

**Kansas
Self-Insurers**

Association ... Serving the workers compensation needs of insured and self-insured employers.

Registration Brochure

**Fifteenth
Annual
Conference**

*July 9 & 10, 2009
Hotel at Oldtown
Wichita, KS*

KSIA's Fifteenth Annual Conference

Make your plans to attend the KSIA Conference July 9-10, 2009 in Wichita. Highlights include informative sessions, exhibits, and networking opportunities. Registration fees include President's Reception, breakfast, lunch, Conference notebook and all meeting sessions. Golf Tournament fees are additional.

Pending Continuing Education Offerings:

KSIA has applied for continuing education credits through the following organizations: Kansas Department of Health and Environment: (Nursing Home Administrators), Kansas Insurance Department, Commission on Health Care Certification Certified Life Care Planner Pre-Approval (CLCP), KSBN Approval (Kansas RN), Human Resource Certification, Texas Department of Insurance, Oklahoma Insurance Commissioner, and CCMC Approval: Nurse Case Managers (CCM).

Conference Schedule / Session Information

Thursday, July 9, 2009

9:06 a.m. Golf Tournament at Auburn Hills (first tee time)

6:00 – 7:30 p.m. President's Reception and Exhibits

Friday, July 10, 2009

7:30 – 8:00 a.m. Continental Breakfast in Exhibit Hall

8:00 – 8:05 a.m. Welcome by KSIA President John Buselt

8:05 – 8:55 a.m. **Case Law Update**
Doug Hobbs, Wallace Saunders Austin Brown & Enochs Chrtrd
Ron Laskowski, Entz, Entz & Laskowski, LLC

8:55 – 9:55 a.m. **Excess Insurance Market**
Charles Caldwell, Midlands Management Corporation

9:55 – 10:10 a.m. Break in Exhibit Hall

10:10 – 11:00 a.m. **ADAAA**
Alan Rupe, Kutak Rock LLP

11:00 – 11:50 a.m. **Medicare - Mandatory Reporting and MSA's**
Fred Greenbaum and Timothy Gaarder, McAnany Van Cleave & Phillips, P.A.

11:50 – 1:00 p.m. **Lunch/Business Meeting**
Legislative Update, Larry Karns
Ethics, Bernie Hayen
Drawings

1:00 – 2:00 p.m. **Return to Work**
Dr. Chris Fevurly

2:00 – 2:15 p.m. Break in Exhibit Hall

2:15 – 3:30 p.m. **Workers Compensation Toolkit**
2nd Injury Fund - Larry Karns
ISO Searches - Erin Carter, ISO
Investigations - Del White, Red Rock Investigations
Managing Drug Costs - Celeste Player, Express Scripts
Understanding the Fee Schedule - Dr. Tracey

Hotel Information

Accommodations for the Conference are available at the Hotel at Oldtown. The room rate is \$115/Queen. For reservations, call the hotel at 316.267.4800 or 877.2oldtown. Be sure to mention that you are with the KSIA Conference to secure the special rate. The reservation deadline is Wednesday, June 17. After June 17, reservations will be accepted according to space and rate availability.

Registration Form

Name _____

Company _____

Address _____

Phone (_____) _____ Fax (_____) _____

Email _____

Conference Registration - Includes food functions, sessions and conference notebook, but not optional golf. First person from each company pays full registration fee, additional members from company pay discounted fee. Please list additional registrants from same company:

Optional Golf - You are invited to play in the annual four-person scramble golf tournament on Thursday, July 9, at Auburn Hills Golf Course. The first tee time is 9:06 a.m. There is limited space available for the tournament. Registrations will be processed in the order received. Indicate your preference for your team if you know your foursome. If a foursome is not indicated, we will place you on a team. Additional information, such as map and directions, will be sent to those who register for golf at a later date.

Your name: _____

Your Team: _____

Member Registration Fees

Full Registration (\$125) = \$ _____

Full Registration-First Time Attendee (\$100) = \$ _____

Same Company Discount \$100 x _____ = \$ _____

Optional Golf \$70 x _____ = \$ _____

Total \$ _____

Non-Member Registration Fees

Full Registration (\$175) = \$ _____

Same Company Discount \$150 x _____ = \$ _____

Optional Golf \$70 x _____ = \$ _____

Total \$ _____

Payment Information:

Check Enclosed (payable to KSIA) Visa Mastercard

Card Number _____ Expiration Date _____

Signature _____

Are there any special accommodations you require to more fully participate in the Conference? _____

Return form no later than July 3 to:

KSIA
825 S. Kansas Avenue, Suite 500
Topeka, KS 66612
Fax to 785.233.2206

Cancellation policy:

No cancellations after July 3 due to hotel guarantee deadlines.

Register online at www.ksia.org

Kansas Self-Insurers Association

825 S. Kansas Avenue
Suite 500
Topeka, KS 66612

Hotel Information



830 East First
Wichita, Kansas 67202
(316) 267-4800
www.hotelatoldtown.com

