

Spring 2010

Membership Conference and Tradeshow

Program Agenda

Wednesday, March 10, 2010

- 8:30 a.m.—3:00 p.m. Registration/Continental Breakfast
- 9:00 a.m.—9:30 a.m. President's Welcome and State of the Association
Bob Hawley OKAMA, President
Jimmy Johnson, Treasurer
- 9:30 a.m.—10:00 a.m. BREAK/Vendor Time
- 10:00 a.m.—11:30 a.m. Medicaid
Lisa Gifford, Oklahoma Health Care Authority
- 11:30 a.m.—1:00 p.m. LUNCH/Vendor Time
- 1:00 p.m.—2:00 p.m. Emergency Medical Services for Children
Stacy Morton, EMSC Program Coordinator
- 2:00 p.m.—2:30 p.m. BREAK/Vendor Time
- 2:30 p.m.—4:00 p.m. "TrailBlazers/Medicare Part B Update"
Gail Atnip, Medicare Part B Provider Specialist,
TrailBlazers Health Enterprises

Oklahoma
Ambulance
Association



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Speakers and Topics

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Lisa Gifford, TPL Claims Director

Medicaid– Submitting Claims and Avoiding Errors

Lisa, who works for the Provider Education Department of the Oklahoma Health Authority (Medicaid) will be providing education and information on submitting claims and avoiding claim errors. There will be ample time for audience interaction, examples, and questions and answers.

Stacy Morton, EMSC Program Coordinator

Establishing and Maintaining a Partnership Between EMSC and EMS Agencies

Currently, in Oklahoma data suggests there are significant gaps in the care provided to children. Through a partnership between EMSC and EMS Agencies around the state, we can work to bridge those gaps to ensure all children in Oklahoma receive appropriate care with appropriate equipment at the appropriate time. This presentation aims to introduce to EMS administrators the need for their assistance, the results of data collected in previous years and method for improvement.

Stacy is the Program Coordinator for the Oklahoma Emergency Medical Services for Children Program. She is a Nationally Registered EMT-Paramedic with rural EMS, urban EMS and flight EMS experience. Stacy has her Master's in Healthcare Administration and is a frequent lecturer on pediatric topics including; Pediatric Airway, To Breath or Not To Breath, Recognizing Child Abuse and A Historical Perspective of EMSC.

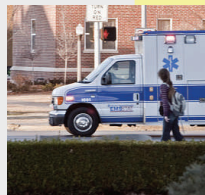
Gail Atnip, Medicare Part B Provider Relations Specialist, TrailBlazer Health Enterprises, LLC

Working with TrailBlazer

TrailBlazer is the combined administrator of Part A and Part B Medicare fee-for-service claims for Oklahoma providers. In this session Gail will provide an update to providers. Questions will be addressed during the session.

Gail is employed by TrailBlazer Health Enterprises, LLC, and has worked with Medicare Part B since 1978. She is a Medicare Provider Outreach and Education Specialist where she has served providers for the past 10 years. Her specialties are Ambulance and Physical Medicine.

Gail has extensive background with Medicare Part B policies and claims processing. She has held various positions in the Medicare division, including beneficiary and provider customer service and telephone and written appeals.



Vendor OKAMA Spring 2010 Registration

Please fill out this form and return with a check to:

OKAMA
2504 W Owen Garriott #302
Enid, OK 73703

Or Fax to : 1-866-464-7799

Company _____

Contact _____

Representative attending _____

Phone: _____ Mobile: _____

Email address: _____

Special Information: _____

Member Table (\$25 each)

Number of tables _____

We would like to sponsor:

() Lunch \$500

() Morning break \$250

() Afternoon break \$250

Please contact Ann Athey for further information aathey0070@aol.com or

Steve Athey mobile 940-367-3280

OKAMA Spring 2010 Participant Registration

Please mail the conference registration to:

Oklahoma Ambulance Association
2504 W. Owen K. Garriott #302
Enid, OK 73703

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FAX to:
1-866-464-7799

Payments made after March 1, 2010 may be made at the registration desk.

Please Print

Organization _____

Address _____

1. Attendee Name and Title _____

2. Attendee Name and Title _____

3. Attendee Name and Title _____

4. Attendee Name and Title _____

Registration Fees:

First OKAMA Member/agency is free -0-

Additional persons, \$25 each _____

Non-Member \$100 1st person _____

Non-member additional persons, \$50 ea _____

TOTAL DUE _____