

Case Management Boot Camp: Best Practice Strategies For Success

By: **Toni Cesta, Ph.D., RN, FAAN**, Consultant and Owner, Case Management Concepts LLC
Bev Cunningham, MS, RN, ACM, Partner and consultant, Case Management Concepts LLC

Location 01: October 5, 2017 | Chicago, IL

Location 02: December 8, 2017 | San Francisco, CA



SPEAKER

Toni Cesta, Ph.D., RN, FAAN, Consultant and Owner, Case Management Concepts LLC

Toni G. Cesta, Ph.D., RN, FAAN is Partner and Health Care Consultant in Case Management Concepts, LLC, a consulting company which assists institutions in designing, implementing and evaluating acute care and community case management models, new documentation systems, and other strategies for improving care and reducing cost. The author of nine books, and a frequently sought after speaker, lecturer and consultant, Dr. Cesta is considered one of the primary thought leaders in the field of case management.

Dr. Cesta writes a monthly column called "Case Management Insider" in the Hospital Case Management journal in which she shares insights and information on current issues and trends in case management.

Prior to her current work as a case management consultant, Dr. Cesta was Senior Vice President – Operational Efficiency and Capacity Management at Lutheran Medical Center in Brooklyn, New York.

She was responsible for case management, social work, discharge planning, utilization management, denial management, bed management, the patient navigator program, the clinical documentation improvement program and systems process improvement. Prior to her position as Senior Vice President at Lutheran Medical Center, Dr. Cesta has held positions as Corporate Vice President for Patient Flow Optimization at the North Shore – Long Island Jewish Health System and Director of Case Management, Saint Vincents Catholic Medical Centers of New York, in New York City and also designed and implemented a Master's of Nursing in Case Management Program and Post-Master's Certificate Program in Case Management at Pace University in Pleasantville, New York. Dr. Cesta completed seven years as a Commissioner for the Commission for Case Manager Certification.

Dr. Cesta has been active in the research and development of case management for over 25 years. Her research in case management has included two funded studies measuring the effects of a case management model on congestive heart failure and fractured hip patient populations, with measures of patient satisfaction, quality of life, and short and long term clinical perceptions and outcomes.



Bev Cunningham, MS, RN, ACM, Partner and consultant, Case Management Concepts LLC

Bev Cunningham, MS, RN, ACM is a founding partner of Case Management Concepts, LLC. She has a 25-year deep working knowledge of case management with specific expertise in denials management, the utilization management process, patient flow, and the role of the Case Manager and Social Worker in the Case Management process. She has served as a Commissioner on the Commission for Case Management Certification and is a fellow with the Advisory Board.

She also co-authored the book Core Skills for Hospital Case Managers and wrote a chapter in most recent two editions of CMSA's Core Curriculum for Case Management. Bev is also the former Vice President of Resource Management at Medical City Dallas Hospital, where she had responsibility for Case Management, Social Work, Health Information Management, Patient Access and Solid Organ Transplant services.

COURSE DESCRIPTION

The world of healthcare is changing rapidly and so is the role of case management in that world! Whether you are reading or hearing about value-based purchasing, the Affordable Care Act, the continuum of care, bundled payments, transitions in care, or accountable care organizations (ACOs), case management is at the center of it all!

Because things are changing so rapidly it can be a challenge to stay current and knowledgeable in the issues that most greatly impact your role as a case manager or social worker. Reimbursement has changed dramatically as has utilization management, transitional planning and compliance. CMS has incorporated changes that impact on payments related to readmissions, length of stay and the cost of care. Who is in a better place to address these issues than case managers and social workers! Finally, how do you measure your impact on the cost and quality of care and the reimbursement your organization receives for that care? All these topics and more will be covered in this jam-packed one-day seminar.

The program will start with an overview of the state of the art in case management today, how we got here, and where we are going in the future. From there we will discuss what utilization management and transitional planning really mean under the new CMS rules. We will then review the issues of compliance most important to your practice such as the "choice list", the NOTICE Act and the 2-midnight rule, among others. We will end our series with a discussion on the best ways to measure the outcomes of your case management department and its impact on the organization.

Whether you are new to case management or a seasoned pro, this seminar will provide you with the latest and most up-to-date topics and information that you will need in order to be at the top of your game and produce the best outcomes for you, your patients and your organization.

AGENDA Day One (8:00 AM - 5:00 PM)

Registration Process - (08:00 am – 08:30 am)

08:30 am – 09:30 am : Module 1 - "The State of the Art in Case Management: 2018 and Beyond"

Case management began moving into acute care settings around 1985 following the introduction of prospective payment. Today case management is found across the continuum of care, most recently returning to the community where its roots began. This module will review where case management came from and how it will work in today's managed care and government payer environments. Included will be a review of Medicare's latest programs that impact on the role of the case manager most directly including value-based purchasing, the readmission reduction program, accountable care organizations and others. Take a glimpse into the future in this state-of-the-art review.

09:30 am – 09:45 am : Break

09:45 am – 11:00 am : Module 2 - "Roles, Functions and Models for RN Case Managers and Social Workers"

The role of the case manager and social worker is dynamic and constantly changing in response to the changes in health care delivery and reimbursement at the federal, state and local levels. While change remains a constant, there are certain core roles and functions that apply to the work of the social worker and nurse case manager regardless of job setting. In addition, case managers and social workers work within guidelines that provide us with definitions of practice, guiding principles and philosophy statements. This module will include these issues plus a description of the best practice case management models and how the roles of RNs and social workers can be developed to meet the outcomes of a hospital in the era of value-based purchasing. Also included are the best practice staffing ratios based on model selection.

11:00 am – 12:15 pm : Module 3 – "Utilization Management" What Does it Really Mean?"

Utilization management was the first role applied in acute care case management models. It was first known of as utilization review but has evolved into something much more comprehensive than that. Today it encompasses elements of resource management and denials management as well. This module will review the role of utilization management as it applies to today's contemporary case management models. Included will be best-practice suggestions for your practice with tips and strategies for stream-lining the process and making it as efficient as it can be.

12:15 pm – 01:15 pm : Lunch

01:15 pm – 02:30 pm : Module 4 – "Transitional Planning Under the Current and Proposed CMS Rules"

Discharge planning has become more than just the movement of the patient out of the hospital. It is a "process" that starts at the point of admission and follows beyond discharge. The Centers for Medicare and Medicaid Services have recently added more "teeth" to the process. This module will review the most recent changes from the Medicare program as well as strategies for safely transitioning your patients across the continuum of care. In addition we will review how to engage other members of the interdisciplinary care team in the process of planning for the patient's movement across the continuum including verbal and written hand-off communication. Transitional planning is no longer a destination but a process! Learn how to be sure that your processes address the complexities of the new healthcare environment.

02:30 pm – 02:45 pm : Break

02:45 pm – 04:00 pm : Module 5 – "Applying Compliance Measures to Your Role as a Case Manager"

As case managers we must be aware of the myriad of compliance issues that we must adhere to in our daily practice. Never has this been more important to our work as case managers than it is now. This program will review the compliance issues most greatly impact on your practice such as the 2-midnight rule, the NOTICE Act, HINNs, the Conditions of Participation, and many others. The Joint Commission and other hospital accrediting bodies are now monitoring these issues when they have deemed status from Medicare, so your compliance is critical to a good hospital survey outcome. This module will help you to identify where you may have compliance practice gaps as well as how to fix them!

04:00 pm – 04:45 pm : Module 6 – "Measuring the Success of Your Case Management Model"

When all is said and done, how do we know that we are doing a good job as case managers. How do we know what our impact is on our patients and on the organization? This module will discuss the latest ways in which case management departments and staff can ensure that they are achieving the outcomes that they hope to achieve. Included will be what the latest outcomes measures are in the field of case management as well as examples of dashboards that you can create to track and trend your results over time.

04:45 pm – 05:00 pm : Wrap-Up / Q & A

WHO WILL BENEFIT

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| ✓ Coordinator Utilization Management/Case Management | ✓ Appeals Manager | ✓ Medical and Academic Affairs | ✓ Medical Officer Clinical & Quality Services |
| ✓ Account Management/Executive | ✓ Patient Care Services and Logistics | ✓ Medical Officer Clinical & Quality Services | ✓ Family Medicine |
| ✓ Administrative Director Care Management | ✓ Clinical Documentation | ✓ Family Medicine | ✓ Health Management |
| ✓ Population Health | ✓ Continuum Care Management | ✓ Hospitalist Consultants | ✓ Health Social Work |
| ✓ Analyst Clinical Documentation & Care Coordination | ✓ Integrated Care Delivery | ✓ Specialist Health Information Management | ✓ Integrated Care Management |
| | ✓ Medical Director Hospitalists | ✓ Denial Management Specialist | ✓ Manager Revenue Cycle |
| | | ✓ Medical and Academic Affairs | |

Registration Form

Registration Information:

- ✓ **Register Online.** Use your American Express, Visa or MasterCard.
- ✓ Get your group to attend the seminar at a discounted price call +1-888-717-2436.
- ✓ Call Toll Free: +1-888-717-2436 (USA), 8000-3570-2845 (Middle East) or Fax your PO: +1-650-565-8542
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Seminar Topic: Case Management Boot Camp: Best Practice Strategies For Success

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Attendee 2			
Attendee 3			
Attendee 4			

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