

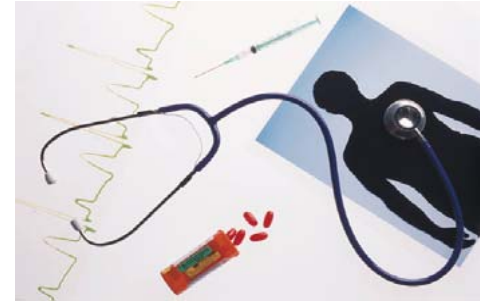
VantagePoint HealthCare Advisors
9 Washington Avenue, Hamden, CT 06518

VantagePoint's experienced consultants provide education and support for hospitals, physician practices and other clients on these and many other topics. For more information, call 203-288-6860 or visit us on the Web: www.vantagepointconsult.com

**VantagePoint HealthCare
Advisors, LLC**

Coding Workshops and Educational Programs for Physicians, Administrators and Staff

2007



Hot New Topics

*Pay-for-Performance Programs
Consumer-Driven Healthcare
Communications to Improve the Bottom Line*

Coding Courses Pending CEU's from the American Academy
of Professional Coders

Coding Workshops

Call to Register: 203-288-6860

CPT® Coding Basics

Intended Audience: Medical office staff, billing and collection personnel, practitioners and anyone interested in learning the basics of Current Procedural Terminology (CPT).

Workshop Description: CPT is a systematic listing of codes describing medical services and procedures performed by healthcare practitioners. These codes are used to report medical services and to obtain reimbursement from third party payers, Medicare and Medicaid. This 1.5-hour workshop introduces you to CPT format and symbols. It includes an overview of the CPT subsections and how each are used, including: E/M Codes, Procedure Codes, Add-on Codes and Procedural Modifiers. It also will touch on Correct Coding Initiative (CCI) edits.

Dates: April 11 or September 19 **Time:** 5:30 to 7:00 p.m.
Fee: \$149.00
Location: VantagePoint, 9 Washington Avenue, Hamden, CT

ICD-9 Coding Basics

Intended Audience: Anyone currently involved in the billing of healthcare services or interested in learning the basics of diagnosis coding.

Workshop Description: International Classification of Diseases, 9th Revision, Clinical Modification (ICD-9-CM) is used to assign codes to indicate the condition, symptoms, problems and/or complaints of patients. ICD-9 codes are required on claim forms. Payers are especially focused on the link between CPT codes and ICD-9 codes. This 1.5-hour workshop introduces you to the basics of ICD-9 coding and provides an understanding of the basic structure of volumes 1 and 2 of ICD-9, the do's and don'ts of coding and how ICD-9 codes affect CPT codes. It also will touch on ICD-10.

Dates: May 3 or October 3 **Time:** 5:30 to 7:00 p.m.
Fee: \$149.00
Location: VantagePoint, 9 Washington Avenue, Hamden, CT

New! A-Z Communicationssm - Simple Techniques for Improving Your Bottom Line

VantagePoint invites you to a special workshop with Clarity Consultants . . .

Improving the quality of communication in a health care organization is the most powerful way to improve results. The JCAHO reports that, "in nearly 70% of the sentinel events recorded in 2005, communication is a root cause".

A-Z Communication goes beyond traditional thinking and gets right to the "heart of the matter." In just a few hours, physicians, administrators and executives learn how to drive results through improved efficiency and outcomes, fewer mistakes, higher morale, less staff turnover, quicker decision making and increased trust. See the enclosed flyer for more about this great program.

Dates: Physicians - March 15, May 10 or Oct. 11 **Time:** 3-7 p.m. (inc. dinner)
 Administrators/Execs - March 13,14; May 8, 9; Oct. 9,10 ~ 9-5 p.m. (inc. lunch)
Fee: \$395 **Location:** VantagePoint, 9 Washington Avenue, Hamden, CT

To Register for All Classes: Call 203-288-6860 or complete this form and send it, with payment, to VantagePoint, 9 Washington Avenue, Hamden, CT 06518. Fax: 203-288-3283

Name		
Organization		
Street Address		
City/State/Zip		
Phone		Fax
E-mail		
Date	Name of Workshop/Course	Fee
Check Enclosed Amount: \$		
Credit Card	<input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express	
	Card #:	Exp. Date:
Signature:		

**Hot, New topics for Physicians,
Practice & Hospital Administrators!**

**Consumer-Driven Healthcare: Opportunities and Issues for
You and Your Patients**

Seminar Description: Is Consumer-Driven Healthcare (CDH) a cure for the healthcare system or just a passing fad? Consumerism runs the gamut from patients seeking information about treatment costs and options, to account-based plan designs that make billing and collections more challenging than ever. But high deductible benefit plans with a Health Reimbursement Account (HRA) or Health Savings Account (HSA) are gaining in popularity because they can help lower medical costs, improve health, increase satisfaction levels and patient-physician relationships. This 2-hour session covers:

- Consumerism and CDH plan history.
- High deductible health plans, HRAs and HSAs: how they work and how they compare.
- What CDH means for physicians, hospitals, medical practitioners and their patients: opportunities and liabilities.
- Techniques for making CDH work for you and your patients.

Dates: April 18, June 13 or November 8

Fee: \$295

Time: 9 to 11 a.m.

Location: To be determined

Pay-for-Performance: Is it Time to Get on Board?

Seminar Description: Lower medical costs and improved outcomes are a major focus of today's healthcare market and CDH motivates patients to become educated about their health, medical options and healthcare spending. The result is a growing emphasis on data collection, evidence-based medicine and collaboration between government /private insurers, employers, hospitals, physicians, healthcare practitioners and patients. The goal is to lower costs and improve quality by keeping people healthy, diagnosing and treating their medical conditions early, and helping those with chronic disease manage their conditions effectively. This 2.5-hour session covers:

- What is Pay-for-Performance (P4P)?
- Overviews and comparison of Medicare's PVRP and other physician-focused P4P programs.
- How P4P can impact your practice today and in the future.
- Weighing the pros and cons of program participation.
- Mandatory and voluntary programs: how to manage participation.

Dates: March 28, May 16 or October 17

Fee: \$295

Time: 8:30 to 11 a.m.

Location: To be determined

Coding Workshops

Coding Evaluation and Management (E/M) Services

Intended Audience: Coding and billing personnel, from medical practices, hospitals and other healthcare facilities, who are responsible for billing physician and non-physician services.

Workshop Description: Accurate medical record documentation and selection of the correct E/M code are necessary for accurate reporting and reimbursement of services provided during office visits, hospital visits and consultations. This workshop - presented in four, 1.5-hour sessions - provides students with specialty-specific tools and the knowledge to accurately code for E/M services. It focuses on the components of E/M services, how to apply established criteria to identify the intensity or complexity of each service, and how to apply the accurate code to ensure optimal reimbursement.

Session One

- Covers guidelines for New, Established and Consult encounters.
- Reviews *chief complaint* and its impact on the level of the encounter.
- Explores elements of *history of present illness*, *review of systems* and *past/family/social history*, as well as the impact of the 1995 and 1997 guidelines on the overall *history* portion of an E/M code.

Session Two

- Explores the 1995 & 1997 guidelines pertaining to the *exam* portion of an E/M code.
- Covers the levels of an exam.
- Students review physicians' notes, learn to identify applicable content and use it to select the appropriate exam level.

Session Three

- Reviews components of the three categories for *Complexity of Medical Decision Making (MDM)*.
- Covers how to identify a patient's place in the table of risk and to determine the *MDM* complexity.
- Students review physicians' notes and learn how to apply content to the guidelines for *MDM* complexity.

Session Four

- Covers time-based E/M services.
- Focuses on determining code level from practitioner documentation.
- Pulls the components of E/M together with a review of *chief complaint*, *history*, *exam* and *MDM*.

Dates: Class 1 - April 5, 12, 19 & 26 • Class 2 - October 9, 16, 23 & 30

Time: 5:30 to 7:00 p.m.

Fee: \$395.00 (for four sessions)

Location: VantagePoint, 9 Washington Avenue, Hamden, CT

Coding Workshops

Call to Register: 203-288-6860

“Incident To” Rules

Intended Audience: Hospital and physician office staff struggling with the Medicare “incident to” rules, and/or needing to correctly bill for mid-level professionals, APRNs, PAs, and other ancillary personnel.

Description: Who are non-physician practitioners (NPP)? Can you bill both under the MD’s provider number and the NPP’s provider number? How do you document for “incident to” billing? This 1.5-hour workshop helps answer these questions by teaching the guidelines and rules for “incident to” billing. The class will review different scenarios to ensure that students understand how to document appropriately and bill accurately.

Dates: May 17, September 25 **Time:** 5:30 to 7:00 p.m.

Fee: \$149.00

Location: VantagePoint, 9 Washington Avenue, Hamden, CT

NEW!

Coding for Cardiology Services



Intended Audience: Coding and billing personnel from medical practices specializing in Cardiology, or any practitioner or individual interested in coding for Cardiology.

Description: This workshop covers coding concepts commonly encountered within the cardiology practice. Topics will include:

- Procedural coding for stress tests, echocardiograms, holter monitors, and arrhythmia monitoring.
- Common reasons for claim denials.
- Category II and III codes related to cardiology and how they may play a role in Pay-for-Performance programs.

For those interested in accreditation, the class also will touch on the accreditation process for nuclear, echocardiography and vascular.

Dates: March 19

Time: 5:30 to 7:00 p.m.

Fee: \$179.00

Location: VantagePoint, 9 Washington Avenue, Hamden, CT

Coding Workshops - Auditing

Evaluation and Management (E/M) Auditing for Beginners

Intended Audience: Billing staff, compliance professionals or any individual with a desire or need to learn how to perform E/M audits and reviews in the healthcare setting.

Prerequisite: Must have a working knowledge of CPT and ICD-9 coding, and knowledge of the documentation guidelines for E/M coding.

Description: E/M codes represent the foundation to physicians’ professional services. This workshop covers the basics of E/M auditing, including:

- E/M guidelines.
- How to perform a coding review of E/M services.
- How to evaluate the key components.
- How to audit time-based E/M services.
- How to review E/M documentation and use the information to identify the appropriate level of service based on both the 1995 and 1997 documentation guidelines.
- The impact of auditing.
- How to present outcomes of audits to practitioners. Audit forms will be provided.

Dates: June 5, November 1

Time: 9:00 to 11:00 a.m.

Fee: \$249.00

Location: VantagePoint, 9 Washington Avenue, Hamden, CT

Register Early - Space is Limited !

Call the number above, or complete the form on page 7 and return it, with your payment, to:

VantagePoint Healthcare Advisors
9 Washington Avenue
Hamden, CT 06518
Fax: 203-288-3283

Cancellation Policy: Please notify us 5 business days in advance to cancel a reservation and receive a full refund.