

Healthcare Conference

registration form

Please use a separate form for each registrant. Registration forms may be photocopied. **PLEASE PRINT OR TYPE.**

Course #: 616

Name: _____ Nickname: _____

TSCPA Member Number: _____ Preferred Mailing: Home Work

Business Name: _____

Address: _____ PO Box: _____

City/State/ZIP: _____

Daytime Phone: _____ Fax: _____

E-mail: _____

Please select which concurrent sessions you wish to attend:

Monday • Nov. 30

12:40 – 1:30 p.m. (please select one)

- The Revenue Cycle - A "Reformed" Approach
- The Changing Face of ASCs
- Standards for Tennessee CPAs: Important Ethical Concepts, Principles and the Rules for CPAs in Tennessee

1:55 – 2:45 p.m. (please select one)

- TMA Update
- THA Update
- Current Developments in the Nursing Home Industry

Tuesday • Dec. 1

10 – 10:50 a.m. (please select one)

- Hospital and Physician Arrangements - The Dos and Don'ts Under Federal Fraud and Abuse Laws
- Standards for Tennessee CPAs: Important Ethical Concepts, Principles and the Rules for CPAs in Tennessee

10:55 – 11:45 a.m. (please select one)

- 16. Healthcare Tax Update
- CMS's Recovery Audit Control Program (RAC): Illusion vs. Reality

2:45 – 3:35 p.m. (please select one)

- Accounting Update
- EMR: Tying Patients Closer to Your Practice

Check here if this is a change of address.

Check all that apply: CPA Not a CPA TSCPA Member Non-Member HFMA

PAYMENT INFORMATION (Credit card registrations may be faxed to 615/309-8054 or 615/377-3904.)

Your Total: \$ _____ Charge To: MasterCard Visa

Cardholder Name: _____

Card Number: _____ Expiration Date: _____

Credit Card Security Code (last three digits on back of credit card): _____

Cardholder Signature: _____

Check enclosed payable to:

Educational & Memorial Foundation of TSCPA 201 Powell Place, Brentwood, TN 37027

If you have special needs under the Americans with Disabilities Act, please attach a written description or call the society office at 615/377-3825 or 1-800/762-0272.

TSCPA reserves the right to change any portion of this program due to unforeseen circumstances.