



Lost in Translation: *Bridging the Post-Acute Care Gap to Reduce Readmissions*

Webinar IA0621

Wednesday, June 21, 2017
10:00 a.m. – 11:00 a.m. (CDT)

Overview

The Improving Medicare Post-Acute Care Transformation (IMPACT) Act helps assess the health status of individuals as they transition between acute and post-acute care settings. If these care settings are not “speaking the same language” by collecting and reporting on different health criteria, this can hurt quality measures and contribute to readmission penalties in both care settings. This presentation will address this issue and much more.

Target Audience

CNOs, Nurses and Quality Directors and Staff

Objectives

At the conclusion of this webinar, participants will be able to:

1. Describe the highlights of the IMPACT Act legislation
2. Identify how these changes align with and influence hospital goals
3. Discuss how to integrate the post-acute care setting with hospital efforts

Faculty

Kate LaFollette, RN is a program specialist at Telligen. She received her nursing degree from the Iowa Methodist School of Nursing in Des Moines, Iowa. She has more than 20 years of experience in nursing and has worked as a charge nurse in a skilled care unit, adult med/surg, internal medicine triage and as an outpatient quality director. Currently her duties at Telligen include coordination and implementation of Medicare quality improvement initiatives reducing hospital readmissions and improving transitions of care. This includes assisting communities to form coalitions, develop, implement and measure pilot programs and providing tools, resources and education to health care providers.

Certificates of Attendance

Certificates of Attendance will be issued to all registrants. These certificates should be placed on file at your hospital as evidence of attendance. Certificates of Attendance will not be awarded for recorded sessions.

Registration

\$175 for AHA Member Hospitals

Registration includes **one** internet connection and **one** telephone connection at **one** location, although there can be an unlimited number of participants from your organization in that **one** listening room.

Two days prior to the event, you will receive instructions and passwords for accessing the event, along with the slide presentation and other resource materials. It is the responsibility of the registrant to download and/or access presentation materials prior to the day of the event.

Participants should register at least five business days prior to the event to ensure optimal processing of conference materials. To register, please submit the attached registration form. If you have not received an e-mail with instructions ([via the e-mail provided on the registration form](#)) or if you are unable to download or open presentation materials, at least two business days prior to the event, please contact Anna Sroczynski at 501-224-7878 or asroczynski@arkhospitals.org. **Without payment (via check or credit card), your registration cannot be processed, and you will not receive connection instructions.**

Cancellation Policy

Refunds, minus a \$25 processing fee, will be granted if requests are received in writing by the AHA at least 5 business days prior to the program. No refunds will be issued after that date. Fax cancellation/refund requests to the Education Department at 501-224-0519.

(Registration Form on Next Page)

REGISTRATION FORM

Lost in Translation: *Bridging the Post-Acute Care Gap to Reduce Readmissions*

Webinar IA0621

Wednesday, June 21, 2017

Registration Fee

\$175 for AHA Member Hospitals

Registration fee covers one or multiple participants at one location (**one connection per registration**) and includes one set of instructional materials/handouts. Upon receipt, additional handouts can be copied.

Name and Title of Contact Person _____

Organization _____

Mailing Address _____

City, State, Zip _____

Telephone _____ Fax _____ E-mail _____

Method of Payment

Check in the amount of \$_____ payable to the Arkansas Hospital Association is enclosed.

Credit Card # _____ Visa MasterCard *(AmEx and Discover Not Accepted)*

Cardholder's Billing Address (including zip code) _____

Expiration Date _____ Name on card _____

Signature _____ Card Holder's Phone # _____

Mail form and payment to

Education Department, Arkansas Hospital Association, 419 Natural Resources Drive, Little Rock, AR 72205; phone: 501-224-7878; or fax form with credit card information to 501-224-0519.