

The dates and locations for this seminar offering are as follows:

Friday, October 19, 2018
Sleep Inn Conference Center
5872 33rd Avenue
Eau Claire, WI 54703
715-874-2900

Monday, October 22, 2018
Ingleside Hotel
2810 Golf Road
Pewaukee, WI 53187
262-547-0201

Tuesday, October 23, 2018
Liberty Hall Banquet
& Conference Center
800 Eisenhower Drive
Kimberly, WI 54136
920-731-0164

Register Online At:
<http://www.cvent.com/d/3bqjyt/4W>

LeadingAge Wisconsin
204 South Hamilton Street
Madison WI 53703
Tel: 608-255-7060
Fax: 608-255-7064
info@LeadingAgeWI.org
www.LeadngAgeWI.org

2018 Medicaid Nursing Home Formula Update and The New Medicare Reimbursement World

Wisconsin Medicaid again will set rates quarterly starting July 1, 2018 using MDS 3.0, RUGS IV, and the Medicare quarterly assessments. Is your nursing facility receiving the Medicaid reimbursement to which it is entitled based on the care provided? This seminar will focus on the "Hot Spots" for Medicaid reimbursement and MDS accuracy. A recent Senior Medicaid Auditor, Brent Rapos, will assist you in understanding how Medicaid rates are set and how \$18 million will be used to adjust rates.

This year's reimbursement seminar will provide you with an understanding of what sections of the MDS 3.0 are used to ensure appropriate Medicaid reimbursement, highlight the impact of changes in labor factors, and review the new Nursing Home Methods of Implementation. The seminar will assist you in meeting the challenges of quarterly rate increases and decreases as a result of the many Medicaid CMI changes. The seminar will review the key adjustments to the Medicaid cost report that impact your Medicaid rates.

Updates to the SNF Value Based Purchasing (VBP) and the Quality Reporting Program (QRP) will be discussed. Facilities are already beginning to see the financial implications of these scores. It is critical to understand what information to track and threshold expectations to ensure maximum Medicare reimbursement.

The Five Star Program and Nursing Home Compare changes have challenged many facilities as the Payroll Based Journal (PBJ) became part of Five Star. Key issues related to PBJ, how CMS uses the information, and what you should watch for as you submit your payroll information will be covered.

Patient Driven Payment Model (PDPM) which will go into effect on October 1, 2019 will be covered. As this process is completely different than the present RUGs IV payment system, it is important that your staff begin to understand the components of the process, so they can make this transition as seamlessly as possible.

Changes in the Medicaid and Medicare Reimbursement Systems continue to provide significant challenges to nursing home. This expanded annual reimbursement seminar is designed to implement strategies to ensure your nursing facility survives in the new world of reimbursement.

Learner Objectives:

- Discuss how the Medicaid CMI is used to calculate Medicaid rates.
- Analyze how MDS 3.0 coding affects the Medicaid CMI.
- Identify effective strategies to implement for working successfully with the MDS for 2018-19.
- Discuss Medicaid Audit best practices and how to navigate the audit process.
- Outline how changes to labor factors will affect July 2018 Medicaid rates.
- Compare and contrast your facility's nursing home costs with other facilities' costs.
- List key items on the MDS 3.0 that have the greatest impact on Medicaid RUG 48 score.
- Analyze PDPM and how it's changes will affect your MDS coding.
- Analyze opportunities for setting the assessment reference date to optimize reimbursement while minimizing staff work load.
- Discuss how processes may need to change in the facility to meet new objectives.
- Identify new CMS initiatives that will be implemented over the next two years.
- Analyze the "Hot Spots" for documentation to ensure appropriate reimbursement.
- Review key adjustments to Medicaid cost reports that impact Medicaid rates.
- Discuss how to implement strategies to ensure your nursing facility survives the many reimbursement changes.

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Schedule

8:00 a.m. to 8:45 a.m.

Registration and Continental Breakfast

8:45 a.m. to 11:30 a.m.

**Medicaid Reimbursement Formula Update
– July 2018**

- Update on the July 2018 Nursing Home Reimbursement Formula
- Key sections in the Nursing Home Methods of Implementation
- Navigate the Medicaid Audit in a way that maximizes reimbursement and streamlines record keeping
- Impact of changes in labor factors
- Key changes to the July 2018 Medicaid rate calculations
- Potential missed reimbursement opportunities from a former Medicaid Auditor
- Key DHS policies that impact your Medicaid rates
- Medicaid auditor cost report adjustments impacting your rates
- LeadingAge Wisconsin members participating in the LeadingAge Wisconsin data base will receive a cost analysis of their 2017 cost report data as compared to other nursing facilities
- Medicare Rates for 10/1/18

11:30 a.m. to 12:15 p.m.

Lunch

**The New Medicare/Medicaid
Reimbursement World**

12:15 p.m. to 1:15 pm

Medicaid Reimbursement

- “Hot Spots” for MDS documentation
- MDS Changes, Accuracy and Impact on Medicaid Reimbursement
- Picture Quarter Management

1:15 p.m. to 2:30 p.m.

New Medicare Changes

- SNF Value Based Purchasing
- Quality Reporting Program
- New Quality Measures
- Changes to the MDS
- Impact on Reimbursement from Collecting New Data

2:30 p.m. to 3:30 p.m.

**CMS Initiatives that Affect Post-Acute
Providers**

- PDPM and how to prepare

3:30 p.m.

Adjournment

There will be a 15 - minute break during the morning and afternoon sessions.

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The deadline for registration is Friday, October 12, 2018.

Guarantee your seat at this information-packed seminar by submitting your registration today!

Suggested Audience

This information-packed seminar is designed specifically for individuals interested in maximizing their reimbursement under the Medicaid payment system and/or persons wanting critical information linking the refined Medicare PPS RUG system to daily clinical practice and reimbursement. This includes, but is not limited to Administrators, Assistant Administrators, Executive Directors, Financial Directors, Directors of Nursing, Assistant Directors of Nursing, Staff Development, MDS/PPS Coordinators, Clinical Department Heads (e.g., Activities, Social Services, Dining Services), Clinical Consultants (e.g., Dietitians, Pharmacists), Specialized Therapies, Business Office Managers, Regional and Corporate Staff.

Continuing Education Units (CEUs)

LeadingAge Wisconsin has requested this educational program be approved for five and one-half (5.5) hours of continuing education for nursing home administrators; that request has been submitted (but not yet approved) to the NAB/NCERS. Call LeadingAge Wisconsin at 608-255-7060 for further information.

Registration

The Registration Fee to attend this seminar is \$120 per person for LeadingAge Wisconsin members and subscribers. Non-members/Non-subscribers must add \$20 per person. This registration fee covers seminar instruction, handout materials, continental breakfast, break refreshments, and lunch.

Please send registration information with appropriate remittance by Friday, October 12, 2018 to: LeadingAge Wisconsin, 204 South Hamilton Street, Madison WI 53703. Please make checks payable to LeadingAge Wisconsin. You may pay by credit card by calling the LeadingAge Wisconsin office at 608-255-7060.

For Additional Information

For further information regarding this seminar, please contact:

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Presenters

Brent A. Rapos, CPA, MSA

Brent Rapos is Vice President of Financial & Regulatory Services for LeadingAge Wisconsin. Prior experience as a Senior Medicaid Auditor provides Brent with valuable insight into the rate setting process, internal policy, and best practices to a successful Medicaid audit. Work in public accounting as a healthcare audit team member and consultant has given Brent great insight into the business needs of the healthcare provider community.

Patricia J. Boyer, MSM, RN, NHA

Patricia J. Boyer, MSM, RN, NHA has more than 30 years of professional health industry experience. Her areas of expertise include long-term care and subacute operations, state and federal compliance programs, and performance improvement process development.

Prior to founding Boyer & Associates, LLC (which merged with Wipfli in February 2014), Pat was an Operations Consultant for BDO Healthcare Group, LLC. Pat also worked for a national nursing home company, where her roles included director of nursing services, administrator, quality improvement specialist and director of regulatory compliance. In these roles, Pat used the Resident Assessment Instrument (RAI) to improve survey outcomes and facility processes.

She has extensive experience in evaluating facility processes, documentation systems, and developing performance improvement plans to improve efficiency and effectiveness of facility systems. Pat has conducted numerous workshops on related topics at the national, state, and local levels. Her recent experience includes conducting RUGs-based Medicare and Medicaid operational assessments in nursing facilities. Pat also authors the monthly Ask the Payment Expert column in McKnights Long-Term Care News.

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