Medicare 201: Nov. 5

Date: November 05, 2018    Time: 9:00 AM

Location:
IHA Naperville
1151 E. Warrenville Road

IHA Springfield (via videoconference)
700 South 2nd Street

Registration:
IHA Members: $200/person

Registration is limited to staff at IHA-member hospitals and health systems.

This follow-up program will build on the overview of Medicare finance and policy issues impacting providers in IHA’s Medicare 101 course last fall. Medicare 201 will address more specific Medicare policies and financial applications affecting certain groups of providers.

Through a combination of lectures and class discussion, you’ll gain in-depth knowledge of:

- Medicare Graduate Education payments
- Medicare Disproportionate Share payments
- Medicare Value-Based payment adjustments
- MACRA physician payment reform
- IHA 2019 Medicare advocacy priorities
- Medicare audits
• Centers for Medicare & Medicaid Services (CMS) Hospital Compare websites that share provider-specific Medicare information with the public

While not an absolute requirement for the course, knowledge of basic Medicare coverage and payment policies—covered in the Medicare 101 course—is beneficial

OBJECTIVES

At the end of this program, you’ll be able to:

• Briefly review the basic principles of IHA’s Medicare 101 program.

• Outline major Medicare payment changes (final and proposed) and other “hot topics” on the docket for the federal program in 2019.

• Describe the various facility-specific adjustments that will add to or subtract from the Medicare base payment rate for services.

• Discuss the various types of Medicare audits and describe their purpose.

• Explain how CMS shares Quality of Care information with the public.

WHO SHOULD ATTEND

This program is designed for frontline and management staff in:

• Patient financial services

• Finance and reimbursement

• Corporate compliance

• Revenue integrity

• Marketing and public relations

• Government relations

• Strategic planning

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• Clinical and other hospital leadership

SPEAKERS

Tom Jendro, IHA Senior Director of Finance

Jendro specializes in financial analyses of Medicare payment legislation and regulation. He evaluates the impact of current and proposed legislation to inform IHA’s federal advocacy agenda and he creates Medicare financial reports for member hospitals and health systems.

Jendro collaborates regularly with federal agencies and other healthcare associations, including CMS, the American Hospital Association, the Healthcare Association of New York State’s DataGen State Hospital Association User Group and other state hospital associations. He is also IHA’s liaison to the First Illinois and Southern Illinois chapters of the Healthcare Financial Management Association.

In addition to his work at IHA, Jendro is an adjunct faculty member at the University of St. Francis’ College of Business and Health Administration, Masters of Science in Health Administration program.