

Wednesday, September 24th

Keynote Presentation: 9:00 a.m. – 10:30 a.m.

101 – State Representative - TBD

Day 1 - General Session: 10:45 a.m. - 12:15 p.m.

**102 - What's Old is New: Legal and Regulatory Update 2025
- Robert W. Markette, Jr.**

The 2024 election saw the reelection of Donald Trump and the republican party sweep control of both houses of Congress. This will result in changes in enforcement focus, promulgation of regulations and more. While this is one of the biggest changes that will impact the homecare industry, there are a number of other changes that will impact providers in 2025. These changes include the results of federal litigation challenging the DOL salary rule, the FTC non-compete rule and the FINCEN reporting rule. There were key changes in both the hospice and home health rules. There continues to be a significant focus on home health and hospice fraud, which has led to significantly increase scrutiny. We are also facing changes at the state level, including pushes to revise background check requirements, Medicaid Managed care rollout and more. This session will review the legal and regulatory changes facing the industry in order to provide guidance to providers regarding what to expect in 2025.

Learning Objectives:

- Attendees will understand the major statutory and regulatory changes at the state and federal level impacting home health, hospice and private duty providers.
- Attendees will understand how these changes impact their operations and what operational and related changes are necessary for compliance.
- Attendees will learn key considerations for compliance strategies so that they can take steps to ensure compliance at their agency.

Hall, Render, Kilian, Heath & Lyman, P.C.

Day 1 - Concurrent Sessions: 1:45 - 3:15 p.m.

**103 – 2026 ICD-10-CM October Updates and Coding Matters: Understanding the Impact on Your Agency
- Jennifer Osburn**

Diagnosis coding impacts your business in so many ways, from the clinical grouping to comorbidity adjustments, care planning to risk adjustment for VBP measures, and even HIPAA compliance. Get the latest information on October 1, 2025 updates for FY 2026 ICD-10-CM, from new codes, new guidance, and changes to Guidelines and Conventions in this session. Knowing the details of how diagnosis coding impacts your revenue and patient care is an important part of ensuring you are following the standards and receiving proper payment for the care you deliver. This webinar will review the importance of accurate diagnosis coding for your home health agency.

Learning Objectives:

- Attendees will list new, changed, and deleted ICD-10-CM codes for FY 2025 in the October 1, 2025 update.
- Attendees will identify official Coding guidelines for accurate reporting of new and changed diagnoses.
- Attendees will demonstrate understanding of impact of diagnosis coding on their revenue, patient care and compliance with regulatory requirements.

Healthcare Provider Solutions

**104 – “It’s Just Part of the Job”: The Leadership Trap We Need to Leave Behind - How to Build a Proactive Workplace Violence Safety Committee That Goes Beyond the Bare Minimum
- Jonas Fortenberry**

In home-based care, caregiver safety risks—escalating behaviors, unsafe homes, unreported threats—are often brushed off as “just part of the job.” But regulations require providers to take real action. This session explores how to build or strengthen a workplace violence prevention committee that earns caregiver trust, leadership support, and regulatory alignment. You’ll leave with practical strategies and real-world examples from agencies who’ve done the work—what’s worked, what’s changed, and how it’s shaped their culture. Silence isn’t safety—and “just part of the job” can’t be the standard anymore.

Learning Objectives:

- Understand the role a WPV committee plays
- Develop an effective committee structure
- How to implement proactive safety strategies

105 – 2025 Medicare Home Health Workshop Part 1 - TBD

Palmetto GBA is pleased to announce our 2025 Home Health Workshop series titled “Thrive with Medicare in 2025.” These workshops are designed to equip home health providers with the tools they need to be successful with Medicare billing, coverage and documentation requirements.

The “Thrive” workshops will provide insight for home health agency staff at all levels. However, we do suggest that providers who are new to Medicare, or have new staff, attend our online learning courses for beginners at www.PalmettoGBA.com/hhh. Basic billing and other online educational resources can be found by accessing the **Events and Education** topic at the top of the page.

Errors in billing and responding to additional documentation requests can be costly. During the workshop series, Palmetto GBA will provide information related to the most common errors and why these errors occur. We will also provide tips to avoid these errors. Palmetto GBA’s goal is to educate providers on the most up-to-date information and apply skillful techniques to their documentation and billing practices.

Workshop Topics for Part I

- Improper Payments
 - Insufficient Documentation
 - Face-to-Face
 - SBAR Communication
 - Medical Necessity
 - Home Bound
 - Nursing Medical Necessity
 - Therapy Medical Necessity
- Case Studies/Patient Scenarios

Palmetto GBA

106 - Enhancing CAHPS Scores through a Modern Family Experience - Cara Abbott

Family caregivers shape every episode of care yet remain largely unsupported. Using data from thousands of admissions, Cara Abbott shows how simple, human-centered digital touchpoints—texting cadences, real-time feedback, and 13-month bereavement follow-up—lift CAHPS “Communication with Family,” increase referrals, and cut costs. Attendees get case studies, a plug-and-play micro-learning toolkit for staff, and clear steps to turn families into powerful drivers of quality, growth, and loyalty.

Learning Objectives:

- Add 1+ point to CAHPS “Communication with Family” — in one quarter
- Turn happy family caregivers into referral magnets — increasing google reviews
- Provide real-time positive feedback to staff — increasing engagement
- Prove dollar-for-dollar ROI to your CFO
- For Hospice — modernize your CMS required bereavement services

Betterleave

Day 1 - Concurrent Sessions: 3:30 - 5:00 p.m.

107 – The Transparency of Care: OASIS E1 with 2025 HHVBP Insights - Jennifer Osburn

How does the public, insurance companies, and CMS know your agency’s quality of care? DATA!! The OASIS data set was designed to collect data for comparison of processes and patient outcomes among home health agencies, and your data tells your story. Understanding the latest OASIS E1 updates and OASIS-Based Value Based Purchasing measures is a key step in ensuring your data accurately reflects the work of your agency’s superheroes. Learn new, changed, and deleted OASIS items as well as guidance for selected items that could be impacting how your agency’s story is publicly reported.

Learning Objectives:

- Attendees will list new, changed, and deleted items in OASIS E1.
- Attendees will identify official CMS OASIS guidance for accurate collection of data for new and changed OASIS items.
- Attendees will demonstrate understanding of changes to HHVBP OASIS-based measures for PY 2025.

Healthcare Provider Solutions

108 – Audits 2025: Considerations for responding to payer audits - Robert W. Markette, Jr.

Home health and hospice scrutiny continues at a high level. Providers are subjected to a myriad of audits – TPE, RAC, MAC, UPIC and more. Providers need to be prepared to respond to audits and the results of those audits. Provider’s need to be prepared to respond to ADRs to ensure claims are not denied merely for lack of a response. More

importantly, providers need to be prepared to appeal demands from Auditors. This is crucial, as the provider's response to the first and second levels can significantly impact litigation in front of the ALJ. This session will review the audit and appeals process. We will then address processes and considerations for responding to recoupment demands, including the use of consultants, when to involve counsel, and addressing extrapolations. We will also address some compliance efforts designed to identify and prevent issues prior to an audit.

Learning Objectives:

- Attendees will understand the Medicare audit and appeals process.
- Attendees will learn key strategies for preparing for and responding to audit requests.
- Attendees will understand important considerations in pursuing Medicare payer appeals, including when to involve counsel.

Hall, Render, Kilian, Heath & Lyman, P.C.

109 – 2025 Medicare Home Health Workshop Part 2 - TBD

Workshop Topics for Part II

- 2025 Final Rule Summary
 - Prospective Payment System (HH PPS) Rate Update
- Home Health Updates
 - Expanded Home Health Value-Based Purchasing (HHVBP) Model Overview
 - Revisions to Home Health Edit Matching Claims to Notices of Admission
 - Allowing Home Health Telehealth Services During an Inpatient Stay
 - Medicare Advantage Overview
- Palmetto GBA's eServices Portal
 - eServices' Newest Self-Service Tools and Updates
- Overview of the Targeted Probe and Educate (TPE) Process or Home Health Review
- Choice Demonstration (RCD)
- Provider Enrollment Updates
- CERT Overview
- Educational Resources for Providers

Palmetto GBA

110 - Establishing Clear Protocols: 404.105(i) and the Home Health Acceptance Process
- Wendi Tingley

This presentation will examine 404.105(i) and its implications for the home health agency acceptance-to-service process. Attendees will learn how to develop and implement clear, compliant protocols for evaluating patient eligibility, documenting service acceptance decisions, and ensuring alignment with regulatory expectations.

Kentucky Home Care Association

Thursday, September 25, 2025

Keynote Presentation: 8:30 – 10:00 a.m.

201 – Care at Home 2025: State of the Movement & Washington Update
-Dr. Steven Landers, CEO of National Alliance for Care at Home

Description coming soon!

National Alliance for Care at Home

Day 2- Concurrent Sessions: 10:15 – 11:45 a.m.

202 – Ensuring 100% EVV Visit Success: Best Practices for Administrators, Caregivers and Schedulers
- Julio Barea

Master EVV compliance with strategies for accurate clock-ins, fewer manual corrections, and smoother billing. Perfect for caregivers, schedulers, and administrators looking to simplify processes!

Learning Objectives:

- Master accurate clock-in and clock-out practices to reduce errors.
- Learn strategies for schedulers to minimize disruptions and improve visit tracking.
- Ensure complete audit compliance with EVV regulations.
- Reduce manual adjustments in billing workflows for faster claims submissions.
- Optimize team communication to streamline EVV success across your agency.

CareTime

203 – Social Determinants of Health: Identifying and Addressing Health Related Social Needs for Better Outcomes

- Jennifer Osburn

Social Determinants of Health are known to impact outcomes, and are a current focus of CMS. This session will look at current data trends, the SDOH items in OASIS E1, proposed SDOH items coming in 2027 and why this data is being collected. Additionally, learn how developing the plan of care with patient's health-related social needs in mind can improve your agency's quality and VBP outcomes.

Learning Objectives:

- Identify how SDOH factors impact hospitalization rates and patient outcomes.
- Verbalize understanding of the OASIS items and professional assessment items that help identify patient's social needs.
- Learn proven measures to address health related social needs to improve patient outcomes.

Healthcare Provider Solutions

204 - Homecare Employment 2025: New administration, same concerns

- Robert W. Markette, Jr.

With a new administration taking over, DOL and EEOC enforcement priorities may shift. Recent court decision, such as Texas v. DOL and Ryan LLC v. FTC have resulted in federal regulations regarding salary basis of payment and noncompete agreements being struck down. These changes impact employers' efforts to comply with FLSA, Title VII and other employment laws. Homecare providers will continue to face challenges when trying to comply with these laws. This session will review recent trends, court rulings, as well as, other changes and common compliance issues, including employee classification, workplace harassment, travel time and other issues. We will then discuss compliance strategies to assist providers to maintain compliance.

Learning Objectives:

- Attendees will understand recent trend in employment laws and enforcement.
- Attendees will learn common compliance concerns and responses.
- Attendees will understand key strategies for achieving and maintaining compliance.

Hall, Render, Kilian, Heath & Lyman, P.C.

205 - Age Friendly Health Systems - Eugenia Smither

The US population aged 65+ years is expected to nearly double over the next 30 years, from 43.1 million in 2012 to an estimated 83.7 million in 2050. These demographic advances, however extraordinary, have left our health systems behind as they struggle to reliably provide evidence-based care to every older adult at every care interaction. In this session we will review the Age-Friendly Health System Initiative, a collaborative effort of the Institute for Healthcare Improvement, the American Hospital Association, Catholic Health Association of the US, and the John A Hartford Foundation.

Learning Objectives:

- Discuss the Framework of an Age-Friendly Health System
- Discuss how this assists in caring for Older Adults and The Three Keys to Cross – Sector Age- Friendly Care
- Discuss some specifics in using the Framework in Home health

Bluegrass Care Navigators

Day 2- Concurrent Sessions: 1:15 – 2:45 p.m.

206 - HIPAA - Robert W. Markette, Jr.

More information coming soon!

Hall, Render, Kilian, Heath & Lyman, P.C.

207 – Preparedness, Planning, and Compliance: Emergency Requirements for Kentucky Home Health Agencies - Wendi Tingley

This session will provide an in-depth overview of the emergency preparedness requirements for Kentucky Home Health Agencies, focusing on compliance with federal and state regulations. Attendees will gain practical guidance on developing and maintaining a comprehensive Emergency Preparedness Program that addresses risk assessment, communication planning, policies and procedures, and staff training and testing, in alignment with 42 CFR §484.102 and related state-specific mandates.

Kentucky Home Care Association