

# Presents: ICD-10-CM: Preparing for a Successful Implementation

Presented by: Nelly Leon-Chisen, RHIA, Director, Coding and Classification, American Hospital Association, Chicago, IL.

Ms. Leon-Chisen had disclosed that she does not have any relevant financial relationships with commercial interests.

#### 2014 SCHEDULE

## Wednesday, March 5

(9:00 am-12:30 pm) Hilton Oak Lawn 9333 S Cicero Ave., Oak Lawn IL 60453

### Wednesday, April 16

(9:00 am-12:30 pm) Chicago Medical Society Building 33 W Grand Ave., Chicago IL 60654

## Wednesday, May 21

(9:00 am-12:30 pm) Hyatt Lodge at McDonald's Campus 2815 Jorie Blvd, Oak Brook, IL 60523

Target Audience: All Physicians, Practice Managers, Physician Executive Staff and Medical Office Staff

Desired Learning Outcomes: At the completion of this learning activity, participants should be able to:

- Describe key elements required in a plan for a successful transition to ICD-10-CM.
- Make recommendations for each of the four phases of implementation of ICD-10: Planning, impact analysis, implementation, and post-implementation.
- Discuss the code structure, format and basic conventions of ICD-10-CM diagnosis coding and understands its impact.

This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Education (ACCME). The Chicago Medical Society is accredited by the ACCME to provide continuing medical education for physicians.

The Chicago Medical Society designates this live activity for a maximum of **3.5** AMA PRA Category 1 Credit (s)<sup>TM</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

The following planning members of the Chicago Medical Society's CME Committee have disclosed that they do not have any relevant financial relationships with commercial interests: Ajay K. Chauhan, MD, Chairman, Howard Axe, MD, Vickie L. Becker, MD, Adrienne L. Fregia, MD, Robert W. Panton, MD, Loren S. Schechter, MD, Kathy M. Tynus, MD, Michael R. Treister, MD, Course Director, and Cecilia Merino, Director of Education.

REGISTRATION FORM FOR (CHECK ONE):			METHOD OF PAYMENT:
□ 3/5/14	□ 4/16/14	□ 5/21/14	☐ Check enclosed in the amount of _\$
Fee: ☐ CMS Mbr: \$59 ☐ Non-Mbr: \$159			☐ Charge: \$ ☐ Visa ☐ Master Card ☐ Amex
ATTENDEE NAME:			ACCOUNT #:
MAILING/BILLING ADDRESS:			EXP. DATE:
			SIGNATURE:

**REGISTRATION:** Send your **ICD-10** registrations to:

Mail to: Chicago Medical Society - Attn: Education Dept.

515 N. Dearborn St., Chicago, IL 60654

**Register Online:** <u>www.cmsdocs.org</u> **Fax:** 312-670-3646 **Phone:** 312-670-2550 x338 **Email:** emedrano@cmsdocs.org