



# 2020 Continuing Education for Medical Office Professionals

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Thursday, August 13, 2020

Medical Office Compliance

9:00 am to 4:00 pm

Program # 24371-0813

**CEU's:** 6 per person

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](http://pmiMD.com).

### Where:

Monroe County Medical Society  
200 Canal View Boulevard  
Suite 202  
Rochester, NY 14627

### Fee:

\$299 per person  
Includes instructional materials

### Questions:

Laurie Phillips  
Physician Relations/Business Manager  
Ph: 585-473-7573  
E-mail: [mcms@mcms.org](mailto:mcms@mcms.org)

### Register:

Online: [mcms.org/events](http://mcms.org/events)  
Ph: (585) 473-7573  
Fax: (585) 473-7641  
Mail: Monroe County Medical Society  
200 Canal View Boulevard  
Suite 202  
Rochester, NY 14627

## Medical Office Compliance

Honest mistakes happen, often resulting from incorrect information, creating a tremendous liability.

**Newly** updated to include information on:

Workplace Violence | Opioid Abuse | Cybersecurity

Lack of training and knowledge is not a valid defense in a federal audit. This course will explain all the compliance responsibilities and liabilities in a medical office. Examples of cautionary areas: billing for claims with no assignment of benefits on file, selling a photocopier without wiping patient data stored in memory, or listing employees as salaried to avoid paying overtime wages.

### Class Highlights

- The 3 major compliance risk areas: Medicare, HIPAA and OSHA
- ADA rules and how to apply them in your practice
- How to perform a risk assessment
- Areas of weakness that could result in fraud investigations
- What to do when an auditor makes contact with your office
- Appropriate clinical documentation for compliance with payer and regulatory guidelines
- Compliance efforts that could reduce or minimize the adverse effects of fraud investigations



Stay connected & informed on industry related news for Medical Office Professionals. Visit <https://info.pmiMD.com/blog>

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

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: \_\_\_\_\_

Address associated with card: \_\_\_\_\_

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

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