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Accreditation

Training and education to ensure a successful accreditation system at your facility and guidance to integrate continuous survey readiness into daily operations. Survey coordinators, accreditation and quality professionals gain in-depth explanations of CMS and Joint Commission requirements while ensuring a higher level of care.

**CMS Compliance Crosswalk**
CMSCC18 | $165

The latest and greatest edition of HCPro’s highly regarded accreditation crosswalk. This book shows you how to comply with each Condition of Participation (CoP) set forth by CMS and highlights which requirements from The Joint Commission and other accrediting organizations correspond to individual CoPs.

Using a table format, the book takes readers through each CoP, explains how accreditation standards differ from the CMS requirements, and offers tips and documentation suggestions for survey preparation.

**The CMS Conditions of Participation and Interpretive Guidelines**
CMSHCPIG7 | $95

Compliance with the Conditions of Participation (CoP) is required to meet Medicare and Medicaid hospital regulations. While CMS posts updates to the CoPs on its website, they are often difficult to search and lengthy, not to mention tedious to print.

We have taken the most recent version of CMS’ CoPs and the corresponding Interpretive Guidelines and reprinted them in an easy-to-use format to simplify your job.

**Survey Training Essentials: Tools for Ongoing Survey Prep**
JML19 | $165

This electronic toolkit is thoroughly updated to current Joint Commission standards. It addresses all levels of training and contains comprehensive survey training tactics you can apply across every department.

Plus, this toolkit is completely customizable, letting you focus on the areas of your facility that need the most attention, whether that’s infection control, life safety, or environment of care.

**The Chapter Leader’s Guide to Environment of Care, 2nd Edition**
CGEOC2 | $135

This newly update resource breaks down The Joint Commission’s complex Environment of Care requirements into easy-to-understand solutions. You get simplified explanations of the chapter’s key components along with communication techniques to help foster strong and successful partnerships between survey coordinator, chapter leader, and staff of all levels.

Plus, to make staff training easy, this guide includes two downloadable PowerPoint® presentations highlighting key compliance takeaways.

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CGEMM2 | $135

Keep your facility up to speed on the ever-increasing emergency management requirements. This book breaks down The Joint Commission’s Emergency Management requirements into easy-to-understand solutions to meet the challenges of these complex standards. You get simplified explanations of the chapter’s key components along with communication techniques to help foster a strong and successful partnership between survey coordinator, chapter leader, and staff of all levels.

Survey Success: A Hospital Guide to Mock Surveys
JMT20 | $165

Get your entire team ready for the moment surveyors walk through your front door. This premier survey prep guide breaks down the latest CMS standards in a mock survey checklist format and guides you through practice tracers throughout your organization. The included tools help train chapter leaders and committee members to easily delegate the right forms to the right people on their committees.

The Survey Coordinator’s Handbook
SCH19 | $155

This is the ultimate resource in survey prep for all accreditation professionals no matter their experience level. This handbook walks through every step of preparation, explaining key problem areas and highlighting major areas of focus for surveyors. The latest edition’s updates include the new 2012 Life Safety Code® guidance, new CMS requirements related to emergency management and Legionella risk assessment, and Sentinel Event Alerts related to handoff communication and the role of leadership in developing a safety culture.

Chapter Leader’s Guide to the Medical Staff, 2nd Edition
CGMS2 | $135

Empower your medical staff chapter leaders to successfully navigate the survey process. This book breaks down The Joint Commission’s medical staff requirements into easy-to-understand solutions to meet the challenges of these complex standards. You get simplified explanations of the chapter’s key components along with communication techniques to help foster a strong and successful partnership between survey coordinator and chapter leader.

Accreditation and Quality Compliance Center

AQCC | Basic ($495), Platinum ($995) — Annual Subscription

The Accreditation & Quality Compliance Center (AQCC) is an online resource for accreditation, quality, and patient safety professionals. This digital offering combines the Accreditation market’s flagship publications and resources into one robust destination for analysis, guidance, and on the job resources. AQCC will feature weekly article releases from its two publications; Patient Safety Monitor Journal and Inside Accreditation and Quality. With two levels of membership, users gain access to a range of product offerings including Patient Safety Standards Crosswalks, an Accreditation Encyclopedia, a Career Center, CMS Compliance Crosswalk, Mock Tracer Toolkit, Accreditation Training Toolkit, webinars, and more.
CCMMBPHS | $155

This book explains the differences between case management and social work and the ways in which case management functions have evolved over time. Rationale for providing case management services in health systems and ACOs is also included along with suggestions for case management reporting structures. Whether your healthcare organization has an existing or developing case management department, this resource can help you select an appropriate model and seek staff with skills best suited to help you reach your goals.

The Essential Guide to Interprofessional Ethics in Healthcare Case Management
EGETHHCM | $155

This informative resource will help case managers navigate the ethical conundrums they face as they interact with one another, the healthcare team, and patients and families. Rather than providing a broad-strokes overview of ethics, author Ellen Fink-Samnick takes a focused approach and considers specific scenarios unique to healthcare and case management. The book covers industry disruptors, including technology and social media; workplace bullying; licensure across state lines; and the impact of ethics on models of care, such as value-based care and population health.

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The Hospital Case Management Orientation Manual
HCMOMRG | $215

A comprehensive resource that supplements initial training for new case managers. This book explains what to document, where to document it to ensure appropriate level of care and reimbursement, and how to avoid unnecessary denials. This book’s focus is utilization management, discharge planning, and relevant CMS regulations. It can help new case managers learn how to perform their jobs effectively on their own time. It can also serve as a wide-ranging resource for more experienced case managers, particularly those whose training was less than adequate.

Case Management Patient Communication Toolkit
TCMPCT | $255

The information the case manager communicates to the patient, family/caregiver, hospital team, and postacute care providers is paramount to getting the patient the right care in the right place at the right time and potentially avoiding a readmission. Communication is essential to the role of case management, yet crafting a universal message that both the patient and the case manager understand is a challenge for many hospitals.

The Case Management Patient Communication Toolkit helps ensure case managers are delivering that universal message. This toolkit contains 5 handbooks and 5 pocket cards.

Case Management Guide to Population Health: Management Across the Continuum of Care
CMGEPH | $155

A comprehensive playbook for ensuring the effectiveness of a population health program. This resource is designed to help case management and other healthcare professionals examine social determinants of population health, gauge the sustainability of population health modules in case management, and measure case management outcomes. This book offers personalized insight into the history of case management and the population health evolution in addition to providing factual guidance for the future from a respected case management authority.

Care Transitions in Case Management
CMLCPCID | $135

This book provides practical advice on patient and family engagement, strategies for partnering with payer case managers and utilization review, definitions of roles, and road maps for those involved in case management. Covering the entire lifetime of patient care, this book is a useful tool for case managers in all settings as they work to improve relationships and resources across the care continuum.

The Hospital Case Management Orientation Manual
HCMOMRG | $215

A comprehensive resource that supplements initial training for new case managers. This book explains what to document, where to document it to ensure appropriate level of care and reimbursement, and how to avoid unnecessary denials. This book’s focus is utilization management, discharge planning, and relevant CMS regulations. It can help new case managers learn how to perform their jobs effectively on their own time. It can also serve as a wide-ranging resource for more experienced case managers, particularly those whose training was less than adequate.

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Clinical Documentation Improvement (CDI)

Education, tools, and strategies to implement successful CDI programs and achieve professional growth.

The 2019 CDI Pocket Guide
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Each year, authors Dr. Richard Pinson and Cynthia Tang research, revise, clarify, and update the content of the CDI Pocket Guide. They capture significant changes in authoritative clinical diagnostic standards, the ICD-10 classification, DRG assignment, Official Coding Guidelines, and Coding Clinic and accommodate useful feedback from readers. They also provide the wisdom of their experience as consultants helping organizations sculpt their documentation and coding practices.

FULLY UPDATED FOR 2019!

“The CDI Pocket Guide changed my practice on a daily basis!”
—CINDY P., CDI CONSULTANT, MEDPARTNERS

“My CDI Pocket Guide is an invaluable tool! I reference it daily in my reviews, writing queries and educating physicians regarding documentation opportunities. I would be lost without it!”
—NORMA B., CODING AND CDI SPECIALIST, BAY MEDICAL CENTER

“The essential tool for our documentation specialists and coders—each section provides the clinical criteria needed to recognize documentation improvement opportunities in the medical record!”
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Let the new 2019 edition of the Outpatient CDI Pocket Guide show you how to master Hierarchical Condition Categories (HCC).

Authors Richard Pinson and Cynthia Tang explain how HCCs affect both providers and payers and clarify the chief considerations in outpatient reimbursement, documentation, and coding guidelines.

This powerful resource provides essential information for the coder to excel in any setting. It clearly and concisely provides clinical definitions, diagnostic criteria, and treatment guidelines to accurately code and clinically validate the most important conditions; explains the crucial inpatient and outpatient coding of ICD-10 and E/M coding and guidelines, documentation requirements, and DRG tips; lists pertinent comorbid conditions (MCC, CC, HCC); and provides tips to improve E/M coding and physician querying along with MS-DRG and HCC tables, plus so much more.

This study guide prepares candidates for the Certified Clinical Documentation Specialist (CCDS) exam. Each section reviews core content established by the CCDS Certification Board and contains sample questions for self-testing.

To help candidates prepare for this exam, the best-selling **CCDS Exam Study Guide** targets the test objectives and content outline prepared by the CCDS Certification Board, letting candidates focus their time on areas of CDI practice with which they are least familiar.

We’ve compiled a panel of contributors representing some of the most advanced thought leadership in the pediatric CDI realm today to provide an in-depth look at a wide variety of documentation concerns related to childhood conditions. Whether you need help securing administrative support from the get-go or want some guidance on delving deep into the documentation depths, this book provides the building blocks to get your pediatric program off the ground.

This is a must-read resource for both new CDI specialists and experienced CDI specialists who have pediatric chart review added to their responsibilities.

Your new CDI specialists start in a few weeks. While they have the right background to do the job, they still need orientation, training, and help understanding the core skills of their profession. Don’t spend time creating training materials from scratch.

**The CDI Specialist’s Complete Training Guide** is the perfect resource for CDI program managers to help new CDI professionals understand their roles and responsibilities.

An indispensable ACDIS guide for CDI professionals about quality measures and how the CDI department affects those measures. CDI specialists and departments can use this guide to advance to the next level of CDI—not just reviewing and clarifying diagnoses, but understanding how those diagnoses impact hospital quality metrics and influence indirect revenues.
CDI Field Guide to Denials Prevention and Audit Defense
CDISGAD | $165
The world of denials prevention and audit defense is filled with a host of watchdog agencies—an alphabet soup of acronyms—to audit claims and take back funds for inappropriate submissions. Your hospital must work to protect its reimbursement, and your CDI program can help. With more than a dozen years’ experience working with CDI staff to defend claims and tighten procedures around documentation for auditor targets, get step-by-step tools to help your program improve its denials prevention efforts.

CDI Workbook: Investigating Complex Cases and Formulating Queries
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First Steps in Outpatient CDI: Tips and Tools for Building a Program
OCDI | $165
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The CDI Specialist’s Guide to Evaluation and Management
CDIEM | $165
CDI professionals who understand why and how physician documentation affects the physicians’ own coding and billing system fare better when it comes to physician engagement in CDI efforts. This book provides an in-depth look at how E/M codes are built and which documentation matters most based on the setting of the patient encounter.

The Essential Guide to Coding Audits
EGCA | $139
An in-depth look at the coding auditing process, ranging from external audits and accuracy rates to structuring your own internal coding audit program. This book can be your constant companion and reference throughout the audit-refining process, and is a must have for coding managers and coders looking to avoid denials and produce the most accurate claims possible.

The Outpatient CDI Specialist’s Complete Training Guide
CDISCTOUT | $165
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This powerful resource provides essential information for the coder to excel in any setting. It clearly and concisely provides clinical definitions, diagnostic criteria, and treatment guidelines to accurately code and clinically validate the most important conditions; explains the crucial inpatient and outpatient coding of ICD-10 and E/M coding and guidelines, documentation requirements, and DRG tips; lists pertinent comorbid conditions (MCC, CC, HCC); and provides tips to improve E/M coding and physician querying along with MS-DRG and HCC tables, plus so much more.

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The Coder’s Guide to Physician Queries
COGPHYQ | $155
Get easy-to-follow strategies for coding departments to improve their query processes and train their coders on developing and executing physician queries. Using the tools in this guide, new and established coders can revise their practices and train staff to meet the challenges of integrating ICD-10-CM/PCS codes into queries, government payer initiatives, auditor denials, and electronic advances.
JustCoding’s Guide to Modifiers: Hospital Outpatient Edition

JCMC4 | $155

Healthcare professionals must stay up-to-date with guidance for reporting modifiers or risk repeated audits and lost revenue. JustCoding’s Guide to Modifiers: Hospital Outpatient Edition provides detailed information on the latest guidelines surrounding CPT®/HCPCS modifiers. This book features comprehensive explanations of when to report each modifier, including coding tips and detailed examples.

JustCoding’s Practical Guide to Coding Management

PGCM | $155

This book gives coding managers new benchmarks, standards, and tips to ensure they’re running an effective coding department. It provides strategies for coder retention, best practices to balance internal and outsourced coders, and tips for managing on-site and remote staff. The book also provides much-needed information for managers on how to educate their teams on coding’s role within the revenue cycle.

JustCoding’s Clinical Scenario: 2019 CPT® Edition

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An opportunity for coders to practice and refine their skills in a hands-on way by using a wide range of real-life case scenarios. Coders will determine the correct CPT and ICD-10-CM codes to report for each case scenario based on provided documentation, evidence of sufficient medical necessity, and any conditions present that would allow for Hierarchical Condition Category capture.

JustCoding’s Clinical Scenario: 2019 ICD-10-PCS Edition

JCCSICD10P19 | $155

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JustCoding’s Emergency Department Coding Handbook (Pack of 5)

JCECTH | $155

This handbook is a quick reference guide for coders in emergency department (ED) settings. It guides coders through assigning visit levels and documentation requirements for a variety of common ED services. The handbook also includes anatomical illustrations for fractures.

JustCoding’s Injections and Infusions Coding Handbook (Pack of 5)

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This handbook begins with a review of drug administration concepts, including definitions of common terms. It then walks through the hierarchy that outpatient facility coders use to select the initial drug administration service. The handbook also explains how to properly determine when to report concurrent, subsequent, and additional hours of substances and when to report hydration.

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Make sense of medical necessity, condition codes, and patient notices while reviewing cases. The Patient Status Training Toolkit for Utilization Review is a quick-reference handbook and pocket card that will serve as an everyday guide to utilization review (UR).

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This book gives compliance officers everything they need to take charge of a healthcare compliance program, whether they are new to the field or seasoned professionals who want to incorporate the latest strategies. Packed with legal insights from two experts on the latest OIG regulations, this handbook delivers tools, practical examples, and interpretations to build and maintain programs consistent with best practices for risk assessment, HIPAA compliance, training, monitoring, and auditing for compliance, and a host of other organizational responsibilities.

Medicare Compliance Essentials Training Compendium
MCETS | $205
The most popular Medicare compliance training handbooks combined into a single collection, offering Medicare professionals a one-stop resource for regulatory and practical guidance. The Medicare Compliance Essentials Training Compendium is a full-size book featuring a brand-new introduction with guidelines on using the content and tools in each handbook for training purposes. The individual handbooks can also be downloaded and printed for training unlimited numbers of staff.

OSHA Program Manual for Medical Facilities
OSHASPM2 | $215
A thorough and efficient way to compile OSHA compliance plans, checklists, hard copies of OSHA regulations, and more. Keep your OSHA safety program strong with this manual for medical facilities. The OSHA Program Manual for Medical Facilities breaks down OSHA regulations and gives you the flexibility to customize sections to meet your facility’s specific needs.

The CMS Conditions of Participation & Interpretive Guidelines
CMSSHCPIG7 | $95
Compliance with the Conditions of Participation (CoP) is required to meet Medicare and Medicaid hospital regulations. While CMS posts updates to the CoPs on its website, they are often difficult to search and lengthy, not to mention tedious to print. We have taken the most recent version of CMS’ CoPs and the corresponding Interpretive Guidelines and reprinted them in an easy-to-use format to simplify your job.

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“The CDI Pocket Guide changed my practice on a daily basis!”
—CINDY P., CDI CONSULTANT, MEDPARTNERS

“My CDI Pocket Guide is an invaluable tool! I reference it daily in my reviews, writing queries and educating physicians regarding documentation opportunities. I would be lost without it!”
—NORMA B., CODING AND CDI SPECIALIST, BAY MEDICAL CENTER

“An essential tool for our documentation specialists and coders—each section provides the clinical criteria needed to recognize documentation improvement opportunities in the medical record!”
—KAREN S., HIM DIRECTOR, NANTICOKE HOSPITAL
With frequent ICD-10-CM/PCS code updates, policy changes, and advances in electronic query systems, coders are constantly being challenged to redefine where and how they generate queries. Without an efficient and effective query process, facilities risk denials and audits that can cost them significant time and money.

The Coder’s Guide to Physician Queries provides easy-to-follow strategies for coding departments to improve their query processes and train their coders on developing and executing physician queries.

Accessible, practical, road-tested guidance from authors with a wealth of experience in the field. This book is an all-in-one resource for established HIM directors looking for guidance on navigating a changing profession and newer HIM directors in need of expert advice on policies and programs.

Bring clarity and knowledge to the HIM director’s role and responsibilities through a deep understanding of the core HIM functions and areas of expertise, highlighting the connection between seemingly disparate topics.

These handbooks provide fundamental privacy and security training for new and seasoned staff. They include scenarios that depict workplace practices specific to staff and settings. They are updated to include relevant information from the Omnibus Rule. A quiz helps ensure that staff understand what the law requires.
Home Health

Information, education, and guidance on complex topics such as Medicare compliance, agency management, coding and documentation, billing, aide training, and clinical management to help home health and hospice clinical staff, coders, staff educators, and administrators break down confusing regulations into easy-to-understand processes and procedures.

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Our coding manual includes a wide range of features to help ensure accurate coding and compliance, prevent denials and help your agency secure every reimbursement dollar earned. Plus, the 2020 edition includes features that will support your ongoing ICD-10 training needs.

Make Sure Your Agency Has the Best-Selling ICD-10 Coding Manual Created Specifically for Home Health Coders!

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The Home Health ICD-10-CM Coding Companion, 2020 is the perfect educational resource to use in conjunction with your 2020 Complete Home Health ICD-10-CM Diagnosis Coding Manual. It’s your guide to accurate coding and compliance with expert guidance and comprehensive decision trees to help you navigate the ICD-10 code set.

Home Health ICD-10-CM Coding Answers, 2020

DHPAB10AN20 | $179

Practice your coding or teach others about coding by working through 150 ICD-10 coding scenarios that cover home health’s most complicated situations, including surgical and trauma wounds as well as complicated wounds, sepsis, multiple diabetic manifestations, lower extremity ulcers, proper assignment of 7th character, injuries, fractures, late effects, and much more! You can code each scenario in the separate workbook, and then look up the answer and rationale behind the coding in the Answers Book.
Essential In-Services for Home Health—For Aides & Nurses, 2019
DHJH50E19 | $210
This significantly updated version of HCPro’s Essential In-Services for Home Health features thoroughly reviewed in-services and examines new hot topics such as OASIS-D, individualized plans of care, patient rights, and patient complaints and service recovery.
Offering more home health in-services on more essential topics than any other product on the market, Essential In-Services provides everything you need to train your nurses and aides, satisfying CMS’ requirement of completing 12 in-service training hours annually.

Home Care Specialist—Compliance (HCS-C) Certification Study Guide, 2018
DHPABHCSCS18 | $83
The Home Care Specialist—Compliance (HCS-C) joins BMSC credentials HCS-D, HCS-H, and HCS-O as the fourth home care specialty credential. The HCS-C credential is designed specifically for home health staff responsible for complying with state and federal regulations related to agency operations. Begin your preparation for the HCS-C certification exam with the Home Care Specialist—Compliance (HCS-C) Certification Study Guide, 2018.

Home Care Coding Specialist—Hospice (HCS-H) Certification Study Guide, 2019
DHPABHCSCS19 | $83
The Home Care Coding Specialist—Hospice (HCS-H) ICD-10 Certification Study Guide, 2019 will help prepare you to take the Home Care Coding Specialist-Hospice (HCS-H) ICD-10-CM certification examination, offered by the Board of Medical Specialty Coding & Compliance (BMSC), the credentialing arm of the Association of Homecare Coding & Compliance (AHCC). You’ll get tips and sample test questions to help you prepare for the exam.

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The Home Care Coding Specialist—Diagnosis (HCS-D) ICD-10-CM Certification Study Guide, 2019 will help prepare you to take the Home Care Coding Specialist-Diagnosis (HCS-D) ICD-10-CM certification examination, offered by the Board of Medical Specialty Coding & Compliance (BMSC). You’ll get tips and sample test questions authored by BMSC Board.

Home Care Clinical Specialist—OASIS (HCS-O) Certification Study Guide, 2019
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For clinicians who are serious about validating their OASIS proficiency, the Home Care Clinical Specialist—OASIS (HCS-O) Certification Study Guide, 2019 is your preparatory resource to take the HCS-O Certification Exam.
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Home Health Billing Answers, 2019
DHPABBILLG19 | $299
Not only will you need to understand how to bill for payments in the new PDGM model, your agency will also need to spend money on training and billing department changes.

Give your billing and collections staff the information they need to bill correctly on the front end and correct denials before they reach auditors with Home Health Billing Answers, 2019.

Our resource walks you through every step of the billing process and provides crucial tips for avoiding common billing errors.

Home Health Conditions of Participation Answers, 2019
DHPABCPAN19 | $299
Ensure your home health agency’s policies and procedures are up to par as surveyors hone in on the updated CoPs.

Our updated 2019 version is the only resource you have to help you rapidly get up to speed, implement new processes and avoid hefty CMS penalties at your next survey.

Broken into six sections, this resource systematically walks you through each requirement along with its interpretive guidelines, ensuring you have the context you need to achieve alignment and compliance as you lead your agency through its change effort.

CMS’ Home Health Conditions of Participation and Interpretive Guidelines, 2019
CPARTI19 | $99
Compliance with the Conditions of Participation (CoPs) is required to meet Medicare regulations. While CMS posts updates to the CoPs on its website, they are often difficult to search and lengthy, not to mention tedious to print.

We have taken the most recent version of CMS’ CoPs and the corresponding Interpretive Guidelines (IG) and reprinted them in an easy-to-use format to simplify your job. This product provides an easy-to-read hard-copy reference of CoPs, and their related IGs and G-tags, for easy quick cross-reference.
The latest revision of the OASIS assessment, effective January 1, 2019, includes the removal of 28 items, the addition of six items, and revisions to seven items. Among the biggest challenges for agencies grappling with the revised assessment are new items GG0170 (Mobility) and GG0130 (Self-Care). These items require scoring of actual performance and a discharge goal for a combined 24 activities.

This brand-new pocket guide provides a quick reference for filling out the OASIS, with tips and callouts on new items, including which items affect case mix, rating, and value-based purchasing reimbursement. This reference explains how OASIS items fit into various assessments and provides troubleshooting tips to avoid incorrect payments, denials, and fines.

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The Patient Rights CoP is the most often cited by surveyors and will continue to draw their focus. The Patient Rights CoP broadens the scope of patient rights. You and your staff need to be thoroughly prepared.

Written by a well-known home health attorney, Robert E. Markette, these policies and procedures will arm agencies with the tools needed to comply with the new patient rights regulations. This book will help you get started with implementing compliant patient rights policies and procedures.

Regulatory burdens and payment uncertainty are expected to continue in 2019. Among agencies’ challenges are the complying with the revised Home Health Conditions of Participation (CoPs), preparing for the Patient-Driven Groupings Model (PDGM), achieving 5-star ratings, ensuring clinicians achieve success with OASIS-D, overcoming targeted probe-and-educate reviews and standing out on value-based purchasing.

More than ever, you need solid data, insightful analysis and easy-to-use tools to plot your agency’s course for the years to come. To help you, the Home Health PPS Benchmarks, 2019 with up-to-date PPS data about quality outcomes, utilizing therapy, productivity, referrals, patient satisfaction and more.

The ICD-10-CM & OASIS Field Guide, 2020 contains two important references for clinicians on the go — a quick ICD-10 code look-up and a guide to answering the OASIS case-mix questions.

Section I: ICD-10-CM Field Guide provides official guidance on how to assign the most often-used home health ICD-10 codes. It contains Tabular rules such as Includes and Excludes notes, and provides case-mix and supply booster information.

Section II: OASIS Field Guide provides the most up-to-date CMS guidance on how to accurately answer the OASIS-D case-mix questions. We’ve taken CMS’ most recent guidance and boiled it down to plain-English tips that clinicians can quickly turn to when filling out an OASIS form.
Diagnosis Coding Pro for Home Health

DHCPH | $497

Coding guidance you can trust from the publishers of the Complete ICD-10-CM Diagnosis Coding Manual for Home Health, the gold standard in diagnosis coding. Diagnosis Coding Pro for Home Health provides you and your coding staff with ICD-10-CM coding and training education. It’s like having a coding consultant show up in your agency every month.

Critical Thinking in Home Health: Assess, Analyze & Act

CTHH | $150

Critical Thinking in Home Health: Skills to Assess, Analyze, and Act explains how to teach critical thinking, how to train for it during orientation and how to apply it to the home health setting. Includes relevant, concrete information for the development and tuning of critical thinking skills for the new graduate and the experienced nurse. This resource also addresses the experienced nurse, as this is often the home health nurse while offering dozens of tools to help with the implementation effort.

Home Health Line

DHHHL | $627

When news breaks you will hear it from Home Health Line first. For more than 20 years, every weekly issue has been delivering regulatory news, proven best practices and tools to help your agency provide excellent patient care and increased profitability. Subscribe today, and join the thousands of home health agency executives who currently benefit from 48 weekly briefings a year.

The Homecare Administrator’s Field Guide, Third Edition

DHHCAFG3 | $189

The Homecare Administrator’s Field Guide, Third Edition, is the must-have resource for new and veteran home health administrators. Running a home health agency has never been more challenging. Every year brings new regulations, and you need best practices for staying compliant with ALL of them, including updated Conditions of Participation (CoP), new QAPI requirements, star ratings, OASIS-D, and annual PPS updates—and that’s just the tip of the iceberg.

This book provides a strategic breakdown of the organizational structure of a home health agency and explains the administrator’s role in operations, human resources, financial management, OASIS, payment, public reporting, and regulatory compliance.
Long-Term Care

Education and guidance on complex topics such as MDS, the survey process, and reimbursement to help long-term care administrators, reimbursement professionals, and clinical staff members break down confusing regulations into easy-to-understand processes and procedures.

The Long-Term Care State Operations Manual
LTCSOM14 | $70

Stay compliant with the most up-to-date regulations, interpretive guidelines, and newly assigned Ftags, and adhere to CMS’ guidance and survey requirements.

This valuable resource provides word-for-word CMS regulatory guidance and forms covering virtually every aspect of a nursing home’s annual survey.

50 Essential Inservices for LTC
LTC50EI | $175

The material in this book covers the most essential topics in long-term care, including Alzheimer’s disease, behavior management, and infection control. Its 10 new in-services keep learners up to date with new regulations and cover topics such as drug regimen review, safe social media practices, and activities of daily living.

A SNF’s Guide to Medication Reconciliation and Drug Regimen Review
MRCLTC | $155

A fresh, educated perspective on the nuances of medication management in long-term care and addresses multiple industry challenges, including antibiotic stewardship requirements, eliminating medication discrepancies during care transitions, and antipsychotic use.

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Competency-Based Care & Facility Assessments: A Compliance Guide for F726 and F838
GCBCFA | $165
With an explanation of how to stay compliant, how to properly conduct assessments, and how to develop a competency-based training program, plus practical tools including more than 100 competency assessments, this resource is everything long-term care leadership needs.

MDS Care Plans: A Person-Centered, Interdisciplinary Approach to Care, Second Edition
MDSCP2 | $150
Save time and unnecessary effort by eliminating documentation redundancy when completing the CAA. The worksheets available for download in this manual will help you improve resident outcomes by knowing what to look for in each assessment. Each care plan provides a framework for guiding the review of trigger areas and clarifying a resident’s functional status and related causes of impairments.

MDS 3.0 RAI User’s Manual
UMDS3.15 | $65
The best-selling MDS 3.0 RAI User’s Manual includes CMS’ most recent updates. Remain compliant and informed with CMS’ latest updates while completing resident assessments, ensuring proper reimbursement, and providing quality care.

Long-Term Care Quality Measures: A Guide to Data Analysis, Performance Improvement, and Public Reporting
QMDIP | $155
A thorough drilldown of each QM, this book supplies detailed explanations of each measure’s description, including numerator, denominator, and the facility’s and surveyor’s perspectives. This resource provides strategies for using your QM data to achieve performance improvement, insight into how CMS uses your QM data, and tips on using public reporting to track your quality improvement efforts.

Nursing and Therapy Documentation: Optimizing SNF Regulatory Compliance and Quality Resident Outcomes
SNFNTCC | $150
Most SNFs provide the care the resident needs at the appropriate time, but struggle with communicating and recording the care on the MDS in order to trigger a higher case-mix level and corresponding reimbursement. Nursing and Therapy Documentation: Optimizing SNF Regulatory Compliance and Quality Resident Outcomes highlights key areas of collaboration and communication that can ensure the full scope of resident care is documented and identified, letting the facility receive the payment it deserves.
Finance & Budgeting Made Simple for Senior Living Administrators
SLAES | $135
Assisted living facilities must focus on quality and exercise prudent expense management to achieve sustainable profit margins if they hope to stave off competition and remain profitable.

This resource will provide readers with the financial and decision-making skills they need to achieve quality and compliance on dwindling profit margins.

SNF Compliance & Ethics Toolkit
SNFCTLKT | $155
This resource offers practical, efficient ways to train and educate staff, develop self-correcting actions, and stay on top of the constantly changing regulatory environment in long-term care.

Get new sample policies and even more downloadable resources to help your facility be ever-vigilant for high-risk, problem-prone areas; identify key areas of noncompliance based on previous Office of Inspector General reports; and monitor claims for accuracy to avoid financial and marketing hardships.

PPS Alert for Long-Term Care
PPSA | $315
PDDM must be implemented by October 1, 2019. This resource will help you prepare.

PPS Alert for Long-Term Care is the industry’s leading resource devoted to navigating long-term care professionals through the MDS and PPS processes and continual shifts in regulatory compliance, as well as keeping you informed of top industry news. This monthly, digital publication features practical tips, how-to guidance, and vital tools from our team of long-term care experts to help your facility remain compliant and quality-focused.

The Big Book of Resident Activities, Second Edition
BBACT2 | $150
This resource outlines more than 100 specific activity ideas by target audience, timeframe, recommended group size, and cognitive function. No matter what the clinical condition or cognitive limitation, this book offers activities that suit each resident’s distinct needs and interests. Tools and downloads for activity professionals include sample care plans and resident assessments, sample activity calendars, and sample press releases, posters, and letters to keep family members involved and boost your facility’s reputation.

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ICD-10-CM Documentation Trainer, 2020
DHMPBIDOCT20 | $209.95
Packed with pages and pages of detailed checklists and proven tools, this book will ensure you meet all the additional ICD-10-CM documentation requirements that are critical to ICD-10 implementation success. Organized by chapters mirroring the structure of your code book, you’ll speed through this book together and have the opportunity to test each other’s knowledge of key points you’ll learn along the way with exercises, real-life coding scenarios and quizzes. This single documentation training source has all the tools necessary for an effective documentation analysis and a corrective action plan.

AMA CPT© 2020 Professional Edition
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Accurate reporting and billing of medical procedures and services starts with the CPT® 2020 Professional Edition, the definitive AMA-authored resource proven to help health care professionals establish the procedural coding advantage. Covering hundreds of 2020 CPT codes, official coding rules and clear anatomical and procedural illustrations, you have everything you need to ensure accurate reimbursements.

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This comprehensive guide will help individual providers to avoid MIPS penalties and secure bonuses. You’ll get scorecards for quality reporting measures, advancing care information measures, clinical practice improvement activities and cost to help you determine your easiest path to success. You’ll also get a clear understanding of the specific MIPS requirements you must meet with decision trees and step-by-step guidance.

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Newly updated with the most current CPT® and HCPCS level codes, facility and non-facility RVUs and reimbursement rates, medical practice billers will be fully armed with the critical reimbursement data they need to ensure fair out-of-network reimbursement from payers, optimize contracts and compare Medicare-based fee schedules against local fair market charges for top services.

Endorsed by the Board of Medical Specialty Coding & Compliance (BMSC) as a preparation guide for the Specialty Coding Professional — Pain Management (SCP-PM) or Advanced Coding Specialist—Pain Management (ACSPM) certifications, this authoritative answer book delivers critical core principles coders must master to build competency in this specialty area.

E/M Bell Curve Sourcebook, 2020
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### Medical Decision-Making

**HPI** = 4, **ROS** = 10, **PFSH** = 3

#### COMP

**EPF**

- HPI = 1, **ROS** = 1

#### EPF

**HPI**

- History Exam

#### 99283

- Acute complicated or multi prob w/1 exacerbated

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Optimized for medical necessity and reimbursement understanding, this guide focuses on a subset of musculoskeletal surgeries, medicine and ancillary services CPT® codes chosen by experts who take into consideration utilization, denial risk and complexity.

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This comprehensive book will help you implement a personalized prevention program that builds on your current procedures for monitoring catheter usage and CAUTI rates. Through evidence-based best practices and guidelines, you will be able to effectively track patients with catheters and the duration of each catheterization.

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A user-friendly guide for nurse leaders that provides sound theoretical perspectives, evidence-based practices, practical strategies, and tools for achieving the best recruitment, engagement, and retention outcomes for their organization.

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Nursing Orientation Program Builder: Essential Tools for Onboarding, Orientation, and Transition to Practice

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The Charge Nurse Leader Program Builder: A Competency-Based Approach for Developing Frontline Leaders

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BHROTK2 | $135

This updated second edition includes significant new information about Just Culture, much of it based on the national Just Culture program that author Gary Sculli started in 2016. This powerful resource also focuses on leadership and how leaders can help transform their facilities into high-reliability organizations and references recent research on the topic of high reliability.

Quality Improvement for Nurse Managers

QINM | $105

A complete guide to quality improvement for nurse leaders
This book and CD clearly outline a nurse leader’s role in quality improvement and offer simple instructions to improve patient outcomes through nurse education and engagement. In an easy-to-understand format, this guide explains how to engage staff, how to choose, measure, and benchmark nursing quality data, and how to use QI projects to achieve positive results.

The Essential Guide to Supporting Quality Care Measures Through Documentation Improvement

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An indispensable ACDIS guide for CDI professionals about quality measures and how the CDI department affects those measures. CDI specialists and departments can use this guide to advance to the next level of CDI—not just reviewing and clarifying diagnoses, but understanding how those diagnoses impact hospital quality metrics and influence indirect revenues.


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The Accreditation & Quality Compliance Center (AQCC) is an online resource for accreditation, quality, and patient safety professionals. This digital offering combines the Accreditation market’s flagship publications and resources into one robust destination for analysis, guidance, and on the job resources. AQCC will feature weekly article releases from its two publications; Patient Safety Monitor Journal and Inside Accreditation and Quality. Users can sign up Basic of Platinum membership gaining accessing to a range of product offerings including Patient Safety Standards Crosswalks, an Accreditation Encyclopedia, a Career Center, CMS Compliance Crosswalk, Mock Tracer Toolkit, Accreditation Training Toolkit, webinars and more.
Residency

Compliance advice, best practices, training tools, and sample forms and documents to solve the toughest challenges in graduate medical education. These resources help residency program managers and directors ensure resident competence, comply with accreditation standards, and operate an efficient and effective residency program.

The Residency Coordinator’s Handbook

RESHB4 | $165

This book offers residency program and fellowship coordinators the education and field-tested solutions they need to ensure a successful and efficiently run residency/fellowship program. With contributors from an array of backgrounds, this book offers a global, multispecialty view of coordinator duties. New and veteran coordinators will benefit from the guidance, sample policies, and program tools they can implement immediately.

The Residency Program Director’s Handbook, 2nd Edition

TRPDH2 | $155

An on-the-job manual tailored to residency program directors and administrators. In this updated edition, Sara Multerer, MD, FAAP, Linda S. Nield, MD, and Jennifer L. Reemtsma, M.Ed, provide expert tips for developing a disciplinary policy, measuring outcomes, evaluating residents and faculty, assessing a curriculum, navigating the program director’s role in the Next Accreditation System (NAS) and Clinical Learning Environment Review (CLER), and other ACGME requirements. This book will streamline the day-to-day responsibilities of graduate medical education and reveal new and innovative teaching strategies to reach your residents.

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Residency

Resident Well-Being: A Guide for Residency Programs
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Residency Coordinator Certification Toolkit
TAGMEST | $105
An easy-to-use study tool that residency and fellowship coordinators can use to review the ins and outs of the role in relation to the program and institution. With 200 flashcards and a workbook featuring 50 questions concerning coordinators’ responsibilities, you can use this toolkit to test your ACGME accreditation knowledge and ensure your facility is in compliance.

Beyond ACGME Compliance: Successful Development, Oversight, and Enhancement of Residency Programs
PONAS | $150
This book will provide readers with essential tools and processes to create a robust residency program oversight system for their institution that satisfies ACGME Institutional, Common, and Specialty Program Requirements under the Next Accreditation System (NAS) and which can be tailored to the unique characteristics of their educational environment.

Essential Tools and Forms for Residency Training Programs
TTFRPC | $155
This book offers residency and fellowship coordinators the forms, policies, and spreadsheets they need to make day-to-day operations more efficient. All forms have been reviewed by expert Paige Rinehart, BS, C-TAGME, CPS, saving coordinators the time and hassle of creating them from scratch. Best of all, each form is downloadable and customizable, letting coordinators tailor the material to their specific program’s needs.

Resident Recruitment: From ERAS to Match
RESREC | $155
Residency recruitment can be very stressful for residency coordinators. A poorly executed recruitment process could lead to residency programs accepting residents that are not the right fit, potentially putting patient safety at risk. This book takes the hassle out of the recruitment process, helping you ensure your candidates are the right fit for your program.

The Complete Guide to Continuous GME Accreditation
TCGNAS | $155
Insight, guidance, and how-to instructions from the Cleveland Clinic’s GME office provide readers with the foundational knowledge to successfully navigate a CLER visit. The authors have undergone two CLER visits at the Cleveland Clinic, and they bring their experience to life in this in-depth guide. They provide readers with foundational knowledge about the CLER, including definitions, background, and steps to prepare for an on-site visit. Readers will also receive best practices to maintain their program’s accreditation with guidance on the Common Program Requirements, Milestones, and annual surveys and evaluations.
The Graduate Medical Education Office Handbook
GMENAS | $150
This book provides the office of graduate medical education (GME) the guidance it needs to successfully run its GME program. Author Vicki Hamm, C-TAGME, provides GME office staff with how-to guidance and tools for implementing ACGME Institutional Requirements, institutional policies, crafting resident/fellow contracts, and other daily duties of the GME office. This book contains over 20 sample policies and forms to customize for your institution.

The Graduate Medical Education Program Management Workbook
RPAWKBK | $50
This workbook includes knowledge application questions grouped by topic areas, listings of commonly used acronyms, and helpful GME resources. Program coordinators can use this workbook to create a self-learning plan, to aid in the creation of a procedural manual for their offices, to identify areas for personal and program improvement, and to prepare for ACGME continuous accreditation through education. Although created for the individual coordinator, this tool can also be purchased and distributed by GME offices as a way to support the education of their program managers and staff.

The Residency Coordinator Essentials Kit
pkRESCOKIT | $199
From ensuring their GME program meets accreditation requirements to making sure residents, faculty, and program directors have all the resources they need, everyone relies on the Residency Program Coordinator. But who (or what) can the coordinator rely on for guidance, tools, and advice on the dozens of tasks they might face every single day, all while growing as a leader?
The Residency Coordinator Essentials Kit is ideal for program coordinators looking to balance supporting their program with their daily responsibilities while growing exponentially in both leadership and management skills.

Residency Program Alert
RPA | $395
Residency Program Alert is the source of information that goes beyond the standards and regulations, giving you the practical advice, tools, and step-by-step strategies you need to maintain accreditation, improve your program, and make your daily tasks easier. This annual subscription provides expert compliance advice, best practices, and tips from well-respected in-the-trenches experts.

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CDIPG19CV | $165
This powerful resource provides essential information for the coder to excel in any setting. It clearly and concisely provides clinical definitions, diagnostic criteria, and treatment guidelines to accurately code and clinically validate the most important conditions; explains the crucial inpatient and outpatient coding of ICD-10 and E/M coding and guidelines, documentation requirements, and DRG tips; lists pertinent comorbid conditions (MCC, CC, HCC); and provides tips to improve E/M coding and physician querying along with MS-DRG and HCC tables, plus so much more.

CDI Pocket Guide—Outpatient, 2019
CDIPG19OP | $165
Let the new 2019 edition of the Outpatient CDI Pocket Guide show you how to master Hierarchical Condition Categories (HCC).

The 2019 Outpatient CDI Pocket Guide: Focusing on HCCs features an easy-to-understand approach, boiling HCCs down to a few basic principles that, when mastered, make them a breeze. Authors Richard Pinson and Cynthia Tang explain how HCCs affect both providers and payers and clarify the chief considerations in outpatient reimbursement, documentation, and coding guidelines.
2019 CDI Pocket Guide

CDIPG19 | $165

Each year, authors Dr. Richard Pinson and Cynthia Tang research, revise, clarify, and update the content of the CDI Pocket Guide. They capture significant changes in authoritative clinical diagnostic standards, the ICD-10 classification, DRG assignment, Official Coding Guidelines, and Coding Clinic and accommodate useful feedback from readers. They also provide the wisdom of their experience as consultants helping organizations sculpt their documentation and coding practices.

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JustCoding’s Clinical Scenario: 2019 CPT® Edition provides an opportunity for coders to practice and refine their skills in a hands-on way by using a wide range of real-life case scenarios. Coders will determine the correct CPT and ICD-10-CM codes to report for each case scenario based on provided documentation, evidence of sufficient medical necessity, and any conditions present that would allow for Hierarchical Condition Category capture.

JustCoding’s Clinical Scenario Workbook: 2019 ICD10PCS Edition

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With this workbook, coders will determine the correct ICD-10-CM and ICD-10-PCS codes to report for each case scenario based on provided documentation, evidence of sufficient medical necessity, and any conditions present that would allow for MS-DRG capture. This workbook also includes labeled illustrations for select cases to help coders by highlighting important anatomic details.

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Medicare Billing Edits: Solving NCCI and MUEs

MBEGRRR | $135

Claims returned with National Correct Coding Initiative (NCCI) edits or Medically Unlikely Edits (MUE) can easily be lost in the shuffle. It’s often not clear who is responsible for resolving an edit, and delays from other departments can hold up the process. Some hospitals may even write these claims off, leaving money on the table.

Resolving edits can be overwhelming, causing staff to work the same edits repeatedly, unless time and resources are spent to identify and fix the root cause of the problem. Medicare Billing Edits: Solving NCCI and MUEs will help readers understand Medicare claims edits and give them practical tools and information to efficiently handle these edits, helping to ensure compliance and protect revenue. This robust offering includes a book, webinar, FAQs, and downloadable resources that help break down the definition, resolution, and tracking of NCCI edits and MUEs.

The Essential Guide to Interprofessional Ethics in Hospital Case Management

EGETHHCM | $

Gain the ethical skills necessary to respond to workplace violence, bullying, and other ethical dilemmas. This new resource will help case managers navigate the ethical conundrums they face as they interact with one another, the healthcare team, and patients and families.

The Practical Guide to Clinical Trials Billing

PGCTBILL | $155

An array of solutions for every step in the clinical trials billing process, including trial submission and review board approval, charge capture and segregation, and denials management. The book delivers an inside look at the financial life cycle of clinical trials from three revenue integrity experts at university medical centers who manage the complexities of clinical trials billing on a regular basis.

The Essential Guide to Coding Audits

EGCA | $139

This book takes an in-depth look at the coding auditing process, ranging from external audits and accuracy rates to structuring your own internal coding audit program. This book can be your constant companion and reference throughout the audit-refining process, and is a must have for coding managers and coders looking to avoid denials and produce the most accurate claims possible.


CCDSES4G | $125

To help candidates prepare for this exam, the best-selling CCDS Exam Study Guide targets the test objectives and content outline prepared by the CCDS Certification Board, letting candidates focus their time on areas of CDI practice with which they are least familiar.

Also, the CCDS Exam Study Guide comes with an online practice exam, allowing prospective examinees to practice and get instant results—just like the certification exam offers.

Revenue Cycle
Medicare Compliance Essentials Training Compendium

MCETS | $205

HCPro has brought together seven of its most popular Medicare compliance training handbooks into a single collection, offering Medicare professionals a one-stop resource for regulatory and practical guidance. The Medicare Compliance Essentials Training Compendium is a full-size book featuring a brand-new introduction with guidelines on using the content and tools in each handbook for training purposes. The individual handbooks can also be downloaded and printed for training unlimited numbers of staff.

NAHRI’s Core Functions of Revenue Integrity

NAHRIEGRI | $155

This book provides a well-rounded perspective on revenue integrity, covering everything from payment systems and reimbursement methodologies to denial appeals and charge capture review. It is authored by six NAHRI advisory board members whose collective knowledge and experience will help revenue integrity professionals ensure their programs are running effectively and capturing revenue opportunities.

The Revenue Integrity Manager’s Guidebook

TRIMGB | $155

Have you ever been to a store where a product’s price tag didn’t match the price on the receipt? Or have you ever been over- or under-charged for time and materials? Whether you have an established revenue integrity department or are looking to form one, The Revenue Integrity Manager’s Guidebook is your all-encompassing reference guide to revenue integrity leadership. This book provides expert tips on developing and staffing a department as well as guidance on how to identify, monitor, and improve revenue accuracy.

The Essential Guide to Healthcare Payer Contracting

EGHPC | $155

Payer contracting is integral to ensuring facilities are paid appropriately for the services they provide. Unfortunately, both the contracting process and the payer contracts themselves can be difficult to navigate. Fortunately, The Essential Guide to Healthcare Payer Contracting takes all the guesswork out of the topic. This comprehensive book covers a range of payer contracting essentials to ensure it meets the needs of both seasoned professionals and those working on their first contract.

The Contemporary Guide to Patient Financial Services

CGPFS | $155

With healthcare’s rising costs, selective consumers, and constantly changing regulations, creating a stable and successful patient financial services (PFS) department that withstands industry changes and workplace turnover is integral to ensuring accurate reimbursement. This resource takes readers through a patient’s financial journey from pre-registration and scheduling through posting payments, managing collections, and tackling the denials and appeals processes.

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FG4 | $145

This book is the perfect companion to your Life Safety Code (LSC) compliance efforts. This portable, concise resource is a perfect on-site quick reference and will help you understand the requirements for healthcare and ambulatory occupancies, prepare for survey, and maintain your accreditation regardless of accrediting option.


LSC4 | $265

This self-study desk reference gives you the in-depth analysis of LSC requirements for healthcare and ambulatory occupancies, survey preparation, and how to maintain accreditation, regardless of accrediting option. The latest edition removes outdated code references and highlights changes to the LSC from the 2000 to 2012 editions, including changes to the 2012 edition to prepare for CMS adoption.
OSHA Program Manual for Medical Facilities
OSHASPM2 | $215
A thorough and efficient way to compile OSHA compliance plans, checklists, hard copies of OSHA regulations, and more. Keep your OSHA safety program strong with this manual for medical facilities. The OSHA Program Manual for Medical Facilities breaks down OSHA regulations and gives you the flexibility to customize sections to meet your facility’s specific needs.

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LSBTJC3 | $215
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HCSTT | $135
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CGEMM2 | $135
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Survey Success: A Hospital Guide to Mock Surveys
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The Infection Control Manual for Outpatient Settings
HHICM | $150
Many hospitals are acquiring or otherwise collaborating with physician practices, but these smaller settings don’t often have the dedicated infection control staff that larger facilities do. In most offices, infection control falls to medical assistants—who have little professional training on the subject. The Infection Control Manual for Outpatient Settings explains the steps physicians and their staff should take to protect patients, employees, and the environment and prevent the spread of infectious diseases.

Hospital Safety Center
BHS | $555
The world of hospital safety is constantly changing, whether it’s complying with new requirements from CMS and The Joint Commission, being ready for a natural disaster, or dealing with violence in the emergency department. Hospital Safety Center provides everything you need to reduce your risk, stay compliant with regulators, and train your staff. This online resource cuts through the regulatory clutter, delivering only the most practical up-to-the-minute information related to healthcare safety, as well as the tools and expert advice that safety officers need to get their job done right.

Medical Environment Update
MEU | $275
Medical Environment Update is a monthly resource that keeps safety professionals up to speed with the always-changing policies of OSHA, CDC, EPA, and other healthcare regulatory agencies. Each month, you’ll discover workplace health and safety tips written with facilities like yours in mind.

USP <800>: How to Prepare for the New Hazardous Drug Handling Requirements
HDRUSP800 | $165
USP <800>: How to Prepare for the New Hazardous Drug Requirements is the resource you need to understand the best practices of hazardous drug disposal. This detailed how-to guide on USP compliance, authored by Kurt Patton, MS, RPh, will approach the topic from the perspective of a Joint Commission survey.

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