MEDICAID INTEGRITY INSTITUTE (MII)
CY2023 TRAINING CALENDAR

VIRTUAL ONLY

Certified Coder Boot Camp – Original (Outpatient) Version	**January 23-February 3, 2023**
Education & Outreach for the Territories Workgroup	**February 22, 2023**
Evaluation and Management Coding Boot Camp	**March 6-9, 2023**
Medicaid Provider Auditing Fundamentals: Provider Audits Overview	**April 4, 2023**
Medicaid Provider Auditing Fundamentals: Introduction to Data	**April 11, 2023**
Medicaid Provider Auditing Fundamentals: Audit Focus and Methodology	**April 18, 2023**
Medicaid Provider Auditing Fundamentals: Audit Plans, Protocols, and Reports	**April 27, 2023**
Medicaid Provider Auditing Fundamentals: Documenting an Audit	**May 2, 2023**
Certified Coder Boot Camp – Inpatient Version	**June 5-16, 2023**
Coding for Non-Coders	**June 13-15, 2023**
HHS-OIG Fraud Schemes and Trends	**July 12, 2023**
Do Not Pay State Initiative – Beneficiary	**July 26, 2023**
Professional and Hospital Outpatient Services Boot Camp	**August 7-18, 2023**
Do Not Pay State Initiative – Provider	**August 9, 2023**
Medicaid Provider Enrollment and Terminations	**August 23, 2023**
Medicaid Provider Auditing Fundamentals: CMS Unified Program Integrity Contractor (UPIC) Priorities	**October 25, 2023**

The dates and course/webinar titles may change as needed.

10/11/2023

GENERAL COURSE DESCRIPTIONS

All descriptions are subject to change as each course is developed.

Certified Coder Boot Camp – Original (Outpatient) Version, January 23-February 3, 2023
This two-week **"LIVE"** boot camp will cover the fundamentals of CPT, ICD-10-CM, and HCPCS Level II coding for professional services and hospital outpatient services. This course is designed to assist in preparation for AAPC's Certified Professional Coder certification (CPC) and provide the framework for applying coding principles in a real-world environment. Please note that this Boot Camp is not designed to serve as the sole preparation for the AAPC's CPC exam. Preparation for the exam typically involves a significant amount of self-study following the completion of the Boot Camp.

Education & Outreach for the Territories Workgroup, February 22, 2023
This workgroup focuses on program integrity-related education and outreach opportunities available for the territories.

Evaluation and Management Coding Boot Camp, March 6-9, 2023
This four-day **"LIVE"** boot camp will teach the fundamentals and intricacies of E/M coding and how to perform effective E/M audits. The course goes beyond the basics and dives right into the many gray areas of E/M to expose conflicting information between CMS and local carriers. This intensive training is geared to both coding and auditing professionals and will show attendees how to evaluate documentation relative to national and local carrier guidelines with a strong emphasis on interpreting rules accurately and maximizing E/M audits.

Medicaid Provider Auditing Fundamentals: Provider Audits Overview, April 4, 2023
This webinar series brings together auditors and investigators within Medicaid program integrity to focus on the overall goal of conducting effective provider audits. The series has five sessions that will focus on topics such as an overview of the audit process; introduction to data; audit focus and methodology; audit plans, protocols, and reports; and documenting an audit.

Medicaid Provider Auditing Fundamentals: Introduction to Data, April 11, 2023
This webinar series brings together auditors and investigators within Medicaid program integrity to focus on the overall goal of conducting effective provider audits. The series has five sessions that will focus on topics such as an overview of the audit process; introduction to data; audit focus and methodology; audit plans, protocols, and reports; and documenting an audit.

Medicaid Provider Auditing Fundamentals: Audit Focus and Methodology, April 18, 2023
This webinar series brings together auditors and investigators within Medicaid program integrity to focus on the overall goal of conducting effective provider audits. The series has five sessions that will focus on topics such as an overview of the audit process; introduction to data; audit focus and methodology; audit plans, protocols, and reports; and documenting an audit.

Medicaid Provider Auditing Fundamentals: Audit Plans, Protocols, and Reports, April 27, 2023

This webinar series brings together auditors and investigators within Medicaid program integrity to focus on the overall goal of conducting effective provider audits. The series has five sessions that will focus on topics such as an overview of the audit process; introduction to data; audit focus and methodology; audit plans, protocols, and reports; and documenting an audit.

Medicaid Provider Auditing Fundamentals: Documenting an Audit, May 2, 2023

This webinar series brings together auditors and investigators within Medicaid program integrity to focus on the overall goal of conducting effective provider audits. The series has five sessions that will focus on topics such as an overview of the audit process; introduction to data; audit focus and methodology; audit plans, protocols, and reports; and documenting an audit.

Certified Coder Boot Camp – Inpatient Version, June 5-16, 2023

This two-week **"LIVE"** boot camp will make coders proficient in ICD-10-CM/PCS coding for hospital inpatient facility services and MS-DRG assignment. At the conclusion of this boot camp, participants will be able to do the following:
•Apply fundamentals of diagnosis code assignment (ICD-10-CM) and procedures (ICD-10-PCS) for inpatient services by utilizing conventions, instructions, and sequencing guidelines from the Official Guidelines for Coding and Reporting;
•Relate interaction of diagnoses/procedures on reimbursement using the MS-DRG methodology;
•Review chapter-specific diagnoses/procedures for their clinical presentation and application to better understand code assignment;
•Recognize appropriate documentation and documenters within the inpatient medical record to support valid code assignment; and
•Review appropriate coding resources such as the AHA's Coding Clinic for ICD-10-CM/PCS as they apply to certain chapter-specific diagnoses/procedures.

Coding for Non-Coders, June 13-15, 2023

This course is for the program integrity staff who have a general but limited knowledge of medical coding and who will benefit from a basic understanding of coding principles to assist in understanding the coder's analysis. Please note that this course **is not** designed to prepare students for the American Academy of Professional Coders (AAPC) Certified Professional Coder (CPC) exam or for attendance at a CPC Boot Camp. Students who hold coding certifications **may not apply** (e.g., CPC, CCS-P). This course will provide students with fundamental knowledge on HCPCS codes, CPT codes with an emphasis on E&M, and ICD-10-CM codes. The course will provide students with general knowledge on coding fraud implications and coding resources.

HHS-OIG Fraud Schemes and Trends – July 12, 2023

HHS-OIG will share the latest fraud, waste, and abuse trends on topics such as nursing homes, behavior health, polypharmacy prescribing, and collaboration in managed care investigations.

Do Not Pay State Initiative – Beneficiary, July 26, 2023

The U.S. Department of the Treasury, the Bureau of the Fiscal Service (Fiscal Service) operates a resource dedicated to preventing and detecting improper payments—the Do Not Pay® Business Center (DNP). DNP is authorized and governed by the Payment Integrity Information Act of 2019 (PIIA), and several Office of Management and Budget (OMB) memoranda and circulars. The authorities generally belong to OMB, which delegated the operational aspects to the Department of the Treasury. PIIA gives DNP the authority to work directly with State Agencies that manage federally funded state-administered programs such as Medicaid. Establishing a relationship with DNP can assist with your current pre-award and pre-payment verification of beneficiaries, providers, and vendors. The multi-agency government-wide DNP® Initiative provides a variety

of data matching and data analytics services to support federally funded state-administered programs in their efforts to strengthen internal controls and payment integrity initiatives. This session will focus on beneficiary payment integrity resources.

Professional and Hospital Outpatient Services Boot Camp, August 7-18, 2023
This two-week **"LIVE"** course boot camp is designed to teach the fundamentals of ICD-10-CM, Evaluation and Management (E/M) coding for professional services (category and level selection only), CPT surgical coding (10000-69999 series), and Medicaid National Correct Coding Initiative (NCCI) concepts. This course will focus on practical areas related to professional and hospital outpatient coding. This course is not designed to prepare students for AAPC's Certified Professional Coder (CPC) exam.

Do Not Pay State Initiative – Provider, August 9, 2023
The U.S. Department of the Treasury, the Bureau of the Fiscal Service (Fiscal Service) operates a resource dedicated to preventing and detecting improper payments—the Do Not Pay® Business Center (DNP). DNP is authorized and governed by the Payment Integrity Information Act of 2019 (PIIA), and several Office of Management and Budget (OMB) memoranda and circulars. The authorities generally belong to OMB, which delegated the operational aspects to the Department of the Treasury. PIIA gives DNP the authority to work directly with State Agencies that manage federally funded state-administered programs such as Medicaid. Establishing a relationship with DNP can assist with your current pre-award and pre-payment verification of beneficiaries, providers, and vendors. The multi-agency government-wide DNP® Initiative provides a variety of data matching and data analytics services to support federally funded state-administered programs in their efforts to strengthen internal controls and payment integrity initiatives. This session will focus on provider payment integrity resources.

Medicaid Provider Enrollment and Terminations, August 23, 2023
This webinar will cover provider screening and enrollment topics, including risk-based screening and components of screening (such as site visits and fingerprint-based criminal background checks (FCBCs)), revalidation, denial/termination of enrollment, and how the CMS Payment Error Rate Measurement (PERM) Program measures states' compliance with associated federal regulations. The course will also address provider disclosures, application fees, and moratoria.

Medicaid Provider Auditing Fundamentals Series: CMS Unified Program Integrity Contractor (UPIC) Priorities, October 25, 2023
This final session of the Medicaid Provider Auditing Fundamentals Series will bring together the CMS UPIC contractors within Medicaid program integrity to focus on the overall CMS goal of conducting effective provider audits and investigations. This session will focus on the types of analysis, audits, methodology, and outcome from each UPIC jurisdiction.

10/11/2023