



# MEDICAL SOCIETY OF VIRGINIA Crash Course on Coding

*A one-day program for beginning coders and those wanting to brush up on their skills*

By bundling three classes into one day, MSV gives you a more affordable and efficient way to learn about or refresh your coding skills. You will gain an understanding and application of billing and coding concepts and guidelines for diagnosis (ICD-9) and procedure (CPT, HCPCS) codes. Participants will also learn how to identify ways to help maximize reimbursement and how to link diagnosis and procedure codes together so that you can achieve claims paid in full on the first submission. In addition, you will learn the difference between Modifier-25 and Modifier-59, how the correct use will help ensure appropriate reimbursement, when it is applicable to use them, and the difference between the various modifiers that can cause confusion.

**Module 1:** Coding 101 — 9:00 AM to 12:00 PM

**Module 2:** Introduction to Medical Billing and Coding: The Next Step — 12:45 PM to 2:45 PM

**Module 3:** Modifier Madness 3:00 PM to 5:00 PM

**INSTRUCTORS:** Rose B. Moore, CPC-I, CPMA, CEMC - MSV Senior Physician Practice Advocate  
Lesley S. Wagner, CPC-I, CMOM, MSV Physician Practice Advocate

**DATES & LOCATIONS:**  Tuesday, October 26, 2010 | Rappahannock General Hospital Training Center  
(Please select one) 101 Harris Road | Kilmarnock, VA 22482  
 Thursday, October 28, 2010 | Medical Society of Virginia  
2924 Emerywood Pkwy., Ste. 205 | Richmond, VA 23294

**TIME:** 9:00 AM - 5:00 PM

**Registration for individual modules is available. Please visit [www.msv.org/classes](http://www.msv.org/classes) for more information.**

**Registration Fee** – Please indicate which applies to you:

\_\_\_\_\_ \$249 discounted MSV member rate – Available to all MSV members and to non-physicians sponsored by a MSV member. Please provide name of sponsoring MSV member here: \_\_\_\_\_

\_\_\_\_\_ \$349 Non-member rate

Registration fee is payable by credit card or check and must accompany registration form. Please complete and return this form by fax or mail by Tuesday, October 19. Please send to:

**Medical Society of Virginia**  
2924 Emerywood Parkway, Suite 300 | Richmond, VA 23294 | Fax: 804 | 355-6189

## REGISTRATION

Name: \_\_\_\_\_  
Title: \_\_\_\_\_  
Organization name: \_\_\_\_\_  
Address: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

## PAYMENT

Type:  Visa  MasterCard  AMEX  Discover  
Credit card number: \_\_\_\_\_  
Exp. date: \_\_\_\_\_  
Name as it appears on card: \_\_\_\_\_  
Signature: \_\_\_\_\_

**Cancellation Policy:** Cancellations received on or prior to the registration deadline will receive a full refund. All other cancellations received prior to the seminar date are subject to a \$25 processing fee. No refund will be provided without notice of cancellation prior to seminar date.