Speaker Information and Schedule for the CA Seminar

Date: Saturday, August 20, 2022, from 8am-5pm

Course Title: Revenue Cycle System

CE Hours Provided: 8 General hours

Speaker:

Brandie Brimhall, CPC, CPCO, CCCPC, CMCO, CPMA

Brandy has served chiropractic and multi-discipline practices since 1999. She has received professional certification from the AAPC as a Certified Professional Coder, a Certified Professional Compliance Officer, and a Certified Professional Medical Auditor; from the Practice Management Institute (PMI) as a Certified Medical Compliance Officer; and from the ChiroCode Institute as a ChiroCode Certified Chiropractic Professional Coder.

Brandy has routinely been featured in a number of publications as well as speaks at seminars and webinars across the country. Brandy provides training and education as well as assists practice with coding/collections/compliance and revenue cycle systems. She serves practices today with revenue cycle system and compliance training along with other practice resources through The Billing Connection and through credentialing services at Rapid Credentialing.

Course Outline:

Hour 1-2:
The CA/Biller Role in the Revenue Cycle System
Learning Points:

1. Role based leadership, essentials of communication and accountability
2. Role of the front desk CA
    a. Patient communications, over-the-counter collections, and software management
    b. Patient and payer account setup and how to minimize errors at this junction
3. Role of the biller
    a. Note that sometimes this is the same person – let's look at time management and prioritization
    b. Ensuring correct charge entry, claims preparation and submission and how to minimize errors at this junction
4. General processes and important relationships of documentation, coding, billing, and collections (pt and ins)

Hour 3:
All the moving parts to the Revenue Cycle System
Learning points:

1. Identification and discussion of how this all flows together for individual clinics
2. Identification of common "interferences" in the moving parts of the revenue cycle system, how to identify these and work to minimize or remove

3. Risk areas that result in loss of time and money
4. The value of the Insurance Verification including what/why/how
5. Controllable errors in billing

Hour 4-5:
Payer Specifics
Learning points:
Review of billing nuances as well as payer policy guidelines and rules for:
1. Medicare
2. Medicare Advantage
3. Aetna
4. BCBS
5. Cigna
6. Workshopping – clinics are invited to bring their own EOBs and coding questions for discussion

Hour 6:
Over the Counter Collections
Learning points:
1. The value of OTC collections and cost to the clinic if this role is not properly trained
2. Common obstacles and solutions with over-the-counter collections and how to minimize or prevent money from slipping through the cracks
3. Review of how covered vs non-covered items/services should be communicated to patients, communicated in software, and managed financially

Hour 7-8:
Aging Accounts Receivable
Learning points:
1. Insurance AR and critical processes
2. Patient AR and critical processes
3. Identifying what really is AR, what's collectible and how to get a handle on it
4. Using AR reports as diagnostic tools
5. Workshopping – clinics are encouraged to bring their own AR reports and we will work to review, "diagnose" interferences in the revenue cycle process and identify action steps to get that money moving and minimize ongoing challenges.