



2017

Zimmer Healthcare Signature Education Series

A collection of monthly one hour webinars, each designed to address the unique clinical, financial and operational challenges facing our industry.



www.zhealthcare.com

Zimmet Healthcare Services Group, LLC has provided unmatched professional education to skilled nursing facilities for nearly 25 years. The challenges facing our industry have grown exponentially during this time, but our commitment to meeting our clients' regulatory and reimbursement-compliance needs has grown even stronger.

While we continue to participate in dozens of industry conferences throughout the year, and proudly host our own nationally renowned symposium in Atlantic City each August, today's technology enables us to provide supplemental, cutting edge web-based solutions that are highly effective, interactive, convenient and economical.

Accordingly, ZHSG is delighted to introduce our 2017 "Signature Education Series," a collection of monthly one hour webinars, each designed to address the unique clinical, financial and operational challenges facing SNF providers.

For our clients' convenience, the sessions are scheduled from 1pm – 2pm EST on the second Wednesday of every calendar month (unless otherwise noted). Access is "subscription-based," whereby a one-time fee gives your staff access to all of the programs, including unlimited replays. There is no need to pay for multiple programs throughout the year. Simply put, our Signature Education Series is the most economical and convenient way for your entire staff to stay on top of the ongoing changes impacting post-acute care. And of course, participants earn valuable CEU credit* for every "live" session they attend.

While each program covers specific subject matter, the Series adheres to the principal of accretive learning, wherein we build upon concepts from prior sessions to provide the most robust educational program in the industry for clinicians, billers, administrators and anyone else involved in regulatory and reimbursement-compliance.



Set your calendar for the second Wednesday of each month from 1pm – 2pm EST (except where otherwise noted) – you won't want to miss a single session!

The Signature Education Series annual subscription fee is \$750 per facility. This works out to \$63 per month for up to 3 registered participants* per webinar for an exceptional educational experience. While registration for individuals not covered by a subscription is available for \$95 per webinar, capacity is limited and subscribing facilities are granted priority access to the programs. Please visit <https://www.zhealthcare.com/events/> or call (732) 970-0733 / (877) SNF-2001 for more information or to register today.

* 1 CEU credit will be awarded to the participant that LOGGED IN with the email used to register for each webinar. Additional persons who are VIEWING the presentation but NOT LOGGED IN with a registered email CANNOT receive credit, per NAB guidelines. Replays do not earn CEUs.

JANUARY

Wednesday, January 11, 2017; 1pm – 2pm EST

Institutional Special Needs Plans (“ISNPs”): Clinical and Financial Considerations

The ISNP initiative was created by the Medicare Modernization Act of 2003, but has only recently gained traction in skilled nursing facilities. The entire healthcare system is moving toward “value-based” payment and shared-savings, and the ISNP program is fully consistent with this evolution. ISNP clinical and financial models have evolved significantly over the past year and have become more integrated with other facets of SNF operations. Whether you have already adopted the ISNP model or are considering it, this session will provide strategies to ensure your facility structures the most clinically effective and financially advantageous partnership with the health plans.

FEBRUARY

Wednesday, February 8, 2017; 1pm – 2pm EST

Rules of Participation: Insuring Optimal Care Delivery and Survey Success

CMS recently issued comprehensive changes to the SOM and Survey process. This webinar will highlight key requirements for Phase 1 implementation that include necessary changes to facility Standards of Practice, clinical team assessments, documentation and care planning. A “to do” list, in addition to practical resources, will be provided so that participants may immediately evaluate their “needs and wants” to ensure full compliance with the new requirements.

MARCH

Wednesday, March 8, 2017; 1pm – 2pm EST

Managed Care Case Management

Medicare Advantage represents nearly one-third (and growing) of all Medicare beneficiaries, yet most facilities struggle to collect all associated reimbursement to which they are entitled from insurance plans. This session will highlight the 12 most common Medicare Advantage issues impacting SNFs and offer strategies to improve the associated revenue cycle.

APRIL

Wednesday, April 5, 2017*; 1pm – 2pm EST

Managing the Morning Care Concern Dashboard: The Key to Quality

This program will advise SNF teams on how to utilize various tools to improve care delivery, reduce hospital readmissions and capture reimbursement-sensitive conditions. The presenters will explain how to use technology and dynamic clinical tools to design early warning systems and direct clinical efforts in “real time” to prevent re-hospitalizations and functional declines.

MAY

Wednesday, May 17, 2017*; 1pm – 2pm EST

Reaching for the (Five) Stars

As Medicare, insurance companies and ACOs begin tying quality to admissions and payment, maintaining an optimal Five-Star rating for providers has never been more important. Utilizing key metrics, this session will highlight the calculations of staffing and quality measures, including how facilities can measure their own performance. Strategies to improve Five-Star performance will be highlighted.

JUNE

Wednesday, June 14, 2017; 1pm – 2pm EST

Alternative Payment Models: Is Your Therapy Department Prepared?

The changes keep coming: Accountable Care Organizations, bundling demonstrations, CJR, managed care, episodic payment, readmission penalties. While these initiatives impact the entire facility, only the therapy department must be reengineered to meet the new realities of healthcare reform. Whether your department is outsourced or “in-house,” this session will review the key metrics against which performance is evaluated and offer strategies to reduce operating costs and improve your profile with health systems and insurance companies.

JULY

Wednesday, July 12, 2017; 1pm – 2pm EST

Utilizing QAPI and Analytics for the Clinical Team:

Incorporating the changes to the Rules of Participation and the SOM, this program will help facility staff identify and set priorities for mandated QAPI studies utilizing MDS assessment items and outcomes affecting care and quality measures. A QAPI outline utilizing Section GG items including assessment, goal setting and outcomes will be provided.

AUGUST

Wednesday, August 16, 2017*; 1pm – 2pm EST

Mining the UB-04 for Data and Compliance

The Medicare claim is the manifestation of all clinical activity provided by your facility. It contains detailed utilization and demographic information about SNF residents. This session will explain how to improve billing compliance and harvest critical data to develop sophisticated, case-mix adjusted outcomes data using information from the claim. Also covered will be billing administration issues including Consolidated Billing compliance, Advanced Beneficiary Notices, Medicare Part B coding and ICD-10 reporting.

SEPTEMBER

Wednesday, September 13, 2017; 1pm – 2pm EST

2018 SNF PPS Final Rule Review

The first year of a new administration typically brings significant new Medicare rule making, and 2017 should be no exception with pay-for-performance and “value-based” payment dominating the PPS landscape. The SNF Final Rule is expected to be published by August, 2017. This session will review all pertinent regulatory changes that will impact SNFs effective October 1, 2017 and beyond.

OCTOBER

Wednesday, October 18, 2017*; 1pm – 2pm EST

Reimbursable Bad Debt: Maximizing Medicare Cost Report Collections

The 2017 Medicare Part A SNF co-payment amount for days 21 – 100 of a covered stay is \$164.50 per day. Facilities that are unable to collect these fees may recoup much of it via the annual Medicare cost report, provided that associated regulations are followed. Bad debt is the most commonly audited cost report item, so staff must take efforts to ensure the SNF receives all reimbursement to which it is entitled. This session will provide the tools needed to meet Medicare’s strict reimbursement guidelines, and comes just in time to ensure 2017 reporting compliance.

NOVEMBER

Wednesday, November 8, 2017; 1pm – 2pm EST

Managed Care Appeals

Managed care continues its assault on long-term care. Specifically, Medicare Advantage now represents one-third of our short-term sub-acute population. These plans are becoming more aggressive in managing, and denying, our claims. However providers have rights, and this session will explain how to effectively manage and appeal denials issued by Medicare Advantage plans.

DECEMBER

Wednesday, December 13, 2017; 1pm – 2pm EST

Reimbursement Compliance and the Current Audit Environment

Medicare and Medicaid have stepped up their audit initiatives over the past year. This session will review recent trends from the Office of Inspector General, Medicare Fiscal Intermediaries, Recovery Auditors (and other third-party contractors) and state Medicaid agencies. Presenters will advise on establishing appropriate clinical documentation and response strategies to effectively build your “Audit Defense” protocols and protect your facility’s reimbursement. Anecdotal data from our extensive audit experience will be presented along with strategies for improvement.

* Denotes program scheduled for day other than second Wednesday of the month.

Zimmet Healthcare Services Group, LLC

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Name of Webinar: _____

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Facility Subscription: Fee \$750; Entire series for up to 3 email registered participants per webinar, with unlimited replays.

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Individual registration: Fee \$95 per email registration

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