

Louisiana Chapter Healthcare Financial
Management Association

invites you to the

2009 Summer Institute

Sam's Town Shreveport
314 Clyde Fant Parkway
Shreveport, LA 71101

Sunday, August 23, 2009
to

Tuesday, August 25, 2009

11 CPE Hours Available



Many thanks to our Corporate Sponsors

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Louisiana Chapter – Healthcare Financial Management Association
2009 Summer Institute

Sunday, August 23, 2009

4:00-5:00 PM COMMITTEE MEETINGS

5:00-6:00 PM BOARD MEETING

6:00-7:00 PM SOCIAL
Sponsored by DSH Recovery Services

Session G
4:00-4:50 PM 990 and Tax Related Update
Horne LLP

5:30-7:00 PM SOCIAL
Sponsored by DSH Recovery Services

Monday, August 24, 2009

7:30-8:00 AM REGISTRATION

7:50-8:00 AM PRESIDENT'S WELCOME/
BUSINESS MEETING

Session A
8:00-8:50 AM LA LEGISLATIVE UPDATE
Kevin Birdwell, LHA
Sean Prados, LHA

Session B
9:00-10:30 AM MMSEA Section 111 Reporting: The ABCs of
RREs, Are You Ready?
Clare M. Bello, President/CEO of VCM
Diane Wilkerson, Sr. VP of Marsh

Session C
10:45-11:50 AM Seeking Out Eligibility
Chris Cruise, Cardon Health Network, Inc.

12:00 -1:00 PM LUNCH

Session D
1:00-4:50 PM CERTIFICATION COACHING –
MAKE A DIFFERENCE
ACCOUNTING AND FINANCE SPECIALTY
COACHING COURSE
Chip Cantrell, CPA, CHFP, Cantrell CPA
Services, LLC

Session E
1:00-2:30 PM Improving Registration Accuracy Through Tools
and Technologies
Paul Shorosh, President/CEO Database
Solutions, Inc.

2:20 – 3:00 Break

Session F
3:00-3:50 PM Medicare Contracting Reform, Are You Ready?
Garry Keute, Director of Business Development,
VisionShare, Inc

Tuesday, August 25, 2009

Session D - Continued
8:30-11:50 AM CERTIFICATION COACHING –
MAKE A DIFFERENCE
PATIENT FINANCIAL SERVICES SPECIALTY
COACHING COURSE
Deidra K. Dunagan, CHFP, American Legion
Hospital

Session H
9:00-9:50 AM LA Medicaid Update
Becky Burns, Field Representative, Unisys

Session I
10:00-11:50 AM You CAN Master Managed Care – Just Pretend
It's Medicare!
Bill Richburg, , M.S., FHFMA, Director,
Government Programs, MedAssets

Hotel Reservations

Please make your reservations early and directly with

Sam's Town Shreveport
315 Clyde Fant Parkway ~ Shreveport, LA

Call 1-877-429-0711

Or Online at www.samstowshreveport.com

(Select reservations and use **S08HEAL** as the code)
Single/Double Occupancy - \$79.00/night

Please refer to the Group Code **S08HEAL** for
LA Healthcare Financial Management Association.
This block will be released on Thursday, August 3rd.

Speakers and Sessions ~ LA HFMA Summer Institute ~ August 23 – 25, 2009

Session A Legislative Update

This session will review the overall highlights from the 2009 Louisiana Legislative session as it affects healthcare. Review of the issues that are already being addressed for next year's session will also be discussed.

Kevin Bridwell is the Assistant Vice President of Healthcare Reimbursement at the Louisiana Hospital Association. He joined LHA in December 2006 and his areas of responsibility include the analysis of federal and state reimbursement changes and their various impacts, evaluating current market issues and trends in managed care, assisting in the development of policy, and advocacy activities. Kevin has more than 15 years of experience in healthcare reimbursement. He has served in health plan administration and provider contracting on the payer side, as well as in hospital revenue cycle management.

Sean Prados, Senior Vice President, joined the Louisiana Hospital Association in February 1999. In his role he oversees strategic health policy planning; coordinates political action activities and represents the LHA before the state and federal governmental officials, lawmakers and regulatory bodies. Sean also serves as the LHA HOSPAPAC Secretary-Treasurer and oversees the LHA Management Corporation. Before joining the LHA staff, Sean spent several years as an independent lobbyist where he developed expertise in healthcare, managed care, workers' compensation, transportation, and agriculture. He also served in the United States Marine Corps. He is a graduate of Nicholls State University where he received a Bachelor of Arts in Government and also a graduate of Louisiana State University where he was awarded a Master of Public Administration with a concentration in healthcare administration. Sean is married to the former Catherine Savoie, and they have two children, Michael Charles Prados and Elinor Claire Prados. Sean is an avid outdoorsman and particularly likes to fish and play golf.

Session B MMSEA Section 111 Reporting: The ABCs of RREs, Are You Ready?

The presentation will cover a description of MMSEA Section 111 which is a 2007 amendment to the Medicare Secondary Payer Statute of 1980. Some payers do not realize that almost thirty years ago federal legislation was passed whereby Medicare was to be a secondary payer when another payer had primary responsibility for payments involving Medicare beneficiaries. Implementation was only marginally successful.

In 2007 MMSEA 111 created a reporting infrastructure, a defined process for registration, testing and mandatory reporting as well as stiff penalties for non compliance. The mandate applies to Group Health Plans and non Group Health Plans also referred to as liability insurance carriers (including self insurance), no fault insurance and workers' compensation. We will focus on the basic elements of liability, no fault and workers' compensation reporting under MMSEA 111, and provide an overview of the past, present and possible future financial impact of this legislation on HFMA members.

Clare M. Bello, Esquire is the co-founder, President and Chief Executive Officer of VCM, located in Pittsburgh, Pennsylvania. VCM is a national claims and consulting organization designed to address claims and litigation management issues for healthcare facilities in the alternative risk transfer (ART) market.

Clare has led VCM from a regional organization to a national company, taking the lead in the healthcare claims management industry. She has lectured in national programs aimed at the healthcare alternative risk market, been published for her innovative concepts and approaches to claims management and consulting services and is active in organizations designed to develop and promote best practices for the management of claims and risk in the ART market.

Clare holds a law degree from the Duquesne University School of Law. She managed an active law practice in the Commonwealth of Pennsylvania for over a decade before beginning her corporate career with VCM. Prior to co-founding VCM, Clare's practice was focused in insurance regulatory law and providing professional liability litigation defense.

Clare is a member of the AHA, ASHRM, VCA; SCCIA, and CIC-DC as well as remaining an active member of her state and local legal bar association organizations.

Diane Wilkerson is the Senior Vice President of Marsh. She is the MMSEA Section 111 content expert and thought leader delivering CMS reporting solutions and implementation support. She assists self-administered healthcare clients in developing their claims management process and related loss control reports.

Diane has experience as a claims manager for multiple captive programs and responsible for reporting to captive boards and actuaries. She has been involved in implementing fast track claims management model resulting in significant cost savings for self administered clients. She developed a proprietary information management system geared to serve the needs of adjusters and reporting requirements of Boards.

Ms. Wilkerson holds a BA in English and Education University of Detroit and has her NC Agent License. She is a member of American Society of Healthcare Risk Managers, American Healthcare Association and Risk and Insurance Management Society.

Session C Seeking Out Eligibility

This session will discuss how the various public agencies (Medicaid, SHCIP, Crime Victims, Liability, Emergency Medicaid, SSI Disability, etc) can improve your front-end cash collections in dealing with the Financial Counseling eligibility process.

Christopher Cruise has worked for over 20 years in the Healthcare Revenue Cycle industry - with hospital and physician management, billing and collections, and consulting. He has managed in small and large hospitals in Iowa, Idaho, Texas and Physician Groups in Texas. Physician groups have consisted of a central business office for 60 clinics in San Antonio for the Houston, San Antonio, Beaumont and College Station, for the Christus Medical Group, including Lubbock for Covenant Medical Group.

Mr. Cruise has extensive knowledge within denial management, contract management, AR management, development of tracking indicators, including polices and procedures. His background of billing and collections covers multiple insurance carriers of Medicaid, Medicare, Commercial, Work comp, Veterans Affairs and IHS within the states of Texas / Arizona / Idaho/ Iowa / New Mexico / Colorado. Mr. Cruise also has an extensive background in the management of Patient Access and Financial Counseling (Federal, State, County and Charity programs) area to include Pre-registration, Cash collections, Insurance Verification, Authorization and Pre-certification, Quality Assurance and ED discharged collections. Mr. Cruise is an HFMA member.

Session D Certification Coaching – Make A Difference

All HFMA members are eligible to participate in the certification process. One of the very first steps is to successfully complete a two-part test. This coaching course provides an excellent resource to prepare you for two of the specialty exams – the Accounting and Finance on Monday afternoon and the Patient Financial Services on Tuesday morning. These classes will be an in-depth review of the dimensions of healthcare finance that are emphasized on these two examinations. This interactive course is designed to cover 100% of the materials that will be included in the specialty exams, including example questions as well as test taking strategies. The course uses the recently updated HFMA Self-Study Manuals (2007-08 edition), and it is highly recommended that you obtain a copy to attend this class. You may either purchase these manuals on the HFMA National website or borrow from the Louisiana chapter library (you will want to contact the chapter Certification Committee Co-Chair, Deidra Dunagan to reserve a copy for the class).

The maximum benefit of the coaching course is obtained by taking the test shortly after the course. Our instructors will also review the process for scheduling a proctor to take the test. So what are you waiting for? Make a difference in healthcare by signing up!

Accounting and Finance Specialty Coaching Course (Monday)

Chip Cantrell, CPA, CHFP is a CPA and sole member of Cantrell CPA Services, LLC in Kaplan, Louisiana. Chip received his CHFP certification in 2007 after successfully completing the examination process a year earlier. Chip completed the Core exam along with the Accounting & Finance Specialty exam. Cantrell CPA Services, LLC provides a broad range of accounting services including healthcare consulting for all types of healthcare organizations as well as Medicare and Medicaid cost reporting.

Patient Financial Services Specialty Coaching Course (Tuesday)

Deidra K. Dunagan, CHFP is Patient Financial Services Director for American Legion Hospital in Crowley, Louisiana. Deidra received her CHFP certification in 2003 by successfully completing the Core exam and the Patient Financial Services specialty exam. American Legion Hospital provides healthcare services to the people of Crowley and the surrounding southwest Louisiana community.

Session E Improving Registration Accuracy Through Tools and Technologies

As the revenue cycle's last (and best) frontier, this presentation will explore the financial impact of registration errors, identify quality assurance programs that will immediately improve registration accuracy rates, and review methods, tools and technologies available to audit and track registration errors for increased accountability and competency. You will learn how to develop effective quality assurance processes that improve staff competency at the front and prevent rework and denials at the back. Helpful take-home tips, ROI calculations and QA tools will be provided as well as an error tracking and reporting database tool you can use immediately to streamline your revenue cycle.

The Learning Objectives:

1. Understanding of the Financial Impact on the revenue cycle
2. Identifying quality assurance programs that will immediately impact registration accuracy
3. Understanding the technology available to audit 100% of registrations with minimal manual processes

Paul Shorosh has over 16 years of hands-on revenue cycle experience, most recently as Business Office and Revenue Cycle Director for Springhill Memorial Hospital in Mobile, Alabama. He holds an MBA in Healthcare Administration and IT from the University of Connecticut and an MSW in Healthcare from the University of Alabama. Seeing the disconnect between the front and back end of his departments, Paul developed a way to automate the manual QA process to report hundreds of common registration error types back to registrars so they could self-correct prior to billing. Complaints, rework and denials went down significantly and morale went up for both PFS and Patient Access staff, not to mention significantly greater accuracy rates and clean claim rates. Soon hospitals began requesting copies of AccuReg, and today Paul is President of AccuReg Software, a firm dedicated to empowering Patient Access.

Session F Medicare Contracting Reform, Are You Ready?

CMS is replacing the current contracting authorities that administer the Medicare Part A and Part B Fee-For-Service (FSS) programs, and consolidating all Fiscal Intermediaries and Carriers into a new A/B payer organization called a Medicare Administrative Contractor (MAC). Louisiana is part of Medicare Contractor Reform Jurisdiction 7, which comprises the states of Arkansas, Mississippi and Louisiana.

The presentation will provide an overview of Medicare Contracting Reform and the potential impact on Louisiana healthcare providers, as it pertains to EDI connectivity for claims processing activities and Part A, FISS/DDE access.

Garry Keute is the Director of Business Development at VisionShare Inc. Garry has been the lead project manager for statewide Medicare Administrative Contractor transition events in 12 jurisdictions. Garry has in-depth knowledge of Medicare Contracting Reform and has been helping healthcare providers deal with the overwhelming prospect of re-establishing an EDI relationship with a new Medicare contractor while experiencing no downtime with their current Medicare reimbursement process.

Prior to his role as Business Develop Manager at VisionShare, Garry spent over 15 years working in various sales, marketing, and project management roles for 3M Company and Imaton. Today Garry leads a team of thirteen specialists who work directly with healthcare providers helping them to transition to a new Medicare Contractor for batch claims/remits, Direct Data Entry (DDE)/FISS, Medicare eligibility verification, and other reimbursement transactions.

Session G 990 and Tax Related Update

Representatives from Horne, LLP will discuss the Form 990 and other pertinent tax related issues specific to hospitals.

Session H LA Medicaid Update

Rebecca Burns from Unisys will be on hand to discuss the hottest issues and latest changes to the LA Medicaid program.

Session I You CAN Master Managed Care – Just Pretend It's Medicare!

Medicare is the dominant factor in most providers' revenue and cash flow projections, with managed care at a strong second. With the advent of MS-DRG and cost-based DRG weights, CMS has put the provider community on notice: Medicare is becoming a managed care system. Central to this objective are:

Learning Objectives

- Participants will understand the impact of Medicare's changes on Medicare Advantage plans and all other managed care.
- Participants will begin to identify how providers can alter contract negotiation in the near term as their bargaining power declines.
- Participants will identify certain tools to help the organization operate successfully in a market where nearly 100 percent of patients are in managed care plans.

Bill Richburg, M.S., FHFMA, is Director of Government Programs for MedAssets. Mr. Richburg is one of the nation's leading experts on Medicare payment. He has extensive experience in Medicare programs and insight into the development and regulation processes affecting the various Medicare payment systems. Bill advises hospitals and physician practice groups how to accurately identify and collect underpayments from Medicare to significantly improve both their financial performance and the integrity of their financial reporting.

Bill is an HFMA Fellow and a member of the Board of Directors of the Lone Star HFMA Chapter (serving North Texas), where he presently serves as Chairman of both the Founders Program and Certification Committee. He is a frequent presenter at HFMA and other professional and civic organizations. He has also been published in HFM and numerous HFMA chapter newsletters. Bill earned HFMA specialty certifications in Accounting and Finance, Patient Financial Services and Managed Care. In 2006, he received the "Founders Medal of Honor" in recognition of his continued voluntary service to the HFMA Lone Star Chapter, the Show-Me of Missouri Chapter, and HFMA National.

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| COST |
| \$125.00 HFMA Members Summer Institute |
| \$150.00 Non-Members Summer Institute |
| Registration Includes: |
| 8/23/09 Social |
| 8/24/09 Lunch & Social |

COURSE SELECTION – Please mark the sessions you wish to attend.

- | | | |
|------------------------------------|----------------|--|
| Monday, August 24, 2009 | 8:00-8:50 AM | LA Legislative Update |
| <input type="checkbox"/> Session A | 9:00-10:30 AM | MMSEA Section 111 Reporting: The ABCs of RREs, Are You Ready? |
| <input type="checkbox"/> Session B | 10:00-11:50 AM | Seeking Out Eligibility |
| <input type="checkbox"/> Session C | 1:00-4:50 PM | Certification Coaching: Accounting & Finance Specialty Coaching |
| <input type="checkbox"/> Session D | 1:00-2:50 PM | Improving Registration Accuracy Through Tools and Technologies |
| <input type="checkbox"/> Session E | 3:00-3:50 PM | Medicare Contracting Reform, Are You Ready? |
| <input type="checkbox"/> Session F | 4:00-4:50 PM | 990 and Tax Related Update |
| Tuesday, August 25, 2009 | | |
| <input type="checkbox"/> Session G | 8:00-11:50 PM | Certification Coaching: Patient Financial Services Coaching Course |
| <input type="checkbox"/> Session D | 9:00-9:50 AM | LA Medicaid Update |
| <input type="checkbox"/> Session H | 10:00-11:50 AM | You CAN Master Managed Care – Just Pretend It's Medicare! |
| <input type="checkbox"/> Session I | | |

Registration: 2009 Summer Institute

2009 Summer Institute, August 23 – 25, 2009

Members \$125.00

Non-members \$150.00

Name: _____

Title: _____

Organization: _____

Address: _____

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Please mail or FAX registration by August 10th to:
Karen Stuart, Administrative Assistant
LA Chapter HFMA
PO Box 265
Sumrall, MS 39482
lahfma@msn.com
Phone: 601-758-0677
Fax: 601-758-0745

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