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NEWSBRIEF

NEWSLETTER OF THE SOUTHERN CALIFORNIA CHAPTER OF H.F.M.A.

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OCTOBER/NOVEMBER 2006

2006 | 2007

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THE 2006-2007 MEMBER-GET-A-MEMBER CAMPAIGN

Win a Fabulous Vacation

Rick M. Lash, Treasurer / Southern California Chapter, HFMA

Your Membership Committee hopes all of you had a safe and healthy summer. During this time, we have been at work reinventing our "Member Get A Member Campaign."

The "crusade" is in full swing. We hope all of you, our dedicated and committed members, will be of assistance to your chapter by recruiting as many new and former members as possible.

And in addition to knowing that you're helping to keep us a premier chapter, you have an opportunity to win a fabulous Mexican vacation:

7-DAYS/6-NIGHTS IN BEAUTIFUL PUERTO VALLARTA

INCLUDING \$500 TOWARDS THE PURCHASE OF AIRFARE

Continued on page three

CFO Roundtable Luncheon Thursday, October 19

MARK YOUR CALENDAR!

This year's series of CFO Roundtable briefings and discussion was kicked off in July at the Costa Mesa office of Deloitte & Touche LLP. It was a great time to meet our peers and renew old acquaintances. Our next Roundtable will be held on October 19 at the Manhattan Beach offices of Deloitte & Touche LLP.

Presentations include:

Tim Weis / Speltz & Weis LLC
Reporting Community Benefit

Doug Halley / Deloitte & Touche LLP
**Accounting and Reporting Update
for Hospital CFOs**

John Valenta / Deloitte & Touche LLP
Planning for Rate Setting

I look forward to meeting with you there.

Steven R Blake, *Chairman CFO Roundtable*
CFO, Integrated Health Care Holdings, Inc.
1301 N. Tustin, Santa Ana, CA 92705
714.953.3536 / 714.745.6092 cell
714.953.3384 fax / Steve.Blake@IHHIOC.com

Administrative Transition for the SoCal Chapter

Greg Labow, FHFMA

Over the last six years, Christy Thompson has performed administrative duties for this chapter and has been an invaluable member of the team. Earlier this year, Christy informed me that due to other commitments and obligations, she would need to step down from this role at the end of this year. Unfortunately, that time table needed to be moved up and she will have stepped down by the time this *NewsBrief* is distributed.

We will all miss Christy and the support that she has provided. I'd like to thank Christy for all of her efforts over the last six years. We have benefited as a Chapter from her presence. She will be continuing to help in the background with all of the transition details and as a resource for issues as they arise.

The good news is we have a new person on board that has been working with Christy, Lori Kuwahara. Lori has already taken over responsibilities for the Region 11 Symposium and, beginning October 1st, is the contact for the

Continued on page five

FROM THE PRESIDENT'S DESK

Greg Labow



Our first four months have been extremely active, complete with programs that are new to our chapter. Our hours of education during the first reporting period are up by more than 2,000 compared to last year. The first CFO Round Table in Costa Mesa in July was very well received, and we look forward to the next program October 19th in the offices of Deloitte & Touche in Manhattan Beach. Our First Educational Program in Long Beach was a hit with close to 120 attendees. As you can see from the article addressing the program, our state-wide Managed Care Conference in San Francisco was also a great success. Those who did not have an opportunity to attend missed a great event with a great curriculum. Next year, the conference is tentatively scheduled to be held in Lake Tahoe. With an expanded focus, it promises to be another great program.

We also have some great events coming up in the next few months. On October 12, we will present a notable geographic program at St. Bernardine Medical Center in San Bernardino. The following week is the CFO Round Table on October 19th. We are offering group tickets for the play "Sister Act" in Pasadena on November 5th at 2pm. Watch for the announcement as the tickets will be limited. Of course, you can't miss out on the program at the Universal City Hilton Hotel on November 15th. It promises to be eventful. Mark your calendars today to plan to attend.

In December, we will hold our annual Holiday/Christmas Party jointly with AAHAM. The plans are not finalized yet but save December 7th as the tentative date for the festivities. Of course January will be our 9th Annual Region 11 Symposium in Las Vegas at Caesar's Palace from January 28 – January 31, 2007. Make your hotel reservations and register early because the block will sell out.

We currently are preparing our Membership Directory which will be distributed in early November. It is important that the directory be as current as possible. We need your help to ensure that your information is up-to-date and accurate. We pull our information from National's membership listings. Please take a minute to go to their website, review your information and update any necessary data elements. Click on: www.hfma.org/membership. On that screen, click on Manage My Account, enter your user name and password, and from there you can access your profile and update if necessary

It is going to be a busy four months, with a lot of great events coming up. I look forward to seeing you there.

Sincerely,



Greg Labow, FHFMA
President, Southern California Chapter HFMA

2006 | 2007

COMMITTEES

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CFO Round Table

Steven R. Blake, CHAIR

Chapter Leadership Training

Victoria Morgan, FHFMA, CHAIR

Davis Chapter Management

Donna Anglin, FHFMA, CHAIR

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Region 11 Symposium

Ira Alexander, CHAIR

James Stewart, CO-CHAIR

Student Recruitment, Mentoring & Scholarship

Kymblyn Brown, CHAIR

Website

Donna Anglin, FHFMA, CHAIR

HFMA SO-CAL

Lori Kuwahara

323-266-4362

714-844-9354 FAX

lori.kuwahara@gmail.com

SAVE THE DATE

November 15, 2006

Education Session II

Our Second Educational Session of the current HFMA year will be held at the Hilton Los Angeles / Universal City on November 15, 2006, starting with Registration and a Continental Breakfast at 7:30am. Chapter Announcements begin at 8:00am, followed by a Legislative Update at 8:15am. The Session begins at 8:30 and has the following Tracks:

□ GENERAL SESSION / 8:30 am – 10:15 am

Compliance 2006 Update

This session will feature a panel of speakers who will share relevant real life compliance experiences. On the panel will be Barry Weinbaum, Hospital CEO, Katherine Lauer, esq., Latham & Watkins LLP, and John Valenta, Deloitte Touche LLP. They will also be addressing developing regulations and government enforcement activities.

□ BREAK / 10:15 am – 10:30 am

□ BREAKOUT SESSIONS / 10:30 am – 12:30 pm

Track I, Government Programs

Medicare Disproportionate Share Hospital (DSH) – Past present and likely future issues related to the DSH adjustment. This session will focus on DSH developments since the implementation of HCFAR 97-2, and it will touch on regulatory and legal issues that are currently under review in various legal and administrative venues. The presenter will be Robert L. Roth, esq., Partner at Crowell and Moring LLP. Mr. Roth successfully argued the famous Monmouth Case.

Track II, Managed Care

Commercial and Managed Care payers continually develop strategies to minimize hospital reimbursement. Silent PPO schemes, retrospective denials, and lengthy delays in payment are but a few of the evolving games that need to be addressed at the ultimate source - the "Contract". Greg P. Leff, senior vice president at MD-X Solutions, will be giving pointers on how to address these issues in the contract negotiations phase.

Track III, CFO Round Table

Tim Weis (Speltz & Weis) will discuss measuring and reporting community benefits. Vina Vina and Fernando Flores (Deloitte & Touche LLP) will provide an update on accounting and reporting standards for hospitals.

More details on this exciting program will be coming soon!



HFMA SoCal Chapter CFO Roundtable—October 19, 2006 11:30-1:30 (Lunch)

Guest Speakers

Tim Weis-Reporting Community Benefit-
Speltz & Weis LLC

Doug Halley-Accounting and Reporting
Update for Hospital CFOs-Deloitte & Touche LLP

John Valenta- Planning for Rate Setting-
Deloitte & Touche LLP

Location: (Validation stickers will be provided during the Roundtable event). The parking lot is located behind the Deloitte office.

Deloitte & Touche LLP
1500 Rosecrans Avenue, Suite 300
Manhattan Beach, CA 90266

RSVP: October 10

Steven R Blake, CFO
Integrated Health Care Holdings, Inc.
1301 N Tustin, Santa Ana, CA 92705
714.953.3536/714.745.6092 cell/714.953.3384 fax
email: Steve.Blake@IHHCIO.com

Or
Mae Padilla
949.903.8124 cell
maepadilla@deloitte.com

Fabulous Vacation Continued from page one

Our thanks and appreciation goes to Progressive Management Systems and CMRE Financial, Inc. for sponsoring this fabulous prize.

Here's how to win a trip to Puerto Vallarta.

The member who accrues the most points at the end of the HFMA Year is the winner. The point system works as follows:

- You receive two (2) points for bringing a potential new member to Chapter events. Make sure to let our Administrative Assistant know this when your potential new member registers for the event. That's 2 points for each potential new member!
- You receive five (5) points for each potential new member who applies for membership at a Chapter event. (This would give you a total of seven (7) points if a potential new member attends an event and signs up all in one day). Yahoo!!
- You receive two (2) points for potential new members who decide to join *after* attending a Chapter event (not *at* the event). This would give you a total of four (4) points. Way to Go!!
- The person signing up as a new member needs to provide your HFMA name when completing the application form.

So let's get out there and recruit, recruit, recruit.

UNIVERSITY CORNER

Student Recruitment, Scholarship and Mentoring Committee

Call For Speaker Volunteers

As our continued goal and commitment to our key universities, HFMA and its committee has provided some outstanding opportunities and scholarships to upcoming healthcare professionals at UCLA, UCS, CSUN and CSULB. Because our goal is to recruit and mentor upcoming healthcare leaders and be apart of what HFMA has to offer, we would like to call on volunteers who would be interested in becoming a classroom speaker. In this role, you will be asked to discuss your professional job, the benefits of a career in healthcare and how HFMA has played a role in your career, from educational events to networking. We appreciate and thank our continuing volunteers from last year. Interested members please contact:

Annalisa Abbs

Email: aabbs@cbbinc.com / Office: 626-303-1515

Cal State University Northridge Asks HFMA Members To Mentor Students

If you are interested in becoming a *Mentor* and having the fulfillment of guiding a future healthcare professional in their career, call us for more information on the CSUN program:

Annalisa Abbs

Email: aabbs@cbbinc.com / Office: 626-303-1515

Our Committee Needs School Liaisons

As a Liaison, you will meet with faculty and student organizations to introduce the benefits of HFMA student membership. You will also distribute information on classroom speaker programs, conferences and scholarships. If you are interested in becoming a *Liaison* at UCI or USC, please contact:

Kymblyn Brown

Email: kbrown@mail.cvhp.org / Office: 626-813-7805

Course Credit offered for HFMA Membership at Cal State University Long Beach

We would like to recognize Charles DelCampo, professor at Cal State Long Beach and a member of our committee. Due to his efforts, the faculty plan to endorse HFMA membership by giving extra credit for membership.

Student Scholarship Applications

Applications for the student scholarship program are beginning to be distributed by our University Liaisons at the following facilities: UCLA, UCS, CSUN and CSULB.

Student Forum at Cal State Long Beach

Kymblyn Brown, Co-Chair for the Student Recruitment, Scholarship and Mentoring Committee, will be speaking the first week in October at the Student Forum at CSULB.

Region 11 Fall President's Meeting

The Southern California Chapter is part of Region 11 along with six other chapters. Each year, the chapter presidents and president-elects meet with the regional executive, regional executive-elect, a representative from the HFMA National staff and a representative from the Board of Directors. It is an opportunity for the leadership of each chapter to get together, share best-practices and discuss mutual challenges. This year, our national representative was Dick Clark, President and our board representative was Joe Corfits, Director. Cheryl Storey, from the Oregon Chapter is our current Regional Executive and Vickie Morgan, from our own chapter is the Regional Executive-Elect. We met in Maui for two days and a number of important changes were discussed.



Northern and Southern California Chapters got together during the Fall President's Meeting in Maui to discuss plans for next year's conference in September. (L-R) Vickie Morgan, Regional Executive Elect; Jack Ruzic, Northern California President; Barbara Ruzic; Christine Sarrico, Northern California President Elect; Greg Labow Southern California President; Susan Labow.

The first change is that all chapters will be incorporated in Illinois next year. Currently, chapters operate as unincorporated associations of the National organization. This structure leaves open the issue of volunteer and member liability for the acts of the chapter. While this issue is remote, it does exist. When incorporation occurs, we will need to revise our by-laws to conform to the State of Illinois requirements. Once the by-laws are revised, they will be distributed to the membership for approval. This revision will occur between now and next June, the beginning of the HFMA year.

The other upcoming change will be to the Davis Chapter Management System (DCMS), the method by which chapters' performance and contributions to the membership is measured. A task force to review the current program and make recommendations for changes worked for the last two years. Ira Alexander, from Southern California was one of the members of this task force. The recommendation was to create a Chapter Balanced Score Card (CBSC) and there was significant

Continued on page five

Transition *Continued from page one*

Southern California Chapter as well. Lori comes highly recommended and I am certain she will do a great job. We are in the process of transitioning everything from Christy to Lori and will soon have a permanent HFMA e-mail address for her; in the interim, you can use lori.kuwahara@gmail.com. Lori's phone number is 323-266-HFMA(4362).

All of us anticipate a smooth transition, but if there are any questions, please feel free to contact Lori. I am also available at 562-843-1510.

Region 11 Meeting

Continued from page four

discussion of items for the measurements on the score card and how they are impacted by the makeup of the individual chapters. For example, small rural chapters perform quite differently compared to large urban chapters and all participants felt strongly that these differences need to be taken into consideration. All the input will be taken back to the Board and final revisions in the plan will be coming out over the next few months.

All-in-all it was a very good meeting in a great location. Both Debby Chanen and I had some good time to interact with the other chapters. We were also able to get together with the Northern California Chapter to discuss moving forward on plans for next year's Managed Care Conference (look for a new name and expanded program). Next year's meeting will be in Sun Valley, Idaho.

NEW HFMA MEMBERS SINCE JUNE, 2006

Annalisa Abbs
California Business Bureau

Lance D. Adams, MHA
Denials Analyst

Patricia A. Bates
Catholic Healthcare West

Cathryne D. Bell
Saint Joseph Hospital

Harold W. Bond, II
Glendale Adventist Medical Center

Peter A. Boone
Patient Financial Services

Jeff Brown
Hospital Management Services

Jill F. Canada

Corinne Carmody-Riley
Integrated Medical Management

Regino Carrillo

Shawn T. Curtis
St. Mary Medical Center

Tony L. Davis
Davis Consulting

Mildred Dejesus
Health Advocates

Curtis N. Dikes, RN, MSN, B
Kaiser Permanente

Tawni Dillehay-stephen
TDS Consulting

Tracy M. Donegan
Bearingpoint, Inc.

Shirell Y. Edmonds

Bennie-lynn Flores
Health Care Legal Services

Christine S. Fox, PhD
3M Health Information Systems

Melanie Fox
Ernst & Young

John H. Gardner
Logos Health Systems, Inc.

Doug Halley
Deloitte & Touche, LLP

Cindy Hong
White Memorial Medical Center

Cindy Huhn
St. Jude Medical Center

Vicki Kratzke
County of San Bernardino

Karen A. Kretz
Kaiser Permanente

Lori M. Kuwahara
HFMA So Cal Chapter

Kimberly Layne
Medquist

Cindy Lee
Cedars-Sinai Medical Center

Priscila Mainit
Huntington Hospital

Eula McKinney

Liz M. Meisler
LAGLC

Arthur Mejia
Pioneers Memorial Healthcare Dist.

R. Travis Mendenhall
Cedars-Sinai Medical Center

Genea L. Miller
VA GLA: Center For The Study Of Healthcare Provider

John K. Mills, CPA
Catholic Healthcare West

Teresa Nakamoto-Hayman
Kaiser Permanente

Cynthia K. O'Donnell
Oliver View Medical Center

Patricia E. Park
VHA West Coast

Louella Paul
Mission Hospital

David Pringle
St. Mary Medical Center

Greg Rassier
Tenet Healthcare

Catherine Rodriguez
Arrowhead Regional Med Ctr

William Rohde
Hoag Memorial Hospital

Simran Sahny
PriceWaterhouseCoopers

Maryjane R. Schroeder
Chan Healthcare Auditors

Henry W. Seay
Davita

Teresa K. Spence
Pediatric Medical Group

Kirk Stepney
CFHS Holdings, Inc.

Jennifer E. Turpin
Ryan Miller & Associates

Frank S. Vo
Citizens Choice Health

Matthew Warfield
Navigant Consulting

Tim White
Pimco

Maggie A. Williams
Kaiser Permanente

HFMA SO. CALENDAR

2006 EVENTS

- October 12** **GEOGRAPHIC PROGRAM** St. Bernadine Medical Center, 2101 N. Waterman Ave., San Bernardino
- October 19** **CFO ROUND TABLE** Deloitte and Touche, 1500 Rosecrans Blvd., Manhattan Beach / 11:30-1:30
- November 15** **CHAPTER EDUCATIONAL SEMINAR #2**
Hilton Los Angeles, Universal City, 555 Universal Hollywood Dr., Universal City 91608 / 818-506-2500
- December** **ANNUAL HOLIDAY PARTY** Date and location TBA

2007 EVENTS

- Jan. 28-31** **NINTH ANNUAL REGION 11 SYMPOSIUM** Caesars Palace, Las Vegas

Details on all events can be found on the chapter's web site www.hfma-socal.org/

CERTIFICATION EXAMS are scheduled for 8:00 am on the third Friday of each month at Cedar Sinai Financial Services, 6500 Wilshire Blvd 8th floor Training Room (Corner of Wilshire and San Vicente)

Revenue Cycle Corner

————— Rick M. Lash, Treasurer / Southern California Chapter, HFMA —————

In almost all healthcare organizations, *everyone* has an impact on the revenue cycle, whether they realize it or not. Issues including Pricing Transparency, Charity Care, and Consumer Directed Health Plans challenge most of us on a daily basis. I had the opportunity to interview Patricia Kittell, Vice President of Patient Financial Services, Cedars-Sinai Health System, to learn how she and her organization are meeting those challenges and making progress in a very demanding environment.

LASH: What are your areas of responsibility? What is the structure of your management team?

KITTELL: My responsibilities include Patient Accounting, Admitting/Registration, Health Information, Revenue Management and Compliance.

Five directors report to me: four over each department and a Director of Patient Placement. Reporting to them are managers and supervisors.

LASH: How effective are your Patient Accounting Systems, including the claims scrubber? Are you planning any upgrades in the near future?

KITTELL: Cedars-Sinai Medical Center (CSMC) has been operating on an earlier version of SMS for many years. As a result, we've installed many bolt-on systems to improve functionality. We are planning to install an integrated ADT and PA system within the next few years.

LASH: What challenges do you encounter with respect to staff recruitment?

KITTELL: CSMC is a tricky place to get to because there is no direct freeway access. It is also situated in an affluent area of Los Angeles. Recruiting from outside the area is a challenge, primarily due to the cost of housing in the immediate and adjacent areas.

We are working to upgrade the revenue cycle competence of the staff throughout the Patient Financial Services organization. It is very difficult to find entry-level staff with the educational skills needed to get the job done. As more students graduate without competent English and other basic skills, we as an employer may have to start educating them in these skill sets.

LASH: What is your position on staff training? How much training do they receive?

KITTELL: I strongly believe in training and education. This is important for career progression for the staff. Over the last three years, PFS has implemented comprehensive training programs for Registration and PFS staff. We have also implemented quality and work performance standards for employees and have created Quality Assurance departments in Admitting/Registration and PFS. We are working to install these programs in Health Information as well.

LASH: What unique obstacles do you encounter due to the size of the organization?

KITTELL: The number of Outpatient Clinics and multiple access locations make it difficult to standardize processes related to patient check-in, charge capture and Medical Record management.

We generate \$5.75 billion in gross revenue annually. We are managing a multi-billion dollar operation with limited technology; thus again, our need for a new ADT and PA system.

It is challenging to find managers of sufficient caliber to handle the scope and depth of a multi-billion dollar operation and all of its complexities: (1) we have approximately 1,000 beds; (2) over 100 Clinics; (3) we are a teaching/research facility; and (4) we are a quaternary care facility.

I do have a dynamic team of PFS Directors!

LASH: In addition to Charity Care and Pricing Transparency, what other issues will you face in the near future?

KITTELL: Consumer Directed Health Plans will be a challenge for us. We will need to help educate patients so that they can make informed healthcare decisions. With high co-insurance and deductibles, patients will be paying more out of their own pocket. We need to help them learn how to meet these liabilities and determine where they want to have their care and how much they are willing to pay for it.

The RAC audits are probably here to stay and require a substantial amount of record review in the HIM Department. Our regulatory environment is very stringent. JCAHO's Core Measures are also a challenge.

The health plans continue to ratchet down payments, and patients are getting more demanding in terms of their expectations of us.

LASH: What tools are used to manage your revenue stream?

KITTELL: Our Revenue Management Department audits charge-based accounts and managed care underpayments. When they determine that adverse trends exist, they turn them into Process Improvement projects. It becomes an effective, collaborative effort between the clinical departments and Finance.

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White Space/Black Space

Will Weisbaum

White Space and Black Space refers to the dynamic of providers versus payers with regards to the payment of out-of-network (non-par) claims. White Space is the payer's perspective, whereas Black Space is the provider's vantage point. Approximately, 10% of all claims paid are considered out-of-network, so the potential impact to a payer's cost versus a provider's revenue can be significant.

The objectives of White Space are to enhance network effectiveness by renting provider networks in order to expand coverage and access discounts. White space firms promise payer's a goal of getting a discount on 80% of the non-contract claims. For example, a large regional payer paid \$1 billion in Total Claims, \$90 million in Total Out-of-Network which resulted in a Total net revenue of \$100 million. Suppose a white space manager told this payer that they can reduce non-par claims by 60% and discount the remaining non-par claims by 50% thus resulting in a positive \$27 million added to net revenue. The real question is not whether this decision would be made in the affirmative but how long would it take. An educated guess would be about a 3 nano-seconds.

For providers, who are receiving payments from a variety of payers, how do they identify their claims that are being paid by these White Space managers so to maximize their potential revenue? Following these steps will greatly increase a provider's ability to spot non-contracted claims payments. One; copy both sides of the patient identification card because the participating networks are listed on the back of the card. Two; identify all out-of-network claims at admission. Three; compose a list of all networks under contract so that you may compare to the patient's identification card. Four; reject allegations of excessive UCR rates because in California Medicare is not a "reasonable payment" for non-par claims. Five; limit authority for discounting because the payers requesting the discount are trained professionals with many years of experience. Six; use the employer plan terms for leverage. Seventh and finally; this process must be actively managed and measured which means that resources need to be allocated for this area. If budgets are tight outsource these responsibilities because the revenue recovered more than covers the cost for the outsourced firm.

Revenue Cycle Corner

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We are implementing improved charge capture and clinical documentation processes. We are also updating our pricing policies to assure consistency.

Compliance is a positive tool. When you start looking at doing the right thing, it is a benefit to your organization. Compliance does not lose money for you. It improves your net revenue base.

LASH: Do you have Board support?

KITTELL: The Board is very supportive of our redesign efforts. It is incumbent upon the Revenue Cycle VP to educate the Board on what the organization needs and why it needs it. At my monthly Board presentations, I also do a lot of education on the revenue cycle. It is more than just about numbers.

LASH: How does Patient Accounting establish its monthly cash collection goals?

KITTELL: We average the last three months of net revenue, and the goal is to collect in excess of 100 percent of that net patient revenue number.

LASH: How do you establish your claims submission goals?

KITTELL: We have developed best practice performance metrics, not just for claims submission, but for all other PFS areas as well.

LASH: What else would you like to share with us?

KITTELL: I became the Revenue Cycle VP at Cedars-Sinai in 2001. However, I've been managing revenue cycle departments in hospitals since 1989. How many facilities had one revenue cycle leadership position back then? It is important to have someone at the Executive Level, from an operational perspective, not a financial one, managing; (1) the people, (2) the processes, (3) the technology, and (4) setting standards and holding people accountable.

As you can see, Patricia and her organization have a very clear vision of how they want their Revenue Cycle operation to function and a roadmap on how to get there. I want to thank Patricia for making the time to meet with me so that we can share her perspectives on Revenue Cycle Management.

Managed Care and Other Topics Come to Downtown San Francisco

The 16th annual Statewide Managed Care Conference stormed the Grand Hyatt on San Francisco's Union Square, and for three days, the conference center buzzed with 256 attendees, and untold ideas and discussions. The conference was held September 17-19th.

Sunday, the first day of the conference, was dedicated to in-depth discussions of topics including Strategic Planning and Metrics for Contract Reimbursement and Tricks of the Trade for Revenue Cycle Managers. The evening festivities began with a "ballpark" buffet offering a host of fun foods, including corn dogs, "sliders" and popcorn and peanuts, with entertainment by a three-piece oldies band.

The Monday session got underway early, with breakfast commencing at 7:00am with the first session at 8:15. The keynote speaker, futurist Ian Morrison, presented first, and after providing fair warning, proceeded to insult nearly every country's healthcare system while providing both useful comparisons between them and insights as to their advantages and disadvantages. No system escaped unscathed, but the criticisms were both appropriate and devastatingly funny, and provided a useful framework for discussions of what "ought to be" in healthcare.

The second session focused on recent legislative changes in California and their effects on providers. The first two speakers each dissected one new law and its impact, and Kevin Donohue of the Department of Managed Care delivered the state's line on each. He then discussed the proposed new Section 1300.71.39 dealing with unfair billing patterns. This presentation touched on comments from a meeting the previous Friday, so the data was extremely current, although it will be out of date by the time this article is published.

After a very entertaining and informative lunch presentation on the Washington, DC scene from Jeanne Scott (cut far too short, but no less entertaining for its brevity), the breakout sessions began. Topics included Appeals Strategies, Charity Care, ICD-10 updates, IPA/Medical Group Contracting, Legal Considerations in Hospital
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Northern and Southern California Presidents Thank Core Managed Care Committee Members: [BACK L-R] Gordon Johnson, Terry Paff, Jim Moynihan, Brian Marrs, Aimee Arata, Mary Ackley. [FRONT L-R] Vickie Morgan, Debby Chanen, Jack Ruzic, Greg Labow.



Panel Discusses a Progress Report on California SB 260 and AB 1455: [L-R] Kevin Donohue, General Counsel, DMHC; Jennifer Jackman, CEO, Bright Medical Group; Frank Matricardi, Moderator; Kevin Pugliese, Director of Compliance, Brown, Toland Medical Group.



Attendees share ideas at the Forum Member's Breakfast: [L-R] Debby Chanen, President-Elect Southern California; Milan Mehta, Southern California; Will Garand, Southern California; David Hoskinson, Florida; Steve Blake, Southern California; Greg Labow, President, Southern California; Mary Ackley, Chair Managed Care, Northern California.



Closing Panel Discussion: [L-R] Rick Swanson, CAPG; Chris Ohlman, CAHP; Duane Dauner, CHA; Jeff Flick, Region IX CMS.

Managed Care comes to Downtown San Francisco



Key Note speaker Ian Morrison provides lively insights on The Future of American



Moderator Jim Moynihan leads the discussion regarding the ICD-10 Update.

Continued from page eight

Charges, and Predictions for the Next Generation of Managed Care. Kaiser Chairman and CEO George Halvorson finished the day's education with a discussion of why the United States needs an "Industrial Revolution" in Health Care.

At the reception which followed, the band played on, and the food features included a pasta bar with various garlicky delicacies, a sushi bar, and carving stations serving up turkey, ham and prime rib.

Tuesday started early again with a Forum Members breakfast. The general session got underway with a survey of trends in healthcare and a forecast of conditions in 2020, compliments of PWC's Kevin Baldwin and Sandy Lutz. A second session on Consumer Driven Healthcare elicited lots of "I never thought of the consumer that way" comments on the way out. The breakouts which followed varied widely, ranging from strategies for dealing with consumerism, to a session on "What Keeps CFO's Up at Night" to a report from the trenches on Hospital and Health Plan Contracting.

After a light lunch of salad and pasta, the final program was a report on the Medicare Advantage program, featuring speakers from CMS, CAPG, CHA and CAHP. After the award of door prizes and final announcements, the attendees and exhibitors scattered, until they can reconvene September 9-11, 2007. Watch for details of that program, which is tentatively planned to take place in Lake Tahoe.

THE LOOKING GLASS

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"No one is special but everyone is Unique!"

Bob Dumais