

Tennessee MGMA Legislative and Regulatory Conference

August 23-24, 2018

The Guest House at Graceland, Memphis



MGMA
TENNESSEE



Tennessee MGMA 2018 FALL CONFERENCE AGENDA

Thursday, August 23

8:00 am	Exhibitor Registration
9:30 am	Attendee Registration
10:30 - 11:45 am	Opening General Session State Legislative Update Yarnell Beatty, JD, Tennessee Medical Association
11:45 - 12:45 pm	Networking Lunch
12:45 - 1:45 pm	Preparing the Practice for Value-Based Compensation Curtis Mayse, FACMPE, CliftonLarsonAllen, LLC
1:45 - 2:15 pm	Break with Exhibitors
2:15 - 3:15 pm	The Real Truth – A Panel Discussion to Prepare Your Practice for Value-Based Compensation Curtis Mayse, FACMPE, CliftonLarsonAllen, LLC
3:15 - 3:45 pm	Break with Exhibitors
3:45 - 5:00 pm	Taking Care of Business: Coding and Compliance Kathy Rowland, BSN, RN, CPC, CEMC, CHC, CPC-I, Integrity Compliance, LLC
5:00 - 6:30 pm	Networking Reception with Exhibitors

Friday, August 24

7:15 am	Breakfast with Exhibitors
8:00 - 9:15 am	Weird, Vague and New Stuff in Provider Payer Agreements Penny Noyes, Health Business Navigators
9:15 - 9:45 am	Break with Exhibitors
9:45 - 11:00 am	Better Dashboards, Better Decisions: Business Intelligence for Revenue Cycle Managements Nate Moore, CPA, MBA, FACMPE, Moore Solutions
11:15 - 12:30 pm	Payer Contracting: Assessment and Renegotiation Process Overview Penny Noyes, Health Business Navigators
12:30 - 1:30 pm	Lunch with Exhibitors TMGMA Business Meeting & Awards Presentation
1:45 - 3:00 pm	Seeing Past Tomorrow: Using Appointment Data to Strategize, Change and Thrive in the Future Nate Moore, CPA, MBA, FACMPE, Moore Solutions
3:00 pm	Closing Remarks and Prize Drawing

GENERAL SESSION DESCRIPTIONS

State Legislative Update – A. Yarnell Beatty, JD

In our opening general session, we will review the legislative issues that will have an impact on the healthcare industry in our state.



Yarnell Beatty joined the Tennessee Medical Association (TMA) in 2001 as general counsel. In 2004, he was appointed to oversee TMA's legal, government affairs, insurance, and eHealth departments. In January 2013, he was promoted to Vice President of Advocacy. Mr. Beatty formerly served as staff counsel to the Tennessee

Department of Health as well as positions in the Department as Executive Director of the Tennessee Board of Medical Examiners and Director of Health Related Boards. He has been strongly involved in TMGMA having served on the Executive Council and Legislative Committee. Mr. Beatty holds a B.A. degree from Vanderbilt University and law degree from Emory University School of Law.

Preparing the Practice for Value-Based Compensation – Curtis Mayse, FACMPE

As the health care industry migrates from reimbursement and physician compensation based on volume to one based on value, organizations are left struggling to define exactly what 'value' means. Success in this changing landscape will be dictated by willingness to be innovative and transformational operationally first and foremost. Many of these practices are left wondering how and when to begin shifting operations to match the potential change in reimbursement, much less how it will impact the compensation model. Part one of this two-part session will address current operational and value-based compensation trends and the regulatory drivers behind it. This session will provide you with the knowledge to:

- Diagram transformational operational practices in value-based compensation
- Explain how to implement value-based compensation models
- Examine medical practice's experience with value-based compensation

The Real Truth – A Panel Discussion to Prepare Your Practice for Value-Based Compensation – Curtis Mayse, FACMPE

As practices begin to contemplate changes in their practices based on the previous session, this session will address case studies of real life examples and the transformational practices that accompany value-based reimbursement and the operational and physician compensation changes needed to be prepared for this reality. We will have a panel discussion illustrating the impact

that the practices have had to date with ideas and techniques that peer groups have implemented.



Curtis Mayse, FACMPE is a principal within the national health care practice of CliftonLarsonAllen (CLA). Curt has more than 25 years of executive level experience specializing in physician strategy, operational practice assessments, revenue cycle improvement, compensation plans, and physician/hospital acquisition and integration. He has worked with a large health care provider-specific consulting firm and served in the interim capacity of VP of Physician Services for a large health system managing an 80-provider group. He has worked with a wide variety of clients, including medical groups, ambulatory surgery centers, health systems, and community hospitals. Curt is an advisor for numerous medical groups and a frequent national speaker on practice management and strategy topics.

Taking Care of Business: Coding & Compliance – Kathy Rowland BSN, RN, CPC, CEMC, CHC, CPC-I

The Affordable Care Act requires all physician practices, regardless of size, to implement a "right-sized" Compliance plan for their office. This session will focus on the components of operating an effective compliance plan for your practice as well as providing information on common compliance risks to a practice such as coding and documentation, the electronic health record, outliers and those identified on the Office of Inspector General's 2018 Work plan. Recommended areas for ongoing monitoring and auditing of the elements will also be reviewed.



Kathy Rowland has over twenty-five years in the areas of Healthcare Administration and Management. Ten years of this time spent specifically in the development and implementation of practice-based compliance plans, auditing documentation and litigation support. She is a Certified Professional Coder with a specialty certification in evaluation and management coding as well as a certification in healthcare compliance. Kathy has a consulting practice, Integrity Compliance LLC, located in Nashville Tennessee.



Weird, Vague and New Stuff in Provider Payer Agreements – Penny Noyes

In addition to a quick recap of certain provisions that you should always be aware of in your payer agreements, such as the rate exhibit, amendments, term and termination and products, this session will identify some provisions that you might not realize are in there, some of them quite new to agreements. Among them are assignment, merger and acquisitions, notice requirements, excluded services and more. We will cover what impact they can have on your practice, how state and federal laws may impact these, how they sometimes are related to other provisions and how you can either negotiate new language or manage what a payer won't change. The objectives are:

- Identify the usual suspects as well as unusual, vague or obscure contract provisions that can be detrimental
- Identify provisions that intertwine and supersede each other
- Determine the adverse impact of these provisions
- Outline ways to improve or manage contract language

Payer Contracting: Assessment and Renegotiation Process Overview – Penny Noyes

This fast-paced session will walk you through the entire process of gathering, assessing and negotiating your payer agreements. Penny will share her candid perspective on how to organize your information in useful formats, determine when and how to initiate a negotiation, model offers and test counteroffers and touch upon some language in agreements that you need to negotiate or manage to the practice's advantage. We will review:

- Gathering current contracts and rates
- Determining which contracts to tackle first & when
- Sending renegotiation notice
- Modeling and analyzing offer impact
- Identifying & Managing contract provisions that need attention



Penny Noyes is President, CEO and Founder of Health Business Navigators (HBN). With four decades of industry experience, Penny has spent 18 years on the payer side of the industry and 22 years on the provider side. Prior to HBN she was Sr VP of Business Development for US HealthWorks, heading up the acquisition process for 23 deals involving nearly 100 clinics in 7 states that included approximately \$100 million in revenue. Penny rolls up her sleeves, negotiating payer agreements and tackling credentialing challenges on a daily basis on behalf of practices nationwide, giving her insight and keeping her up to date on the trends and health care practices' business issues that need to be understood, renegotiated and/or managed.

Better Dashboards, Better Decisions: Business Intelligence for Revenue Cycle Management – Nate Moore, CPA, MBA, FACMPE

This session will describe and demonstrate business intelligence tools (BI) that produce customized reports with a specific focus on an expanded view of revenue cycle management from appointments through denials. It is easy for managers and staff to see exactly what they need to see without having to go to the IT department for each new report. The BI tools are easily automated. Reports come directly to your email, web page, or electronic device. Spreadsheets automatically refresh data as they open, so your time is spent analyzing data instead of simply creating reports over and over again.

Learning Objectives:

- Get example after example of revenue cycle tools currently being used by practices across America.
- Compare several BI tools, many of which your practice already owns, that deliver customized, automated data quickly and efficiently.
- Gain practical ideas to apply in your practice and learn what BI should mean to your practice's revenue cycle.

Seeing Past Tomorrow: Using Appointment Data to Strategize, Change, and Thrive in the Future – Nate Moore, CPA, MBA, FACMPE

How would financial management be different in your practice if you could see the future? Appointment data is about as close as a practice manager can come to seeing what next week and next month will look like. Join an interactive discussion on using appointment data to increase opportunities in your practice. We will discuss ways to measure patient access to your providers, to reduce no show appointments, and to maximize capacity of your most important practice resources. See how practices across America are using appointment data to identify and solve problems before patients arrive, to make staff more efficient, and to reduce the number of unsold patient appointments. Medical practices have unique and unparalleled access to future information if they can leverage appointment data. Bring your ideas and experience and join the conversation in this session.



Nate Moore, CPA, MBA, FACMPE speaks, consults, and writes about business intelligence in medical practices throughout the country. His presentations consistently receive top marks as powerful, entertaining tools that can be used in the clinic immediately. Nate's two books, *Even Better Data, Better Decisions: Advanced Business Intelligence for Medical Practices*, and *Better Data, Better Decisions: Using Business Intelligence in the Medical Practice*, are MGMA best sellers. Nate's consulting focuses on using SQL Server to mine and leverage medical practice data into actionable knowledge.

CONFERENCE INFORMATION

CONFERENCE REGISTRATION

	<u>By 07/31/18</u>	<u>After 07/31/18</u>
Active Member	\$125	\$150
Life Member	No Charge	No Charge
Affiliate Member	\$325	\$350
Non-Member	\$325	\$350

The registration fee covers all meetings, materials, meals and breaks. Conference breakfast and lunch functions are for registered exhibitors and conference attendees only. Attire for the conference is business casual. A jacket or sweater is suggested.



LOCATION

The Guest House at Graceland, 3600 Elvis Presley Blvd., Memphis TN. Visit <http://www.graceland.com/lodging/guesthouse/> and use our group name: 180822TENN by Tuesday, July 24, 2018 to receive our group room rate of \$144/night.



ACMPE CREDIT

American College of Medical Practice Executive (ACMPE).

To apply this program toward your ACMPE continuing education requirement, please calculate the total number of clock hours you spent in educational sessions and enter your hours online in the My Transcript area of mgma.com.

CANCELLATION POLICY

Cancellations received prior to July 31, 2018 are subject to a \$50.00 cancellation fee. No refunds will be issued for cancellation requests after this date. Substitutions from within the same group are acceptable.



**For additional information and to register,
please visit our website at tmgma.com**