

# Finding the Dollars: Thriving Through Health Care Payment Reform

**You're Invited to a Free Dinner Seminar**

Join athenahealth for a private dinner at The Beechwood Hotel on March 19, and discover a steady path to financial health during this turbulent, rapidly changing time in health care.

Getting paid for the care you deliver is becoming exceedingly more complicated, especially as new reimbursement models and government requirements converge over the next few years. To thrive through this period of change, you'll need to seize new incremental revenue and capture every dollar you earn more efficiently. All while staying focused on patient care and satisfaction.

**At our March 19<sup>th</sup> dinner event, we'll discuss critical information and tips for:**

- ▶ Earning up to 8% additional revenue from Pay-For-Performance incentives—without slowing productivity
- ▶ Achieving Stages 1 and 2 of Meaningful Use—while avoiding upcoming financial penalties
- ▶ Capturing patient payments more quickly and efficiently—without having to write off losses

We'll also look at what it will take to manage all of this against the looming backdrop of the ICD-10 code set transition. You'll learn how the right partner and a cloud-based service can enable you not only to survive these challenges, but to get paid more for delivering quality care.



**Join us on March 19<sup>th</sup> at 6:00 p.m.**

## The Beechwood Hotel

363 Plantation Street • Worcester, MA 01605

6:00 p.m. Registration, Cocktails

6:30 p.m. Presentation and Dinner

7:30 p.m. Questions and Networking

## Register today:

- ▶ Fax registration form on back
- ▶ E-mail information on form to [seminars@athenahealth.com](mailto:seminars@athenahealth.com)

This is a private event by invitation only, seating is limited.



# Dinner Seminar Registration Form

**The Beechwood Hotel • Worcester, MA**

**Tuesday, March 19, 2013 • 6 pm**

**This complimentary dinner discussion is invitation-only. Seating is limited.  
To register to attend, please fax this form to 888.512.8436.**

## Registration Form

☐ Yes, I plan to attend; please see the information below

☐ Unfortunately, I cannot attend; but I am interested in learning more about athenahealth

Number of attendees: \_\_\_\_\_

Full name: \_\_\_\_\_

Title: \_\_\_\_\_

Practice name: \_\_\_\_\_

Phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Specialty: \_\_\_\_\_

Number of physicians in your practice: \_\_\_\_\_

## Additional Attendee Information

Full Name	Title	Email Address	Phone #
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Full Name	Title	Email Address	Phone #
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Full Name	Title	Email Address	Phone #
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