

**THE REVENUE INTEGRITY AND CARE FORUMS  
PROUDLY PRESENT**



**TWO SIDES OF THE SAME COIN: HOW  
REVENUE INTEGRITY AND COMPLIANCE  
WORK TOGETHER**

**TUESDAY JUNE 11<sup>TH</sup>, 2019**

**DOUBLETREE BY HILTON HOTEL  
700 HOPE ROAD, TINTON FALLS NJ 07724**

## EDUCATION SERIES

### *Two Sides of the Same Coin: How Revenue Integrity and Compliance Work Together*

**7:30am – 8:20am**      **Registration and Breakfast**

**8:20am - 8:30am**      **PROGRAM START TIME:  
NJ Revenue Integrity and CARE Forums Introduction and Kickoff**

**8:30am - 8:40am**      **NJHA Update**

**8:40am - 9:00am**      **Welcome - Induction of Officers and Announcements of Scholarship Recipients**

**9:00am - 10:00am**      **Hot Topics in Compliance and Revenue Integrity**

The session brings together stories from the OIG as well as examples of remediation to enhance compliant billing. Highlights include the collaboration between Compliance, Case Management, Coding and Revenue Integrity, helping attendees achieve greater compliance and accurate billing and reimbursement.

#### **Session Objectives:**

- Overview of major recent Compliance enforcement activities and their related impact to healthcare entities
- Discuss Revenue Integrity initiatives that attendees could implement in their organizations
- Attain a deeper understanding of the necessary interplay between Compliance and Revenue Integrity within a healthcare organization

#### **Presenter:**

##### **Nancy Toll Perilstein**

Senior Manager Risk and Financial Advisory  
Deloitte and Touche LLP

##### **Rob Senska, Esq., MBA**

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#### **10:00am - 11:00am Appropriate Use Criteria: A Revenue Integrity and Compliance Perspective**

The 2014 Protecting Access to Medicare Act included a provision requiring clinicians consult with appropriate use criteria (AUC) through a qualified clinical decision support mechanism (CDSM) when ordering advanced imaging services (i.e., SPECT/PET MPI, CT and MR) in order to receive payment approval from the Centers for Medicare and Medicaid Services (CMS). Following several delays, the implementation of this requirement is set for January 1, 2020. This session will provide the audience with an overview of the program requirements and strategies for preparation.

#### **Session Objectives:**

- Provide an overview of Appropriate Use Criteria and the impact to Revenue Integrity and Compliance
- Offer providers tangible strategies as they prepare for implementation

#### **Presenters:**

**Leslie V. Boles, CCS, CPC, CPMA, CHC, CPC-I**

Compliance Audit Manager  
Saint Peter's Healthcare System

**Gloria Johnston, MBA, RN, RHIT**

Chief Health Information Officer  
HealthAdvanta

#### **11:00am - 11:15am Break**

#### **11:15am - 12:30pm Total Knee Arthroplasty: How to Preserve Revenue in the Outpatient World**

It is now more than a year since CMS removed TKA from the inpatient only list. Providers need to maintain revenue streams in the present regulatory and reimbursement environment. Equally important is achieving profitability for outpatient TKA cases. This session will give attendees an overview of the regulatory, reimbursement, and clinical operations issues in achieving financial sustainability for TKA in a new environment.

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#### **Session Objectives:**

- How to adapt to Medicare's removal of TKA from inpatient only list
- Review clinical criteria for inpatient vs outpatient and discuss authorization requirements and the importance of clinical documentation for all payers
- Feedback from MACs, QIOs and other auditor groups
- Discuss the reimbursement and financial impact of performing TKA inpatient vs outpatient

#### **Presenters:**

##### **Christine Gordon**

Director of Reimbursement  
Virtua Health System

##### **Nancy Toll Perilstein**

Senior Manager Risk and Financial Advisory  
Deloitte and Touche LLP

##### **Kate S. Gillespie, MBA, RN, NE-BC**

AVP Orthopedic Service Line  
Virtua Health

#### **Moderator:**

##### **Debbie Minnucci, CHC, CPC**

Compliance Audit Specialist  
Hackensack Meridian Health

**12:30pm - 1:15pm      Lunch**

**1:15pm – 2:30pm      Strategies to Protect Revenue During System Conversion**

Many hospitals and health systems have plans to convert from their main EHR platform to a new vendor, or to upgrade their existing EHR system. When undergoing a conversion of this scale, proactive planning from the Revenue Integrity and Compliance teams can mean the difference between a quick return to baseline revenue vs experiencing decreased cash flow and other unforeseen costs to your organization. The panel discussion will focus on ways to uncover strategies to protect your organization's financial health as you

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work to mitigate risks and manage the many pitfalls that can potentially impact your revenue stream during such a transition.

#### **Session Objectives:**

- Overview of project management best practices from a Revenue Integrity perspective for a system conversion
- Discuss recommendations on pre-conversion projects and current state analysis
- Provide guidance on go-live revenue monitoring practices and key metrics

#### **Presenters:**

##### **Lori Pietropola, CPA**

Director of Revenue Cycle Operations and Revenue Integrity  
Virtua Health

##### **Thomas Barnes**

General Manager and Practice Director, Revenue Cycle Services  
e4 Services

#### **Moderator:**

##### **Elaine Dunn, DHA, RRT, RPSGT, CPCO**

Vice President Integration Services  
Craneware

**2:30pm – 2:45pm Break**

**2:45pm – 4:15pm The Impact of Drug Diversion on Revenue Integrity and Compliance**

Drug diversion can be defined as any act or deviation that removes a prescription drug from its intended path from the manufacturer to the patient. Drug Diversion raises many problems for health care organizations. Diversion can be hidden by billing when a drug is not administered, is not billed correctly, or is charged to the wrong account. Attendees will learn how Revenue Integrity and Compliance departments can address issues of wrongful billing for drugs and how hospitals can raise awareness about drug diversion in their organizations.

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#### **Session Objectives:**

- Overview of the drug diversion regulatory environment in New Jersey
- Strategies for preventing drug diversion and monitoring drug billing accuracy within your organization
- The importance of collaboration between Revenue Integrity and Compliance in addressing drug diversion
- How to build and foster a program to combat drug diversion

#### **Presenters:**

##### **Ken Bevenour, R.Ph, MBA**

Corporate Director, Pharmacy Services  
Jefferson Health New Jersey

##### **Barbara Piascik**

Chief Compliance Officer  
Bergen New Bridge Medical Center

##### **Eva Goldenberg, Esq., CHC, CHPC**

Vice President Corporate Compliance and Internal Audit, Chief Compliance Officer, Privacy Officer, Research Integrity Officer  
Atlantic Health System

#### **Moderator:**

##### **Craig Dolan, R.Ph, PharmD, MBA**

Vice President, Strategy  
McKesson Pharmaceutical Solutions and Services

**4:15pm - 4:30pm**      **Closing**

**4:30pm - 5:30pm**      **Happy Hour**

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#### EDUCATION CREDITS

**NEW JERSEY BOARD OF ACCOUNTANCY CONTINUING PROFESSIONAL EDUCATION CREDITS**

Based on our understanding of the New Jersey State Board of Accountancy’s continuing professional education (CPE) requirements, Sponsor No. 185, this course is currently approved for 7 CPE credits, 1 hour in accounting and 6 hours in Specialized Knowledge.

**AMERICAN COLLEGE OF HEALTHCARE EXECUTIVES CONTINUING EDUCATION CREDIT**

The New Jersey Chapter of the Healthcare Financial Management Association is authorized to award **6** hours of pre-approved Category II (non-ACHE) continuing education credit for this program toward advancement, or recertification in the American College of Healthcare Executives. Participants in this program wishing to have the continuing education hours applied toward Category II credit should indicate their attendance when submitting application to the American College of Healthcare Executives for advancement or recertification.

**AMERICAN ACADEMY OF PROFESSIONAL CODERS CONTINUING EDUCATION CREDIT**

CEU’s are currently approved for **PENDING** AAPC credits.

**SUPREME COURT OF NEW JERSEY BOARD ON CONTINUING LEGAL EDUCATION**

Based on our understanding of the Supreme Court of New Jersey Board on Continuing Legal Education mandatory continuing legal education program requirements, this course will qualify for **7.2** credits. NJ HFMA is an approved service provider (#1098).

To register online, please visit our website at **www.hfmanj.org**, where online payment submission is also available, but not required. If you prefer to register by mail, please list your attendees and follow the registration instructions presented below.

NAME	ORGANIZATION	TITLE	HFMA MEMBER or NON-MEMBER	EMAIL ADDRESS

**FEE:**

ADVANCE REGISTRATION – MEMBERS .....	\$135
ADVANCE REGISTRATION – NON-MEMBERS .....	\$160
ADVANCE REGISTRATION – CERTIFIED MEMBERS (FHFMA, CHFP) .....	\$100
STUDENT REGISTRATION .....	\$35
ON-SITE REGISTRATION, ON “SPACE AVAILABLE” BASIS .....	<b>\$25 extra</b>

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#### **REGISTRATION INFORMATION:**

- Registration is available online at [www.hfmanj.org](http://www.hfmanj.org) or by mail.
- Make checks payable to **HFMA - NJ CHAPTER**, and please mail at least **10 days prior to the event**.
- Registration must be received **three working days prior to the event**.
- REFUNDS WILL BE GRANTED ONLY IF CANCELLATION IS RECEIVED 48 HOURS PRIOR TO THE MEETING.
- Dress is **Business Casual**.
- Mail payment to:
  - HFMA – NJ Chapter
  - Laura Hess
  - P.O. Box 6422
  - Bridgewater, NJ08807
- Phone number for questions is **(908) 963-2505**.
- In the event of questionable weather or other emergency affecting a significant number of members, please check the Chapter website no earlier than two hours prior to the start of registration for the event to confirm status of event.