



SNF Medicare Billing Compliance – Basics

This 3-day workshop offers comprehensive **SNF Billing** training to successfully submit claims and receive payment for services provided in your Skilled Nursing Facility.

Polaris Group, with over 30 years of hands-on experience, provides more than regulations and theory for attendees. Polaris Group's LTC Training Institute – **SNF Medicare Billing Compliance - Basics** workshop will cover numerous topics including a review of Medicare Skilled Nursing Facility regulations for billing, the creation of compliant Part A and Part B claims for various billing situations and other aspects of Medicare billing often handled in the Business Office. Such topics as navigating the Medicare FISS system, SNF Consolidated Billing guidelines, skilled coverage criteria, Medicare Beneficiary Notice compliance and much more. Included will be a review of PDPM and how PDPM changes affect billing. Hands on experience in creating claims for various situations will also be included in this training.

Attendees will receive a comprehensive training manual that can be used as a resource in your facility, as well as a USB with forms and procedures which allows for customization to fit your operational needs.

We provide a unique “how to implement” approach to our training which includes skill-building for Part A and B Medicare billing, Managed Care, and Medicare as Secondary Payer. The workshop will provide attendees with the tools they will need to ensure timely receipt of revenue and manage the complexities of Medicare compliance in the ever-changing billing environment.

Who should attend?

- Business office staff**
- Administrators / Owners / Executive Directors
- Reimbursement / Finance Directors and staff**
- Corporate Accounts Receivable Consultants and/or Educators**
- Administrators in Training

**** Attendees should have some exposure to the Medicare billing processes.**

This workshop is comprehensive, and requires some knowledge of the SNF billing process. This workshop is taught on an intermediate level, but we can respond to questions at all levels. Business Office experience of at least a few months is extremely helpful, but not required.

Why THIS training is one of the best investments you can make this year!!

- **Practical Experience** – Attendees leave with a comprehensive understanding and working knowledge of Medicare billing.
- **Intensive learning format** – After reviewing the regulations, we then provide interpretation of those rules and provide detailed, step-by-step methods for implementation including needed procedures/forms that ensure compliance or optimal revenue.
- **Small class size** – With a smaller group, more interactive activities are provided with all questions answered to ensure optimal learning experience.
- **Program manual and USB** – Each attendee receives a comprehensive training manual which includes all training materials, small group activities, and sample procedures and forms. In addition, forms and procedures are provided on USB which can be implemented in your facility.
- **Create your own personal “to do” list** – For each covered area, we will work together to identify areas for improvement needed in your SNF. You can then create a priority “to do” list to take back to your facility to implement.
- **Expert assistance with resolving “real” claim issues** – Hands-on assistance from one of our Medicare Billing Professionals with processing your “problem” claims. We will utilize our secure software to access FISS to help you solve up to 3 issues, or review 3 UB-04's that you are having difficulty getting paid. We can help you get paid!
- **Polaris Group experience** – Polaris Group has been an established expert in Medicare compliance and billing with best practices for over 30 years.

Institute Questions: 1-800-275-6252 ext. 250

Click here to register: www.polaris-group.com



SNF Medicare Billing Compliance – Basics: Institute Information

Instructor:

Kristy Brown, Senior Financial Health Care Consultant for Polaris Group has over 35 years of experience in the Long Term Care industry. She has worked in the health care finance field at multiple corporate levels, as well as owning her own Long Term Care facility. She held the positions of Director of Operations, Regional Financial Consultant, Nursing Home Administrator, and Assisted Living Director.

Dates & Locations/Continuing Education Credits:

August 20-22, 2019: San Antonio, TX
October 22-24, 2019: Las Vegas, NV

Continuing Education Credits:

Administrators - 15 CECs
Nurses - 15 CECs

Day of Training:

- Registrant to make own hotel reservations
- First two days - class times are 8:30 a.m. to 5:00 p.m. Third day lecture ends by 2 pm, followed by post lecture “real time claims processing”
- Coffee or soda provided. Meals are on your own.
- Fee includes: Three (3) days of training, training manual and USB.
- **Course Fee:** \$979/per person
 - 10% off/per person, if registered 30 days in advance
 - Group Discount: First two registrants pay the usual fee; any additional registrants (2nd, 3rd, 4th, etc.) from the same location have a \$50 discount applied. To receive the discount, please call 800-275-6252 ext. 250 and discount will be applied
- Refund/Cancellation Policy: All refund requests required in writing. Please refer to our website for complete refund policy information.

Interested in a Group Training!?

We can bring the Institute to you!

You will have the benefit of having your staff all hear the information at the same time; and access to our experts speakers and materials.
Call 800-275-6252 ext. 237, Sales Department to learn more about our specialized group training!

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DAY 1

Module 1 – Reviewing Medicare Coverage Criteria

- Analyzing the Common Working File (CWF) for appropriate payment
 - Traditional Medicare
 - Overview of Covered Services
 - Skilled coverage Criteria
 - Benefit Periods
 - Qualified Medicare Beneficiaries
 - Medicare Part B Coverage Requirements
 - Managed Care
 - How to determine plan type: HMO, PPO
 - Insurance Verification
 - RUG Based, Contracted Rate
 - Medicare Secondary Payer
 - MSP Questionnaire
 - MSP Rules and Regulations
 - Coordination of Benefits (COB)

Module 2 – Consolidated Billing

- SNF Consolidated Billing guidelines
 - Major Categories Review
 - Vaccines
 - Supplies and Durable Medical Equipment (DME)
 - Ambulance Transportation
- CMS WEBSITE – Finding the answers
 - Consolidated Billing Downloads
 - Locating Fee Screen Information
 - Medicare Administrative Contractors (MAC) Jurisdictions

Module 3 - Medicare Notices

- Implement policies surrounding Medicare Beneficiary Notices and Letters, Advanced Beneficiary Notices (ABN)
 - Define each notice and appropriate usage
 - SNF ABN
 - ABN for Part B

DAY 1, continued

Module 3 - Medicare Notices

- Annotating the Medicare Notices
- NOMNC/Generic Notice for expedited review.
- Annotating the Medicare Notices

Module 4 – Business Office Best Practices For Accurate Revenue

- Business Office and Month End Processes
 - Month End Processes
 - Census reconciliation
 - Validating MDS Transmission – Validation report
 - Triple Check QA procedures
 - Medicare Claim checklist
- Medicare Explanation of Benefits (Remittance Advice).
 - Applying Payments
 - Understanding the remit advice
- A/R review
 - How to review your A/R for success

DAY 2

Module 5 – PDPM Overview What is PDPM?

- Understand the key points to PDPM
 - What is PDPM?
- Discuss, in detail all 6 Classifications assigned all residents
 - Nursing
 - PT
 - OT
 - SLT
 - Non – Therapy Ancillary
 - Non-Case Mix
- Calculating the SNF PPS per diem rate
- Determining the HIPPS modifier for PDPM
- PDPM examples and group activities

DAY 2, continued

Module 6 – UB-04 Workshop

- Completion of a clean claim
 - Correct use of occurrence, condition, span and status codes to create the appropriate UB-04 claim for:
 - Medicare Part A/PDPM Claim Review
 - Medicare Part B
- Other claim situations
 - No Pay and Benefits Exhaust claims
 - Provider Liability claim
 - Leave of Absence claim
 - Medicare Secondary Payer
 - Managed Care
 - Demand Bills
 - Provider Liability

Module 7 – UB-04 Case Studies

- GROUP ACTIVITY

DAY 3

Module 8 – Diagnosis Coding

- ICD-10-CM Overview
- Common coding errors
- ICD-10-CM coding on both Part A and Part B claims
- Coding tips for PDPM
- Care team communication



DAY 3, continued

Module 9 – FISS Navigation

- Navigate FISS (Fiscal Intermediary Shared System) to follow-up on submitted claims and ensure payment.
 - Direct Data Entry
 - DDE Short cuts and tips
 - Roster Billing
 - Corrections
 - Adjustments
 - Cancellations
 - Additional Development Requests (ADR)
 - Understanding Denial reason codes

Module 10 – Group Activities

- Building Correct Claims
- MSP Claim Building
- No Pay Claims
- Analyzing claim errors
- PDPM examples

Post Lecture - REAL TIME Claims Processing

- “Hands-on” assistance with problem claims. Come prepared to log on to Fiscal Intermediary Shared System (FISS) with your facility specific information:
 - DDE log on and password (you will not share this information with others)
 - NPI
 - MAC jurisdiction info
 - Problem UB-04’s – may include MSP, MANAGED CARE, INSURANCE
- PLEASE limit your issues to 3 due to time constraints.

Testimonials

“Loved this workshop, Kristy was very personable, knowledgeable, and patient with us “new billers.” Orlando 2018

“Kristy is very knowledgeable about Medicare Billing. I have learned a lot and I’m not a biller but an Administrator. Good information that will help in the future” Vegas 2017