

Nebraska Home Care Association



Summer Listening Tours--We're Coming To You!!!



Don't Miss Out On This Networking Opportunity

Meet with fellow home care administrators, clinical, billing and administrative staff to share ideas, resources and information. Provide feedback about how the Nebraska Home Care Association can continue to serve, support and advocate for you, and your agency or company and your clients.



JOIN US TO LISTEN AND SHARE



This is a FREE event, but please register on page 2 or click here to register online at www.nebraskahomecare.org.

Snacks, water and soft drinks will be provided.

Tuesday, July 10th, 2018

2:00 - 4:00 p.m.

Visiting Nurse Association

Conference Room

12565 W Center Rd #100

Omaha, Nebraska

Thursday, July 12th, 2018

2:00 - 4:00 p.m.

Mary Lanning Healthcare

Basement Conference Room 1

715 N St. Joseph Ave

Hastings, Nebraska

Friday, July 20th, 2018

1:00 - 3:00 p.m.

Great Plains Health

Education Conference Room B

601 West Leota

North Platte, Nebraska

Topics to be discussed include:

Online Registration click [HERE](#)

- Conditions of Participation and how members are implementing them
- Face-to-face requirement
- Billing for Medicaid
- Recruiting more nurses and clinicians into the home health field and employee retention strategies
- Consolidating billing
- HHCAPPS and how agencies are dealing with them
- Value-Based Purchasing
- Challenges in delivering home care in rural areas of Nebraska
- Technology and telehealth
- Finding creative ways to generate revenue
- Private duty issues - workforce recruitment and retention; electronic visit verification; how to bill for Medicare Advantage Plan clients

Please indicate which Listening Tour you will be attending:

- Tuesday, July 10th in Omaha
- Thursday, July 12th in Hastings
- Friday, July 20th in North Platte

Send Registration to:

Nebraska Home Care Association
1633 Normandy Ct., Suite A
Lincoln, NE 68512
Email: nebraskahomecare@assocoffice.net
(402) 423-0718
www.nebraskahomecare.org

Names of Participant(s) and Credentials (if applicable)

1.	_____	Email :	_____
2.	_____	Email :	_____
3.	_____	Email :	_____
4.	_____	Email :	_____
5.	_____	Email :	_____
6.	_____	Email :	_____

Agency/Company: _____

Address: _____ City: _____

State: _____ Zip: _____

Phone: _____