



*Association for Home & Hospice
Care of North Carolina*

Presents

*Cardiac, GU and Endocrine/GI
ICD-9-CM Coding
(Formerly Intermediate Coding)*

August 16, 2010 – Guardian Health Services, Hickory, NC
August 18, 2010 – Kinston Enterprise Center, Kinston, NC

To keep your travel expenses low, AHHC is once again offering regional coding classes!!

This hands-on coding practice class is designed for coders who have mastered the basics of coding and are ready to progress to the intermediate level of coding as well as more experienced coders who would like to explore coding for three primary topical areas in greater depth. The session also provides an opportunity for an open Q&A session for participant questions.

- ❖ Go beyond nonessential hypertension and congestive heart failure to explore the myriad of cardiac and circulatory conditions found within Chapter 7, Diseases of the Circulatory system.
- ❖ Disorders of the Genitourinary system is a logical next step following diseases of the circulatory system beginning with cardio-renal conditions and looking at some of the routine and complex situations that can affect the genitourinary system.
- ❖ There is more to the Endocrine, Nutritional and Metabolic Diseases than uncomplicated diabetes. Come explore what other coding gems exist in Chapter 3 of the Diagnosis Coding Manual.

PLEASE BRING YOUR CODING MANUAL

Judy Adams, BSN, HCS-D, COS-C, Adams Home Care Consulting, Inc. is a well known health care consultant and speaker with over 30 years of healthcare experience and extensive experience in home care and home health management. Judy holds the Homecare Coding Specialist – Diagnosis (HCS-D) certification from the Board of Medical Specialty Coding and a Certificate for OASIS Specialist – Clinical from the OASIS Certificate and Competency Board.

The registration fee is **\$189** for AHHC members and **\$329** for Non-members. Space is **limited** to allow optimum interaction between attendees and faculty and available on a first-come, first-served basis. You will not be registered until payment is received. Registration for the class will begin at 8:30 a.m. and the class will begin at 9:00 a.m. **Lunch is provided.** The class will conclude by 4:00 p.m. Two breaks are also provided. A confirmation will be sent by email prior to the class.

AHHC is an approved provider of continuing nursing education by the North Carolina Nurses Association, an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.

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Please register each attendee on a separate form - you may duplicate this form as many times as needed.

____ August 16, 2010 – Guardian Health Services, Hickory, NC
____ August 18, 2010 – Kinston Enterprise Center, Kinston, NC

Attendee Name: _____

Agency Name: _____

E-Mail Address: _____

Please print clearly as your confirmation will be sent to this email address!

Address: _____

City: _____ State: _____ Zip Code: _____

Phone: () _____ FAX: () _____

AHHC Member (\$189.00)

Non-Member (\$329.00)

Payment

My check (payable to AHHC) is enclosed in the amount of \$ _____

Visa

MasterCard

American Express

Discover

Credit Card Number _____ Exp. Date _____ Security code _____

Name (as it appears on card) _____

Address (of cardholder) _____

Signature (required) _____

Registration must be received in writing and will not be accepted without payment

Two Easy Ways to Register! *By Mail:* (If paying by check or credit card) mail registration form with total registration fees to: AHHC, 3101 Industrial Drive, Suite 204, Raleigh, N.C., 27609

By Fax: (If paying by credit card) fax a copy of the registration form with the appropriate credit card information and signature to 919.848.2355. Our fax lines are open 24 hours a day.

Cancellation Policy: Fees will be refunded, or invoices will be adjusted, only if **written** notice of cancellation is received by AHHC two weeks prior to the workshop. In the event of cancellation, AHHC will retain, or charge, \$40 of the initial registration fee, per registrant, to cover administrative overhead. Once written cancellation is received, an AHHC staff member will review for approval. If your cancellation is approved, we will email back a signed and dated copy of the cancellation that your agency should retain on file in case of questions.

Please contact Richard Fowlkes **if you have any questions about registration at 919.848.3450.** Association for Home & Hospice Care of NC, 3101 Industrial Drive, Suite 204, Raleigh, NC 27609, 919.848.3450, fax 919.848.2355.