manual with Decision Health. The faculty discussed with the Nurse Planner and agrees to the provider's policy and will present without bias.

Sponsorship: There is no sponsorship for this event.

Commercial Support: There is no commercial support for this event.

Workshop Location

Michigan Home Health Association Conference Room
2140 University Park Drive, Suite 220
Okemos, MI 48864
Phone: 517/349-8089 Fax: 517/349-8090

Study Session and Exam Location:

Michigan Home Health Association Conference Room
2140 University Park Drive, Suite 220
Okemos, MI 48864
Phone: 517/349-8089 Fax: 517/349-8090

Registration/Cancellation Information:

To register, complete this form and return it with payment to : Michigan Home Health Association, 2140 University Park Drive, Suite 220, Okemos, MI 48864. Payment must accompany registration. To receive a refund, MHHA must be notified in writing of any cancellation 10 days prior to the workshop date. A \$40.00 administrative charge will be assessed to all cancellations. No refunds will be given after March 20, 2010. MHHA reserves the right to limit the number of participants. Please advise MHHA in writing of any substitutes in advance of the workshop.

ICD-9-CM Coding Workshops & Study Session
March 30-31, 2010

Name: _____

Organization: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

E-mail: _____

- March 30th Beginning Workshop March 31st Intermediate Workshop
 April 1st Study Session (Additional Charge)

 Vegetarian Meal Requested

Payment Method: _____ **Total Enclosed:** _____

- Visa MasterCard Discover Check Enclosed

CC#: _____

Authorized Signature: _____ Exp. Date: _____

CVC # (3 digit on back of card): _____

Billing Address: _____

Mail/Fax Registration Form with Payment to:

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