

This workshop will take agencies through the significant updates to the PDGM reimbursement model and move through all the aspects of home health reimbursement.

PDGM has brought many changes to home health and 2023 will continue to keep agencies on their toes while adapting fully to the model, including dealing with the NOA. There will be a discussion of Pre-Bill claim reviews and the significance of conducting them. The impact of OASIS & Coding and medical review programs has the potential to more directly impact reimbursement than some of the other aspects of PDGM and this workshop will get you up to date on all that. 2023 also brings the implementation of Value-Based Purchasing (VBP) and OASIS-E. This workshop will hit the highlights of both as they impact reimbursement. In addition to Traditional Medicare, the Medicare Advantage plans have become a major part of home health reimbursement, and this workshop will take you through some of the detail aspects of getting what you need in order to get paid. Medical Review has emerged as one of the greatest concerns for home health. This workshop will take you through the contractor asks and dig into the reasons behind review. PEPPER reports are a large part of the data used to target agencies and this workshop will give you an up to date review of how to analyze your current PEPPER. Whether you are a biller, collector or Administrator, this workshop is just what is needed to get you up to date on all things Home Health Reimbursement.

- 1. Program Goals: Day to Day Revenue Cycle Under PDGM
- 2. Evaluate the PDGM Structure
- 3. Detail the significant impact of Intake on Revenue Cycle
- 4. LUPA, PEP Calculations
- 5. Details of Billing RAP & Final Claim
- 6. OASIS & Coding Impact on Reimbursement
- 7. Brief overview of VBP & OASIS-E
- 8. Detail Credentialing with Managed Care & Issues surrounding getting paid
- 9. Medical Review all contractors
- 10. PEPPER Reports monitoring and evaluating



Presenter: Melinda A. Gaboury, COS-C CEO - Healthcare Provider Solutions

Melinda A. Gaboury is co-founder and Chief Executive Officer of Healthcare Provider Solutions, Inc. (HPS). Melinda Gaboury and Mark Cannon founded the company in April 2001 to provide financial, reimbursement, billing, operational and clinical consulting to the home care and hospice industries. Melinda A. Gaboury, with more than 30 years in home care, has over 22 years of executive speaking and educating experience, including extensive day to day interaction with home care and hospice professionals. She routinely conducts Home Care and Hospice Reimbursement Workshops and speaks at state association meetings throughout the country. Melinda has profound experience in Medicare PDGM training, billing, collections, case-mix calculations, chart reviews and due diligence. UPIC, RA, ADR & TPE appeals with all Medicare MACs have become the forefront of Melinda's current impact on the industry. She is currently serving as the Chair of the NAHC/HHFMA Advisory Board and Work Group and is currently serving on the Board of Directors for both the Home Care Association of Florida & Tennessee Association for Home Care. Melinda is also the author of the Home Health OASIS Guide to OASIS-E and Home Health Billing Answers, 2023.