

APPLICATION FOR CONTINUING EDUCATION CREDIT

This form must be completed in order to receive continuing education credit.

**HCCA's 14th Annual 2010 Compliance Institute
April 18-21st, 2010 – Dallas, TX**

To receive your continuing education credit, please check the box corresponding to the credit type(s) you wish to receive, and complete and turn in all pages.

Please leave this application at the registration desk or fax to 952-988-0146.

Your certificate will be emailed within 6 to 8 weeks.

	*CCB (50 min hr)
	AAPC (60 min hr)
	ACHE (60 min hr)
	ADHI (60 min hr)
	AHIMA (60 min hr)
	ASHRM (50 min hr)

	**CLE/MCLE (60 min hr)
	RN (CA Board of Nursing, 50 min hr)
	NAHQ (60 min hr)
	NAMSS (50 min hr)
	***NASBA/CPE (50 min hr)
	NAB/NCERs

** CCB CEUs fulfill requirements for the: CHC, CCEP, CHRC, CHC-F and CCEP-F designations*

*** Attorneys must submit their continuing education application within 25 days of the completion of the conference.*

****Those requesting CPE (NASBA) credits must also sign in on each individual sign out sheet located outside of each session room.*

By signing below, I certify that I have attended the sessions.

Name (print legibly please) _____

Signature: _____

License State _____ License/Bar Number _____ **(Nurses and Attorneys)**

Company _____

Address _____

City/State/Zip _____

Email _____

Phone Number _____ HCCA Member ID # _____

Only select the sessions you attended

Attendance Record

Sunday, April 18th, 2010 – Pre-Conference Sessions

Morning sessions 9:00 am to 12:00 pm (Maximum 2.75 Clock Hours With Breaks)

- P1: Compliance 101
- P2: Developing an Organizational Risk Profile for Measuring Compliance Program Effectiveness
- P3: Beyond Healthcare Reform
- P4: Privacy and Security 101
- P5: EMR: Challenges, Risk and Solutions
- P6: False Claims Act Developments
- P7: Physician Financial Arrangement Work Plan
- P8: How to Find and Address the Real Fraud and Abuse in ‘Quality of Care’
- P9: Program Integrity Across CMS: Medicare, Medicaid and Part C & D

Afternoon sessions 1:30 pm to 4:30 pm (Maximum 2.75 Clock Hours With Breaks)

- P10: PACE Yourself: Improving Compliance with Better Policies, Awareness, Committees and Education
- P11: Research/IRB Stark & Clinical Research: 5 Compliance Scenarios & 5 Practical Safeguards
- P12: Compliance Effectiveness: Are there Really ‘Best Practices’ and How do we Practically Measure That?
- P13: Information Security and Privacy: A New World and What This Means to your Organization
- P14: RAC Reality Check
- P15: Anti-Kickback and Stark Primer and Current Developments
- P16: How to do it! Risk Assessment to a Compliance Internal Audit Workplan
- P17: Update on Enforcement Trends Regarding Quality of Care
- P18: Are You Prepared for that Pending Emergency, Disaster or Pandemic to Ensure Business Continuity Planning
- P19: The Evolution of HIPAA: A Practical Path to HITECH

Monday, April 19, 2010

General Session: 8:30 am – 10:15 am (Maximum 1.75 Clock Hours)

- 8:30 am – 8:40 am Opening Remarks
- 8:40 am - 9:30 am General Session: How Organizations and Individuals Slide Into Crime
- 9:30 am – 10:15 am General Session: OIG Update

Breakout Sessions 11:00 am – 12:00 pm (Maximum 1 Clock Hour)

- 101: Compliance Effectiveness from the Inside Out
- 102: Analytics for Compliance: A Case Study of Deployment
- 103: HITECH Act... HIPAA 2.0: LTC Provider Implications
- 104: HIPAA Risk Assessment Tool for Physician Practices
- 105: Compliance in a One-Person Office
- 106: Avoiding Fair Market Value Pitfalls
- 107: Mistakes Happen: The Nuts and Bolts of a Voluntary Medicare Repayment
- 108: PSOs: New Privacy, Security and Confidentiality Rules
- 109: Integrating Compliance and Risk Management
- 110: Overcoming Obstacles: Strategies for Enhancing Your Effectiveness as a Compliance & Ethics Officer
- 111: The Nexus of Information Technology, Compliance and Revenue Cycle Performance
- 112: Gifts and Conflicts of Interest
- 113: Risk Assessments... Who, What, Where, When, Why and How!

Name: _____

Monday, April 19, 2010 Continued

_____ 11:00 am – 12:00 pm Lunch & General Session (1/2 Credit for a Maximum of .5 Clock Hours – CCB only)

Breakout Sessions 1:30 pm – 2:30 pm (Maximum 1 Clock Hour)

_____ 201: Fraud Risk Assessment

_____ 202: CMS Audits of Health Plans: How to Avoid the Crisis

_____ 203: Identifying OIG LTC Priorities and Making Necessary Changes

_____ 204: Cyber Threats to Health Care Organizations: Tips for the Compliance Professional

_____ 205: Conflicts of Interest: Addressing the Latest Regulations

_____ 206: HEAT Initiative: DOJ & OIG Strategies to Combat Health Care Fraud

_____ 207: Tackling the Challenges of Auditing Delegated Entities

_____ 208: Structuring, Implementing and Monitoring Service Contracts: A Team Sport of Compliance, Quality, Legal and Human Resources

_____ 209: So, You Think you have an Effective Compliance Program: Think Again!

_____ 210: How to Better Engage your Board in Compliance: The Rising Standard of Care

Industry Immersions 1:30 pm to 5:30 pm (Maximum 3 Clock Hours with Breaks)

_____ II1: Professional Development: Negotiation/Collaboration

_____ II2: Large Hospital & Health Systems

_____ II3: Payor/Managed Care

Breakout Sessions 3:00 pm to 4:00 pm (Maximum 1 Clock Hour) * II Sessions Extend into this time *

_____ 301: Whistle blowing: What are we Hearing, Where Should we be Listening, and How Should we be Responding?

_____ 302: The Investigative Lights Shine Big and Bright: Perspectives on Best Practices for Internally Initiated Compliance Investigations

_____ 303: Smart Document Management in an Evolving World of Information and Legal Exposure

_____ 304: Enforcement Efforts

_____ 305: I Thought I was Supposed to Practice Medicine

_____ 306: Medicaid Fraud Enforcement

_____ 307: Help Them, Help Themselves-And You

_____ 308: Informed Consent: Form Versus Process

_____ 309: Ethics Expedition: Reaching the Summit of Program Effectiveness with Base Camp Resources

_____ 310: Effective Compliance Program Strategies for Small to Medium-Size Organizations

_____ 311: Overcoming Obstacles: Strategies for Enhancing Your Effectiveness as a Compliance & Ethics Officer

Breakout Sessions 4:30 pm to 5:30 pm (Maximum 1 Clock Hour) * II Sessions Extend into this time*

_____ 401: Take a Second Look at Your Physician Relationships: Tips Based on Experience and Changes in the Law

_____ 402: OIG-Excluded Parties and Sanctions Screening Compliance

_____ 403: Case Studies in Post-Acute Care Arrangements Between SNFs, Hospitals, and other Providers

_____ 404: Applying ISO 27000 to Address Federal and State Security Mandates

_____ 405: Working with Drug and Device Manufacturers

_____ 406: Department of Justice Investigations and Role of Compliance Department

_____ 407: Auditing your Copy Forward or Templated EMR Record

_____ 408: More than Alphabet Soup: BAA, PSAE, RAC, MIC and ZPICs

_____ 409: Revenue Integrity and Safeguarding: Comprehensive Strategies for Contractor Combat (RACs, MICs, ZPICs and Others)

_____ 410: HITECH Implementation: Lessons Learned and the Road Ahead

Tuesday, April 20th

General Session: 8:45am to 10:15am (Maximum 1.5 Clock Hours)

- _____ 8:45 am to 9:30 am General Session: CMS Keynote Presentation
- _____ 9:30 am to 10:15 am General Session: Moving Forward: Ethical Leadership for the 21st Century

Breakout Sessions: 11:00 am to 12:00 pm (Maximum 1 Clock Hour)

- _____ 501: Data Mining: Compliance and Internal Audit Applications
- _____ 502: Uncle Sam HIT Me!! Compliance Risks in Implementation of Electronic Health Records
- _____ 503: Assessing the Impact of Compliance-Related Legislative and Regulatory Developments on LTC
- _____ 504: Physical Security in the Privacy World
- _____ 505: Dental Compliance: Implementing a Medical Compliance Program in the Dental World
- _____ 506: Internal Investigations
- _____ 507: Measurable Metrics for Scope of Practice Monitoring and Auditing
- _____ 508: Solving Patient Grievances While Avoiding Compliance Snares
- _____ 509: Enterprise Risk Assessment and Mitigation: A Practical Approach Leveraging Internal Resources
- _____ 510: "Connecting the Dots": A Compliance and Quality Partnership
- _____ 511: Quality, Waste and Abuse in the Medicare and Medicaid Programs

Industry Immersions: 11:00 am to 3:45 pm (Maximum 3 hours with Breaks)

- _____ II4: Academic Medical Centers
- _____ II5: Compliance Challenges for the Laboratory Industry: 2010 and Beyond

Breakout Sessions: 1:15 pm to 2:15 pm (1 Clock Hour) * II Sessions extend into this time"

- _____ 601: Preparing for the Great Unknown: What Recent Government Healthcare Fraud Efforts mean for You
- _____ 602: Implementing New York State's Mandatory Compliance Programs a Year Later: OMIG and Provider Perspective
- _____ 603: LTC: The MICs Are Here
- _____ 604: Research Data: Identifying Institutional Risks with Privacy, Confidentiality, and the Data Security
- _____ 605: Working the Numbers
- _____ 606: Foreign Corrupt Practices Act and the Anti-Kickback Statute and Healthcare Fraud Enforcement
- _____ 607: Who's Policing the Hospital CoPs?
- _____ 608: Steps you can Take to Integrate "Quality of Care" into Your Compliance Program
- _____ 609: Mission Possible: Meeting Compliance Training Obligations Under a CIA
- _____ 610: Compliance from the Independent Monitor's Perspective
- _____ 611: Delivering Powerful Compliance Messages in Print, Web & Video

Breakout Sessions: 2:45 pm to 3:45 pm (Maximum 1 hour) * II Session extend into this time*

- _____ 701: RAC ATTACK: A Successful Guide for Appeals
- _____ 702: Hospital Research Compliance: Where's the Risk and how to Address
- _____ 703: Hospice and Nursing Home Partnership: How to Get it Right!
- _____ 704: Turning Awareness into Action: An Academic Medical Center's Approach to Educating its Workforce of HIPAA Privacy and Information Security Principles and Practices
- _____ 705: Avoiding the 'HEAT': Compliance Programs for Small Practices
- _____ 706: Hospital-Patient Status: Overpayment and False Claims Act Liability
- _____ 707: Compliance Auditing and Monitoring: Demonstrating Effectiveness
- _____ 708: Quality of Care and Compliance: How to Engage the Board of Directors
- _____ 709: Creating and Sustaining a Compliance Program Commensurate w/ Your Multi-Hospital System's Size & Complexity
- _____ 710: Tools for Achieving Compliance in an Era of Health Care Reform
- _____ 711: Dealing with the Medicare Consultation Code Deletion

Wednesday, April 21, 2010-Post Conference Sessions

8:00 am – 12:00 pm (Maximum 3.75 Clock Hours with Breaks)

- _____ W1: The Road Ahead
- _____ W2: Riding Herd on Fraud, Waste & Abuse
- _____ W3: Understanding the Interactions Between Federal and State Integrity Recovery Programs in the Post-Acute Healthcare Setting
- _____ W4: Privacy Officer's Roundtable
- _____ W5: Clinical Documentation Improvement & Federal Integrity Activity (RACs, MACs, MICs...) Your Acute and Post-Acute Hospital's Compliance in Preventing Inappropriate/Unnecessary Admissions
- _____ W6: Part 1: Recent Developments in Voluntary Disclosure/Part 2: False Claims Act Developments and Management of Risk/Part 3: The Role of the Compliance Officer, General Counsel, Management, and the Board
- _____ W7: RAC Preparation & Successful Appeals
- _____ W8: Quality Incentives: Practical Next Steps for Legal, Compliance and Operational Improvements
- _____ W9: The World According to the (Should-Be) All-Knowing and Omnipresent Compliance Gurus