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RIS

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Revenue Integrity Symposium

OCTOBER 15–16, 2019
ORLANDO, FLORIDA

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RIS Revenue Integrity Symposium

The **2019 Revenue Integrity Symposium** brings together training on revenue integrity, Medicare billing and compliance, patient status, coding, clinical documentation improvement (CDI), and case management, helping attendees ensure compliance and accurate billing and reimbursement across the revenue cycle. Unlike any other, this conference offers a wide range of exciting sessions on critical revenue integrity topics and the chance to learn from and network with trusted industry experts and revenue cycle professionals of all varieties.

Our expert speakers will cover topics essential to revenue integrity, Medicare compliance, and the revenue cycle in acute care and long-term care settings.

BENEFITS FROM THE 2019 REVENUE INTEGRITY SYMPOSIUM:

- ✓ Learn strategies for designing a revenue integrity program, defining leadership, and setting and meeting revenue integrity goals
- ✓ Gauge the financial and operational impact of the 2020 OPPS and MPFS proposed rules and the 2020 IPPS final rule
- ✓ Discover best practices for maintaining an up-to-date and compliant charge description master and learn to identify and implement effective charge capture strategies
- ✓ Get the latest information on external auditors and learn new strategies for dealing with claim denials and appeals
- ✓ Develop strategies for enhancing your denials management program, using analytics to strengthen internal audits and defend against external audits
- ✓ Gain insight into billing and coding hot topics that may impact your facility's financial performance, including injections and infusions, claim edits, and patient status
- ✓ Return to your facility armed with the tools to enhance revenue integrity and develop strategies for accurately documenting, coding, and billing patient encounters and stays
- ✓ Discuss strategies for executing the new PDPM case-mix payment model
- ✓ Analyze the role of diagnosis coding with the MDS in the post-acute care setting

2019 HIGHLIGHTS:

- ★ Highlights of the 2020 OPPS proposed rule
- ★ Properly addressing National Correct Coding Initiative edits and Medically Unlikely Edits
- ★ Revenue integrity program design and management
- ★ Impact of value-based reimbursement models on revenue
- ★ Reimbursement, documentation, and coding strategies for laboratory tests and drug administration
- ★ Current payer audit targets and strategies to protect revenue
- ★ Best practices for reducing payer denials using targeted data analytics
- ★ Understanding the impact of patient status and navigating payer regulations
- ★ The impact of the new PDPM case-mix payment model on billing and reimbursement
- ★ The link between ICD-10 coding and the MDS

REGISTER TODAY! Call 615-724-7200 or visit hcmarketplace.com/RIS2019



The **Association for Medicare Billing and Reimbursement (AMBR) for Long-Term Care** is designed to help you tackle tough regulatory issues while better connecting a broad network of long-term care billing and reimbursement professionals. AMBR's mission is to serve as a community for networking, education, and analysis of complex regulations to empower its members to succeed and achieve professional growth.

NEW FOR 2019: TRACK DEDICATED TO LONG-TERM CARE

This first-of-its-kind track is brand new in 2019. Sponsored by the Association for Medicare Billing and Reimbursement (AMBR) for Long-Term Care, sessions will address the specific challenges that long-term care facilities face when it comes to all aspects of revenue integrity, including several sessions that dive into SNF's new payment system, the Patient-Driven Payment Model.

Sessions will also cover the claims process, achieving accurate reimbursement with PDPM's new incentives, performance data's impact on revenue, cost reporting and its relation to compliance, coding, how to minimize claim and denial risk, and more!

Everyone involved in the billing and reimbursement cycle should attend these sessions, from billers and business office managers, to MDS coordinators, administrators, and chief financial officers. No one understands the connection between these roles better than our expert speakers, many of whom come from backgrounds in the field and all with years working in the long-term care industry. Attendees will leave feeling educated, energized, and with a new networking community.

NAHRI National Association of Healthcare Revenue Integrity

The **National Association of Healthcare Revenue Integrity (NAHRI)** is dedicated to providing the hospital revenue integrity community the resources, networking, and training required to achieve efficiency, compliance, and optimized reimbursement for their organization. By becoming a member, you gain access to a vast body of revenue cycle knowledge, high-quality training programs, the latest tools and tactics, exposure to leading-edge thinking, and opportunities to interact with your peers.

Join NAHRI and save an extra \$100 off the cost of the Revenue Integrity Symposium.

JOIN NOW AND SAVE!

[HCMARKETPLACE.COM/AMBR](https://hcmarketplace.com/AMBR)

[HCMARKETPLACE.COM/NAHRI](https://hcmarketplace.com/NAHRI)

DAY 1

TUESDAY, OCTOBER 15, 2019

7:00–8:00 a.m.	REGISTRATION AND CONTINENTAL BREAKFAST (PROVIDED—EXHIBIT HALL OPEN)			
8:00–9:00 a.m.	GENERAL SESSION 1			
	GREAT BALLS OF FIRE! HOW TO STAY MOTIVATED NO MATTER WHAT <i>Denise Ryan</i>			
9:10–10:10 a.m.	BREAKOUT SESSION 1			
	ROUND THE RULE MERRY-GO-ROUND: IPPS, OPPTS, AND MPFS <i>Jugna Shah, MPH, and Valerie A. Rinkle, MPA, CHRI</i>	PEPPER: AN INTEGRAL TOOL FOR REVENUE INTEGRITY <i>William L. Malm, ND, DNP, CRCR, CMAS</i>	REVENUE INTEGRITY: A TEAM APPROACH TO COMPLIANT REVENUE RETENTION <i>Tracey A. Tomak, RHIA, PMP, and Dawn Crump, CHC, SSB, MA</i>	PDPM IMPLICATIONS FOR SENIOR MANAGEMENT <i>Stefanie Corbett, DHA</i>
10:10–10:40 a.m.	NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)			
10:40–11:40 a.m.	BREAKOUT SESSION 2			
	BACKGROUND AND HISTORY OF THE 2 MIDNIGHT RULE AND THE IMPORTANCE OF PATIENT STATUS ISSUES <i>Marc Hartstein, MA</i>	THE CDM: TALES FROM A CFO, COORDINATOR, AND CONSULTANT <i>Sarah L. Goodman, MBA, CHCAF, COC, CCP, FCS, Kay Larsen, CRCR, and Linda J. McCray, CPA, MBA</i>	THE ABCS OF HCCS <i>Rose T. Dunn, MBA, RHIA, CPA, CHPS, FACHE, FHFMA</i>	TRACKING AND ANALYZING THERAPY UTILIZATION TO MINIMIZE CLAIM AND DENIAL RISK <i>Megan Reavis, MBA, BS, COTA/L</i>
11:40 a.m.–12:40 p.m.	NETWORKING LUNCH (PROVIDED—EXHIBIT HALL OPEN)			
12:40–1:10 p.m.	SPONSORED SESSION			
1:20–2:20 p.m.	BREAKOUT SESSION 3			
	SEEING THROUGH PRICING TRANSPARENCY <i>Caroline Rader Znaniec, MBA, MS-HCA</i>	DRUG ADMINISTRATION REVIEW AND REFRESHER: TESTING YOUR KNOWLEDGE THROUGH AN INTERACTIVE DIALOGUE <i>Jugna Shah, MPH</i>	EVOLUTION OF UTILIZATION REVIEW AND THE ROLE OF PHYSICIAN ADVISORS <i>Kurt Hopfensperger, MD, JD</i>	IMPLEMENTING REVENUE CYCLE MANAGEMENT FOR SNFS <i>Kim Cusson, CCS, CPC</i>
2:20–2:50 p.m.	NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)			
2:50–3:50 p.m.	BREAKOUT SESSION 4			
	SUCCESS AND LEADERSHIP: PANEL CONVERSATION WITH FOUR WOMEN LEADERS <i>Stacey McCreery</i>	VALUE-BASED CARE: A COMPREHENSIVE LOOK AT MIPS, BUNDLES, AND RECENT CHANGES <i>William L. Malm, ND, DNP, CRCR, CMAS</i>	LET'S OWN OUR REVENUE INTEGRITY: USING REVENUE CYCLE PRINCIPLES TO MAXIMIZE REIMBURSEMENT <i>Sheldon A. Pink, MBA, FHFMA</i>	REVENUE AND BILLING INTEGRITY TESTING IN LTC MERGERS AND ACQUISITIONS <i>Reginald M. Hislop III, PhD</i>
4:00–5:00 p.m.	BREAKOUT SESSION 5			
	PRICING HOSPITAL SERVICES: ANYTHING BUT TRANSPARENT <i>Valerie A. Rinkle, MPA, CHRI, Dapo Akanbi, MBA, and John D. Settlemeyer, MBA, MHA, CPC</i>	TODAY'S WORLD OF AUDITS AND REVIEWS: A LOOK AT CMS' AUDIT PROGRAMS, THEIR CONTRACTORS, AND OTHER FEDERAL OVERSIGHT <i>Diane Weiss, CPC, CPB, CCP</i>	STRATEGIES TO IMPLEMENT THE SELF-DENIAL PROCESS AND BILL SUCCESSFULLY WITH CONDITION CODE W2 <i>Kimberly A.H. Baker, JD, CPC</i>	TRACKING PAYER CORRESPONDENCE TO PREVENT LOST CLAIMS <i>John W. Carter</i>
5:00 p.m.	ADJOURN			
5:00–6:00 p.m.	NETWORKING RECEPTION			

DAY 2

WEDNESDAY, OCTOBER 16, 2019

7:00–8:00 a.m.	CONTINENTAL BREAKFAST (PROVIDED—EXHIBIT HALL OPEN)			
8:00–9:00 a.m.	BREAKOUT SESSION 6			
	UNDERSTANDING AND APPLYING NEW LAB DATE OF SERVICE REQUIREMENTS <i>Marc Hartstein, MA</i>	REDUCE MUE AND NCCI EDITS BY BEING PROACTIVE <i>Denise Williams, COC</i>	SAFETY NET FOR REVENUE CAPTURE <i>Suzanne Tschetter, CPA, Karen Giacomo, BA, CPC, CHA, and Jim Carlson</i>	AVOIDING COMMON COST REPORT MISTAKES: IMPLICATIONS FOR COMPLIANCE AND REIMBURSEMENT <i>Kim Cusson, CCS, CPC</i>
9:10–10:10 a.m.	BREAKOUT SESSION 7			
	TARGET PROBE AND EXTRAPOLATE: A CONCERNING CMS INITIATIVE <i>Alicia Kutzer, Esq., LL.M., MHA</i>	SECURING AND RETAINING THE BEST TALENT: A PANEL DISCUSSION ON CREATING A STRATEGY AND CULTURE TO ATTRACT AND RETAIN STAFF <i>Stacey McCreery</i>	UNDERSTANDING PART A HOSPITAL BENEFITS: HELP ME COUNT THE DAYS <i>Judith L. Kares, JD</i>	PDPM CRASH COURSE FOR THE BUSINESS OFFICE <i>Maureen McCarthy, BS, RN, RAC-MT, QCP-MT, DNS-MT, RAC-MTA</i>
10:10–10:40 a.m.	NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)			
10:40–11:40 a.m.	BREAKOUT SESSION 8			
	ORGANIZATIONAL INTERDEPENDENCE STRATEGIES FOR IMPROVED REVENUE INTEGRITY <i>Caroline Rader Znaniec, MBA, MS-HCA, and Stacie Smith, EMBA, RHIA</i>	MANAGING DENIALS PROCESSES: AN ANALYTICAL APPROACH <i>Becky W. Cook, CPA, MHA, and Scott Everitt, MBA</i>	OBSERVATION: COMMONLY USED, POORLY UNDERSTOOD, FREQUENTLY BILLED INCORRECTLY <i>Ronald L. Hirsch, MD, FACP, CHCQM</i>	CONSOLIDATED BILLING: IMPACTS ON REIMBURSEMENT UNDER PDPM <i>Stefanie Corbett, DHA</i>
11:40 a.m.–12:40 p.m.	NETWORKING LUNCH (PROVIDED—EXHIBIT HALL OPEN)			
12:40–1:10 p.m.	SPONSORED SESSION			
1:20–2:20 p.m.	BREAKOUT SESSION 9			
	LEVELING THE FIELD: AN ANALYTIC APPROACH TO CREATING INDIVIDUAL PAYER STRATEGIES <i>Joseph Zebrowitz, MD, and Jay Ahlmer, CFA</i>	APPROPRIATE USE CRITERIA FOR ADVANCED DIAGNOSTIC IMAGING: UNDERSTANDING THE REQUIREMENTS AND IMPACT ON OPERATIONS <i>Denise Williams, COC, and Angela Lynne Simmons, CPA</i>	DRG OPTIMIZATION: WHY CURRENT DRG OPTIMIZATION EFFORTS MAY BE COMING UP SHORT <i>Laura Legg, RHIA, RHIT, CCS, CDIP</i>	REINVENTING YOUR TRIPLE CHECK AND MEDICARE MEETING PROCESSES FOR PDPM SUCCESS <i>Maureen McCarthy, BS, RN, RAC-MT, QCP-MT, DNS-MT, RAC-MTA</i>
2:20 p.m.	ADJOURN			
3:00–5:30 p.m.	NAHRI'S CERTIFICATION IN HEALTHCARE REVENUE INTEGRITY CREDENTIALING EXAM View the CHRI Exam Candidate Handbook at nahri.org/certification to learn about prerequisites and apply today.			

Agenda and speakers subject to change

TRACKS
ACUTE CARE REGULATORY CHANGES AND HOT TOPICS
REVENUE INTEGRITY AND REIMBURSEMENT STRATEGIES
ACUTE CARE CODING AND DOCUMENTATION
CHARGEMASTER AND CHARGE CAPTURE STRATEGIES
DENIALS, AUDITS, AND APPEALS
PATIENT STATUS AND UTILIZATION REVIEW STRATEGIES
PROFESSIONAL DEVELOPMENT
LONG-TERM CARE

Brought to you by **AMBR**

SAVE 15%

when you register for BOTH the 2019 Revenue Integrity Symposium and a Pre-Conference or Post-Conference Boot Camp!

Pre-Conference

OCTOBER 13–14, 2019

Medicare Boot Camp®—Utilization Review Version

Medicare Boot Camp—Utilization Review Version is an intensive two-day course focusing on the Medicare regulatory requirements for patient status and the role of the utilization review (UR) committee.

Managing patient status plays a critical role in proper compliance, correct reimbursement, and stabilizing inpatient payments for the hospital. In 2019, CMS made significant changes to the inpatient-only list and continues to change its strategies for auditing patient status. Don't become a target or leave money on the table—ensure the UR committee is ready to implement and leverage the regulatory requirements.

Post-Conference

OCTOBER 17–18, 2019

Medicare Boot Camp®—Audits, Appeals, and Denials Version

Get expert guidance on preventing denials and focusing appeals efforts for success. The evolution of reimbursement models and uncertainty regarding healthcare laws mean that to keep the doors open, organizations can't afford to write off appealable denials. Organizations need sound, practical information on overturning denials. **Medicare Boot Camp®—Audits, Appeals, and Denials Version** is your key to proven strategies for success and will answer all of your questions on denials management and appeals processes.

Post-Conference

OCTOBER 17–18, 2019

Medicare Boot Camp®—Provider-Based Departments Version

The **Medicare Boot Camp—Provider-Based Departments Version** provides education on attestations, on- and off-campus determinations, enrollment, billing, and reimbursement. This boot camp will provide brand new insight for understanding hospital outpatient department billing and reimbursement in an ever-changing regulatory landscape.

EXCLUSIVE FORUM JUST FOR REVENUE INTEGRITY LEADERS!



Revenue Integrity Leadership Exchange

OCTOBER 13–14, 2019

Are you a vice president, director, or senior finance leader accountable for the direction of your hospital or health system's revenue cycle enterprise?

HealthLeaders and HCPro have added the **Revenue Integrity Leadership Exchange**, an exclusive, small-group opportunity within the **2019 Revenue Integrity Symposium**. Selected leaders will be able to share ideas on a range of challenges, including patient-friendly billing strategies, understanding changes in the payer market, and driving high-level operational efficiency.

Benefits include:

- ✓ Share ideas in two small-group roundtables, moderated by NAHRI leadership and featuring only revenue integrity vice presidents or above
- ✓ Collaborate with revenue integrity leaders in custom workgroups, where you identify the topic, challenge, or opportunity you want to explore
- ✓ Join your fellow leaders in an exclusive off-site dinner with members and sponsors
- ✓ Attend with no registration fee, a value of \$1,099

This opportunity is limited to senior revenue cycle leadership. For more information on qualifications and to request an invitation, please email Jaclyn Fitzgerald at jfitzgerald@hcpro.com with "Revenue Integrity Leadership Exchange" in the subject line.

REGISTER TODAY! Call 615-724-7200 or visit hcmarketplace.com/RIS2019

Speakers



KEYNOTE: DENISE RYAN

Not your typical “motivational speaker,” Denise Ryan is genuine and real. But also highly skilled – she holds the title of Certified Speaking Professional (CSP), a designation awarded to fewer than 10 percent of professional speakers. Ryan is an author, keynote speaker, and most notably, a fire starter extraordinaire. FireStar’s unique programs are relevant, uplifting, and informative. Ryan’s trademark interactive programs address myriad workplace issues such as dealing with change, getting along with others, staying motivated, and the secrets of successful selling. She also offers customized training sessions. Ryan’s infectious enthusiasm motivates the unmotivated and challenges the challenged. Consider yourself warned: FireStar programs are five-alarm scorchers.



JAY AHLMER, CFA, is the senior vice president of strategic accounts at Versalus Health in Philadelphia.



DAPO AKANBI, MBA, is an implementation manager, net patient revenue with Craneware.



KIMBERLY A.H. BAKER, JD, CPC, is the director of Medicare and compliance for HCPro, a Simplify Compliance brand, in Middleton, Massachusetts.



JIM CARLSON is the VP of charge capture services for Revint Solutions in Lafayette, Colorado.



JOHN W. CARTER is senior vice president of clearinghouse operations at ABILITY Network, a leading healthcare IT company and an Inovalon Company.



BECKY W. COOK, CPA, MHA, is an executive consultant and former CFO for a large multispecialty group who was responsible for revenue cycle outcomes in Houston, Texas.



STEFANIE CORBETT, DHA, is a health policy educator, consultant, researcher, and author. She also serves as HCPro’s post-acute regulatory specialist and long-term care boot camp instructor. She serves as an advisory board member for AMBR.



DAWN CRUMP, CHC, SSBB, MA, is the senior director, revenue cycle and denial management solutions, with Intersect Healthcare in Fenton, Missouri.



KIM CUSSON, CCS, CPC, is the healthcare risk CBA manager in Crowe Horwath’s healthcare division.



ROSE T. DUNN, MBA, RHIA, CPA, CHPS, FACHE, FHFMA, is chief operating officer of St. Louis-based First Class Solutions, Inc.



SCOTT EVERITT, MBA, is the vice president of analytic solutions with Practical Data Solutions, where he assists clients with transforming their data into useful information and creating strategic solutions for performance improvement.



KAREN GIACOMO, BA, CPC, CHA, is the revenue assurance manager for the Cleveland Clinic in Independence, Ohio.



SARAH L. GOODMAN, MBA, CHCAF, COC, CCP, FCS, is president/CEO and principal consultant for SLG, Inc., in Raleigh, North Carolina. She serves as an advisory board member for NAHRI.



MARC HARTSTEIN, MA, came to Health Policy Alternatives in Washington, D.C. after 26 years with the Centers for Medicare and Medicaid Services.



RONALD L. HIRSCH, MD, FACP, CHCOM, is vice president of R1 RCM in Chicago. He serves as an advisory board member for NAHRI.



REGINALD M. HISLOP III, PHD, is managing partner and CEO of H2 Healthcare, LLC.



KURT HOPFENSBERGER, MD, JD, is vice president, compliance and physician education, at Optum Physician Advisor Solutions.



JUDITH L. KARES, JD, is an expert in Medicare rules and regulations and is an instructor for HCPro's Medicare Boot Camp®—Hospital Version.



ALICIA KUTZER, ESQ., LL.M., MHA, is an adjunct instructor for several of HCPro's Medicare Boot Camps and is a managing partner of Kutzer Law Firm, LLC, located in the Wilkes-Barre/Scranton area of Pennsylvania.



KAY LARSEN, CRCR, is a revenue integrity specialist at Glendale Adventist Medical Center (soon to be Adventist Health Glendale) in Glendale, California. She serves as an advisory board member for NAHRI.



LAURA LEGG, RHIA, RHIT, CCS, CDIP, is the director of revenue integrity solutions at BESLER in Princeton, New Jersey.



WILLIAM L. MALM, ND, DNP, CRCR, CMAS, is a managing director at Health Revenue Integrity Services in Westlake, Ohio.



MAUREEN MCCARTHY, BS, RN, RAC-MT, QCP-MT, DNS-MT, RAC-MTA, is the president of Celtic Consulting, LLC, and the CEO and founder of Care Transitions, LLP. She serves as an advisory board member for AMBR.



LINDA J. MCCRAY, CPA, MBA, consults with hospitals working to improve charge capture in electronic medical records in Sedro Woolley, Washington.



STACEY MCCREERY established ROISG following her extensive tenure as executive director of Indiana University Health, the largest healthcare system in Indiana.



SHELDON A. PINK, MBA, FHFMA, has more than 18 years of experience in managing the mission, vision, and purpose of revenue cycle management activities and processes for multi-integrated health networks in not-for-profit and for-profit health systems.



MEGAN REAVIS, MBA, BS, COTA/L, is a national educator and has worked primarily in the geriatric setting as a clinician and in management, including as rehab director and area director, for the past 23 years.



VALERIE A. RINKLE, MPA, CHRI, is a lead regulatory specialist and instructor for HCPPro's Revenue Integrity and Chargemaster Boot Camp as well as instructor for the Medicare Boot Camp—Hospital Version, Medicare Boot Camp—Utilization Review Version, and Medicare Boot Camp®—Critical Access Hospital Version. She serves as an advisory board member for NAHRI.



JOHN D. SETTLEMYER, MBA, MHA, CPC, is the associate VP revenue cycle at Carolinas HealthCare System in Charlotte, North Carolina, and an adjunct instructor for HCPPro's Revenue Integrity and Chargemaster Boot Camp®. He serves as an advisory board member for NAHRI.



JUGNA SHAH, MPH, is the president and founder of Nimit Consulting, Inc., a firm specializing in case-mix payment system design, development, and implementation. She serves as an advisory board member for NAHRI.



ANGELA LYNNE SIMMONS, CPA, is the vice president of revenue and reimbursement at Vanderbilt University Medical Center. Simmons serves as an advisory board member for NAHRI.



STACIE SMITH, EMBA, RHIA, is the senior program manager of revenue integrity at Children's National Medical Center in Washington, D.C.



TRACEY A. TOMAK, RHIA, PMP, is the director of project management and client engagement at Intersect Healthcare in Towson, Maryland.



SUZANNE TSCHETTER, CPA, leads the revenue integrity department at the Cleveland Clinic in Independence, Ohio.



DIANE WEISS, CPC, CPB, CCP, is the vice president, reimbursement, for RestorixHealth in Metairie, Louisiana. Weiss serves as an advisory board member for NAHRI.



DENISE WILLIAMS, COC, is senior vice president of the revenue integrity division and compliance auditor at Revant Solutions, Inc., in Trussville, Alabama. Williams serves as an advisory board member for NAHRI.



CAROLINE RADER ZNANIEC, MBA, MS-HCA, is the owner and consulting lead of Luna Healthcare Advisors LLC in Denton, Maryland.



JOSEPH ZEBROWITZ, MD, is founder and CEO of Versalus Health, where he led the development of an innovative approach to 2-midnight rule compliance and managed care performance in Newtown Square, Pennsylvania.

Speakers subject to change



“

The conference was excellent. It exceeded my expectations. The speakers were knowledgeable of their respective subject matter. Most provided great reference material and practical information on how to apply the information and improve processes.

Timely topics presented by experienced, well informed and subject matter experts!

I will definitely attend next year and have already asked my chief medical officer to come with me.

THIS IS THE FIRST CONFERENCE I HAVE BEEN ABLE TO ATTEND IN A WHILE. IT DID NOT DISAPPOINT! ALL OF THE SPEAKERS/PRESENTERS WERE VERY KNOWLEDGEABLE.

The best, most pertinent conference I have attended yet related to my job duties. I operate in a unique role, director of clinical performance, which includes CDI, HCC, UR, clinical denials, clinical analytics and OPPE. This conference actually addressed each area, proficiently, with excellence. I will certainly plan to attend next year, and will share the message with my colleagues. Thank you NAHRI!

”



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PRICING

Main Conference:

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Standard: \$1,199

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Special 15% discount for attending one or more of our pre- and post-conference boot camps:

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Team Program Discount — Main Conference:

Send a team of four and a fifth member attends free!

Early Bird Group Price (Ends August 17): **\$4,800**

(team of five for price of four)

HOTEL

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 - » 10% discount in Tradewinds for dinner
 - » Breakfast for Children 12 & under (2 kids per 1 adult purchase, Tradewinds only)
- Hotel cut off date is Friday, September 20, 2019 or while supplies last
- Reservations may be made online (hcmarketplace.com/RIS2019) or by calling the hotel at 407-351-5555 and referencing the HCPro Revenue Integrity Symposium.

For information on exhibiting, advertising, and sponsorship opportunities, please contact **Carrie Dry** at cdry@hcpro.com or **630-235-2745**.



#REVENUEINTEGRITY2019

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