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# The Quest for Pinpoint Accuracy of the IAF and Optimal Reimbursement



March 9, 2010  
9:30 – 11:00 am  
Live Webinar

CEUs for Administrators, Nurses

For more  
detailed  
information see  
[www.efohca.org](http://www.efohca.org)

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## Date:

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## Continuing Education Credit:

The program is approved for one (1.0) hour of credit for nursing home administrators and nurses. Individual attendance will be monitored throughout the call. Only those attending the entire call will be awarded continuing education credit. All participants regardless of need for CEUs, will receive a certificate of attendance. Upon receipt of your request for continuing education form, certificates will be mailed to the facility.

## How it will work:

One week prior to the webinar, you will receive an email with the toll-free number and access code for your contact person at the facility to enter the webinar, as well as any handout materials and continuing education request forms. The number and access code are only valid for one connection (*phone line & computer*) per each registered organization. Any additional connections will be billed the webinar registration fee.

## How much does it cost?

Facilities will pay one low fee for an unlimited number of participants. However, the number and access code is valid only for one phone line/computer at the location registered with the Association. Any additional telephone #'s/computers calling in will be billed for the registration fee.

Have a conflict the day or time of the call or just want other shifts to be able to hear the program? This program is being recorded and a cd-rom along with the handouts is available for purchase. CEUs are not available for listening to the CD.

It is imperative that an email address is provided as this is where call in code and handout materials will be sent.

## Course Description:

The Quest for Pinpoint Accuracy of the IAF and Optimal Reimbursement" webinar will focus on review of the documentation regulations and the "workings" of the DD classification system. In addition, we will identify the specific items on the form that are often inaccurately coded. The participants will be exposed to the nuances of accurately and fully capturing the amount of assistance and oversight needs of the developmentally disabled population.

## Objectives:

1. Identify regulations regarding documentation and completion of the IAF.
2. Delineate the Resident Assessment Classification system and how reimbursement works based on the results from the IAF.
3. Review accurate coding of the IAF focusing on the most frequently found items of under-coding.

## Speaker:

**Alicia Richey** has over 30 years of nursing experience in long-term care in various positions. As a nurse consultant with Plante & Moran, Alicia provides clinical consulting and educational services for both Ohio and Michigan facilities, specializing in certification compliance, quality assurance and reimbursement opportunities. Since joining the firm over two years ago, one of her primary functions has been to assist facilities with maximizing IAF scores and training staff on IAF completion. She is known to relate well with the programmatic staff. Plante & Moran is an OHCA Champion Partner.

## Still Have Questions ???

Want to know more about this seminar or anything else related to our educational services? Contact the Association at 614.436.4154.

**Register on line and save 10% off the registration fee listed.**

## Mail-in Registration

**or [www.efohca.org](http://www.efohca.org)**

### COMPANY INFORMATION:

Facility \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone ( \_\_\_\_\_ ) \_\_\_\_\_

## Registration Fees:

Members:	\$ 75 (Prior to March 2)	\$ 100 (March 2th and after)
Non-Members:	\$ 130 (Prior to March 2)	\$ 175 (March 2th and after)

### Payment must be included to be processed.

Send this completed form and payment to:

**EFOHCA**

55 Green Meadows Drive South, Lewis Center, Ohio 43035 • Fax: 614/436-0939

### CONTACT PERSON:

Name: \_\_\_\_\_

Title: \_\_\_\_\_

Email Address (**required**): \_\_\_\_\_

**Checks accepted with mail-in registrations.  
Credit cards accepted with online registrations.**