



**PRACTICE  
MANAGEMENT  
INSTITUTE**

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**Wednesday, July 10, 2019**

Appeals, Refunds & Recoupment Requests

9:00 am to 12:00 pm  
Program # 23562-0710

OR

Billing for Mid-Level Providers

1:00 pm to 4:00 pm  
Program # 23754-0710

**CEU's: 3 per person, per session**

PMI grants CEUs for its certified professionals based on total number of instructional hours (1 CEU per hour of classroom instruction). CEUs may be applied to annual renewal requirements as noted on pmiMD.com.

**Where:**

Monroe County Medical Society  
The Park at Allens Creek  
132 Allens Creek Rd.  
Rochester, NY 14618

**Fee:**

\$199 per person, per session  
Includes instructional materials

**Register:**

Online: [mcms.org/events](http://mcms.org/events)  
Fax: (585) 473-7641  
Mail: Monroe County Medical Society  
132 Allens Creek Road  
Rochester, NY 14618  
Questions: Debbie Bennett  
Program Coordinator  
585-473-7573  
[dbennett@mcms.org](mailto:dbennett@mcms.org)

# 2019 Continuing Education for Medical Office Professionals

## Appeals, Refunds & Recoupment Requests

Stand up to denials and win!

This class will explain the provider's rights and responsibilities when appealing claim denials. Receive expert guidance to recoup dollars rightfully due to the provider. The instructor will address questions and provide tools to help billing staff successfully handle appeals, refunds and recoupment requests. Whether the issue is inadequate payment, denial or rejection, participants will return to the office well-equipped to handle the toughest denials.

### Class Highlights

- Receive state and federal guidelines for prompt pay laws, refunds and recoupments
- Understand the claims rejection methodologies that third-party payers use to deny claims
- Get strategies for handling repeat denials

## Billing for Mid-Level Providers

Documentation requirements and compliance guidelines

21% of incident-to services were performed by unqualified personnel, according to a recent CMS audit report. Get answers to tough billing situations with concrete examples and guidance on documentation needed to support mid-level provider claims.

### Class Highlights

- Incident to billing criteria, requirements and reimbursement considerations
- Level of education, scope of practice and other protocols of the NPP
- Review documentation guidelines

**Registration Form** Keep a copy for your records. List additional registrants on duplicate forms.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Practice Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Specialty: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_

Phone: ( ) \_\_\_\_\_ Fax: ( ) \_\_\_\_\_

Alternate Phone Number for After Hours Contact: \_\_\_\_\_

E-mail address: \_\_\_\_\_

PMI-Certified ID#: \_\_\_\_\_

Check form of payment:  Credit Card  Check (payable to Monroe County Medical Society)

Credit Card #: \_\_\_\_\_ Exp. Date: \_\_\_\_\_ Verification Code: \_\_\_\_\_

Total Amount: \_\_\_\_\_ Cardholder Name: \_\_\_\_\_

Cardholder Signature: \_\_\_\_\_

\* Registration Discounts: PMI certified professionals with an active ID# receive 10% off their registration fee.