



Content Area:	Description:
Budgeting, Revenue Management, and Collections	Practice Revenue Cycle Management Learning Objectives: <ul style="list-style-type: none">• Explore your organization’s people and technology to help increase revenue and productivity• Transition from fee-for-service reimbursement model to a value-based model to ensure maximum payment• Streamline and capture revenue cycle processes and procedures for optimal business operations• Improve annual cash flow and reimbursements• Enhance customer service and provide a positive patient experience
	Point of Service Best Practices: The 3 C’s of Compassionate Care Conversations Tips and scripts for effective collection of co-pays X % of practices miss out on an average of Y by not collecting at the time of the appointment
	Steps to Effective Practice Budgeting Learning Objectives: <ul style="list-style-type: none">• Understand the importance of a budget• Recognize the origin(s) of revenue• Identify mechanisms for tracking expenses• Determine ways to compare experience with peers
	See also: “Connect the Dots” under Contracting with Payers for Value Based Payment
Maximizing Coding Opportunities	Coding for Success: A Look at Three Coding Opportunities Learning Objectives: <ul style="list-style-type: none">• Understand the changes in Chronic Care Management, codes and billing requirements.• Behavioral health coding: can you bill behavioral health and EM code on the same day? If so, how and what codes?• Discover SBIRT coding and requirements for billing Commercial, Medicare and Medicaid.

Content Area:	Description:
	<p>Counting the Cost of Behavioral Health Integration</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Create a Sustainable Behavioral Health Program • Sustainability tool kit • Validated Screening and Measurement Tools • Optimize coding/billing opportunities • Connect Behavioral Health with Outcomes
<p>Contracting with Payers for Value-Based Payment</p>	<p>Preparing for the Next Generation of Payer Contracting: Working Within the Value-Based World</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Identify barriers and deal breakers for contracting arrangements • Identify various contracting methodologies payers are employing in today's transformed healthcare environment • Determine critical care practice attributes necessary for a successful contracting arrangement <p>Insurance Panel: Preparing for the Next Generation of Payer Contracting: Working Within the Value Based World</p> <p>Insurance carriers talk about how practices can prepare for value-based payment</p> <p>Discussion Objectives:</p> <ul style="list-style-type: none"> • What are value-based contracts (VBC)? Are they here to stay? • What do I need to know as a practice to succeed in a value-based world? • How does mental/behavioral health and pediatrics fit into VBC? • What if I am not 'big enough' - can I still participate in VBC? • How can a practice develop or enhance their partnership with payers? <p>Payer Contracting for Value Based Models:</p> <p>Define + Manage = Thrive</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Define the relevance and priority of your contracts • Complete Market Assessment • Review of tools • Analyze Data • Develop Value Proposition • Understand the different between 'contracting' and 'collaborating' • Evaluate Contract Language • Monitor Contract Performance

Content Area:	Description:
	<ul style="list-style-type: none"> • Common Quicksand <p>Getting Ready for 2018: The Reimbursement Landscape for Medical Practices</p> <p>Discover how shifts in the health care landscape will impact your medical practice in 2018 – and beyond. In this dynamic presentation, national speaker, trainer and author Elizabeth Woodcock gives you the lowdown on emerging trends that can pose both opportunities and threats to your practice in the coming year.</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Final Medicare reimbursement for 2018 – what specialties will feel pain, which ones gain • Summary of the 300-plus CPT® changes for 2018 • Effectively managing the newest payer in the market, namely, your patient • Changes to the Quality Payment Program that will impact 2018 – and, those that impact your 2017 reporting as well <p>Connect The Dots: Contracts To Revenue Cycle</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Determine Contracting Foundation • Understand How Payer Contracts Impact the Revenue Cycle • Create a Plan to Optimize Contract Performance
<p>Using Cost and Utilization Data</p>	<p>Understanding Total Cost of Care Data (TCOC) and the Colorado All Payer Claim Database (APCD)</p> <p>Steve Melek, Milliman</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Describe the Colorado APCD • CIVHC’s role with and processes of APCD • Define Total Cost of Care • Review CMMI Cost & Utilization Report Sample and Total Cost of Care Data <p>Stratus</p> <p>Learning Objectives:</p> <p>Access to the Stratus tool that provides cost and utilization data from all participating payers is a unique opportunity during SIM</p>

Content Area:	Description:
	<p>Cost and Quality: How Does My Practice Stack up?</p> <p>Doral Jacobsen</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Identify key data sources to determine practice total cost of care and quality • Define benchmarks available for peer comparison • Learn how to put this data to use – negotiations, compensation, recruiting
<p>MACRA/MIPS</p>	<p>MACRA: Tactical Value-Based Considerations</p> <p>Adele Allison: director of provider innovation strategies, for DST System’s health solutions division</p> <p>Learning Objectives:</p> <p>This session will help operational staff and providers develop a tactical strategies based on cultural and technical infrastructure. Join us for foundational insight into the moving pieces of value-based payment and design industrywide for non-federal payers.</p> <hr/> <p>QRUR: Quality and Resource Use Reports: Key Considerations in Optimizing MIPS Performance</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • What is QRUR? • Why does it matter? • How to use it? • Key considerations for MIPS reporting
<p>Rapid Cycle Quality Improvement</p>	<p>Introduction to Lean Six Sigma for the Medical Practice</p> <p>Learning Objectives:</p> <ul style="list-style-type: none"> • Define Lean Six Sigma • Identify applications and how they work in today’s medical practice • Share outcomes