

Beyond the Basics: Advance Coding

It is not for the faint of heart or those with malaise and fatigue. After a brief review of Appendix D, you'll spend the day coding complex scenarios that include intense study of the coding guidelines. These coding scenarios include the conditions that you'll need to code for the HCS-D certification and recertification exam so they are an excellent study aid!

OBJECTIVES

1. Explain the relevance of OASIS data items for diagnoses to payment.
2. Prioritize diagnoses based on clinical assessment and planned interventions.
3. Apply specific sequencing rules as required by the Official Coding Guidelines.
4. Describe the purpose and appropriate use of V and E codes.
5. Use the coding manual to find codes and sequence diagnoses for home care scenarios.
6. Discuss the relevancy of the clinical record, the official coding guidelines and other official guidance for choosing primary and secondary diagnoses.

CONTINUING EDUCATION

Program have been submitted for approval for continuing education from the MN Board of Nursing and Physical Therapy, and for the maintenance of the HCS-D designation. CEU certificates will be provided at the workshop.

BRING A CURRENT ICD-9 CODING MANUAL

You may purchase a Decision Health Coding manual at a discounted price from www.decisionhealth.com (reference SAMN2008 to receive the discount). Purchases may take up to 2 weeks to receive; or you may purchase one onsite for \$179. You get 10% off and no shipping fee.

CODING CERTIFICATION TESTING

MHCA is NOT offering the BMSC Coding Certificate Testing. If you want more information about testing go to <http://www.medicalspecialtycoding.com/proctoring.aspx>. The BMCS recommends that you consider testing if you have had at least 2 years of coding experience.

ABOUT THE PRESENTER

Lisa Selman-Holman, JD, BSN, RN, HCS-D, COS-C is a home care veteran with 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 Homecare 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 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.



Presented by
Lisa Selman-Holman, JD,
BSN, RN, HCS-D, COS-C,
Selman-Holman &
Associates, LLC

TRAINING DATES & LOCATIONS

- ▶ **September 22, 2010**
 Lakewood Health System
 49725 County 83
 Staples, MN 56479
- ▶ **September 23, 2010**
 Wings Financial
 8101 34th Ave. S. Ste 200
 Bloomington, MN 55425

REGISTRATION INCLUDES

- ▶ Breakfasts and Breaks.
No Lunch (box lunch is available for \$10)
- ▶ Electronic Handouts
- ▶ CEU Certificate

SUGGESTED AUDIENCE

Home care administrators and directors, clinical managers, educators, quality improvement leaders, home care nurses, therapists, and medical staff.



1711 West County Road B, Suite 211 S, St. Paul, MN 55113
 P: 651-635-0607 | F: 651-635-0043 | O: 866-607-0607
 www.mnhomecare.org

2010 ICD-9 HOME HEALTH CODING

Beyond the Basics: Advance Coding

WORKSHOP REGISTRATION BROCHURE

THREE SIMPLE WAYS TO REGISTER

1. Register securely online at: www.mnhomecare.org
2. Fax this completed form below to 651-635-0043
3. Mail completed form to:
 MHCA Coding
 1711 West County Road B, Suite 211 S
 St. Paul, MN 55113

TRAINING DATES & LOCATIONS

- ▶ **September 22, 2010** ~ Staples, MN
- ▶ **September 23, 2010** ~ Bloomington, MN

Registration deadline: September 15, 2010

REGISTRATION FEE

- #_____ **Member First Registrant \$165**
- #_____ **Member Additional Registrant \$140 pp**
- #_____ **Non-Member \$190 pp**

PRE-ORDERED BOX LUNCH

- #_____ **\$10 Box Lunch** (includes drink, sandwich, and chips/salad)

***Email dietary requests to psorenson@mnhomecare.org

TOTAL: \$_____

REGISTRANT INFORMATION

First & Last Name	E-mail Address	Location	Box Lunch
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>
			<input type="checkbox"/>

Company Name: _____

Address: _____

City / State / Zip: _____

Phone: _____

Fax: _____

PAYMENT INFORMATION

Make checks payable to MHCA (Fed ID #41-164-1999) or submit a credit card, we accept Visa, Master, AMEX, and Discover cards. MHCA members have the option to select the "Bill Me" option and Non-Members, payment is due upon registration to guarantee seat.

- Bill Me (Members Only) Check Payable to MHCA AMEX Master Visa Discover

Cardholder's Name: _____

Card Number: _____

Expiration Date: _____

CVV2: _____

Cardholder's Signature: _____

CANCELLATION & REFUND POLICY:

A \$25 cancellation fee will be charged to the individual cancelling their registration. All cancellations must be in writing and received by **September 15, 2010** to receive a refund less the \$25 cancellation fee. In the event of an emergency, cancellations made after the cancellation deadline are charged 50% of his/her registration fee to cover expenses incurred. No refunds for no-shows. Please notify MHCA of any name changes.