JUNE 20-23 | NASHVILLE, TENNESSEE

Gaylord Opryland Resort and Convention Center

HFMA's 2010 ANI

THE HEALTHCARE FINANCE CONFERENCE

27.5 CPEs . 71 BEST-PRACTICE SESSIONS . INDUSTRY LEADERS

COVERING

COST/QUALITY . REFORM . PHYSICIAN INTEGRATION . RACs . REVENUE CYCLE

KEYNOTE SPEAKERS

GEORGE F. WILL

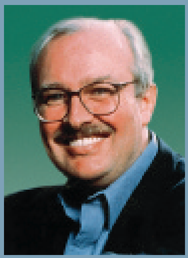
Political Columnist

BILL FRIST, MD

Former United States Senator and Senate Majority Leader

PAT SUMMITT

Head Coach, University of Tennessee Women's Basketball Team



IAN MORRISON

Healthcare Author, Consultant, and Futurist

hfma™ educational foundation

healthcare financial management association

ANI 2010 HIGHLIGHTS

27.5 CPEs

The highest number ever - NEW!

ANI Featured Speakers

Our new Featured Speakers track complements our keynote speakers with initiatives, insights, and strategies that are driving measurable improvement in health care.

MARK E. MILLER, PhD
Executive Director, Medicare Payment Advisory Commission (MedPAC)
Medicare's Evolution

GLENN STEELE, JR., MD, PhD
President and CEO,
Geisinger Health System
Building and Sustaining Physician/Hospital Integration

SCOTT P. SEROTA
President and CEO,
Blue Cross and Blue Shield Association
The Private Sector's Impact on Healthcare Reform

JONATHAN B. PERLIN, MD, PhD, MSHA, FACP, FACMI
Chief Medical Officer and President, Clinical Services, Hospital Corporation of America (HCA)
Using Technology to Reduce Care Cost and Improve Quality

LEAH BINDER, MA, MGA
CEO, The Leapfrog Group
Employer Perspectives on Healthcare Cost Containment

LISA GOLDSTEIN
Senior Vice President,
Moody's Investors Service
Navigating the 2010 Capital Markets

Networking

Four days of dynamic ANI networking opportunities, including:

- ANI Opening Reception on Delta Island
- Post-Welcome Reception at FUSE, *Sponsored by Craneware*
- Forums Breakfast *(Forum members only)*
- Interactive Early Riser Sessions — NEW!
- Chair's Reception and Banquet
- Monday Night Reception on the General Jackson Riverboat, *Sponsored by RelayHealth*
- Lunch and Learn — Recipients of *HFMA's High Performance Award in Revenue Cycle* will share best practices

Exhibit Hall

This year's exhibit hall has over 400 solution providers and a new Product Showcase stage

Get new solutions and new product ideas for your organization at the Idea Exchange Exhibit and at the Product Showcase. Network, register to win prizes, and enjoy lunches and evening receptions.

HFMA's 2010 ANI
THE HEALTHCARE FINANCE CONFERENCE

SUNDAY, JUNE 20

8:00 AM - 5:00 PM
Preconference Seminars

PCS1 Medicare Cost Reporting

PCS2 Advancing to CFO: Pathway to Success
(This session is available only to senior-level executives in a provider setting.)

PCS3 Advanced Charge Master Strategies

PCS4 Building a Best Practice Approach to RAC Appeals

8:00 - 11:30 AM
Preconference Workshops

PCW1 Using an Evidence-Based Approach to Achieve Operating and Financial Goals

PCW2 Capital Region Medical Center: Business Office Customer Service Best Practices

PCW3 Expert Panel: Using Middle Manager Development for Improved Financial Performance

1:00 - 4:30 PM
Preconference Workshops

PCW4 Four Factors to Improve Physician Revenue Cycle Performance

PCW5 Critical Access Hospitals: Reducing Risks and Improving Performance

PCW6 ICD-10 on the Horizon: Planning for Success

PCW7 The Future of Health Care: 2020

4:30 - 5:00 PM
First Timers Get-Acquainted Session

5:00 - 6:00 PM
Keynote Speaker

Ian Morrison: The Future of the Healthcare Marketplace

6:00 PM
ANI Opening Reception on Delta Island

MONDAY, JUNE 21

7:00 - 7:50 AM
Forums Breakfast

8:00 - 9:30 AM
Keynote Speaker

George F. Will: Politics, Policy and the Healthcare Debate

10:00 - 11:15 AM
Updates, Legal Trends and Compliance

A01 Expert Panel: Getting Ahead of New Ethics and Compliance Risks

A02 Late-Breaking Policy/Strategy Session

Strategic Finance

A03 Reducing Risks and Lowering Costs of Defined-Benefit Pension Plans

A04 Natividad Medical Center: From $25M Loss to $8M Gain

Finance and Accounting Operations

A05 Five Steps to Reducing Administrative Costs in Group Practices

A06 Mid-Michigan Health: Reducing Labor Costs Through Staff Incentives

PFS/Revenue Cycle/Patient Access

A07 Hospital Corporation of America: Improving Productivity of Self-Managed Revenue Cycle Staff

A08 Duke University Health System: Measuring and Managing Cost to Collect

A09 Linking Pharmacy with Billing Finds $10M Revenue Variance
(HFMA PEER REVIEW® PROGRAM SESSION: Craneware and Parkview Health)*

Managed Care/Payment/Reimbursement Strategies

A10 Cleveland Clinic: Aligning Quality Outcomes with Financial Performance

A11 Increased Risk Sharing for Increased Managed Care Reimbursement

2:45 - 4:00 PM
Featured Speaker Sessions

B01 MedPAC's Mark Miller: What Medicare's Evolution Means to You

B02 Geisinger's Glenn Steele: Physician Integration to Align Interests, Coordinate Quality, and Lower Costs

B03 Blue Cross and Blue Shield Association's Scott Serota: The Private Sector's Impact on Healthcare Reform

TUESDAY, JUNE 22

7:00 - 7:50 AM
Early Riser Sessions

ER1 Sharp HealthCare: Using Teamwork, Tools, and Technology to Manage RAC Appeals

ER2 Increasing Collections While Preserving Patient Relationships

ER3 Medicare Update for Critical Access Hospitals

8:00 - 9:30 AM
Keynote Speaker

Richard L. Clarke, DHA, FHFMA—Introductory Remarks

Bill Frist, MD: Healthcare Reform—From Debate to Action

10:00 - 11:15 AM
Updates, Legal Trends and Compliance

C01 Measuring Your Hospital's Community Value

C02 Accounting and Auditing Update

Strategic Finance

C03 Community Health System: Ensuring Affordability of Your Hospital's Capital Strategies

C04 An Executive Event: Meet Senator Frist
(This session is available only to senior-level executives in a provider setting.)

Finance and Accounting Operations

C05 Improving Quality with Hospital-Physician Collaboration Incentives

C06 Sisters of St. Francis: Reducing $35M in Non-Labor Cost

C07 Catholic Health East: Enhancing Efficiency and Cutting Costs with Supply Chain Shared Services

PFS/Revenue Cycle/Patient Access

C08 CHRISTUS Health: Using Metrics and Incentives to Create High-Performing Revenue Cycle Teams

C09 Alexian Brothers Health System: Effective POS Collection Reduces Bad Debt by $3M

C10 Creating a True Outsourcing Partnership in Revenue Cycle Management
(HFMA PEER REVIEW® PROGRAM SESSION: MedAssist and Norton Healthcare)*

Managed Care/Payment/Reimbursement Strategies

C11 Regional and Operational Effects on Hospital Pricing

2:45 - 4:00 PM
Updates, Legal Trends and Compliance

D01 Improving Internal Audit with Computer-Assisted Techniques

D02 Medicare Changes: 2010 and Beyond

Strategic Finance

D03 CHRISTUS St. Michael: Funding a Hospitalist Program

D04 Effective Investment Strategies in a Volatile Environment

D05 Success Under Value-Based Purchasing: Strategic and Operational Imperatives

Finance and Accounting Operations

D06 Employed Physicians: Improving Performance and Avoiding Excessive Subsidies

D07 Engaging Staff in EMR Implementation

PFS/Revenue Cycle/Patient Access

D08 St. Clair Hospital: Eliminating Revenue Cycle Leakage with a Self-Improvement Culture

D09 Lourdes Memorial Hospital: Creating an Efficient ED Process for Covering the Uninsured

D10 Health First: Integrating Hospital-Physician Revenue Processes through Automated Data Sharing

Managed Care/Payment/Reimbursement Strategies

D11 Medicare Bad Debt Update: Evaluating Audit Choices, Analyzing Policies and Designing Procedures

6:30 - 10:00 PM

Chapter Presidents' Dinner and Awards *(invitation only)*

WEDNESDAY, JUNE 23

7:00 - 7:50 AM

Early Riser Sessions

ER4 Ensuring Readmissions Appropriateness (HFMA PEER REVIEW® PROGRAM SESSION: Executive Health Resources and Guthrie Health System)*

ER5 Leadership Strategies for Increasing Revenue Cycle Staff Motivation and Productivity

ER6 ICD-10: A Roadmap for Success

8:00 - 9:30 AM

Keynote Speaker

Pat Summitt: A System for Succeeding at Whatever You Do

10:00 - 11:15 AM

Updates, Legal Trends and Compliance

E01 Complying with Debt Covenants by Managing Investment Allocation Risk

E02 Legal Update

Strategic Finance

E03 Healthcare Consolidation Trends and Impacts: The Rise of Regional Superpowers

E04 Best Practices in Board Reporting and Communications

Finance and Accounting Operations

E05 Cleveland Clinic: Enterprise Performance Improvement from Business Intelligence

E06 Integrating Service Line Business, Clinical and Managed Care Strategies

E07 St. Vincent Health: Maintaining Financial Health During Turbulent Times

PFS/Revenue Cycle/Patient Access

E08 Reducing Denials Through Collaboration

E09 Eight Ways to Reduce Bad Debt

E10 Finding Lost Revenue Through Accurate Claims (HFMA PEER REVIEW® PROGRAM SESSION: MedAssets and Phoebe Putney Memorial Hospital)*

Managed Care/Payment/Reimbursement Strategies

E11 Changing Managed Care Reimbursement Models: Financial, Strategic and Operational Implications

* HFMA PEER REVIEW® PROGRAM SESSION
This CPE-eligible session features an educational presentation of an HFMA peer-reviewed product application. Vendors and providers will be co-presenting.

11:30 AM - 1:30 PM

Lunch and Learn: Creating a High-Performance Revenue Cycle

1:45 - 3:00 PM

Updates, Legal Trends and Compliance

F01 Expert Panel: Financing Strategies in an Uncertain Market

F02 Living with RAC: Identifying Vulnerabilities and Improving Processes

Strategic Finance

F03 Readiness Assessment for Reform

F04 Expert Panel: Financial Executive's Guide to Comparing Revenue Cycle Performance

Finance and Accounting Operations

F05 Alegent Health: Financial and Clinical Collaboration Through Technology and Best Practices

F06 Purchasing Services: Reducing Supply Costs Through Transaction Management

PFS/Revenue Cycle/Patient Access

F07 Expert Panel: Overcoming the Challenges of Implementing Bundled Payments

F08 Tenet Healthcare Corporation: Leveraging Self-Service Applications to Achieve Measurable Returns and Empower Patients

F09 Wishard Health Services: Clinical Collaboration for Better Emergency Department Care

Managed Care/Payment/Reimbursement Strategies

F10 Johns Hopkins Medicine: HIPAA 278 Strategies for Administrative Simplification

F11 Analyzing and Appealing Medicare Wage Index Changes for Better Reimbursement

3:15 - 4:30 PM

Featured Speaker Sessions

H01 HCA's Jonathan B. Perlin: Using Technology to Reduce Care Cost and Improve Quality

H02 Leapfrog's Leah Binder: Employer Perspectives on Healthcare Cost Containment

H03 Moody's Lisa Goldstein: Navigating the 2010 Capital Markets

6:00 PM

Chair's Reception and Banquet

CERTIFICATION EVENTS

SATURDAY, JUNE 19 8:30 AM - 4:30 PM
Core Certification Review Course

SUNDAY, JUNE 20 8:30 AM - 4:30 PM
Specialty Certification Review Courses
- Accounting and Finance
- Patient Financial Services

MONDAY, JUNE 21 7:00 AM - 5:00 PM
Certification Exams

EXHIBIT HALL

MONDAY, JUNE 21
11:15 AM – 2:30 PM (Exhibit Hall Lunch)
4:00 PM – 6:00 PM (Exhibit Hall Reception)

TUESDAY, JUNE 22
11:15 AM – 2:30 PM (Exhibit Hall Lunch)
4:00 PM – 6:00 PM (Exhibit Hall Reception)

Welcome to **HFMA's 2010 ANI: The Healthcare Finance Conference.** I look forward to seeing you and sharing HFMA's latest updates on health care during the Tuesday morning address. You will find an abundance of *how-to* solutions in the ANI educational sessions, exhibit hall, and numerous networking settings. While you're here, be sure to also take advantage of the many activities Nashville has to offer!

Richard L. Clarke, DHA, FHFMA
President and CEO
Healthcare Financial Management Association

HOW-TO SOLUTIONS

Here are just a few examples of the solutions you will find.

COST/QUALITY

- How the Cleveland Clinic uses outcomes data to align quality with financial performance and improve regulatory compliance (A10)
- How organizations such as the HCA align technology and clinical processes to improve quality (H01)

REFORM

- How powerful forces are shaping the next decade of healthcare delivery; insights from keynote speakers Ian Morrison, Bill Frist, MD, and George Will
- How your organization can succeed and thrive with upcoming payment and reimbursement changes (F07, A02)

PHYSICIAN INTEGRATION

- How Geisinger Health System uses a range of options to align incentives and coordinate activities among physicians and other care providers (B02)
- How Christus St. Michael makes the business case for a hospitalist program (D03)

RACs

- How Adventist Health System applies best practice processes, tools and communications to manage the RAC process and win RAC appeals (PCS4)
- How Sharpe HealthCare uses cross-functional teams and technology to efficiently manage medical records and RAC appeals processes (ER1)

REVENUE CYCLE

- How Duke University Health System applies cost-to-collect metrics, trend analysis, and labor standards to improve their revenue cycle performance (A08)
- How your organization can achieve high performance status by applying best practices from hospitals recognized by *HFMA's High Performance Award in Revenue Cycle* (Lunch & Learn)

TABLE OF CONTENTS

REGISTRATION HOURS

NOON – 6:00 PM
Saturday, June 19

6:00 AM – 7:00 PM
Sunday, June 20

6:00 AM – 6:00 PM
Monday, June 21

6:00 AM – 6:00 PM
Tuesday, June 22

6:30 AM – 4:00 PM
Wednesday, June 23

CERTIFICATION LOUNGE HOURS

Saturday, noon-6:00 pm
Sunday, 6:00 am-7:00 pm
Monday, 6:00 am-6:00 pm
Tuesday, 6:00 am-6:00 pm
Wednesday, 6:30 am-noon

Please drop by the HFMA Certification Lounge in Delta Island "D," where you can connect and reconnect with other certified members, or just to take a break from the hustle and bustle of the convention. The lounge will be open Saturday morning through Wednesday afternoon.

CPE INFORMATION

Total CPE hours for Early Riser Sessions, Breakout Sessions, and Keynote Addresses: 18.5

See individual descriptions of National Coaching Courses, Preconference Seminars and Preconference Workshops for CPE hours.

Prerequisite/prework not required unless otherwise noted under individual session description.

The CPE Field of Study for sessions is Specialized Knowledge and Applications, unless otherwise indicated in each specific description.

Instructional Method: Group Live

SATURDAY EVENTS

NATIONAL COACHING COURSE 8:30 AM–4:30 PM

NATIONAL COACHING COURSE: CORE CERTIFICATION REVIEW COURSE 8 CPEs

Attaining HFMA's Certified Healthcare Financial Professional (CHFP) designation is a smart career move for anyone. Saturday's National Coaching Course: Core Certification Review Course will provide you with an overview of the healthcare finance industry and help you prepare for the certification exam.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Explain concepts related to and describe application of the content areas covered in the HFMA Core certification self-study guide
- Use the certification study guide materials to prepare for the corresponding Core exam
- Answer any questions about the materials and review activities

PREREQUISITES/PREWORK
Working knowledge of healthcare financial management and general management principles

WHO SHOULD ATTEND
Professionals interested in earning HFMA certification and preparing to take the Core Certification Exam and professionals who want to gain an overview of the healthcare finance industry

SPEAKERS
TBD

Note: For objectives specific to each topic covered, refer to the objectives listed in the self-study guide.

Sunday Golf Outing, Gaylord Springs –
See page 6 for details

DAY AT A GLANCE

8:30 AM-4:30 PM
National Coaching Course: Core Certification Review Course

NOON-6:00 PM
Registration

NOON-6:00 PM
Certification Lounge
(current certified members only)

REGISTER TODAY

Online
hfma.org/ani

Phone
(800) 252-4362, extension 2
Fax
(708) 531-0665
ATTN: Member Services Center

Mail
HFMA, Dept. 77-6063
Chicago, IL 60678-6063

DAY AT A GLANCE

6:00 AM-7:00 PM
Registration

6:00 AM-7:00 PM
Certification Lounge
(current certified members only)

7:00 AM-2:00 PM
Sunday Golf Outing

8:00 AM-5:00 PM
Preconference Seminars

8:00-11:30 AM
Preconference Workshops

8:30 AM-4:30 PM
National Coaching Course: Specialty Certification Review Course

1:00-4:30 PM
Preconference Workshops

4:30-5:00 PM
First Timers Get-Acquainted Session

5:00-6:00 PM
Sunday Keynote Address

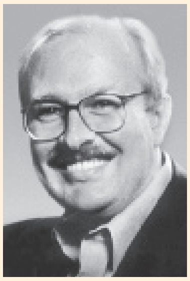
6:00-7:30 PM
ANI Opening Reception on Delta Island

7:30-10:30 PM
Post-Welcome Reception at FUSE Nightclub

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

SUNDAY EVENTS



SUNDAY OPENING GENERAL SESSION 5:00–6:00 PM

1 CPE

Ian Morrison
Healthcare Author, Consultant, and Futurist

The Future of the Healthcare Marketplace

The healthcare industry is looking for a new direction and a new vision, but organizations are stretched thin by the roller coaster of change in management philosophy, reimbursement and medical technology. Ian Morrison, an internationally known healthcare consultant and author of *Future Tense: The Business Realities of the Next Ten Years*, will present his view of the political, economic, and strategic context of change in healthcare.

SUNDAY GOLF OUTING

7:00 am-2:00 pm

The Scottish links-style, par-72 layout offers **18 challenging holes** bordered by limestone bluffs and enhanced by federally protected wetlands. With the **numerous golf awards** it has won throughout the years, Gaylord Springs—designed by former U.S. Open and PGA champion Larry Nelson—has earned its place among the nation's best, and, at the signature fourth hole, you'll find the century-old springhouse from which the club derived its name. Busses will depart from the Gaylord Resort and Convention Center at 7:00 a.m. for an 8:00 a.m. shotgun start, followed by a 19th Hole reception. Register by May 15. *Sponsored by Conifer.*

PRECONFERENCE SEMINARS

8:00 am-5:00 pm

PRECONFERENCE WORKSHOPS

8:00-11:30 am | 1:00-4:30 pm

NATIONAL COACHING COURSE: SPECIALTY CERTIFICATION REVIEW COURSE

8:30 am-4:30 pm

FIRST TIMERS GET-ACQUAINTED SESSION

4:30-5:00 pm

OPENING GENERAL SESSION

5:00-6:00 pm

ANI OPENING RECEPTION ON DELTA ISLAND

6:00-7:30 pm

Greet old friends and make new ones with ANI's opening Reception "Street Party" on Delta Island, immediately following the NEW Sunday Opening General Session. It's a great way to kick-off your ANI experience!

POST-WELCOME RECEPTION AT FUSE NIGHTCLUB

7:30-10:30 pm

Registered attendees will enjoy free admission, as well as cocktails and hors d'oeuvres at FUSE Nightclub, located right in the Opryland Resort. This is an excellent opportunity to continue your networking with other ANI attendees after the Opening Reception. Must have a 2010 ANI registration badge to attend. *Sponsored by Craneware.*

No one under 21 years of age will be admitted.

Delta Island, Gaylord Opryland Resort

SUNDAY NATIONAL COACHING COURSE: SPECIALTY REVIEW COURSE 8:30 AM–4:30 PM

NATIONAL COACHING COURSE: SPECIALTY CERTIFICATION REVIEW COURSE 8 CPEs

Unlock the potential of earning a higher salary and advancing more quickly through your organization by attaining HFMA's Certified Healthcare Financial Professional (CHFP) designation. Sunday's sessions focus on two of the HFMA certification specialty areas: Accounting and Finance and Patient Financial Services.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Explain concepts related to and describe the application of the content areas in one of the following HFMA specialty certification self-study courses: Accounting and Finance, Patient Financial Services
- Use the certification study guide materials to prepare for the corresponding Specialty exam
- Answer questions about the materials and review activities

LEVEL
Intermediate

PREREQUISITES
Working knowledge of healthcare financial management and general management principles

WHO SHOULD ATTEND
Professionals interested in earning HFMA certification and preparing to take the corresponding certification specialty exams and professionals who want to learn more about specific areas of healthcare finance, including current issues, practice management, and regulations

SPEAKERS
TBD

Note: For objectives specific to each topic covered, refer to the objectives listed in the self-study guide.

SUNDAY PRECONFERENCE SEMINARS 8:00 AM-5:00 PM

(PCS1) MEDICARE COST REPORTING 9 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Effectively complete the Medicare Cost Report, including forms, to ensure correct payments
- Identify which cost reporting forms require input and which flow from previous worksheets
- Define the specifics of the worksheets, including the best source for gathering all required input
- Recognize the principles of reimbursement, cost allocation and apportionment to Medicare
- Use new information about limitations and settlements, controversies, and appeals

LEVEL
Basic

WHO SHOULD ATTEND
Individuals directly involved in the preparation and review of Medicare cost reports, but with limited or no practical Medicare cost reporting experience

TOOLS AND TAKEAWAYS
Sample physician time study; provider statistical and reimbursement (PS&R) revenue code mapping schedule; and sample cost report case study with corresponding PS&R report

SPEAKER
Julia DiFrancesco, Director, Deloitte & Touche LLP

(PCS2) ADVANCING TO CFO: PATHWAY TO SUCCESS 9 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Create effective communication plans to facilitate constructive interactions with individuals and groups
- Identify leadership behaviors and change management techniques
- Align personal and organizational conduct with ethical and professional standards
- Integrate strategic business principles and healthcare environmental trends to improve performance

LEVEL
Advanced

PREREQUISITES/PREWORK
Attendees will complete the HFMA Financial Executive Competency Assessment Tool as part of the course to determine areas of additional focus

WHO SHOULD ATTEND
Those looking to advance to the CFO position or gain a better understanding of what role the CFO plays in their organization

CPE FIELD OF STUDY
Business Management and Organization

TOOLS AND TAKEAWAYS
Results from the personalized HFMA Financial Executive Competency Assessment tool and checklist of CFO leadership competencies

SPEAKERS
Randy Fuller, Director of Thought Leadership, Richard L. Gundling, VP of Healthcare Financial Practices, Suzanne Lestina, Technical Manager, Chad Mulvany, Technical Manager, and Todd Nelson, Technical Director, HFMA

Note: This session is available only to senior-level executives in a provider setting.

REGISTER TODAY

Online
hfma.org/ani

Phone
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Fax
(708) 531-0665
ATTN: Member Services Center

Mail
HFMA, Dept. 77-6063
Chicago, IL 60678-6063

SUNDAY PRECONFERENCE SEMINARS 8:00 AM-5:00 PM

(PCS3) ADVANCED CHARGE MASTER STRATEGIES 9 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Determine the impact of healthcare reform on a hospital's revenue cycle and charge master
- Describe the 2010 changes in Medicare's OPPS, CPT, HCPCS, Category II Codes, Category III Codes, and ambulatory payment classifications (APCs), and their effect on the charge master
- Assess compliance and effectiveness of the charge master and charge-capture processes for Medicare and other third party payers
- Develop strategies to employ in selected clinical departments, including the emergency, laboratory, radiology, operating room, and cardiology to take advantage of revenue opportunities

LEVEL
Intermediate

PREREQUISITES/PREWORK
1 to 3 years experience with the charge master

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel

TOOLS AND TAKEAWAYS
Charge master and charge capture opportunity/issues checklists; examples of claims with improvement opportunities; attendee-specific lists of revenue enhancement opportunities based on the attendees' charge master

SPEAKERS
Michael Kovar, Partner, and Stacy Harper, Principal, Tatum LLC

(PCS4) BUILDING A BEST PRACTICE APPROACH TO RAC APPEALS 9 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Apply understanding of a hospital's rights of claims appeal and the RAC appeal process
- Create a system for internal reporting of RAC activity to track alleged medical-necessity coding errors and identify problems in your organization
- Apply tips for effective claims denial appeals management and RAC appeals do's and don'ts
- Apply strategies based on real-life lessons learned, including major RAC targets, RAC readiness recommendations, and process and reporting guidelines

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of RAC process, including reporting, audit response, and appeals

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; compliance officers; legal counsel

TOOLS AND TAKEAWAYS
Case study examples illustrating RAC appeals best practices

SPEAKERS
Robert Corrato, MD, President and CEO, and Michael Taylor, MD, Senior Medical Director, Governmental Retrospective Appeals, Executive Health Resources, Inc; Lynn Leoce, MSN, RN, CPUR, IQCI, ACM,Corporate Director, Case Management, Adventist Health System

SUNDAY PRECONFERENCE WORKSHOPS 8:00-11:30 AM

(PCW1) USING AN EVIDENCE-BASED APPROACH TO ACHIEVE OPERATING AND FINANCIAL GOALS 3.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Use a systematic approach to predict organizational effectiveness
- Provide insight into the factors shaping current operating and financial outcome
- Demonstrate how historic strengths influence your organization's readiness and capacity for healthcare reform
- Identify outcomes and change levers your organization can adjust to improve its future performance

LEVEL
Intermediate

PREREQUISITES/PREWORK
Self-assessment may be completed in advance

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; board members

CPE FIELD OF STUDY
Business Management and Organization

TOOLS AND TAKEAWAYS
Checklist of norms researched for statistical validity in correlation to organizational effectiveness; self-assessment of participants' organizations with comparative benchmarks

SPEAKER
Margo Walter, President and CEO, Creating Effectiveness, Inc.

DAY AT A GLANCE

6:00 AM-7:00 PM
Registration

6:00 AM-7:00 PM
Certification Lounge
(current certified members only)

7:00 AM-2:00 PM
Sunday Golf Outing

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COURSE LEVELS:
Basic
Intermediate
Advanced
Overview
Strategic

SUNDAY PRECONFERENCE WORKSHOPS 8:00-11:30 AM

(PCW2) CAPITAL REGION MEDICAL CENTER: BUSINESS OFFICE CUSTOMER SERVICE BEST PRACTICES 3.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Apply innovative "customer conversation" concepts to improve account resolution and customer satisfaction
- Discuss four styles of communication and their impact on customer service
- Examine how attitude, perception, and behavior relate and transfer into productivity
- Discover how words used with open-ended questioning produce better patient satisfaction results

LEVEL
Intermediate

PREREQUISITES/PREWORK
Bring attitude assessment worksheet to workshop

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers, accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

CPE FIELD OF STUDY
Personnel/HR

TOOLS AND TAKEAWAYS
Attitude test; communication and behavioral style test; list of four behavioral styles; dollar-depreciation matrix

SPEAKERS
Jeff Morgan, Director, Client Services, Revenue Cycle Partners; Debra Froebel, Director, PFS, Capital Region Medical Center

(PCW3) EXPERT PANEL: MIDDLE MANAGER DEVELOPMENT FOR IMPROVED FINANCIAL PERFORMANCE 3.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the middle manager's effect on financial performance related to morbidity, mortality, staff turnover, and department culture
- Drive cultural change for improved performance
- Describe and assess key middle manager competencies as they relate to financial outcomes
- Strengthen financial performance through programs designed to strengthen middle manager performance

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of middle manager's role in organizational performance

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

CPE FIELD OF STUDY
Personnel/HR

TOOLS AND TAKEAWAYS
Middle manager performance competencies; competency assessment and validation

SPEAKERS
Marianne Dietrick-Gallagher, Senior Managing Consultant, IMA Consulting (moderator); Barbara Wadsworth, RN, MSN, MBA, Senior VP, Chief Nursing Officer, Abington Health System; Janetta DeOnna, RN, PhD, Director of Outreach Programs, The Penn State University; Richard Martorelli, Corporate Director, Finance (Nursing), Kennedy Health System

SUNDAY PRECONFERENCE WORKSHOPS 1:00-4:30 PM

(PCW4) FOUR FACTORS TO IMPROVE PHYSICIAN REVENUE CYCLE PERFORMANCE 3.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Apply an effective approach to practice management infrastructure and physician-health system integration
- Assess the leadership needs for appropriate revenue cycle management, including the importance of a partnership with physicians
- Describe the importance of information technology in physician revenue cycle operations
- List the requirements for appropriately reporting revenue cycle information to physicians

LEVEL
Advanced

PREREQUISITES/PREWORK
General knowledge of physician-hospital revenue cycle

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Best practices in professional-fee revenue cycle management

SPEAKER
Margaret Hoban, Executive VP, Southwind Health Partners

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SUNDAY PRECONFERENCE WORKSHOPS 1:00-4:30 PM

DAY AT A GLANCE

6:00 AM-7:00 PM
Registration

6:00 AM-7:00 PM
Certification Lounge
(current certified members only)

7:00 AM-2:00 PM
Sunday Golf Outing

8:00 AM-5:00 PM
Preconference Seminars

8:00-11:30 AM
Preconference Workshops

8:30 AM-4:30 PM
National Coaching Course: Specialty Certification Review Course

1:00-4:30 PM
Preconference Workshops

4:30-5:00 PM
First Timers Get-Acquainted Session

5:00-6:00 PM
Sunday Keynote Address

6:00-7:30 PM
ANI Opening Reception on Delta Island

7:30-10:30 PM
Post-Welcome Reception at FUSE Nightclub

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(PCW5) CRITICAL ACCESS HOSPITALS: REDUCING RISKS AND IMPROVING PERFORMANCE
3.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify ongoing and new reimbursement and operational threats and opportunities for CAHs
- Identify and apply strategies and solutions to address identified issues
- Improve financial and operational performance of CAHs

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of CAH reimbursement and billing rules

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
List of operational and reimbursement issues to be addressed by all CAHs; strategies for addressing identified issues

SPEAKER
Ralph Llewellyn, CHFP, CPA, Partner, Eide Bailly LLP

(PCW6) ICD-10 ON THE HORIZON: PLANNING FOR SUCCESS 3.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- List hospital-specific requirements and timeframe for X12 5010 and ICD-10
- Apply lessons from year 2000 upgrade
- Identify the resources available within your hospital to build a 5010/ICD-10 transition team, including an ICD-10 transition project manager
- Assess the effect of the transition on systems and business processes
- Evaluate the data tools available to map ICD-9-CM to and from ICD-10-CM/PCS data to allow trending of coded data during the transition period
- Develop an implementation plan for the transition to X12 version 5010, ICD-10-CM, and ICD-10-PCS that addresses the financial and productivity impacts of the transition, sequencing efforts within your project plan

LEVEL
Basic

PREREQUISITES/PREWORK
None

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel

TOOLS AND TAKEAWAYS
Sample worksheets demonstrating inpatient and outpatient ICD-9 coding alongside ICD-10 coding; list of affected personnel, processes, systems for a typical hospital; list of 5010/ICD-10 transition risk areas

SPEAKERS
Steve MacCormack, President, Provider Consulting, and Sara Clark, Senior Manager, Provider Consulting Solutions, Inc.; Anita Anderson, Director of Decision Support, St. Joe's Health System

(PCW7) THE FUTURE OF HEALTH CARE: 2020 3.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify global healthcare trends and consider how your organization could be affected
- Identify nontraditional entrants to the healthcare industry and describe how they may affect market dynamics
- Outline the five pillars that will be the basis of a more efficient global health system
- Summarize the key challenges that providers, payers, and other players in the industry will face
- Plan for solutions that will help providers and others thrive in the new healthcare system

LEVEL
Intermediate

PREREQUISITES/PREWORK
Working knowledge of healthcare finance and business environment

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

TOOLS AND TAKEAWAYS
Copy of PricewaterhouseCoopers' *HealthCast 2020* report and survey results; template of future challenges and potential solutions

SPEAKER
Benjamin Isgur, Director, Health Research Institute, PricewaterhouseCoopers, LLP

MONDAY EVENTS

MONDAY KEYNOTE ADDRESS
8:00–9:30 AM
1 CPE

George F. Will
Political Columnist

Politics, Policy, and the Healthcare Debate

Pulitzer Prize-winning George F. Will is the country's most widely read political columnist. And perhaps no one has more or better insights into the issues and political realities of today. Will provides you with an informed and expert view on health reform, public affairs, and American society. He offers a glimpse into what the future holds for healthcare policy. Will's penetrating and incisive commentary on the Washington political scene will bring insight to the issues affecting your patients, your organization, and you.

CONTINENTAL BREAKFAST
7:00–8:00 am

Get your day started off right with a continental breakfast that's available to all conference participants.

HFMA CERTIFICATION EXAMS
7:00 am–5:00 pm

These Internet-based certification exams are available for HFMA members. *Advanced registration required.*

FORUMS BREAKFAST
7:00–7:50 am

Members of the CFO, Revenue Cycle, Medicare Payment, Managed Care, Healthcare Compliance, and Physician Alignment Forums can attend this members-only event to learn and network with their peers on the challenges each group is facing in today's healthcare economy. The breakfast will include tables solely dedicated to each Forum's specific topics, as well as tables with topics that would benefit from multi-Forum participation.

KEYNOTE ADDRESS
8:00–9:30 am

IDEA EXCHANGE EXHIBIT AND LUNCH
11:15 am–2:30 pm

Have lunch in the exhibit hall and visit with more than 400 companies offering ideas and solutions for health-care financial professionals. Don't forget to stop by the Product Showcase, a new offering of the Idea Exchange Exhibit, for great presentations on innovative, results-oriented products.

FEATURED SPEAKER SESSIONS
2:45–4:00 pm

(B01) MedPAC's Mark Miller: What Medicare's Evolution Means to You
Speaker: Mark E. Miller, PhD, Executive Director, Medicare Payment Advisory Commission

(B02) Geisinger's Glenn Steele: Physician Integration to Align Interests, Coordinate Quality, and Lower Costs
Speaker: Glenn D. Steele, Jr., MD, PhD, President and CEO, Geisinger Health System

(B03) Blue Cross and Blue Shield's Scott Serota: The Private Sector's Impact on Healthcare Reform
Speaker: Scott P. Serota, CEO, Blue Cross and Blue Shield Association

IDEA EXCHANGE EXHIBIT AND RECEPTION
4:00–6:00 pm

During the evening reception in the exhibit hall, you will get the chance to mix and mingle with fellow attendees and exhibitors while enjoying beverages and hors d'oeuvres.

MONDAY NIGHT RECEPTION ON THE GENERAL JACKSON RIVERBOAT
6:30–9:30 pm

Enjoy this additional networking opportunity with a reception on the General Jackson Riverboat—an acclaimed Nashville landmark located adjacent to the Opryland Resort. The riverboat will remain in port throughout the evening. Registered conference attendees will be treated to complimentary beverages and great food and music during the event. *Must have a 2010 ANI Registration Badge to attend. Sponsored by RelayHealth.*

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BREAKOUT SESSIONS 10:00-11:15 AM

DAY AT A GLANCE

6:00 AM-6:00 PM
Registration

6:00 AM-6:00 PM
Certification Lounge
(current certified members only)

7:00-8:00 AM
Continental Breakfast

7:00 AM-5:00 PM
HFMA Certification Exams

7:00-7:50 AM
Forums Breakfast

8:00-9:30 AM
Monday Keynote Address

10:00-11:15 AM
Breakout Sessions

11:15 AM-2:30 PM
Idea Exchange Exhibit and Lunch

2:45-4:00 PM
Featured Speaker Sessions

4:00-6:00 PM
Idea Exchange Exhibit and Reception

6:30-9:30 PM
Monday Night Reception on the General Jackson Riverboat

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(A01) EXPERT PANEL: GETTING AHEAD OF NEW ETHICS AND COMPLIANCE RISKS 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify enforcement trends that could affect your hospital, including False Claims Act, Stark, and anti-kickback laws that may be associated with hospital-physician arrangements
- Avoid compliance-program shortcomings that increase risk
- Use voluntary disclosure to curtail liability and mitigate risk
- Respond successfully to government fraud and abuse claims

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of healthcare compliance and ethics

WHO SHOULD ATTEND
CFOs and other financial leaders; compliance officers; accounting professionals

CPE FIELD OF STUDY
Regulatory Ethics

TOOLS AND TAKEAWAYS
List of process steps and protocols that can reduce risk of fraud and abuse claims

SPEAKERS
Patrick Coffey, Partner, Locke Lord Bissell & Liddell LLP; Carmen Wolf, Principal, Blickenwolf, LLC; Chris J. Mollet, Associate University Counsel, University of Illinois at Chicago; Linda Wawzenski, Assistant United States Attorney, Deputy Chief, Civil Division, United States Attorney's Office

(A02) LATE-BREAKING POLICY/STRATEGY SESSION 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

Changes are coming fast in healthcare. We've reserved this session for late-breaking information affecting your financial strategy. Visit *hfma.org/ani* for updated information.

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of healthcare financial strategy

SPEAKERS
TBD

(A03) REDUCING RISKS AND LOWERING COSTS OF DEFINED-BENEFIT PENSION PLANS 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Assess pension plan funding strategies
- Implement investment strategies to minimize risk in pension plans
- Assess whether to use liability-driven investing

LEVEL
Advanced

PREREQUISITES/PREWORK
Knowledge of pension plan funding requirements

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; treasurers; controllers; accounting and finance executives

CPE FIELD OF STUDY
Finance

TOOLS AND TAKEAWAYS
Tools to compare approaches to funding pension plans

SPEAKER
Chris Carabell, Managing Director, Bank of America

(A04) NATIVIDAD MEDICAL CENTER: FROM $25M LOSS TO $8M GAIN 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the key steps in a financial turnaround
- Use a sophisticated payer contracting model to enhance net revenue
- Predict how productivity changes can improve margin and market share for the emergency department
- Plan, structure, and manage culture change

LEVEL
Intermediate

PREREQUISITES/PREWORK
Experience in revenue cycle management or turnaround dynamics

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; reimbursement and contracting directors and managers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Tools for sequencing and managing a financial turnaround, maximizing revenue in payer contracting, and improving ED productivity

SPEAKERS
John Ruffner, Practice Management Consultant, MedAmerica; Harry Weis, CEO, Natividad Medical Center; Jeffrey Bass, MD, Emergency Department Medical Director, Natividad Medical Center

(A05) FIVE STEPS TO REDUCING ADMINISTRATIVE COSTS IN GROUP PRACTICES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Use multi-payer tools to manage information—for example, implementing payer edits early in the claim process
- Use technology to automate workflow and improve data quality
- Use data to improve claim processes
- Train office clinical and administrative staff to improve performance efficiency

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of office technology and cost structure of physician group practices

WHO SHOULD ATTEND
Financial leaders managing physician practice reimbursement/payment

TOOLS AND TAKEAWAYS
An action plan for implementing a technology-based multi-payer approach to physician group reimbursement that streamlines workflow; sample data from the process; tools for analyzing cost savings

SPEAKERS
Kenneth Willman, Director, Provider Interface, Humana Inc. (moderator); Nancy G. Brown, Senior VP, Business Development and Government Affairs, athenahealth; Brian Kagel, Principal Marketing Intelligence, Availity LLC; William Banks, Director of Consulting, St. Elizabeth Healthcare; Chris Kean, COO, San Antonio Orthopaedic Group

(A06) MID-MICHIGAN HEALTH: REDUCING LABOR COSTS THROUGH STAFF INCENTIVES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Use non-monetary rewards to motivate staff
- Create an organization-wide program of point-based incentives to improve performance
- Use point-based incentives to foster a collaborative culture, cost-effective staffing, and labor-cost reduction

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of staffing and productivity

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; accounting and finance executives; department managers

TOOLS AND TAKEAWAYS
Sample action plan for point-based incentive plan

SPEAKERS
Lynn Bruchhof, Corporate VP, Human Resources, and Dana Thering, CPA, Financial Analyst, MidMichigan Health

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8:00-9:30 AM
Monday Keynote Address

10:00-11:15 AM
Breakout Sessions

11:15 AM-2:30 PM
Idea Exchange Exhibit and Lunch

2:45-4:00 PM
Featured Speaker Sessions

4:00-6:00 PM
Idea Exchange Exhibit and Reception

6:30-9:30 PM
Monday Night Reception on the General Jackson Riverboat

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(A07) HOSPITAL CORPORATION OF AMERICA: IMPROVING PRODUCTIVITY OF SELF-MANAGED REVENUE CYCLE STAFF 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Develop metrics for staff performance
- Create a system to share timely performance data to motivate employees
- Apply technology to enable the process of sharing performance data
- Ensure and assess improvement in productivity, employee satisfaction, and client satisfaction

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of employee management and productivity

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; accounting and finance executives

TOOLS AND TAKEAWAYS
Sample data-driven incentive compensation plan; tools for getting staff suggestions for improvement; coaching techniques for a data-driven environment

SPEAKERS
Garett Jackson, CPA, CFO, Joseph Shutts, COO, and Tom Rogers, Director of Operations, National Patient Account Services (NPAS)

(A08) DUKE UNIVERSITY HEALTH SYSTEM: MEASURING AND MANAGING COST TO COLLECT 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Using state-specific cost-to-collect data to compare performance
- Track and assess cost-to-collect performance over time
- Use standard revenue cycle labor metrics to improve performance

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of revenue cycle operations and labor cost data

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; CFOs, CEOs, and other executives

TOOLS AND TAKEAWAYS
Comparative cost-to-collect metrics and trends; revenue cycle labor standards; action plan to develop and apply labor standards; case study

SPEAKER
Scott Hawig, Divisional CFO, Duke University Health System

(A09) PARKVIEW HEALTH: LINKING PHARMACY WITH BILLING FINDS $10M REVENUE VARIANCE 1.5 CPEs

PART OF THE PEER REVIEW® PROGRAM SESSION

TOPIC AREA
Peer Review® Showcase; PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify revenue gaps in pharmacy financial management
- Modernize pharmacy revenue management
- Identify and pursue opportunities for systematic pharmacy revenue improvement
- Measure pharmacy charge-capture success

LEVEL
Basic

PREREQUISITES/PREWORK
None

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; accounting and finance executives; supply chain professionals

TOOLS AND TAKEAWAYS
Working documents from Parkview Health's pharmacy revenue integrity initiative; ROI metrics for pharmacy revenue management; case study of unintended revenue consequences of a clinical IT initiative

SPEAKERS
Kelley Blair, VP, Business Solutions Group, Craneware; Kathy Lytal, Director, Revenue Integrity, Parkview Health

This CPE-eligible session features an educational presentation of an HFMA peer-reviewed product application. Vendors and providers will be co-presenting.

(A10) CLEVELAND CLINIC: ALIGNING QUALITY OUTCOMES WITH FINANCIAL PERFORMANCE
1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Assess how quality outcomes will affect your organization's case mix index and reimbursement
- Compare your hospital's performance with industry norms and peer groups
- Collaborate with physicians to ensure documentation that fully captures CC and MCC rates, patient severity, and risk of mortality
- Use documentation tools to sustain financial gains while maintaining regulatory compliance

LEVEL
Intermediate

PREREQUISITES/PREWORK
Knowledge of quality measures and reimbursement structure

WHO SHOULD ATTEND
Reimbursement and contracting directors and managers; compliance officers

TOOLS AND TAKEAWAYS
Detailed ten-step process for aligning outcomes data with financial performance; checklist of specific documentation issues to support compliance with RACs and ICD-10

SPEAKER
Susan Belley, Coding Manager, Health Data Services, Cleveland Clinic; Garri L. Garrison, RN, CPC, CMC, CPUR, Director, Acute Care Consulting Services, 3M Health Information Systems

(A11) INCREASED RISK SHARING FOR INCREASED MANAGED CARE REIMBURSEMENT 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Assess what types of hospitals will benefit from increased risk sharing
- Assess key components of various risk sharing payment models
- Compare advantages and disadvantages of various risk sharing payment arrangements for your organization

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basics of commercial payer contracting and payment analysis

WHO SHOULD ATTEND
Reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Risk sharing readiness assessment checklist

SPEAKERS
Gregory Herrle, Principal, Consulting Actuary, and Keith A. Kieffer, CPA, RPH, Management Consultant, Milliman

General Jackson Showboat – See page 11
for Monday Night Reception details

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FEATURED SPEAKER SESSIONS 2:45 PM–4:00 PM

DAY AT A GLANCE

6:00 AM-6:00 PM
Registration

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Certification Lounge
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Continental Breakfast

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Forums Breakfast

8:00-9:30 AM
Monday Keynote Address

10:00-11:15 AM
Breakout Sessions

11:15 AM-2:30 PM
Idea Exchange Exhibit and Lunch

2:45-4:00 PM
Featured Speaker Sessions

4:00-6:00 PM
Idea Exchange Exhibit and Reception

6:30-9:30 PM
Monday Night Reception on the General Jackson Riverboat

COURSE LEVELS:
Basic
Intermediate
Advanced
Overview
Strategic

(B01) MEDPAC'S MARK MILLER: WHAT MEDICARE'S EVOLUTION MEANS TO YOU 1.5 CPEs

Medicare Payment Advisory Commission's Executive Director provides an inside view of what's on the horizon for payment reform.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Recognize how Medicare's financial challenges are changing its approach to payment
- Identify the payment innovations MedPAC believes will best control cost and improve quality
- Assess the effect of payment changes on providers

LEVEL
Intermediate

PREREQUISITES
Basics of Medicare payment

SPEAKER
Mark E. Miller, PhD, Executive Director, Medicare Payment Advisory Commission

(B02) GEISINGER'S GLENN STEELE: PHYSICIAN INTEGRATION TO ALIGN INTERESTS, COORDINATE QUALITY AND LOWER COSTS 1.5 CPEs

Geisinger Health System's President and CEO shares the strategies he's used to shape a leading integrated system of care.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify structural and cultural changes required to achieve true integration
- Promote evidence-based medicine, quality and cost improvements, and coordinated care
- Assess the range of options to align incentives and coordinate activities among physicians and other care providers

LEVEL
Intermediate

PREREQUISITES
Familiarity with provider integration issues

SPEAKER
Glenn D. Steele, Jr., MD, PhD, President and CEO, Geisinger Health System

(B03) BLUE CROSS AND BLUE SHIELD'S SCOTT SEROTA: THE PRIVATE SECTOR'S IMPACT ON HEALTHCARE REFORM 1.5 CPEs

Blue Cross and Blue Shield Association CEO Scott Serota highlights innovative collaborations between the Blues and leading providers to dramatically improve healthcare quality, access, and affordability.

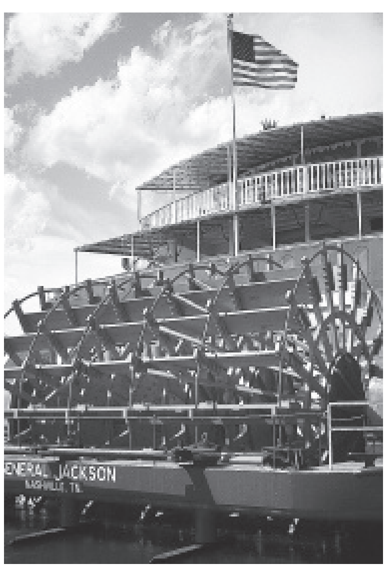
AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Describe the commercial payer perspective on healthcare reform
- Identify opportunities for provider-payer collaboration
- Incorporate understanding of payer innovations into strategic planning for success in a reform environment

LEVEL
Intermediate

PREREQUISITES
Basic understanding of commercial insurance

SPEAKER
Scott P. Serota, CEO, Blue Cross and Blue Shield Association



General Jackson Paddlewheel - See page 11 for Monday Night Reception details

TUESDAY EVENTS

TUESDAY KEYNOTE ADDRESS
8:00–9:30 AM
1.5 CPEs

Bill Frist, MD

Former United States Senator
and Senate Majority Leader

Healthcare Reform—From Debate to Action

Senator Frist believes that in order to achieve comprehensive healthcare reform, America must set a strong foundation where the knowledge-based tools to bend the cost curve can be applied. He will discuss how we can maximize value in healthcare delivery, open the door to continuous quality improvement, and redirect existing monies to where they can do greater good. Senator Frist will also address current trends and future predictions in healthcare with references to both public policy-making and private sector solutions.

CONTINENTAL BREAKFAST
7:00–8:00 am

Get your day started off right with a continental breakfast that's available to all conference participants.

EARLY RISER SESSIONS—NEW
7:00–7:50 am

(ER1) **Sharp Healthcare: Using Teamwork, Tools, and Technology to Manage RAC Appeals**
Speakers: Marina McDonough, Revenue Cycle Consultant, CareMedic Systems; Gerilynn Sevenikar, VP, Patient Financial Services, Sharp HealthCare

(ER2) **Increasing Collections While Preserving Patient Relationships**
Speaker: David G. Morrisey, Director of Development, KeyBridge Medical Revenue Management

(ER3) **Medicare Update for Critical Access Hospitals**
Speakers: John Sheehan, Partner, and Kevin Wellen, CPA, Senior Managing Consultant, BKD, LLP

KEYNOTE ADDRESS
8:00-9:30 am

Introductory Remarks by Richard L. Clarke, DHA, FHFMA President and CEO, HFMA

Keynote Address – Bill Frist, MD

IDEA EXCHANGE EXHIBIT AND LUNCH
11:15 am–2:30 pm

Have lunch in the exhibit hall and visit with more than 400 companies offering ideas and solutions for healthcare financial managers. Don't forget to stop by the Product Showcase, a new offering of the Idea Exchange Exhibit, for great presentations on innovative, results-oriented products.

IDEA EXCHANGE EXHIBIT AND RECEPTION
4:00–6:00 pm

During the evening reception in the exhibit hall, you will get the chance to mix and mingle with fellow attendees and exhibitors while enjoying beverages and hors d'oeuvres.

CHAPTER PRESIDENTS DINNER AND AWARDS
(invitation only)
6:30–10:00 pm

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EARLY RISER SESSIONS 7:00-7:50 AM

(ER1) SHARP HEALTHCARE: USING TEAMWORK, TOOLS, AND TECHNOLOGY TO MANAGE RAC APPEALS 1 CPE

TOPIC AREA
Early Riser-PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Determine who needs to be on the RAC team and how to hold them accountable
- Identify the technology components necessary to efficiently manage the RAC medical records and appeal processes
- Clarify the bottom-line financial impact and communicate improvement requirements back to facilities, departments, and physicians

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of RAC compliance issues.

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel

TOOLS AND TAKEAWAYS
Checklist of fields that need to be captured for RAC tracking and recommended for comprehensive reporting; best practices for the team approach; recommendations on how to hold each party accountable; examples of RAC audit targets and how processes were improved to minimize financial impact in the future

SPEAKERS
Marina McDonough, FHFMA, Revenue Cycle Consultant, CareMedic Systems; Gerilynn Sevenikar, VP, Patient Financial Services, Sharp HealthCare

(ER2) INCREASING COLLECTIONS WHILE PRESERVING PATIENT RELATIONSHIPS 1 CPE

TOPIC AREA
Early Riser-PFS

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify the current challenges with medical collections and the low recovery rate
- Assess the effectiveness of a patient-centric approach to collecting patient balances
- Identify proven methods for increasing collections and preserving relationships
- Use specific tools to lower resistance and motivate payment

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of patient financial services processes

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Sample processes, policies, and staff development tools

SPEAKER
David G. Morrisey, Director of Development, KeyBridge Medical Revenue Management

(ER3) MEDICARE UPDATE FOR CRITICAL ACCESS HOSPITALS 1 CPE

TOPIC AREA
Early Riser-Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify specific Medicare reimbursement opportunities unique to critical access hospitals, including new issues due to legislative, regulatory, and enforcement changes
- Recognize and resolve compliance issues that could reduce reimbursement and/or threaten a hospital's ability to retain CAH status
- Develop longer term strategies for your organization's success as a CAH

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of Medicare reimbursement and CAH reimbursement structures

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
List of the latest legislative, regulatory, and enforcement issues affecting CAHs

SPEAKERS
John Sheehan, CPA, Partner, and Kevin Wellen, CPA, Senior Managing Consultant, BKD, LLP

DAY AT A GLANCE

6:00 AM-6:00 PM
Registration

6:00 AM-6:00 PM
Certification Lounge
(current certified members only)

7:00-8:00 AM
Continental Breakfast

7:00-7:50 AM
Early Riser Sessions

8:00-9:30 AM
Tuesday Keynote Address

10:00-11:15 AM
Breakout Sessions

11:15 AM-2:30 PM
Idea Exchange Exhibit and Lunch

2:45-4:00 PM
Breakout Sessions

4:00-6:00 PM
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6:30-10:00 PM
Chapter Presidents Dinner and Awards *(invitation only)*

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(C01) MEASURING YOUR HOSPITAL'S COMMUNITY VALUE 1.5 CPEs

TOPIC AREA
Updates, Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Document the tax benefit received by your hospital
- Develop key metrics that determine the hospital's position including profitability, cash balance, executive compensation, quality, and community investment
- Measure the financial value of community services provided by the hospital at payment levels below the cost of delivery

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of tax-exempt issues, accounting, reporting, and filing

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; compliance officers

CPE FIELD OF STUDY
Taxes

TOOLS AND TAKEAWAYS
A specific measurement methodology for determining the tax benefits received by a tax-exempt hospital; a structure for establishing the financial value of services provided to the community; specific metrics that can establish and support specific hospital performance in key areas such as cash, profits, and compensation

SPEAKERS
William Cleverley, President, Cleverley & Associates; Craig Bjerke, VP, and Corporate Controller, Ohio Health

(C02) ACCOUNTING AND AUDITING UPDATE 1.5 CPEs

TOPIC AREA
Updates, Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the current accounting and financial reporting requirements, including recent FASB and GASB actions
- Implement recommended changes to accounting practices to comply with these and other important requirements

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of healthcare financial accounting

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; compliance officers

CPE FIELD OF STUDY
Accounting

TOOLS AND TAKEAWAYS
New and updated information from the AICPA; HFMA's Principles & Practices Board recommendations

SPEAKER
Robert M. Valletta, FHFMA, CPA, Partner, PricewaterhouseCoopers, LLP

(C03) COMMUNITY HEALTH SYSTEM: ENSURING AFFORDABILITY OF YOUR HOSPITAL'S CAPITAL STRATEGIES 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Calculate capital capacity and describe how capital capacity varies as a function of management initiatives (e.g., volume/revenue growth and operating expense control) and external market events
- Quantify the impact on the organization's financial position of deferral or trimming of specific strategies
- Determine sources of risk present in the financial plan and assess and manage those risks
- Develop a comprehensive financial plan that is fully integrated with the organization's strategies and apply a best practice approach to monitoring continued viability of the plan

LEVEL
Intermediate

PREREQUISITES/PREWORK
Finance background and working knowledge of capital spending

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

CPE FIELD OF STUDY
Finance

TOOLS AND TIPS
Credit analysis tool/template; debt capacity tool/template; best practice capital position template; incremental final projection analysis

SPEAKER
Jason Sussman, CPA, FACHE, Partner, Kaufman, Hall & Associates

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Chicago, IL 60678-6063

BREAKOUT SESSIONS 10:00-11:15 AM

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6:00 AM-6:00 PM
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COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(C04) AN EXECUTIVE EVENT: MEET SENATOR FRIST 1.5 CPEs

Space is limited; register early to ensure your place. Join Senator Frist for a "Meet the Senator" Q&A forum. This session is limited to senior-level executives in a provider setting.

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the important aspects of healthcare reform from an "insider" perspective
- Determine how healthcare reform and other system changes will affect your organization
- Identify the public perspective of payment reform

LEVEL
Advanced

PREREQUISITES/PREWORK
An understanding of healthcare policy and the legislative process

(C05) IMPROVING QUALITY WITH HOSPITAL-PHYSICIAN COLLABORATION INCENTIVES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Assess current initiatives in hospital-physician collaboration
- Identify factors associated with successful collaborations that improve quality and reduce costs
- Develop an action plan for hospital-physician collaboration
- Implement tools to facilitate successful collaboration

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of healthcare finance and hospital-physician collaboration

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Examples of structures for incentive alignment and tools for sharing performance information among providers; action plan for collaboration

SPEAKER
Neil Pressman, President, Presscott Associates, Ltd.

(C06) SISTERS OF ST. FRANCIS: REDUCING $35M IN NON-LABOR COST 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Organize and direct the efforts of multiple cost-reduction teams
- Identify challenges of complex initiatives in purchased services and human resource management
- Measure savings at the cost-center level, and forecast tangible initiative savings across facilities, departments, and cost centers

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of healthcare finance principles

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and financial executives

TOOLS AND TAKEAWAYS
Real-life examples of practices for addressing complex cost reduction opportunities; examples of management processes and cultural techniques to sustain savings; lessons from multiple cost-reduction initiatives; system-wide initiative tracking tools; samples of savings realization forecasts; team management control reporting tools

SPEAKERS
Gary Dowling, Managing Director, Wellspring Partners; Joel Hoff, Senior VP, Administrative Services, Sisters of St. Francis Health Services, Inc.

(C07) CATHOLIC HEALTH EAST: ENHANCING EFFICIENCY AND CUTTING COSTS WITH SUPPLY CHAIN SHARED SERVICES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify leading practices in supply chain management
- Assess the supply chain shared services model and its benefits
- Implement the building blocks for a successful supply chain shared service
- List Sarbanes-Oxley-like controls in procurement models, both shared service and traditional, including such components as control objectives, control activity, control technique, control type, anti-fraud, and frequency

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic understanding of supply chain processes

WHO SHOULD ATTEND
Supply chain leaders; accounting and finance executives

CPE FIELD OF STUDY
Production

TOOLS AND TAKEAWAYS
Action plan; service level agreement; job description policy/procedure; Sarbanes Oxley-like control matrix; performance metrics

SPEAKERS
Florence Doyle, CRMA, VP, Supply Chain Management, and Peter DeAngelis, FHFMA, CPA, Executive VP, CFO, Catholic Health East

(C08) CHRISTUS HEALTH: USING METRICS AND INCENTIVES TO CREATE HIGH-PERFORMING REVENUE CYCLE TEAMS 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Apply the key elements of high-performance work teams: empowerment, knowledge transfer, and technology adoption
- Create the structure for high-performance work teams
- Identify and implement the metrics for tracking performance and providing staff with performance information
- Structure a pay-for-performance plan that motivates teams by rewarding excellence

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of revenue cycle operations

WHO SHOULD ATTEND
Revenue cycle, PFS, and patient access leaders; other financial leaders

TOOLS AND TAKEAWAYS
Structure of high-performance work teams; implementation roadmap for work teams; do's and don'ts in work-team management

SPEAKERS
Mitzi Green, System Director, Patient Access, CHRISTUS Schumpert Health System; Cassandra Hogans, Director of Business Office Services, CHRISTUS Health; Marjorie Green, President, Healthcare Excellence Institute

(C09) ALEXIAN BROTHERS HEALTH SYSTEM: EFFECTIVE POS COLLECTION REDUCES BAD DEBT BY $3M 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Apply the structure, technology, and methodology used for an effective point-of-service program
- Yield benefits from a point-of-service collections program
- Overcome challenges to implementing such a program
- Apply key success factors

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of revenue cycle systems and operations

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; accounting and finance executives

TOOLS AND TAKEAWAYS
Scorecard examples and monitoring reports used to evaluate the degree of adoption of the tools and processes

SPEAKER
Gary Breuer, VP, Revenue Cycle, Alexian Brothers Health System

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COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(C10) NORTON HEALTHCARE: CREATING A TRUE OUTSOURCING PARTNERSHIP IN REVENUE CYCLE MANAGEMENT 1.5 CPEs

PART OF THE PEER REVIEW® PROGRAM SESSION

TOPIC AREA
Peer Review® Showcase; PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Break down silos between providers and their disparate revenue cycle vendors
- Leverage collaboration for end-to-end process improvement
- Challenge vendors to participate in strategy discussions and offer viable solutions to help cut costs and increase cash collections
- Create a seamless approach to revenue cycle services that can improve community and patient relations

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of revenue cycle operations

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; accounting and finance executives

TOOLS AND TAKEAWAYS
Examples of structures, processes, and communication tools encourage vendors to collaborate for the benefit of the provider

SPEAKERS
Lorrie Wood, VP, MedAssist, Inc.; Gene Hornback, Associate VP, Patient Financial Services, Norton Healthcare

This CPE-eligible session features an educational presentation of an HFMA peer-reviewed product application. Vendors and providers will be co-presenting.

(C11) REGIONAL AND OPERATIONAL EFFECTS ON HOSPITAL PRICING 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Assess the relationship between operating environment and hospital prices, using a national study
- Assess the hospital's inpatient and outpatient price position using critical performance metrics
- Defend hospital pricing in light of unique operating environments by implementing appropriate policies and strategic models

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of reimbursement principles and hospital pricing strategies

WHO SHOULD ATTEND
Reimbursement and contracting directors and managers; accounting and finance executives

TOOLS AND TAKEAWAYS
Data and analysis from a national hospital study that describes pricing relationships; specific metrics that can assess and compare relative price position across facilities after adjusting for intensity and cost-of-living differences; methodology and structure to defend hospital prices to internal and external stakeholders

SPEAKERS
Todd Cox, CPA, FHFMA, FACHE, Director, Corporate Reimbursement, Athens Regional Medical Center; Jamie Cleverley, Principal, Cleverley & Associates

(D01) IMPROVING INTERNAL AUDIT WITH COMPUTER-ASSISTED TECHNIQUES 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the functions of computer-assisted audit techniques
- Incorporate those techniques into financial/operational and healthcare-specific internal audits
- Assess and realize benefits from using computer-assisted audit techniques
- Overcome challenges when implementing such techniques and analytics

LEVEL
Intermediate

PREREQUISITES/PREWORK
Working knowledge of internal audit processes

WHO SHOULD ATTEND
Controllers; accounting and finance executives

CPE FIELD OF STUDY
Auditing

TOOLS AND TAKEAWAYS
Techniques for using computer-assisted auditing techniques for general queries for different types of internal audits; list of the challenges and barriers to implementation

SPEAKERS
Wayne Cafran, Managing Director, and Jennifer Morris, CPA, CIA, CISA, Manager, Risk and Compliance, KPMG; Jeffrey Hensley, Director, Internal Audit, Memorial Sloan Kettering Cancer Center

(D02) MEDICARE CHANGES: 2010 AND BEYOND 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Assess the changes being considered by the Medicare program for FY 2011 and beyond
- Improve 2011 budget accuracy based on a knowledge of federal reimbursement issues
- Identify Medicare reimbursement issues that affect long-range capital decisions and strategic planning

LEVEL
Intermediate

PREREQUISITES/PREWORK
Knowledge of Medicare payment systems

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
A checklist of updates to Medicare rates-of-increases, capital payments, outlier thresholds, case-mix changes, quality reporting elements, and other items requiring action plans for preparation

SPEAKER
Larry Goldberg, Senior Advisor for Health Care Legislative and Regulatory Matters, Grant Thornton

(D03) CHRISTUS ST. MICHAEL: FUNDING A HOSPITALIST PROGRAM 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify characteristics of the two most common approaches to funding and developing a hospitalist program
- Assess current sources and uses of funds and their impact on program design and performance
- Avoid common pitfalls of hospital-physician integration initiatives
- Quantify value of existing or future hospitalist programs

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of the healthcare finance environment and hospitalist programs

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

TOOLS AND TAKEAWAYS
Checklist of essential elements for building hospital medicine programs

SPEAKERS
Ron Greeno, MD, Founder and Chief Medical Officer, Cogent Healthcare; Shawn Barnett, VP and CFO, and Michael Finley, MD, VP of Medical Affairs, CHRISTUS St. Michael Health System

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BREAKOUT SESSIONS 2:45-4:00 PM

(D04) EFFECTIVE INVESTMENT STRATEGIES IN A VOLATILE ENVIRONMENT 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Explain the origins of the current institutional investment approach and why it may not be appropriate for health-care systems today
- Apply more flexibility in your investment classes and allocation ranges
- Design investment programs in a manner that reduces dependence on mean-variance analysis in times of market volatility
- Design investments to fulfill both strategic and tactical needs of the organization

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of investment strategy and policies

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; treasurers

CPE FIELD OF STUDY
Finance

TOOLS AND TAKEAWAYS
Tool to assess appropriateness and effectiveness of investment strategy

SPEAKERS
Thomas Dodd, CFA, FSA, President, and Alyssa B. Cheatham, CFA, Senior Consultant, Stratford Advisory Group, Inc.

(D05) SUCCESS UNDER VALUE-BASED PURCHASING: STRATEGIC AND OPERATIONAL IMPERATIVES 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the structure and mechanisms of value-based purchasing incentives and payment
- Assess the role of care delivery process variance in performance measures that affect national rankings and value-based payment
- Identify strategies and actions to improve national ranking
- Employ a framework for affecting the internal and external operating environment

LEVEL
Intermediate

PREREQUISITES/PREWORK
General understanding of purchasing processes and reimbursement concepts

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

TOOLS AND TAKEAWAYS
Value-based purchasing risk assessment method; process variance indicators, analytical framework template; stake-holder-specific strategies list, national benchmarks

SPEAKERS
Gunter Wessels, PhD, Partner, Total Innovations Group, Inc.; Hal Andrews, JD, CEO, Data Advantage

(D06) EMPLOYED PHYSICIANS: IMPROVING PERFORMANCE AND AVOIDING EXCESSIVE SUBSIDIES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Develop a systematic process to identify and prioritize the key categories contributing to excessive subsidies of employed physicians
- Identify and use the most reliable sources of benchmarks for targeting performance
- Prioritize key initiatives to improve performance, such as staff rightsizing, incentive compensation, and operations improvement

LEVEL
Advanced/Strategic

PREREQUISITES/PREWORK
Working knowledge of physician employment practices

WHO SHOULD ATTEND
CFOs, CEOs, and other executives

TOOLS AND TAKEAWAYS
Survey results, success stories; best practices from ongoing study of physician employment

SPEAKERS
Craig Holm, CHE, CHC, Senior VP, Health Strategies & Solutions, Inc.; D. Louis Glaser, JD, Partner, Katten Muchin Rosenman, LLP

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Chapter Presidents Dinner and Awards *(invitation only)*

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(D07) ENGAGING STAFF IN EMR IMPLEMENTATION 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Define key staff roles in planning for and implementing an electronic medical record system
- Establish a process for obtaining insight and action from key staff
- Establish a project management process to keep the project on time and budget
- Motivate employees and engage them to make significant organizational change

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of electronic medical records

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; budget and finance leaders

CPE FIELD OF STUDY
Business Management and Organization

TOOLS AND TAKEAWAYS
Process map; planning tools; project management monitoring tools; checklist of challenges and barriers to implementation

SPEAKER
TBD

(D08) ST. CLAIR HOSPITAL: ELIMINATING REVENUE CYCLE LEAKAGE WITH A SELF-IMPROVEMENT CULTURE 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Use Lean production methods to develop a comprehensive revenue cycle improvement plan
- Develop a continuous innovation loop and culture to facilitate early identification, intervention, and resolution of revenue cycle issues
- Create strategies to integrate PFS information and data capture to maximize collection opportunities, and improve coordination and communication with insurers, patients, and referring physicians

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of revenue cycle workflows and processes

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Strategies to rebuild patient access and financial services software and processes; a self-replicating process improvement system through inter- and intra-departmental communication, efficient workflows, and effective technology deployment; sample communications to employees about the revenue process works and the importance and role of their individual duties

SPEAKERS
Richard C. Chesnos, CPA, FHFMA, Senior VP and COO, St. Clair Health Corporation; John DeZulovich, Director of Patient Financial Services, and Roxanne T. Marhefka, Manager of Patient Access, St. Clair Hospital

(D09) OUR LADY OF LOURDES MEMORIAL HOSPITAL: CREATING AN EFFICIENT ED PROCESS FOR COVERING THE UNINSURED 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Use automation to improve front-end Medicaid screening and application process in the ED and other outpatient areas
- Apply real-world lessons from Lourdes Memorial Hospital to an effective Medicaid screening program in the ED at other hospitals
- Quantify the financial returns of an insurance coverage improvement program

LEVEL
Intermediate

PREREQUISITES/PREWORK
Understanding of revenue cycle and patient access processes

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Workflow outline of how to implement the process, template to calculate ROI

SPEAKERS
Christopher Baron, FHFMA, Director of Patient Financial Services, Sue Stahl, Lead Financial Counselor, and Donnette Russell, Revenue Cycle Financial Analyst, Our Lady of Lourdes Memorial Hospital, Inc.

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Breakout Sessions

4:00-6:00 PM
Idea Exchange Exhibit
and Reception

6:30-10:00 PM
Chapter Presidents Dinner
and Awards *(invitation only)*

(D10) HEALTH FIRST: INTEGRATING HOSPITAL-PHYSICIAN REVENUE PROCESSES THROUGH AUTOMATED DATA SHARING 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Implement strategy to integrate disparate hospital and physician revenue processes
- Evaluate central intake to route and store scheduling requests
- Centralize preregistration data for better quality and productivity
- Document authorization data for improved reimbursement

LEVEL
Basic

PREREQUISITES/PREWORK
Basic knowledge of revenue cycle processes and IT systems and applications

WHO SHOULD ATTEND
Directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Workflow for receiving, routing, and storing physician orders; checklist of items to document during patient registration; methods to ensure full-charge reimbursement

SPEAKERS
Jim Slate, CPA, VP, Revenue Operations, and Michelle Fox, CHAM, Director, Access Management, Health First, Inc.

(D11) MEDICARE BAD DEBT UPDATE: EVALUATING AUDIT CHOICES, ANALYZING POLICIES, AND DESIGNING PROCEDURES 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Evaluate options for responding to Medicare bad debt audits in order to develop appropriate responses
- Analyze current policies and procedures about collections and bad debts to determine if they are in compliance with the latest developments
- Design new bad debt policies and procedures to comply with recent CMS regulations

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of payment reimbursement and managed care principles

WHO SHOULD ATTEND
Reimbursement and contracting directors and managers; accounting and finance executives

TOOLS AND TAKEAWAYS
Copies of the Code of Federal Regulations and Program Reimbursement Manual that pertain to Medicare Bad Debts; answers from fiscal intermediaries that pertain to the recent Medicare bad debt developments; recommendations and strategies for designing/refining a provider's current collection and bad debt policies; samples of provider changes and fiscal intermediary responses

SPEAKER
Trent Messick, CPA, Managing Member, Dixon Hughes PLLC

COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

Gaylord Opryland
Convention Center

WEDNESDAY EVENTS

WEDNESDAY KEYNOTE ADDRESS
8:00–9:30 AM
1 CPE

Pat Summitt

Head Coach of the University of Tennessee Women's Basketball Team
and Author of *Reach for the Summitt* and *Raise the Roof*

A System for Succeeding at Whatever You Do

Legendary University of Tennessee Lady Volunteers Coach Pat Summitt—the most-winning collegiate basketball coach—will discuss the strategies that brought her unparalleled success in the athletic arena. When applied to business, these strategies can help make you and your organization achieve exemplary results. Summitt will show you and your organization how to get to the top and stay there.

CONTINENTAL BREAKFAST
7:00–8:00 am

Get your day started off right with a continental breakfast that's available to all conference participants.

EARLY RISER SESSIONS
7:00–7:50 am

(ER4) Ensuring Readmissions Appropriateness
Speakers: Joseph Zebrowitz, MD, Executive VP, Executive Health Resources, Inc.; Karen Haesloop, MSN, FNP-BC, Director, Care Coordination Services, Guthrie Health System

(ER5) Leadership Strategies for Increasing Revenue Cycle Staff Motivation and Productivity
Speaker: Brian Shannon, President, EJB World Trade

(ER6) ICD-10: A Roadmap for Success
Speaker: Caroline Piselli, RN, BSN, CHE, Director, ICD-10/P4P Global Program Manager, 3M Health Information Systems

KEYNOTE ADDRESS
8:00-9:30 am

LUNCH AND LEARN
11:30 am–1:30 pm

Speakers from recipients of the *HFMA's High Performance Award in Revenue Cycle* will share their organizations' successful practices.

FEATURED SPEAKER SESSIONS
3:15-4:30 pm

(H01) HCA's Jonathan Perlin: Using Technology to Reduce Care Cost and Improve Quality
Speaker: Jonathan B. Perlin, MD, PhD, MSHA, FACP, FACMI, President, Clinical Services, and Chief Medical Officer, Hospital Corporation of America

(H02) Leapfrog's Leah Binder: Employer Perspectives on Healthcare Cost Containment
Speaker: Leah Binder, CEO, The Leapfrog Group

(H03) Moody's Lisa Goldstein: Navigating the2010 Capital Market
Speaker: Lisa Goldstein, Senior VP/Team Leader Healthcare Ratings, Moody's Investors Services

ANNUAL CHAIR'S RECEPTION AND BANQUET AT OPRYLAND RESORT
Reception: 6:00 – 7:00 pm

Banquet: 7:00 – 10:00 pm

The Annual Chair's Reception and Banquet is always one of the most memorable events of ANI. Enjoy dinner and entertainment and be part of the installation of HFMA's new Board of Directors and the presentation of the Frederick C. Morgan Individual Achievement Award, the Association's highest honor for career-long contributions to healthcare financial management and HFMA.

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EARLY RISER SESSIONS 7:00-7:50 AM

(ER4) ENSURING READMISSIONS APPROPRIATENESS 1 CPE

PART OF THE PEER REVIEW® PROGRAM SESSION

TOPIC AREA
Peer Review® Showcase; Early Riser-Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Evaluate current hospital admission review processes to identify compliance and revenue risks related to medical necessity and readmissions appropriateness
- Describe how to leverage your hospital's utilization-review expertise with an ongoing physician advisement program
- Recognize how to routinely involve admission screening criteria and physician advisor review to reduce avoidable readmission rates

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of Medicare readmissions policies

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
Step-by-step approach to implement a consistent admission review process for readmission cases; questions hospital leaders should ask to evaluate current hospital admission review processes and compliance and revenue risks

SPEAKERS
Joseph Zebrowitz, MD, Executive VP, Executive Health Resources, Inc.; Karen Haesloop, MSN, FNP-BC, Director, Care Coordination Services, Guthrie Health System

This CPE-eligible session features an educational presentation of an HFMA peer-reviewed product application. Vendors and providers will be co-presenting.

(ER5) LEADERSHIP STRATEGIES FOR INCREASING REVENUE CYCLE STAFF MOTIVATION AND PRODUCTIVITY 1 CPE

TOPIC AREA
Early Riser-PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify and address how generational differences and various personality types affect your ability to motivate your staff
- Apply time management skills used by elite performers to help you and your staff gain back hours of productivity each day
- Employ the five top customer service success principles at your hospital

LEVEL
Intermediate

PREREQUISITES/PREWORK
Familiarity with productivity issues and revenue cycle processes

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting director and managers

CPE FIELD OF STUDY
Personnel/HR

TOOLS AND TAKEAWAYS
Customized best practices worksheet

SPEAKER
Brian Shannon, President, EJB World Trade

(ER6) ICD-10: A ROADMAP FOR SUCCESS 1 CPE

TOPIC AREA
Early Riser: PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify and assess organizational risk and readiness associated with ICD-10 implementation
- Describe a process for contacting the fiscal intermediary and payer project managers early in the ICD-10 planning process to assess the need for system upgrades and to establish timelines for data testing
- Evaluate and apply specific uses for the CMS General Equivalence Mappings and Reimbursement Mappings in converting systems and modeling data prior to ICD-10 implementation
- Bring knowledge gained back to your organization to initiate ICD-10 education programs and transition planning

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of clinical documentation

WHO SHOULD ATTEND
CFOs, CEOs, and other executives;directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers

TOOLS AND TAKEAWAYS
Department questionnaire template to assess systems storing and using ICD-9 coded data; Excel spreadsheet template to assess organizational training needs by department; GEMS mapping example; ICD-10 resources links

SPEAKER
Caroline Piselli, RN, BSN, CHE, Director, ICD-10/P4P Global Program Manager, 3M Health Information Systems

DAY AT A GLANCE

6:30 AM-4:00 PM
Registration

6:30 AM-NOON
Certification Lounge
(current certified members only)

7:00-8:00 AM
Continental Breakfast

7:00-7:50 AM
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8:00-9:30 AM
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10:00-11:15 AM
Breakout Sessions

11:30 AM-1:30 PM
Lunch and Learn

1:45-3:00 PM
Breakout Sessions

3:15-4:30 PM
Featured Speaker Sessions

6:00-7:00 PM
Annual Chair's Reception

7:00-10:00 PM
Annual Chair's Banquet

COURSE LEVELS:
Basic
Intermediate
Advanced
Overview
Strategic

(E01) COMPLYING WITH DEBT COVENANTS BY MANAGING INVESTMENT ALLOCATION RISK 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify your hospital's risk tolerance and incorporate it into your investment policy statement
- Recognize how changes to debt structure should prompt a review of investments and asset allocation, and vice versa
- Manage future debt management's impact on assets by scrubbing your covenants to proactively manage market impacts

LEVEL
Advanced

PREREQUISITES/PREWORK
Familiarity with financial ratios, basic investment terminology, and debt covenants and other investment banking terminology

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; compliance officers; legal counsel; board members

CPE FIELD OF STUDY
Finance

TOOLS AND TAKEAWAYS
Tools to quantify your facility's risk tolerance and revise investment policy, and to identify triggers indicating a review if investment is merited

SPEAKERS
Richard Harning, VP and CFO, Allegan General Hospital; William Courson, President, and Tanya Hahn, Senior VP, Lancaster Pollard Investment Advisory Group

(E02) LEGAL UPDATE 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Describe the latest developments in antitrust, fraud and abuse, billing the uninsured, corporate responsibility, privacy, taxation, employment, credentialing, and other areas that are currently undergoing heightened legal scrutiny in healthcare organizations
- Implement strategies to assist with compliance in your organization and help you integrate new legal issues into your business
- Improve your working relationship with legal counsel

LEVEL
Strategic

PREREQUISITES/PREWORK
Basic knowledge of healthcare finance and legal issues

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; practice administrators; controllers; compliance officers

CPE FIELD OF STUDY
Business Law

TOOLS AND TAKEAWAYS
Checklist of action steps for key areas of the law to use in your organization as a guide for legal compliance

SPEAKER
Joanne Judge, JD, CPA, FHFMA, Partner, Stevens & Lee PC

(E03) HEALTHCARE CONSOLIDATION TRENDS AND IMPACTS: THE RISE OF REGIONAL SUPERPOWERS 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Describe the key drivers motivating industry consolidation
- Identify issues that could accelerate/decelerate the regionalization of healthcare delivery and factors that would support/prevent regional health system success
- Implement strategies to position your organization to succeed in an environment likely to be characterized by larger regional and national healthcare systems

LEVEL
Intermediate

PREREQUISITES/PREWORK
Knowledge of healthcare finance

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
Model for quantifying the benefits of scale required for success in responding to regionalization

SPEAKERS
Mark E. Grube, Partner, and Kit Kamholz, CPA, Senior VP, Kaufman, Hall and Associates, Inc.

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COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(E04) BEST PRACTICES IN BOARD REPORTING AND COMMUNICATIONS 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify best practices for reporting to the finance committee and board
- Compare and contrast traditional board reports with best practice board reports
- Implement best practice finance committee and board reporting and use them to improve organizational outcomes

LEVEL
Advanced

PREREQUISITES/PREWORK
Knowledge of strategic financial issues

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

CPE FIELD OF STUDY
Business Management and Organization

TOOLS AND TAKEAWAYS
Actual hospital and health system best practice finance committee and board reports

SPEAKER
Steven Berger, CPA, FHFMA, Founder and President, HealthCare Insights, LLC

(E05) CLEVELAND CLINIC: ENTERPRISE PERFORMANCE IMPROVEMENT FROM BUSINESS INTELLIGENCE 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Develop the processes and business intelligence infrastructure to monitor and manage performance
- Apply business intelligence to facilitate organizational alignment and accountability to achieve strategic objectives
- Apply business intelligence to accelerate performance improvement across the healthcare system, including financial performance, workforce management, quality, and patient experience

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of healthcare operations and finance

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives

CPE FIELD OF STUDY
Business Management and Organization

TOOLS AND TAKEAWAYS
Performance alignment metrics; dashboards for the CEO; template linking performance to annual reviews; customized dashboard views

SPEAKER
Tom Wadsworth, Managing Director, Business Intelligence, Cleveland Clinic

(E06) INTEGRATING SERVICE LINE BUSINESS, CLINICAL, AND MANAGED CARE STRATEGIES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Assess the key trends in market-driven payer strategies with respect to network configurations, provider reimbursements, and integration of clinical quality/outcomes data into reimbursement methodologies
- Determine which contracting models and network configurations are best positioned to capture and retain lives in a managed care world and will be attractive to health plans for forming strategic alliances
- Develop and implement an integrated strategic financial planning approach with your organization's service line business planning processes to optimize managed care revenues

LEVEL
Intermediate/Advanced

PREREQUISITES/PREWORK
Familiarity with managed care concepts and physician alignment issues

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
A guide to managed care strategic financial planning with service line integration; prenegotiation analyses, which serve as the foundation for managed care strategy development as well as negotiating strategies and tactics in developing health plan alliance partners; examples of hospital based pay-for-performance methodologies; outline of key steps involved in developing a clinical integration strategy

SPEAKERS
Christopher Kalkhof, Director, Healthcare Industry Group, Alvarez & Marsal; Roy Schwartz, Associate VP, Managed Care and Payer Relations, University of Pennsylvania Health System/UPENN Medicine

(E07) ST. VINCENT HEALTH: MAINTAINING FINANCIAL HEALTH DURING TURBULENT TIMES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Define financial health and its effects on the healthcare system
- Identify and select tipping points to financial health, including those arising from the economic recession, market shifts, financial market turmoil, and healthcare reform
- Explain core competencies required for future success
- Identify tactical and practical measures of financial health

LEVEL
Advanced

PREREQUISITES/PREWORK
Knowledge of strategic financial planning

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
Tools for organizations dealing with financial health issues to articulate the situation succinctly to the board, leadership, medical staff, employees, and communities; checklist of impact of health reform on financial health; sample proven approaches of how the CFO of an 18-hospital system successfully manages and collaborates among revenue cycle, case management, managed care, physicians, and others

SPEAKER
Ian Worden, CPA, FHFMA, Executive VP, COO, St. Vincent Health

(E08) REDUCING DENIALS THROUGH COLLABORATION 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Define and identify your denials
- Appeal denials successfully to increase cash flow
- Track and report on denials to assist process improvements
- Reduce denials and use data in payer contract negotiations

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of revenue cycle process and payer relations

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Denial definitions; tracking tools; performance reports

SPEAKER
Rayanna Moore, System Director, Revenue Cycle, Appalachian Regional Healthcare System

(E09) EIGHT WAYS TO REDUCE BAD DEBT 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify eight common operational sources of uncompensated care revenue leakage
- Calculate specific performance metrics relative to bad debt
- Determine appropriate actions to reduce bad debt based on performance data

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of bad debt dynamics

WHO SHOULD ATTEND
CFOs, CEO, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Calculation templates and methodologies to assess an organization's bad debt performance, identify breakdowns in the patient management pathway, and identify solutions

SPEAKERS
Francis Hollweck, Senior Manager, and Brian Sanderson, Partner, Crowe Horwath LLP

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COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(E10) PHOEBE PUTNEY MEMORIAL HOSPITAL: FINDING LOST REVENUE THROUGH ACCURATE CLAIMS 1.5 CPEs

PART OF THE PEER REVIEW® PROGRAM SESSION

TOPIC AREA
Peer Review® Showcase; PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Demonstrate how to capture charges lost through typical operational inefficiencies
- Identify operational gaps and lost revenue as a result of spot checking and manual audits
- Recognize opportunities for process change and/or training to improve charge capture workflow

LEVEL
Basic

PREREQUISITES/PREWORK
None

WHO SHOULD ATTEND
Controllers; accounting and finance leaders; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Top 10 operational stop-loss list

SPEAKERS
Wendy Allen, Director, Revenue Management, Phoebe Putney Memorial Hospital; Rebecca Haworth RN, MHA, VP, Charge Capture Audit, MedAssets, Inc.

This CPE-eligible session features an educational presentation of an HFMA peer-reviewed product application. Vendors and providers will be co-presenting.

(E11) CHANGING MANAGED CARE REIMBURSEMENT MODELS: FINANCIAL, STRATEGIC, AND OPERATIONAL IMPLICATIONS 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify key contracting priorities, initiatives, and terms that are being negotiated nationally and regionally and explore how provider organizations are preparing for and responding to healthcare improvement and reform pressures
- Compare the models of value-driven healthcare that are being developed and implemented by national and regional health plans, including full and partial risk, pay for performance, episode-based payments and care packaging, patient-centered medical home, and traditional Medicare-based and other payment systems
- Adapt to evolving reimbursement structures and initiatives that encourage coordination among hospitals, affiliated physicians, and health plans

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic understanding of managed care contracting and reimbursement

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Outline of the priority initiatives of national and regional health plans on value-driven healthcare and provider reimbursement; outline of the evolving provider reimbursement models and the financial and operational implications of each; sample guidelines enabling financial leaders to prioritize resources and respond to current market pressures; sample quality and cost information to make informed decisions using Chartered Value Exchange (CVE); sample models and best practices for moving toward transparent price and service value without sacrificing commercial reimbursement; recommendations for value-driven healthcare

SPEAKERS
Terri L. Welter, Principal, ECG Management Consultants, Inc.; Martin D'Cruz, FHFMA, VP, Managed Care Services, St. Vincent Health

HFMA's High Performance Award in Revenue Cycle – See page 33 for Lunch and Learn details

LUNCH AND LEARN 11:30 AM-1:30 PM

CREATING A HIGH-PERFORMING REVENUE CYCLE 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

This session will highlight those hospitals that have achieved *HFMA's High Performance Award in Revenue Cycle*. The award winning providers will discuss the revenue cycle characteristics and approaches that drive the most value to their patients, physicians, and communities and provide insights into what strategies they employed to achieve this designation.

LEVEL
Intermediate

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify key strategic and tactical characteristics that provide high-performance in revenue cycle operational efficiency, patient satisfaction, and financial stability
- Compare the relationship between these characteristics and a high-performance organization
- Identify successful practices and process improvements for your organizations
- Identify steps to implement these practices

PREREQUISITES/PREWORK
Working knowledge of revenue cycle

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; controllers; accounting and finance executives

TOOLS AND TAKEAWAYS
Access to ***Patient Friendly Billing®*** tools

SPEAKERS
Recipients of *HFMA's High Performance Award in Revenue Cycle* will share their organizations' best practices

BREAKOUT SESSIONS 1:45-3:00 PM

(F01) EXPERT PANEL: FINANCING STRATEGIES IN AN UNCERTAIN MARKET 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Describe best practices that contribute to successful financing strategies
- Identify specific examples of financing structures and alternatives
- Identify factors influencing the capital markets
- Position your health system for financing success

LEVEL
Intermediate

PREREQUISITES/PREWORK
Understanding of capital structure and capital needs

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; compliance officers; legal counsel; board members

CPE FIELD OF STUDY:
Finance

TOOLS AND TAKEAWAYS:
Best practices employed by peer hospital finance teams

SPEAKERS
Kenneth Vallrugo, Managing Director, Bank of America Merrill Lynch (moderator); Steve Gilmore, Director, Capital Finance, Ascension Health; Edward Mann, CPA, Treasurer, Kettering Health Network; Kerry Vermillion, FHFMA, CPA, FACHE, CMA, EVP and CFO, Baptist Health Care

(F02) LIVING WITH RAC: IDENTIFYING VULNERABILITES AND IMPROVING PROCESSES 1.5 CPEs

TOPIC AREA
Updates, Legal Trends, and Compliance

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify known vulnerabilities with both complex and automated reviews
- Develop action-oriented plans for addressing RAC issues
- Recognize audit results that trigger additional areas of focus
- Manage the RAC appeals process

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic understanding of RAC

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
Specific examples of audit findings and suggestions for avoiding similar mistakes; decision-making points in the RAC appeals process

SPEAKER
Day Egusquiza, President, AR Systems, Inc

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BREAKOUT SESSIONS 1:45-3:00 PM

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COURSE LEVELS:

Basic
Intermediate
Advanced
Overview
Strategic

(F03) READINESS ASSESSMENT FOR REFORM 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Recognize the major areas of healthcare reform
- Discover how health systems are preparing for healthcare reform
- Apply leading practices that have been helpful to health systems as they prepare for the future

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of payment trends and reform issues

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance leaders; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
Results of the KPMG Healthcare Reform Readiness Assessment survey

SPEAKERS
Mark Higdon, Partner, and Susan Davis, Director, KPMG LLP; Jerry Wollman, Senior Vice President, Corporate Operations, University of Maryland Medical System

(F04) EXPERT PANEL: FINANCIAL EXECUTIVE'S GUIDE TO COMPARING REVENUE CYCLE PERFORMANCE 1.5 CPEs

TOPIC AREA
Strategic Finance

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify the revenue cycle indicators most important to monitor
- Compare your current revenue cycle situation with results of a revenue cycle performance survey
- Analyze the technology-enabled, patient-focused processes and staffing models that should be implemented
- Define the risks and critical success factors for pursuing an accelerated, organization-wide revenue cycle change initiative

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of the revenue cycle key performance indicators

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Self-calculating revenue cycle bottom-line opportunity spreadsheet; self-calculating tool to identify the return-on-knowledge opportunity related to revenue cycle employee development; self-calculating tool to identify the feasibility of outpartnering revenue cycle functions in a performance-based agreement; guide to assessing and selecting the best outpartner firms; model for determining appropriate revenue cycle FTE ratios; benchmarks for important non-traditional revenue cycle indicators

SPEAKERS
Bobette Gustafson, President & CEO, Gustafson & Associates, Inc.; Lisa Montgomery, FHFMA, CFO, Medical University of South Carolina; Michael M. Marshall, CPA, VP of Finance and CFO, Anderson Hospital; Bruce Whitfield, CPA, CFO, St. Patrick Hospital & Health Sciences Center

(F05) ALEGENT HEALTH: FINANCIAL AND CLINICAL COLLABORATION THROUGH TECHNOLOGY AND BEST PRACTICES 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Summarize how a standardized staffing grid facilitates integrated staffing
- Identify how staffing decisions are affected by the bilateral relationship between a unit's labor accounting and nursing care model
- Describe how interactive dashboards can help identify potentially negative trends before they affect productivity

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of clinical-financial interactions

WHO SHOULD ATTEND
CFOs, CEOs, and other executives

TOOLS AND TAKEAWAYS
End-to-end process chart, including types of tools needed to foster high-quality patient care staff planning in a cost-conscious environment; staffing grid for building tools; sample financial tracking reports

SPEAKER
Connie Blietz, RN, BSN, MBA, NE-BC, Chief Nurse Executive, Mercy Hospital, Alegent Health

(F06) PURCHASING SERVICES: REDUCING SUPPLY COSTS THROUGH TRANSACTION MANAGEMENT 1.5 CPEs

TOPIC AREA
Finance and Accounting Operations

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Describe how making the supply chain more efficient can deliver significant cost savings
- Discover how technology applications used for purchasing can automate the process and also ensure the correct prices are being charged
- Determine how your system or facility can explore options for similar results

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of purchasing and supply chain management

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; compliance officers

TOOLS AND TAKEAWAYS
Case study and best practices for streamlining supply chain operations and reducing end-to-end costs

SPEAKERS
Laurie Jackson, CFO, Broadlane; Doug Watkins, VP, Supply Chain, MedCath Corporation

(F07) EXPERT PANEL: OVERCOMING THE CHALLENGES OF IMPLEMENTING BUNDLED PAYMENTS 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify bundled payment system benefits and risks for physicians, patients, and the organization, based in part on ACE Demonstration Project experience
- Identify potential opportunities for developing and expanding care through quality improvement in clinical pathways, improved coordination of care among specialists, and gainsharing
- Define steps needed to enhance coordination and consistency of care

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of healthcare payment processes

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Specific ways that bundled billing affects the hospital revenue cycle, administrative processes, and physician relationships; strategies for designing processes to meet the challenges of bundled billing

SPEAKERS
David C. Hammer, VP, Revenue Cycle Solutions, McKesson Provider Technologies (moderator); Gary L. Whittington, CFO, Region Services, Baptist Health System; Shannon Fiser, VP Financial Operations, Ardent Health Services

(F08) TENET HEALTHCARE CORPORATION: LEVERAGING SELF-SERVICE APPLICATIONS TO ACHIEVE MEASURABLE RETURNS AND EMPOWER PATIENTS 1.5 CPEs

TOPIC AREA
PFS/Revenue Cycle/Patient Access

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Implement tips for engaging patients and increasing patient loyalty
- Implement strategies involved in launching a successful self-service program
- Apply a data-driven approach to calculating ROI

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of patient access

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers, accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Summary of self-service best practices; checklist for engaging patients and staff

SPEAKERS
Jeffrey Nieman, VP, Operations, and Romina C. White, National Director, Patient Access Operations, Conifer Revenue Cycle Solutions

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Advanced
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Strategic

(F09) WISHARD HEALTH SERVICES: CLINICAL COLLABORATION FOR BETTER EMERGENCY DEPARTMENT CARE 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Create a new clinical integration specialist role in the ED
- Develop a collaborative work model between the new clinical integration specialist role and case managers
- Improve ED documentation to mitigate quality-related reimbursement rights

LEVEL
Intermediate

PREREQUISITES/PREWORK
Working knowledge of ED operations

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; compliance officers; legal counsel; board members

TOOLS AND TAKEAWAYS
Best practices implementing a clinical integration specialist from Wishard Hospital based on its experience

SPEAKERS
Isaac Myers, MD, VP Clinical and Business Integration, Wishard Health Services; Melinda Tully, MSN, Senior VP Clinical Services and Education, and Paul Weygandt, MD, JD, VP Physician Services, J.A. Thomas and Associates

(F10) JOHNS HOPKINS MEDICINE: HIPAA 278 STRATEGIES FOR ADMINISTRATIVE SIMPLIFICATION 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Identify areas of potential cost reductions and other improvements by implementing the HIPAA 278 authorization request transaction, based on a Johns Hopkins Medicine pilot project
- Categorize the provider and payer steps to automate work flow as part of a HIPAA 278 project
- Measure effect of enhanced administrative simplication
- Determine whether similar projects could benefit your organization

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic knowledge of managed care and reimbursement

WHO SHOULD ATTEND
Controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access

TOOLS AND TAKEAWAYS
Metrics and analysis method to demonstrate benefits; sample project plan

SPEAKERS
Richard (Chip) Davis, PhD, VP for Innovation and Patient Safety, Johns Hopkins Medicine; Jeffrey Troutman, Executive Director and Senior VP, PNC Healthcare, PNC Bank N.A.; David Harris, Partner, PricewaterhouseCoopers, LLC

(F11) ANALYZING AND APPEALING MEDICARE WAGE INDEX CHANGES FOR BETTER REIMBURSEMENT 1.5 CPEs

TOPIC AREA
Managed Care/Payment/Reimbursement Strategies

AFTER THIS SESSION, YOU WILL BE ABLE TO:
- Describe current and proposed changes to Medicare Wage Index regulations
- Identify calculations for wage index, occupational mix, geographic reclassifications, and others
- Compile appropriate supporting documentation
- Analyze the effects of pension costs, contract labor, physician costs, home office costs, and paid hours on Medicare Wage Index calculations

LEVEL
Intermediate

PREREQUISITES/PREWORK
General knowledge of Medicare payment policies

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; reimbursement and contracting directors and managers

TOOLS AND TAKEAWAYS
Summaries of the current and proposed regulations; sample calculations

SPEAKER
Julia DiFrancesco, Director, Deloitte & Touche LLP

(H01) HCA'S JONATHAN B. PERLIN: USING TECHNOLOGY TO REDUCE CARE COST AND IMPROVE QUALITY 1.5 CPEs

Hospital Corporation of America's President of Clinical Services, Jonathan Perlin, will share insights from his success at the VA and HCA in aligning technology and clinical processes to reduce cost and improve quality.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Overcome barriers to cost reduction and quality improvement
- Apply key strategies for aligning technology and clinical processes
- Define success factors for using healthcare IT to improve value

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic understanding of issues related to cost and quality improvement

SPEAKER
Jonathan B. Perlin, MD, PhD, MSHA, FACP, FACMI, President, Clinical Services, and Chief Medical Officer, Hospital Corporation of America (HCA)

(H02) LEAPFROG'S LEAH BINDER: EMPLOYER PERSPECTIVES ON HEALTHCARE COST CONTAINMENT 1.5 CPEs

The Leapfrog Group has been at the forefront of helping progressive employers make provider quality and efficiency a priority in purchasing decisions. Leapfrog's CEO Leah Binder explains the long-term implications for providers.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Identify trends in employer purchasing behavior for health insurance
- Define their impact on commercial payer contracting
- Assess the implications of value-based purchasing on providers

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic understanding of cost and quality issues

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

SPEAKER
Leah Binder, CEO, The Leapfrog Group

(H03) MOODY'S LISA GOLDSTEIN: NAVIGATING THE 2010 CAPITAL MARKET 1.5 CPEs

Moody's healthcare ratings team leader Lisa Goldstein reviews how recent trends and coming reform will affect the capital market.

AFTER THIS SESSION, YOU WILL BE ABLE TO:

- Outline the current capital market outlook
- Describe the ratings agencies' view of reform's impact on the industry
- Identify the key areas of interest for ratings agencies

LEVEL
Intermediate

PREREQUISITES/PREWORK
Basic understanding of issues related to financial health

WHO SHOULD ATTEND
CFOs, CEOs, and other executives; controllers; accounting and finance executives; directors and managers of revenue cycle, PFS, and patient access; reimbursement and contracting directors and managers

CPE FIELD OF STUDY:
Finance

SPEAKER
Lisa Goldstein, Senior VP/Team Leader Healthcare Ratings, Moody's Investors Services

REGISTER TODAY

Online
hfma.org/ani

Phone
(800) 252-4362, extension 2

Fax
(708) 531-0665
ATTN: Member Services Center

Mail
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Chicago, IL 60678-6063

FUTURE ANIs

ANI 2011
June 26-29
Orlando, FL

ANI 2012
June 25-28
Las Vegas, NV

CPE INFORMATION

Total CPE hours for Early Riser Sessions, Breakout Sessions and Keynote Addresses: **18.5**

See individual descriptions of National Coaching Courses, Preconference Seminars and Preconference Workshops for CPE hours.

Prerequisite/prework not required unless otherwise noted under individual session description.

The CPE Field of Study for sessions is Specialized Knowledge and Applications, unless otherwise indicated in each specific description.

Instructional Method: Group Live

The Healthcare Financial Management Association Educational Foundation is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be addressed to the National Registry of CPE Sponsors, 150 Fourth Avenue North, Suite 700, Nashville, TN, 37219-2417. Web site: *www.nasba.org*

HFMA is authorized to award pre-approved Category II (non-ACHE) continuing education credits.

FOUR WAYS TO REGISTER

Visit *hfma.org/ani* to register online.

Call our Member Services Center at (800) 252-4362, extension 2.

Fax the registration form to (708) 531-0665.

Mail the form with payment or credit card information to:
HFMA, Dept. 77-6063, Chicago, IL 60678-6063

MAKE YOUR HOTEL RESERVATION EARLY

HFMA has reserved a block of rooms at the reduced rate of $195 single/$210 double occupancy at the Gaylord Opryland Resort and Convention Center. Gaylord Opryland Hotel rooms are available on a first-come, first-served basis until **May 18, 2010**.

Reservations must be made by calling:
(866) 972-OPRY (US and Canada)
(615) 883-2211 (International)

Gaylord Opryland Resort

DON'T MISS OUT ON ANI FUN ACTIVITIES

Sunday, June 20
- ANI Opening Reception on Delta Island
- Post-Welcome Reception at FUSE Nightclub

Monday, June 21
- Reception on the General Jackson Riverboat

Wednesday, June 23
- Annual Chair's Reception and Banquet at Opryland Resort

REGISTER EARLY

Please submit your registration early in order to allow ample processing time. You will receive an e-mail confirmation as soon as the registration process is completed. Any registrant who has not received an e-mailed confirmation should call HFMA's Member Services Center at (800) 252-4362, extension 2, to confirm that the registration has been received.

IF YOU HAVE TO CANCEL

A refund of the registration fee (less a $50 processing fee) will be granted if cancellation is received at least 10 days prior to the event date. Subsequent cancellations received before the date of the program may be issued an HFMA National credit certificate, good toward any future HFMA National educational programs or select products. Substitutions are permitted. Cancellations must be submitted in writing by fax to (708) 531-0665 or by mail.

OUR IRONCLAD GUARANTEE

HFMA stands behind the quality of our programming; therefore, if you are not satisfied, we will gladly refund your money or provide you with a credit certificate toward any future HFMA National educational programs or select products. Contact HFMA directly at: Two Westbrook Corporate Center, Suite 700, Westchester, IL 60154, Attn: Professional Development, or call (800) 252-4362. Please provide HFMA with your comments within two weeks of the program.

SPECIAL THANKS

HFMA extends a special thank you on behalf of ANI participants and staff to the Tennessee Chapter and Bill Matheney, FHFMA, CPA, for their assistance in planning the conference.

REGISTER BY MAY 14 TO RECEIVE THESE PRICES! ADD $100 TO YOUR TOTAL IF REGISTERING AFTER MAY 14.

HFMA'S 2010 ANNUAL NATIONAL INSTITUTE

SOURCE CODE#: 10ANI56789

1. HFMA BADGE INFORMATION (please print clearly)

☐ Member # ____________________ (optional) ☐ Non-Member

This is my: ☐ Business ☐ Home

Nickname for Badge ____________

First Name/Middle Initial/Last Name

Address (No P.O. Boxes Please)

Job Title

Employer

City/State/Zip Code

Telephone

Cell Phone

E-mail Address

Alternate E-mail Address

2. SELECT YOUR PROGRAM PACKAGE

	Member	Non-Member*
Conference (Early Bird Pricing) Includes all receptions; Keynote Addresses; Breakout Sessions M-W; M-W lunches; Wednesday's Chair's Reception and Banquet, and M-Tu Exhibit Hall Sessions.	☐ $ 895	☐ $1055
Preconference Seminar or Two Preconference Workshops Includes Sunday lunch.	☐ $ 525	☐ $ 625
One Preconference Workshop Does not include Sunday lunch.	☐ $ 275	☐ $ 325
Single Day Includes lunch and two Exhibit Hall Sessions. ☐ Monday ☐ Tuesday ☐ Wednesday	☐ $ 525	☐ $ 625

*If you are new to HFMA, this registration includes a membership with the HFMA.
☐ NO Thanks.

Purchase recordings of all conference sessions

☐ Presentations synched to PowerPoint®, special $99 pre-conference price.
Attendees only. Illinois residents add 10% sales tax.

If additional tickets are needed beyond the conference package, indicate below.

☐ **Sunday Welcome Reception** ____ tickets @ $ 65 $ ________
☐ **Chair's Banquet** ____ tickets @ $ 95 $ ________
☐ **Exhibit Hall Sessions** ____ tickets @ $ 35 $ ________
☐ Mon. Lunch ☐ Mon. Reception ☐ Tues. Lunch ☐ Tues. Reception
(Note: A separate ticket is required to attend each of the four Exhibit Hall sessions.)

Additional Events

These tickets are not included in any program package. If you wish to participate in these events, please check the appropriate box below.

Forum Members-Only Breakfast FREE!

These breakfasts will be held Monday, June 21 at 7:00-7:50 am.

☐ **CFO Forum** ☐ **Revenue Cycle Forum**
☐ **Medicare Payment Forum** ☐ **Managed Care Forum**
☐ **Healthcare Compliance Forum** ☐ **Physician Alignment Forum**

Golf Outing

☐ **FREE for Providers** ☐ **$225 for Vendors** $ ________
Golfers responsible for clubs.

3. CERTIFICATION EVENTS

National Coaching Courses (includes lunch):

	With Self Study*	Using Own Self Study
Core Review Course (Saturday)	☐ $ 695	☐ $ 400
Specialty Review Course (Sunday)	☐ $ 695	☐ $ 400

Select only one specialty review course:
☐ Accounting and Finance ☐ Patient Financial Services
Books shipped prior to ANI; cost includes shipping.

Certification Exams ($150 each):

☐ **Core Exam** (allow 4 hours)
☐ **Specialty Exam** (allow 2 hours each)
☐ Accounting and Finance ☐ Patient Financial Services
☐ Managed Care ☐ Physician Practice Management

HFMA will contact you to schedule exams.
Exams available only on Monday, 7:00 am-5:00 pm.

4. TOTAL YOUR FEES

TOTAL $ ______________ **(If registering after May 14, please add $100 to your total.)**

☐ Check enclosed (payable to HFMA Educational Foundation) or charge my: ☐ VISA ☐ MasterCard ☐ American Express ☐ Discover

Card Number

Expiration Date

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Cardholder's Signature

5. COURSE SELECTION

	Sunday (PCS) (8am-5pm)	Sunday (PCW) (8-11:30am)	Sunday (PCW) (1-4:30pm)	Monday (A) (10-11:15am)	Monday (B) (2:45-4pm)	Tuesday (ER) (7-7:50am)	Tuesday (C) (10-11:15am)	Tuesday (D) (2:45-4pm)	Wednesday (ER) (7-7:50am)	Wednesday (E) (10-11:15am)	Wednesday (F) (1:45-3pm)	Wednesday (H) (3:15-4:30pm)
1st Choice	____	____	____	____	____	____	____	____	____	____	____	____
2nd Choice	____	____	____	____	____	____	____	____	____	____	____	____

6. RETURN THIS FORM

By Mail: HFMA Dept. 77-6063; Chicago, IL 60678-6063
By Internet: Complete the registration form located at *hfma.org/ani*.

By Fax: (708) 531-0665 Attn: MSC
By Phone: (800) 252-4362, extension 2

☐ Please check if you require any special accessibility or accommodations and a member of the HFMA staff will contact you after receiving your registration.

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