Learning Center

Jurisdiction L (JL) Educational Events Calendar

Join us for one of our engaging live educational events. Learn more about the Medicare program and discover ways to improve the accuracy and efficiency of your Medicare credentialing or billing process by participating in the free educational events hosted by us. MAC JL includes providers located in Delaware, Maryland, New Jersey, Pennsylvania, and the Washington D.C. Metro Area (Arlington and Fairfax counties in Virginia, the city of Alexandria, VA, the District of Columbia, and Montgomery and Prince George’s counties in Maryland).

[Jump to events >>](#Events)

Event registration is easy!

Access to our events is free with no required accounts to manage. Simply complete a few fields in our registration form and you are ready to participate. Click [here](ddocname:00081806) to learn more about the process.

Continuing education units (CEUs)

CEUs may be awarded for successful completion of an educational event (e.g., 1 CEU per 60 minutes of attendance). Attendees must participate in the event in its entirety to be eligible for a completion certificate containing the CEU. Completion certificates will be available within 3 - 5 business days after the event within the [MyCEUCertificate Gateway](ddocname:00271305).

Click [here](ddocname:00271305) to learn more about CEUs.

Accessing your CEUs is now easier, faster, and better!

Completion certificates are available via the [MyCEUCertificate Gateway](ddocname:00271305) located on the Novitas website under the Learning Center. Click [here](ddocname:00081806) to learn more.

Assistance is available

Need help registering, starting a class, or accessing your completion certificate? Access our step-by-step tutorials:

* [Learning Center Step-by-Step Tutorial: Event registration, participation, and handout access](ddocname:00272720)
* [Learning Center Step-by-Step Tutorial: MyCEUCertificate Gateway](ddocname:00272719)

If you still need help, email us at [LearningCenterHelpDesk@novitas-solutions.com](mailto:LearningCenterHelpDesk@novitas-solutions.com).

**Target audience:**

Part A - Part A (facility services billed on a CMS UB-04 claim form or an electronic equivalent)

Part B - Part B (professional services billed on the CMS-1500 claim form or an electronic equivalent)

New provider - New provider (providers, billers, coders, office staff, etc., new to the Medicare program or looking for a refresher)

All times listed are in the Eastern Time Zone.

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| --- | --- | --- | --- | --- |
| Date | Audience Focus | Eastern\_Time (ET) | Event Description | CEUs |
| Tuesday, July 29, 2025 |  | Start:  2:00 p.m.  End  3:30 p.m. | Medicare Part A Updates - July 2025  This event is a review of the most recent Medicare updates and typically contains a wide variety of topics which include, but are not limited to, MAC initiatives, CMS initiatives, quarterly and annual updates, as well as preventive service reminders.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rf52fabfaaf1b057116f5d6e2f85aa61f) | 1.5 |
| Wednesday, July 30, 2025 |  | Start:  10:00 a.m.  End  11:30 a.m. | Avoiding Part B Claim Errors: April 2025 - June 2025  This webinar will focus on the most frequent Part B rejected and denied claim errors. Join us as we review critical steps and resources to avoid common claim submission errors. Learn how to identify and prevent these claim errors.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r090b7a2371a197ec9b50cdec1d4230b6) | 1.5 |
| Wednesday, July 30, 2025 |  | Start:  1:00 p.m.  End  2:00 p.m. | Cotiviti-Recovery Audit Contractor for CMS Regions 3 and 4  This presentation reacquaints Region 3 and 4 providers with Cotiviti, offers an overview of the Medicare Fee-for Service Recovery Audit Program and demonstrates the features and functionality that equip providers to comprehensively respond to audits through the Cotiviti CMS Provider Portal.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rc8e6e2e6ff81360307cb53f2fdfc3107) | 0.0 |
| Wednesday, July 30, 2025 |  | Start:  2:00 p.m.  End  3:00 p.m. | Medicare Covered Dermatology Services  Medicare may cover dermatology services when reasonable and necessary for the prevention, diagnosis and treatment of certain skin conditions. Join this session to review the Medicare guidelines for dermatology services. This session will provide an overview of the Medicare coverage policies, how to find them and what to do if one does not exist for dermatology services. This session will highlight the medical policy, documentation and billing requirements for Mohs Micrographic Surgery (MMS). We will conclude with a review of the billing guidelines for evaluation and management services when provided on the same day as dermatology services within a global surgical period.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r4bae9ff7b1648d394b2752157f48f06e) | 1.0 |
| Thursday, July 31, 2025 |  | Start:  10:00 a.m.  End  11:30 a.m. | Medicare Part A Payment System: Inpatient Prospective Payment System (IPPS)  The Social Security Act sets forth a system of payment for the operating costs of acute care hospital inpatient stays under Medicare Part A based on prospectively set rates. This payment system is referred to as the inpatient prospective payment system (IPPS). Join this webinar to learn the ins and outs of the IPPS including the factors that make up the IPPS and how the IPPS rate is determined.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rbb571822093ec8fcb4ce80e8568f1b9b) | 1.5 |
| Thursday, July 31, 2025 |  | Start:  1:00 p.m.  End  2:30 p.m. | Medicare Navigator Provider Enrollment: Maintaining the Enrollment Record  The Medicare Navigator Provider Enrollment series promotes compliance with initial enrollment, record maintenance and revalidation for a variety of Medicare facility, provider and supplier types. Providers are required to keep all enrollment information on file current requiring the reporting of changes to the provider's personal information, adverse legal status and more to the Medicare Administrative Contractor (MAC) within a defined period of time. This webinar will identify the changes providers are required to report and in what timeframe, outline how those updates can be reported and review potential penalties for failing to report.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rfe1f7678eb99bf5aadd722d1468d0e2e) | 1.5 |
| Tuesday, August 5, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Novitasphere Portal Series: Novitasphere Enrollment  Join us for a commitment-free demonstration of the enrollment process for Novitasphere, our free, secure internet portal available for use by our JH and JL providers, facilities, billing services, clearinghouses and support staff. During this webinar, we will provide an overview of the Novitasphere enrollment process as well as the registration process for the CMS Identity and Management (IDM) system. We will also define the various roles for Novitasphere Portal users.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rc9e54fc5a1ab25db178e77ba054ac835) | 1.5 |
| Tuesday, August 5, 2025 |  | Start:  12:00 p.m.  End  1:30 p.m. | StayConnected: Exploring the Medicare Requirements for Non-Physician Practitioners (NPP)  Explore Medicare’s guidelines for a non-physician practitioner (NPP) by attending the series, "The Role of a Non-Physician Practitioner". The first webinar of the series will highlight the various types of NPPs and define the qualifications they must meet to enroll in the Medicare program. We will conclude with a review of various billing scenarios, supervision and collaboration options.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rf9f76ee292ee4fb338454a30ccb82746) | 1.5 |
| Wednesday, August 6, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | StayConnected: Enrolling a Non-Physician Practitioner (NPP) into Medicare  Explore Medicare’s enrollment guidelines for a non-physician practitioner (NPP) by attending the series, The Role of a Non-Physician Practitioner. Enrolling the NPP is a critical first step when onboarding into a provider practice. This second webinar will provide an overview of the enrollment process including requirements and qualifications, applications and supporting documentation and methods to track processing status.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/reea0182ce119e5c246c7978f6b138cb5) | 1.5 |
| Thursday, August 7, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Medicare Navigator Fee Schedules: Utilize Other Medicare Fee Schedules for Part B Billing  This three-part Medicare Navigator webinar series is designed to provide a thorough examination of various Medicare fee schedules and how to effectively use them. The last webinar in the series will review the various fee schedules available to Part B providers (excluding the Medicare Physician Fee Schedule). We will define each fee schedule, identify who should use it and demonstrate how to use the schedules to bill Medicare services.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rdb1f357fb5a3c27dcdc647eb5d6912e2) | 1.5 |
| Thursday, August 7, 2025 |  | Start:  12:00 p.m.  End  1:30 p.m. | StayConnected: Exploring Medicare Billing for Non-Physician Practitioners (NPP)  Explore Medicare’s Part B billing options for non-physician practitioners by attending the series, "The Role of a Non-Physician Practitioner". This last webinar will review the types of non-physician practitioners and explore the various billing scenarios available to non-physician practitioners, including direct billing, the incident to provision, and split/shared guidelines.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r7b515694900b985eff0294b512d40805) | 1.5 |
| Tuesday, August 12, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | StayConnected: Behavioral Health Services  Stay connected with Medicare-covered mental health and substance use services by attending our Behavioral Health workshop series. This webinar will review three important Medicare-covered behavioral health services that may improve patient outcomes: behavioral health integration (BHI), psychotherapy for crisis, and opioid use disorder (SUD) screening and treatment. We will outline billing and coverage requirements for these service types as well as review recent updates addressed with the 2025 Final Rule.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rb6115d0287e56e6996ec58a180f7c118) | 1.5 |
| Tuesday, August 12, 2025 |  | Start:  12:00 p.m.  End  1:30 p.m | StayConnected: Understanding Behavioral Health Integration (BHI) Services  Stay connected with Medicare-covered mental health and substance use services by attending our Behavioral Health workshop series. This webinar will define behavioral health integration (BHI) service guidelines and billing requirements. We will review the various roles of care team members and identify valuable resources and references.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r3e1572b7d311b3b06e206903e82ead6d) | 1.0 |
| Wednesday, August 13, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | StayConnected: Psychiatric Services  Stay connected with Medicare-covered mental health and substance use services by attending our Behavioral Health workshop series. This webinar will provide an overview of psychiatric services including diagnostic evaluations, psychological and neuropsychological testing, psychotherapy, family and group therapy and behavioral health integration (BHI) services. We'll identify who can provide these services, explore medical necessity and documentation requirements, and review recently identified improper payment errors while highlighting best practices to avoid them.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rca4ca15bf294eb06fca587f36a644414) | 1.5 |
| Wednesday, August 13, 2025 |  | Start:  12:00 p.m.  End  1:30 p.m | StayConnected: Understanding Psychotherapy for Patients in Crisis  Stay connected with Medicare-covered mental health and substance use services by attending our Behavioral Health workshop series. Patients in high distress with life-threatening, complex problems requiring immediate attention are eligible for psychotherapy for crisis services. Through urgent assessment and mental status examination, these services can help reduce a patient’s mental health crisis (including substance use disorder) to help determine an appropriate plan of care. This webinar will provide an overview of these crucial services and offer valuable resources.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rce70f77b5b1da4cdc06ecbe5c9deb904) | 1.5 |
| Thursday, August 14, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | StayConnected: Substance Use Disorders and Treatment  Stay connected with Medicare-covered mental health and substance use services by attending our Behavioral Health workshop series. The Centers for Medicare & Medicaid Services (CMS) continues to combat the opioid epidemic through the promotion of safe and responsible pain management options. This webinar will provide valuable guidance regarding treatment options for opioid use disorders (OUD) and substance use disorders (SUD), preventive and screening services, and opioid treatment programs (OTPs).  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r74668423158e78359240caec43947f70) | 1.5 |
| Tuesday, August 19, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Medicare Navigator Part B Claims: Patient Eligibility and Claim Submission Requirements  The Medicare Navigator Part B Claims series supports providers billing on the CMS-1500 claim form (or electronic equivalent) with navigating the billing basics to performing post payment claim correction activities. Our first webinar in the series will provide an overview of Part B Medicare benefits and patient eligibility, claim submission requirements, and claims processing outcomes.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rff3fc7b38ded06ec3ead0e03c263d4f8) | 1.5 |
| Tuesday, August 19, 2025 |  | Start:  1:00 p.m.  End  2:30 p.m. | Medicare Navigator Part A Claims: A Guide to Hospital Outpatient Services  The Medicare Navigator Part A Claims series supports institutional providers billing on the CMS-1450/UB-04 claim form (or electronic equivalent) with navigating the billing basics to performing post payment claim correction activities. This webinar will provide an overview of billing requirements for Part A acute hospital outpatient coverage services. We will address various billing scenarios including repetitive and observation services, duplicate billing, claim overlaps, the three-day payment window, and inpatient only services.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r69030e9ca26dc4e873c444e6ecbffd27) | 1.5 |
| Wednesday, August 20, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Modifier of the Month: Repeat Procedures Modifiers: 76, 77 and 91  The Modifier of the Month workshop series describes commonly used modifiers and outlines common billing scenarios for utilization. Modifiers 76, 77 and 91 are used to reflect the rare circumstances when services must be repeated. During this webinar, we will review how to avoid duplicate claim denials by appending these modifiers and outline important documentation requirements.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r91d5d4c7e96920ab42b6a6975fe95367) | 1.5 |
| Wednesday, August 20, 2025 |  | Start:  1:00 p.m.  End  2:30 p.m. | Medicare Navigator Coverage Policies: Introduction to Medicare Coverage Policy  The Medicare Navigator Coverage and Policy series is designed to support providers with searching, locating and understanding Medicare coverage requirements. Our first webinar will define reasonable and necessary criteria and identify the various guidelines where Medicare policyinformation can be found. We will provide a demonstration of the FastTrack to Medicare Coverage Policies Tool to assist with navigating these resources.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rfb4b2934679d6bc322aa0e3871f55510) | 1.5 |
| Thursday, August 21, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Preventive Services: Comprehensive Screening and Testing Part 2  The Preventive Services series identifies a variety of Medicare covered preventive services and provides an overview of coverage, provider and patient eligibility, and billing requirements. This session will provide an overview of several of the preventive service screenings available such as bone mass measurement, cardiovascular disease, screening pap test and more.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r70729ff4c151c8e34846d47b86b5eabe) | 1.0 |
| Tuesday, August 26, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Partial Hospitalization Program Billing and Coverage Requirements  This webinar will review how the Partial Hospitalization Program (PHP) is structured and the distinctions between other programs related to mental health. We will review the type of care that should be rendered for patients that met the criteria to receive PHP services.  We will outline the specific guidelines, requirements and billing related to PHP.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r254e2e214245e6f4437f0d0664930223) | 1.5 |
| Tuesday, August 26, 2025 |  | Start:  12:00 p.m.  End  1:30 p.m | Skilled Nursing Facility (SNF) Benefit and Coverage Requirements  Join this webinar to learn about skilled nursing facility (SNF) coverage requirements including the SNF benefit period. We'll include information on the three-day qualifying hospital stay requirement and medical documentation requirements. We'll also provide some valuable resources to comply with Medicare’s guidelines.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r2ae8f404bd33d048f73e3b9dc7afca61) | 1.5 |
| Wednesday, August 27, 2025 |  | Start:  9:00 a.m.  End  10:30 a.m. | Skilled Nursing Facility (SNF) Consolidated Billing  This webinar is designed to educate Medicare providers on SNF consolidated billing (CB). We will discuss the inclusions and exclusions with an explanation of the major categories. We will review the annual coding files and highlight tips for successful billing. We will conclude with SNF CB scenarios and review the resources available.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rb9b124216e09b692f8c8320a38cbfc66) | 1.5 |
| Thursday, August 28, 2025 |  | Start:  9:00 a.m.  End  10:00 a.m. | Medicare Navigator Medicare Secondary Payer (MSP): Fundamentals  The Medicare Navigator Medicare Secondary Payer (MSP) series supports providers with identifying patient eligibility and billing services to the applicable insurer. Our first webinar of the series will provide an overview of the MSP provisions and define various types of common coverage situations.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/r2ac44b7afa6d681ec2afb178e17f3015) | 1.0 |
| Thursday, August 28, 2025 |  | Start:  12:00 p.m.  End  1:30 p.m | Medicare Navigator Provider Enrollment: Submitting a Sole Owner Application through the Provider Enrollment, Chain and Ownership System (PECOS)  The Medicare Navigator Provider Enrollment series promotes compliance with initial enrollment, record maintenance and revalidation for a variety of Medicare facility, provider and supplier types. During this webinar, we will review how to submit a sole owner application using the Provider Enrollment, Chain and Ownership System (PECOS). A sole owner is defined as the only owner of a Professional Association (PA), Professional Corporation (PC), or Limited Liability Company (LLC) in which the provider renders health care services to the self-owned company, and the business is legally separate from personal assets.  [Graphical user interface  Description automatically generated](https://fcso.webex.com/weblink/register/rcd701c0183d8905aee72fcd5ed4151b0) | 1.5 |

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