

# **Medicare, HIPAA, and Coding Essentials**

## **Mario Fucinari DC, CPCO, CPPM, CIC**

### **4 Hours**

Whether you are new in practice or a seasoned practitioner, running a successful chiropractic office requires a clear understanding of office procedures, regulations, billing, and coding. Even the cash practice is affected by regulations and coding such as Medicare, the ICD-10 Coding, the *NEW* E/M guidelines, and *NEW* HIPAA updates for 2024. Learn what patient treatment, billing, and coding risk management tools are essential to succeed in Chiropractic practice. This class is designed for everybody; doctors, staff, and billers will gain helpful information!

#### **Biography:**

Dr. Mario Fucinari is a Palmer Davenport graduate. He is uniquely qualified as a seasoned practitioner, nationally recognized speaker, author, and instructor. Dr. Mario has decades of experience in compliance, coding, and documentation. He is a member of the Carrier Advisory Committee for Medicare, a Certified Professional Compliance Officer (CPCO), a Certified Physician Practice Manager (CPPM), and a Certified Insurance Consultant (CIC).

#### **Learning Objectives:**

- Understand government regulations and industry trends.
- Determine Function's role in insurance policies.
- Establish procedures for consultation and examination essentials in the treatment plan.
- Be able to define "Medical Necessity" in various carriers
- Integrate outcome assessment tools to develop treatment goals
- Learn Medicare documentation guidelines and requirements
- Explore the NEW 2024 ICD-10 Codes and how they affect patient care
- Give clinical examples to utilize the NEW ABN form properly

#### Hour 1

- Compliance Requirements
- The Standard of Care
- The Eight *Required* Elements of a Documented Compliance Plan
- Legal Requirements in Chiropractic Documentation

#### Hour 2

- HIPAA Privacy Policy and Section 1557 Requirements
- HIPAA Privacy and Security Rule Updates
- Patient Access to Medical Records and the Cures Act
- UPDATED Documentation Requirements for HIPAA
- Financial Policy Pitfalls, Red Flags, and Hazards

### Hour 3

- The Medicare Initial Encounter Report
- E/M Guidelines and Documentation
- The Importance of the Outcome Assessment Tests
- The Assessment and Medical Necessity
- The Advance Beneficiary Notice (ABN) Regulations

### Hour 4

- Updates in ICD-10 Utilization
- Rules in ICD-10 Coding
- ICD-10 Coding Guidelines
- Questions and Answers