

LIVE WEBCAST and AUDIO CONFERENCE EVALUATION

Dealing with the Disruptive Physician

August 18, 2006 at Attendees' Sites

Your evaluation of this program is very helpful as we plan for future Webcasts.
PHA must receive this form by **August 23, 2006**. Thank you for your assistance.

The published learning objectives for this program are listed below. How well did we meet these objectives for you?
Please click on the circle next to the appropriate number for each question, using the following value scale:

5= Very well; 4=Well; 3=Satisfactorily; 2=Fair; 1=Not at all

Through participation in this program, you will:

- | | | | | | |
|--|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| 1) Summarize the latest information on the Medicare RUC 5-year review | <input type="radio"/> 5 | <input type="radio"/> 4 | <input type="radio"/> 3 | <input type="radio"/> 2 | <input type="radio"/> 1 |
| 2) Identify the new applicable CPT codes for Surgeons | <input type="radio"/> 5 | <input type="radio"/> 4 | <input type="radio"/> 3 | <input type="radio"/> 2 | <input type="radio"/> 1 |
| 3) Discover the updates from Capitol Hill on the current health care bills | <input type="radio"/> 5 | <input type="radio"/> 4 | <input type="radio"/> 3 | <input type="radio"/> 2 | <input type="radio"/> 1 |

Speaker Delivery: Steven Marshall, MS, FACMPE

- | | | | | | |
|---|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| 4) was knowledgeable in his content area. | <input type="radio"/> 5 | <input type="radio"/> 4 | <input type="radio"/> 3 | <input type="radio"/> 2 | <input type="radio"/> 1 |
| 5) was effective in his delivery. | <input type="radio"/> 5 | <input type="radio"/> 4 | <input type="radio"/> 3 | <input type="radio"/> 2 | <input type="radio"/> 1 |

Program Rating

- | | | | | | |
|-----------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| 6) Overall rating of this program | <input type="radio"/> 5 | <input type="radio"/> 4 | <input type="radio"/> 3 | <input type="radio"/> 2 | <input type="radio"/> 1 |
|-----------------------------------|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|

Registration

- | | | | | |
|--|-----------------------|-----------------------|-----------------------|-----------------------|
| | Very Easy | Easy | Satisfactory | Fair |
| 7) How would you describe the ease of your registration? | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Time Allocation

- | | | | | |
|-----------------------------------|-----------------------|-----------------------|-----------------------|-----------------------|
| | Just Right | Too Long | Too Short | Much too short |
| 8) The length of the program was: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

Webcast Format

- | | | | | |
|-----------------|--------------------------------|------------------------|---------------------------|-----------------------|
| | Greatly helped me learn | Helped me learn | Made no difference | Distracted me |
| 9) The visuals: | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> | <input type="radio"/> |

- 10) What did you like most about the live webcast and audio conference?

- 11) What did you like least about the live webcast and audio conference?

- 12) What other topics would interest you in a live webcast and audio conference format? (Please select all that apply)

- | | | |
|--|---|--|
| <input type="radio"/> Rightsizing/Staffing | <input type="radio"/> Physician Compensation | <input type="radio"/> Ancillary Services |
| <input type="radio"/> HIPAA | <input type="radio"/> Denials Management | <input type="radio"/> Benchmarking |
| <input type="radio"/> Physician Recruitment | <input type="radio"/> Coding | <input type="radio"/> Advanced Beneficiary Notice (ABN) |

Other

**Thank you. We appreciate your feedback and the time you took to complete this evaluation form.
If you have questions, please contact PHA Learning Center at (303) 778-9887.**