

Title:

Mastering Medicare

Presenter Name:

Michael D. Massey, DC

Total Hours:

8

Course Topic:

Medicare

Course Description:

Mastering Medicare is an in-depth, 8-hour course designed to help healthcare professionals navigate the complex world of Medicare with confidence and clarity. Whether you're new to Medicare or looking to deepen your understanding, this course offers practical guidance, compliance insights, and actionable strategies to optimize patient care and reimbursement.

Each hour of instruction builds upon foundational knowledge to help attendees confidently understand Medicare's structure, properly code and document care, and manage administrative nuances. Through real-world examples and clear explanations, participants will gain the tools to avoid costly mistakes and ensure accurate, ethical billing and documentation.

Course objectives:

- Confidently explain Medicare's structure and participation options
- Identify and correct common Medicare misconceptions
- Accurately code and document Medicare visits
- Establish and support medical necessity through documentation
- Monitor patient function and outcomes to support care planning
- Properly determine and manage patient status
- Navigate key administrative issues to ensure compliance

Hour-by-hour outline:

Hour 1: Introduction to Medicare

- Understanding Parts A, B, C, and D
- Enrollment, credentialing, and using the PECOS system
- Participating vs. Non-Participating providers
- Navigating the Medicare Physician Fee Schedule

Hour 2: Medicare Myths, Misgivings, and Misunderstandings

- Debunking common misconceptions and falsehoods
- Understanding what Medicare really does—and doesn't—cover

Hour 3: Coding

- Proper use of ICD-10 diagnosis codes
- Selecting appropriate CPT codes
- Applying modifiers correctly

Hour 4: Documentation as the Basis for Care

- Defining “Medical Necessity”
- How PART fits into SOAP notes
- Documentation requirements for both new and ongoing visits
- Addressing date of onset and episodes of care

Hour 5: The Importance of Monitoring Function

- Choosing and using Outcomes Assessment Tools
- Planning care appropriately
- Setting measurable, functional goals
- Tracking and reporting outcomes effectively

Hour 6: Determining Patient Status

- Differentiating Acute vs. Chronic conditions
- Defining Active vs. Maintenance care
- Managing transitions between care statuses

Hour 7: Important Administrative Circumstances

- Dual Eligibility and QMB considerations
- Understanding Medicare as a secondary payer
- Avoiding prohibited inducements
- When and how to use the ABN (Advance Beneficiary Notice)

Hour 8: Challenges and Responses

- Visit Screens
- Audits
- Appeals