



Conquering PECOS: What You Can Do!

Sponsored by: GAMES

Registration Fee: \$59.00

I would like to (please select one):*

- Attend the webinar, please send the login information.
- Purchase a digital recording, as I am unable to attend.

*Attendees will receive handouts and login information 1-2 business days prior to the event. Recordings will be e-mailed within 24hrs of the event's end.

I prefer to attend on this date (please select one):

- Monday, November 23, 2009 – 2pm EST/11am PST
- Tuesday, November 24, 2009 – 2pm EST/11am PST

The webinar will last approximately 1 hour and will be followed by a Q&A session. For more information on this webinar, please call Michelle @ (803) 462-9959, ext 252.

Andrea Stark is a Medicare consultant and reimbursement specialist for medical equipment suppliers and pharmacies. She founded MiraVista LLC after working for the Region C DMERC, and now provides consulting and education services throughout the country. She also operates a third party DME billing company, ClaraVista LLC. Stark can be reached via e-mail: andrea@miravistallc.com.



Are PECOS warnings taking over your GEN reports? Are you struggling to get your physicians educated and enrolled in PECOS? You're not alone!

In response to the tremendous impact PECOS edits will have on a provider's bottom line, DME consultant and reimbursement specialist Andrea Stark is offering a special webinar to help state association members take advantage of early Phase I rejection warnings.

This webinar will provide you with a clear understanding of the PECOS system and how the editing process affects your claims.

We'll also address the latest updates from CMS, physician education initiatives and steps you as a provider can take to mitigate rejections on January 4, 2010.

Andrea will hold a live Q&A session at the end of the webinar to help you determine how to prioritize your rejections and best educate your referral sources.

Contact Person: _____

Company Name: _____

Company Address: _____

Telephone#: (____) _____ - _____

Fax#: (____) _____ - _____

Email Address: _____

Payment Information: Your Visa, MC, Amex or Discover will be billed for the amount indicated. Your credit card statement will reflect a charge from MiraVista, LLC. Attendees who are unable to make the event may request a copy of the recording.

Fax Form to: (803) 758-2450

Please confirm the following:

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I am a member of GAMES, and

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I authorize a one-time charge of **\$59.00**.

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(3 digit # on back of card .AmEx is 4 digit # on front)

Card #: _____ Exp. Date: _____