

2008 | 2009

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The Best in Healthcare Financial Management

— Jim Kokkines —

As members of the Healthcare Financial Management Association (HFMA), more than 35,000 members representing most hospital and health systems express their commitment to healthcare financial management.

Although the HFMA functions as a national organization, at its heart are 68 local chapters providing members with the essential local focus that reflects the nature of their professional lives. HFMA members adhere to a code of ethics that assures clients, the public and colleagues of their dedication to the highest in professional practice.

HFMA is the nation's most respected resource for healthcare financial management executives and leaders. HFMA provides the resources your healthcare organization needs to achieve sound fiscal health and deliver excellent patient care.

The following points are compelling reasons to continue supporting an employee's membership in HFMA:

- Access to the latest industry initiatives and research not available anywhere else, such as: *Building a New Payment System*, *PATIENT FRIENDLY BILLING*[®], *Healthcare Finance Outlook*, *Community Benefit Reporting*.
- Access to exclusive member-only reports and documents that are not available anywhere else, such as: 2008-2013 Healthcare Finance Outlook, Key Hospital Financial Statistics and Ration Medians, Revenue Cycle Self-Assessment Tools, Chief Financial Officer's Checklist for Disaster Recovery, Medicare Regulatory Resources, and more.
- *hfm* magazine – HFMA's flagship publication annually ranked as the industry's top publication by more than 70 percent of healthcare CFOs.
- *HFMA's Weekly News*: Overview of the industry topics, from legislation and regulation to compliance and prospective payment reform e-mailed weekly

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SAVE THE DATE!!

WEBINAR TO DISCUSS

Updates to the Recent Provider Reimbursement Review Board (PRRB) Rules Revisions

Wednesday, October 15, 2008 / 10:00 am to 11:30 am Pacific Time

SPEAKERS

- Paul Crofton** : Advisor Provider Reimbursement Review Board
Benjamin Cohen : Advisor Provider Reimbursement Review Board
Dave Volk, Esq. : Davis Wright Tremaine

Look for enrollment detail on the Chapter web site and in upcoming email distribution.

MESSAGE FROM THE PRESIDENT

James Cummings

2008 | 2009

COMMITTEES

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Valeria Ruggieri, CHAIR

Networking and Social Committee

King Bechtel, CHAIR

Newsbrief

Kristina Cabral, CHAIR

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Region 11 Symposium

Susan Labow, CHAIR

Student Recruitment, Mentoring & Scholarship

Kymblyn Brown, CHAIR

Website

Donna Anglin, HFMA, CHAIR

Yerger Coordinator

Greg Labow, HFMA

HFMA SO-CAL

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I hope this Newsbrief finds you doing well. Your chapter leadership has been very busy designing and implementing educational and networking programs for you, the members of the Southern California Chapter of HFMA.

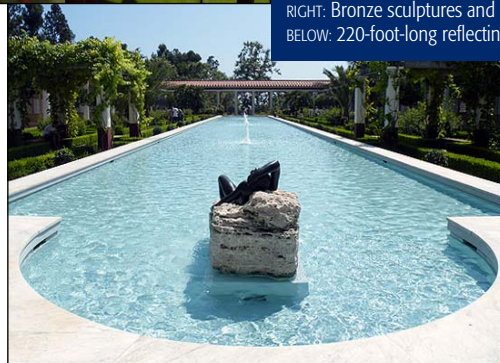
Sam King and the Geographic committee held an excellent geographic program that was presented on three consecutive days in three different locations. The locations were in Orange, San Bernardino, and San Luis Obispo. The attendance at each of the venues was in the expected range and based on the evaluations, the attendees were very satisfied with the programs.

King Bechtel, along with the Social and Networking committee, have also been very busy providing social and networking opportunities for the membership.

They planned a well attended luncheon and tour at the beautiful Getty Villa in Pacific Palisades where guests were able to see Greek, Roman, and Etruscan antiquities arranged by themes including Gods and Goddesses, Dionysos and the Theater, and Stories of the Trojan War. The first tour was a great success and sold out, so the committee scheduled a second luncheon and tour, which was also well attended and enjoyed by all. Thanks to Shery Weaver a Social and Networking committee member who attended both tours and served as an excellent facilitator.



LEFT: Getty Villa Gardens.
RIGHT: Bronze sculptures and replicas found at the Villa dei Papiri.
BELOW: 220-foot-long reflecting pool in the Outer Peristyle.



The August Education Program at the Long Beach Marriott, was a big success. Chris Kinsey and the Program Planning Committee developed an excellent program that was well attended. In fact, there are plans to develop a webinar based on one the August presentations. Thanks to all of the committees who developed sessions for this outstanding education session.

The CFO Roundtable Committee sponsored a luncheon on July 25, 2008. This event was held at Western Medical Center in Santa Ana. The first presenter discussed the proposed reimbursement deductions vs. the current California state budget. The second presenter's topic was "Commercial Contracts & Your Lost Opportunities: Tips on Contracting, Identifying, Appealing and Collecting WC and TPL Claims." As anticipated, this program was well attended, and the evaluations were outstanding.

And then there was the Fall Conference, which was held at the Hyatt in Newport Beach. The Fall Conference is a two-day education sessions that we co-sponsor with the Northern California Chapter of HFMA. This year's conference had outstanding education tracks, and the general session presenters were also noteworthy. They included Steve Ford, son of President and Mrs. Gerald Ford, and Jeanne Scott a Washington, DC Attorney who started her career as a Nurse. She focuses on healthcare policy issues. Prior to the start of the Fall Conference, there was a Golf contest, and several one day workshops on healthcare issues. Thanks to Jim Moynihan and the Fall Conference committee for putting together such an exceptional program.

Continued on page three

MESSAGE FROM THE PRESIDENT

James Cummings*Continued from page two*

Kristina Cabral, our Newsbrief chair, has been very busy. This is the second issue for this chapter year and Kristina is always in search of interesting, quality articles to share with you. If you have written or know of an informative article that you would like to share with the membership, please contact Kristina.

Last May 31st, all HFMA memberships expired so if you have not renewed your membership, it is time to do so. Our chapter leaders may have called you to remind you that membership must be renewed every June 1st. Membership in HFMA is a great investment, our chapter members receive a discounts and or rebates for all chapter sponsored events including the Fall Conference and the Region 11 Symposium, which is held in Las Vegas every January. This year's rebate for the fall conference was \$100, and the rebate for last years Symposium was \$300. Based on rebates alone your membership is money well spent. So if you haven't renewed your membership please do so.

Rick Lash, your President-elect, and I recently attended the Region 11 Fall President's meeting at the Turtle Bay Resort, on the North Shore of the Island of Oahu. We met with the presidents and president-elects of the other six HFMA chapters in Region 11. We shared best practices and ways to make our chapters more successful. I believe that based on the activities we have had thus far and the future activities that are in the planning stages we are off to a very successful year.

I look forward to seeing you at a future chapter event.



James Cummings
President

HFMA, Southern California Chapter

making
connections

TriWest PROVIDER SERVICES

Beware of Referral Directory Solicitation

It has come to our attention that an organization calling itself Military Media is contacting providers by mail and requesting them to purchase a listing in their directory. The letter is in the form of an invoice for a listing in the "Armed Forces Medical Directory, published for selective CHAMPUS providers."

The letter also says the listing will bring providers additional exposure and an additional "influx of CHAMPUS patients, retired and active duty, to your practice." The letter received by some had a Palm Springs, CA address on the letterhead, while the return address had a different Palm Springs address.

This is similar to another solicitation that occurred recently in Alaska, in which some providers were told that they would not receive TRICARE referrals unless they purchased a listing in the directory.

There is a company called Military Media Inc., based out of Poughkeepsie, NY, that offers advertising, marketing and consumer promotions to reach the military audience. When contacted by telephone, a company official said it has no other offices, was not affiliated with this organization and does not print any type of provider directory.

Providers throughout the TRICARE West Region should be on alert to any other similar solicitations. TRICARE referrals are not based on listings purchased in any directory. Network providers are listed in the provider directory at www.triwest.com/provider and do not have to pay to be listed.

If you are contacted by this organization or an organization making similar claims, contact your network representative.

TriWest Healthcare Alliance provides access to quality health care for 2.7 million members of America's military family in the 21-state TRICARE West Region.

HFMA SO. CALENDAR**2008 EVENTS**

October 2 **THE "APCs" OF HOSPITAL OUTPATIENT PPS** Long Beach Memorial Med Ctr / 7:30am - 10:00am

November 20 **CHAPTER EDUCATIONAL PROGRAM II** Embassy Suites, Arcadia / 8:00am - 12:30pm

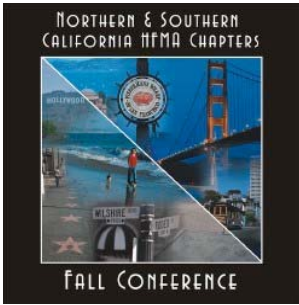
2009 EVENTS

January 25-28 **REGION 11 SYMPOSIUM** SAVE THE DATE! Caesars Palace, Las Vegas

March 19 **CHAPTER EDUCATIONAL PROGRAM III** Center for Healthy Communities, LA / 8:00am - 4:30pm

June 14-18 **HFMA'S ANNUAL NATIONAL INSTITUTE** SAVE THE DATE! / Seattle, Washington

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



Fall Conference Sees 20% Increase in Attendance!

Jim Moynihan, SoCal Co-Chair California Fall Conference

The California Fall Conference held Sept. 14-16 at the Hyatt Newport Beach was very successful with a record number of paid

attendees that exceeded last year's program by 20%. The number of vendors and sponsors also increased, thus creating a financially successful program for the 18th occurrence of the California Fall Conference. The conference also set a record in the number of CFOs who attended perhaps due to some programming changes introduced this year. Your Fall Committee team in conjunction with Steve Blake and the CFO Forum group designed a Saturday CFO luncheon with a guest speaker from Citibank followed by a round of golf at the Pelican Hills Golf Course near to the Hyatt. That was followed by a Sunday pre-conference featuring programs designed specifically for CFOs such as Physician Hospital Alignment Strategies and an update on the Capital Markets We are always pleased to see CFO involvement in the HFMA because it is both a key indicator tracked by national HFMA and a good way to ensure support for all healthcare financial managers in HFMA activities.

The key focus of the Fall Conference has always been on providing practical tools for attendees to do a better job back at the office. Our keynote speakers help us to meet that goal but this year Steve Ford gave us inspiration to do a better job at a higher level. Steve is the third son of Gerald and Betty Ford and a successful actor in both TV series and many movies. The movie clips he showed were a treat to watch but the family photos of the Ford family and the inside stories about President Ford's life were more fascinating "living history". The take away from Steve's presentation was about the importance of character and the crucial responsibility we all have to "do the right thing". Steve talked about important changes in his life and the crucial decisions in the life of his father where the "hard choice" was the "right choice". Pardoning President Nixon may have cost Gerald Ford an election victory against Jimmy Carter but he did what the country needed for healing rather than what was best for him. The contrast between Gerald Ford's "doing the right thing" and reports about the mortgage market meltdown and the Sacramento budget negotiations could not have been greater.

In addition to the successful Saturday Golf/Luncheon and Pre-conference tracks the main program on Monday and Tuesday was jam packed with practical educational programs. Your Fall Committee team designed a three track program with specialized presentations for Finance, Managed Care and Patient Financial Services professionals. Any participant who took good notes could probably return to his or her facility with a handful of ideas about how to save money and do a better job.



TOP Roundtable Luncheon and Golf at Pelican Hills.

BOTTOM Attendees listen to Physician Alignment breakout session with panel speakers.

This is value for money; spend a few hundred dollars on education and find ideas to save many thousands at your facility. While practical money saving "best practices" were paramount in the design of our fall conference, there were also great sessions on California specific regulation and legislation. Our closing panel had the heads of the California Hospital Association, California Medical Association, California Association of Health Plans, California Association of Physician Groups and a representative from the Governor's office describing the latest developments in the budget battle complete with hot-off-the-press blackberry messages from Sacramento.

Many thanks are due to a Southern California team of hard-working volunteers who made this all possible.

From Southern California:

Rick Lash / Co-Chair	Adam Klein	David Epstein
Vickie Morgan	Linda DeAntonio	David Lee
Frank Matricardi	Sam King	Gordon Johnson
Chris Stein	Debbie Chanen	

Our colleagues from Northern California were also a great help and we look forward to joining them in Monterey for next year's conference. Mark it on your calendars now to be in Monterey, California (1.5 hours drive from the San Jose airport) at the Hyatt Monterey for the 19th Annual Fall Conference September 13-15, 2009. Our planning for this begins in late January each year and we are always looking for more people to join in the fun. Everyone in the chapter should let us know about great speakers and ideas for next year's program. Send them to james.moynihan@usbank.com. The Fall Conference is a great tradition and it just keeps getting better!

HFMA's Delegation to Russia

Donna Anglin, FHFMA

I just returned from a 9-day trip to Russia with other HFMA members to learn about Russian healthcare and culture. Our delegation, organized in cooperation with People to People Citizen Ambassador Programs, was led by former HFMA National Chair Joyce Zimowski and included another former chair, Phyllis Cowling. Last year, HFMA President and CEO, Dick Clarke led a delegation on a similar learning trip to China.

The majority of the delegates and guests (22 and 10 respectively), flew out of JFK airport in New York on September 5th and arrived in Moscow on September 6th after a short layover in Frankfurt, Germany. There was a short meeting Saturday night, but the program officially began on the 7th with a full day of tourist activities. The group, which was joined by five delegates and one guest from the United Kingdom, including their Chief Executive Mark Knight and Chairman Chris Calkin, spent the day visiting the Kremlin, including Cathedral Square, and the Armory Museum which holds a collection of Faberge eggs.

Monday morning, we went to the first of four professional meetings. This one was at the National Research Institute of Public Health of the Russian Academy of Medical Sciences. The Institute reported that the greatest concerns for Public Health are the mortality rate, cancer, TB, pneumonia and the lack of preventative care.

Tuesday morning we met with staff of the Federal Compulsory Medical Insurance Fund. This is the fund that is responsible for implementing the Russian Federation Law that grew out of the collapse of the former U.S.S.R. The State is responsible to provide free medical care but the financial resources available are not enough so the quality is poor. On average they spend about 5,000 Rubles (about \$200) per person per year compared to our \$7,439 in 2007. The U.S. spends more per person than any other country in the world. Tuesday evening we flew to St. Petersburg to continue the program.

Wednesday morning we were bused an hour outside the city to visit the Vsevolozhsk Central District Hospital in Leningradsky Region. The group was met by the Chief Physician, Dr. Tatiana Zebode. We later found that she was not just Chief of this hospital but of the entire Region. The hospital Administrator was also a woman. The women delegates were very impressed with this. The hospital itself was in very poor condition but the staff seemed very passionate about their work. They just don't have the financial resources to update the equipment and



LEFT Ivan the Great Bell Tower [said to mark the center of Moscow]

TOP Vsevolozhsk Central District Hospital (in the Leningradsky Region outside of St. Petersburg)

BOTTOM The Great Palace with view of sea channel to Baltic Sea [Peterhof]

infrastructure of the buildings. The afternoon included a guided bus tour of St. Petersburg, which highlighted many of the city's historical buildings and landmarks.

Thursday morning we went to our last professional meeting, this one was the private, for-profit MEDI clinic. This chain of clinics offers dentistry, cosmetic surgery, LASIK and family medicine services. Their clinics are differentiated into economy, business and elite class to provide services to different segments of the population. The company is very profitable and the employees have a great benefit plan including employee discounts, which they seemed very happy with. The afternoon was spent at the world famous Hermitage Art Museum, part of which was once the Winter Palace of the Russian Tsars.

Friday was all tourist activities. We took a tour of the town of Peterhof to visit one of the Summer Palaces of the Tsars. The afternoon was spent touring the Peter and Paul Fortress and Our Savior on the Spilled Blood Cathedral. That night we went to a performance of Swan Lake at the Hermitage Theatre.

Saturday was another half-day tour, this time it was Catherine's Palace, another summer residence of the Imperial family. The palace's façade is the longest in all of Europe, more than 1,000 feet. Saturday night the delegates met for a farewell dinner, as Sunday was the day we departed for home.

Overall it was a great experience. I learned a lot about Russian healthcare, or lack thereof, as well as a wealth of cultural and historical information about both cities visited. If you ever have the chance to participate in one of these delegations, I would highly recommend it.

Meet the MAC: Teleconference Call with First Coast Service Options/Palmetto *Scott Ujita*

The Southern California Chapter was proud to host a very informative conference call with our new MAC for Jurisdiction 1, First Coast Service Options, based out of Florida. The Government Programs committee was very interested in the transition. At several committee meetings it was discovered that there was very little information about First Coast and the transition from National Government Services. Committee members attended several teleconference calls and meetings, but there was little, if any, information distributed regarding the reimbursement part of the transition. The committee decided to take this matter into their own hands and contacted Jackie Burke, the audit manager from the First Coast Jacksonville office. She was very open to having a call so the committee started planning the agenda.

The agenda was divided into four sections: Cost Reports, Audits, Appeals and Other. The agenda was compiled of questions submitted to the committee by members. The committee decided that a call close to the transition date of August 20th would be very important so we would get the

Apparently, the “word of mouth” distribution method for notifying people of the call was successful. There were so many people on the call, that the operator of the conference call had to make more lines available.

latest information. The agenda and invitation was distributed via e-mail to all of the Government Programs committee members in Southern California. The committee encouraged people to forward the invitation to other providers, clients, consultants, lawyers or staff that they thought would be interested in the call. The transition affected California, Nevada, and Hawaii providers.

The day of the conference call, I logged into the call and was surprised to hear many people logging into the call.

Apparently, the “word of mouth” distribution method for notifying people of the call was successful. There were so many people on the call that the operator of the conference call had to make more lines available. There were three representatives from First Coast, Jackie Burke, Manager; Mike Davis, Vice President of Finance and CFO of First Coast; and Tony Matos, Manager and PS&R Contact. The call answered many questions but it also raised even more. Even though the call was accidentally dropped during the question and answer period, I was happy to find many of the callers logging back on to the call to finish up. *Continued on page seven*

Never Events: Their Impact on a Hospital's Operation *Will Weisbaum*

Since the publication of “To Err is Human” in 1999 by the Institute of Medicine, a number of states have adopted patient safety legislation. California, in September 2006, signed into law new reporting requirements for adverse events, grouped into the following six categories: Surgical, Product/Device, Patient Protection, Case Management, Environmental and Criminal.

The adverse events that follow into the surgical category are mainly surgery on either the wrong body part or the wrong patient or a wrong surgical procedure. Product/Device events include death or serious disability due to a contaminated drug, device or biologic or due to the use of a device that functions in a manner other than intended. The most serious event for a new parent is the discharge of an infant to the wrong person. This event would be classified as patient protection. Care management events include medication errors or a hemolytic reaction from the administration of incompatible blood. Any incident in which a line designated for oxygen or another gas to be delivered to patient contains the wrong gas or is contaminated would be considered an environmental event. Finally, criminal events are fake health-care providers providing care or a sexual assault on a patient.

Once an adverse event occurs the Department of Health Care Services has set-up the following time frames for reporting; non-urgent events within 5 days of discovery and urgent events within 24 hours of discovery. Failure to report such events can result in a civil penalty of \$100 per day for not reporting the event. Thus far the most common reported hospital error from the California hospitals who have reported is an advanced skin ulcer (bedsore). All of these errors have prompted Medicare, beginning in October 2008, to stop paying the higher MS-DRG for some of the never events listed above. This will force hospitals to prevent errors from occurring or they will risk the loss of revenue that could have a negative impact on operations. Managed Care Payors have also jumped on the bandwagon and are letting hospitals know their reimbursement will be negatively affected when there is a never or adverse event.

Geographic Programs Update

— Sam King —

The Geographic Programs Committee started off this year with strong committee participation and program planning. The Committee has attracted 10 active members who meet regularly via conference call and are eager to make a difference. Co-chairs Marilyn Carroll and Carl Hill have made the committee more coordinated. Thanks to all the committee members!

The committee has successfully organized 3-day educational events in Orange County, San Bernardino and San Louis Obispo in mid July. Thanks to supports from two speakers, attendees from all three geographic areas were offered quality educational programs right where they work.

The 3-day program started in Orange County at Kaiser Permanente Anaheim Medical Center on July 14, 2008. The challenges faced by most Patient Business Offices when it comes to billing and collecting on workers' compensation accounts is daunting. Attendees learned during the interactive session of **Winning the Battle for Workers' Compensation Account Recovery** presented by Alice Branch from Law Offices of T. Mae Yoshida:

- What is a "Work Injury" and "First Aid" and what are your recovery options
- How the fee schedules work
- How to assert penalties and interest for non-payment
- Which laws to wield to get insurers to pay attention to you
- When it's time to stop wasting your time and go to the Work Comp Appeals Board

The second session was presented by Gary Keute from VisionShare, Inc. on a timely topic of Medicare Administrative Contractor (MAC) transition. The session's title is **Medicare**

Meet the MAC *Continued from page six*

Attendance was tallied based on the number of e-mails that were sent to me and the committee was happy to say that this session brought together 129 verified callers. Any questions that were e-mailed to me were forwarded onto First Coast for a response. All the information that was received from the MAC was then forwarded back to the members based on the address that was provided from their attendance e-mail.

We were able to identify callers from four HFMA chapters; Northern California, Southern California, San Diego/Imperial and the Hawaii Chapter. The committee may plan on having additional telephone calls, if necessary. If you are interested in being notified, please send me a quick e-mail at Scott.Ujita@toyonassociates.com and I will make sure that you are on the distribution list for the next agenda.

Contracting Reform. Are You Ready?, which provided an overview of Medicare Contracting Reform nationwide and the potential impact on California healthcare providers as it pertains to EDI connectivity for processes like claims submission, remittance retrieval and Part A DDE/FISS access. The attendees were able to gain an in-depth understanding of the future Medicare Fee-For-Service environment and what impact it will have on their Medicare reimbursement process. They were also provided with a preparedness checklist to access their current readiness for Contracting Reform along with a list of questions necessary to select an EDI connectivity strategy with their new MAC.

On the second day of the program on July 15, 2008, attendees at the San Bernardine Medical Center sessions enjoyed the same speakers and the same topics as in Orange County the day prior. On the third day on July 16, the speakers traveled all the way up to French Hospital Medical Center in San Louis Obispo to present the same program as they did in previous two days.

The 3-day geographic educational sessions were an innovative way to provide more educational programs within geographic outlying areas of membership to meet their needs. The 3-day events, co-sponsored by AAHAM, well exceeded our expectations in terms of attendance, financial support and attendee satisfactions. Thank you to Kathi Athey of AAHAM for being an outstanding partner in getting this program out successfully. We sincerely thank Melvin Benner at Kaiser Permanente Anaheim Medical Center in Orange County, Teri Purdy and Darryl VandenBosch at San Bernardine Medical Center in San Bernardino County, and Sue Anderson at French Hospital Medical Center in San Louis Obispo County for their generous support and contributions. Our special appreciation also goes to CMRE Financial Services for providing additional financial support.

HFMA PRESENTS OUR EDUCATION PROGRAM #2

November 20, 2008

Embassy Suites Hotel, Arcadia

The program will feature four education tracks:
CFO Forum; PFS/Compliance; Managed Care;
and Government Programs.

The committees are working hard to bring you quality education programs. We hope to see you there.

National Awards for the Southern California Chapter

Debby Chanen, HFMA

Debby Chanen [2ND FROM LEFT], May Beth Briscoe [FAR LEFT] and current HFMA National Chairman of the Board Robert Broadway [FAR RIGHT] with Immediate Past Presidents.



Your Southern California Chapter was a big winner at HFMA's 2008 Annual National Institute (ANI) held at the Mandalay Bay Resort and Casino in Las Vegas on June 23-26. At the President's Dinner, immediate Past Presidents of HFMA's chapters receive awards that their chapter achieved during their term.

Debby Chanen, Immediate Past President of the Southern California Chapter received recognition at the dinner for our Chapter's seven awards, presented by outgoing HFMA National Chairman of the Board Mary Beth Briscoe and current HFMA National Chairman of the Board Robert Broadway.

For the 2008 Helen M. Yerger Special Recognition Awards, National received the most entries since 2004. 149 entries were submitted: 135 single chapter and 14 multi-chapter entries. Of those 149, 102 entries won (68%): 94 single chapter entries and 8 multi-chapter entries. 52 of the 69 chapters were recognized with Yerger Awards (11 by virtue of multi-chapter entries).

The Southern California Chapter received two single chapter awards: CFO Roundtable Education Initiative led by Steve Blake, Chair of the CFO Roundtable committee and Website Improvement Project II led by Chapter Secretary for 2007-08, Donna Anglin. We also received three multi-chapter awards: one for the 17th Annual Fall Conference, chaired by Jim Moynihan and Yerger prepared by Vickie Morgan, one for the Tenth Annual Region 11 Healthcare Symposium and one on the HFMA Region 11 Healthcare Symposium Website, Yerger completed by current Secretary Scott Ujita. National forwarded the actual awards after ANI and they have been presented to the leads responsible for the Yergers projects/submissions.

Southern California was also awarded the C. Henry Hottum Awards for Educational Performance Improvement, one of 32 chapters who received this award this year. Finally we received the Sister Mary Gerald Bronze Awards of Excellence for Education. Eleven total chapters received this Bronze award. Following ANI, Debby presented this award to Rick Lash, current President-Elect but Program Chair for the year we received the award due to his efforts in the area of education. There are also Robert M. Shelton Sustained Excellence Awards, Membership Growth and Excellence awards that all chapters are eligible to receive if meeting the National Goals.

New PRRB Appeals Regulations and Board Rules

David Volk, Davis Wright Tremaine LLP

The Medicare Program on May 23, 2008 issued the long-awaited final rule revisions to the Provider Reimbursement Review Board appeal procedures. The final rule is effective generally for all appeals pending as of, or filed on or after, August 21, 2008. It has now been followed by completely updated PRRB internal rules.

Probably the most important change in the final rule, with long-term consequences for providers, is that providers will no longer be able to raise new issues during much of the appeal process. A request to add issues to an appeal must be **received** by the Board no later than 60 days after the expiration of the initial 180 day appeal filing period (from the NPR). For appeals already pending at the Board as of August 21, 2008, the deadline is the **later** of: (1) 60 days after the expiration of the 180-day period or (2) October 20, 2008. This shortened window of opportunity means that Providers should review existing appeals immediately to assure that all identifiable issues have been properly appealed by the due dates. It also means that providers must be much more diligent in identifying issues promptly after receiving an NPR, and appealing those issues with specificity in a timely manner.

In computing deadlines under the final rule, a provider is presumed to have received the determination to be appealed 5 days after issuance, unless established to the contrary by a preponderance of the evidence. The date of receipt by the Board is the date of delivery if delivered by a nationally-recognized courier, or the date stamped "received" at the Board, if delivered otherwise, unless established to the contrary by a preponderance of the evidence.

Another important change, effective with cost reporting periods ending on or after December 31, 2008, is that providers will not be granted appeal rights for items unless they were either expressly claimed on a cost report or properly self-disallowed as a protested amount on a cost report.

The new PRRB rules, effective August 21, 2008, have numerous changes in the basic processes of pursuing both individual and group appeals, and establish requirements for specificity in identifying issues, amounts in controversy, and jurisdiction. The rules include several suggested forms for appeal requests and other procedural issues. They also revise the group appeal rules, limiting the movement of issues and fiscal years among appeals, and emphasize attention to Common Interest Related Party groups as required.

The appeal regulation (found at 73 Fed. Reg. 30190) and the PRRB rules (see www.cms.hhs.gov/PRRBReview/02_PRRB_Instructions.asp#TopOfPage) are extensive and should be reviewed carefully for your specific situation.

The HFMA Value Proposition

—Tom Albanesi—

I was recently asked by Region 11 Regional Executive Walt Luke to write an article for your regional newsletter about the value of HFMA. Apparently, Region 11 has some chapters that are losing members because some employers don't believe there is much value in their employees being members of HFMA. I'm going to attempt to provide you with some talking points to address this challenge.

Before you can attempt to educate your employer on the value of HFMA, you first need to assess whether you're getting as much value out of your membership as you could be. Do you even look at your copy of *hfm* magazine when it's delivered, or is it tossed into a pile with all the other reading materials you don't read? Why is *hfm* different, and why should it be placed on top of your reading materials ahead of all the others? Easy—it's the one monthly magazine that covers your industry from A to Z. It is full of insightful articles, commentary, and tools that can help you excel in your job. Many of the articles are written by your peers, who are offering their ideas and expertise to their fellow healthcare finance professionals.

Other sources of information in *hfm* are the display ads. Healthcare vendors know that *hfm* has the exact audience they are looking for, and they spend big bucks on these ads. New products, new solutions, and customized answers are often debuted in these ads. If you're seeking a solution to a challenge at work, the answer may be in an ad in *hfm*.

Are you using the HFMA web site at www.hfma.org? It's packed with information that can help you and your employer solve challenges at work. If you haven't logged in for a while, do so today. It's easy to use and it is searchable. The content is continuously updated for late-breaking healthcare issues. Unlike the results produced by using a generic web browser (which can be potluck at best), the content on the HFMA web site has been vetted for its applicability to the field of healthcare finance.

What about the online member directory? It's a valuable tool that provides quick access to your peers both in your chapter and across the organization.

If you're not an active member, either get active or don't be shocked when your boss informs you that your membership dues won't be covered. Better yet, get involved in your chapter. I was a classic HFMA wallflower who looked at my shoes anytime the chapter was soliciting volunteers. I was quite reluctant to volunteer. But once I did, the value of my membership soared! I was viewed much differently by my peers, and to this day I enjoy a level of respect in my chapter that I would have never attained without becoming an active volunteer. It's so true—you'll get much more out of HFMA if you put something into it.

Now that you've assessed your own efforts to derive value from your HFMA membership, let's start on your employer. First, explain to your employer what HFMA is: the premiere membership association for healthcare finance professionals. An organization whose vision is "to be an indispensable resource for healthcare finance." An industry leader that doesn't just report healthcare news, but is helping to create the future of health care.

The best way to demonstrate the value HFMA brings to employers who pay our dues is to give tangible examples of the times you've used HFMA resources to solve a problem or learn something valuable. Show your boss the in-depth articles in *hfm*. Introduce him or her to the web site and to the quality and depth of resources that are listed. Share how the online member directory has been a resource to you in solving a problem. Show an agenda from an upcoming meeting, and highlight the line-up of industry experts who will be presenting. Better yet, get your boss to accompany you to an upcoming meeting and see the value first-hand. Or speak with the program committee about getting your boss a presenter's role at an upcoming meeting.

Any human resources consultant worth a hoot will tell you that an educated workforce is critical in today's fast-moving information age. Explain to your employer that there is no better organization than HFMA to keep you informed about the latest developments in healthcare finance. Forward to him or her pertinent e-mail alerts we receive on breaking issues, as well as the "Weekly News Highlights" e-mail that summarizes (with links for expanded analysis) critical developments in the healthcare industry.

Finally, make a value comparison with other resources your organization consumes. Suppose your annual HFMA budget consists of \$3,000, which covers your dues, a few chapter meetings, and perhaps ANI. Compare that with the cost of engaging a consultant for one day and make a value comparison! I'm not knocking consultants; I used to be one earlier in my career. My point is that HFMA is an incredible year-round value for healthcare finance professionals.

Tom Albanesi, FHFMA, CPA, is vice president, corporate finance, West Penn Allegheny Health System, Pittsburgh, and a member and past president of HFMA's Western Pennsylvania Chapter. He is also a member of the HFMA National's Board of Directors and chair of HFMA's 2008-09 Regional Executive Council.

Healthcare Management

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- **HFMA Wants You to Know:** Practical career and professional development insights e-mailed every other week.
- Joining one of more than 68 chapters allows you to connect not only on a national level with a network of peers, but at a local and regional level as well.
- Nonpartisan, professional organization committed to developing and promoting ethical, high-quality healthcare finance practices.
- A 24/7 online resource library that contains a collection of current information on leading healthcare finance topics.
- Learn from the top industry leaders through in-depth HFMA seminars, conferences, Audio Webcasts, workshops, ANI: The Healthcare Finance Conference and more at discounted member rates.
- Special discounts on valuable resources and promotions exclusively to HFMA members.
- Identity with the HFMA Brand, the premier association for healthcare finance professionals.

Below are some compelling reasons to continue paying your own membership dues and continue to belong to HFMA:

- Premier job bank exclusively for healthcare finance professionals with more than 125 executive-level jobs posted each month.
- Biannual Compensation Survey a powerful tool to benchmark your career progress against others in healthcare finance.
- Certification designations that distinguish your expertise and support your career growth; certified members of HFMA tend to earn a higher salary and are more likely to be hired for upper-level positions.
- Results-oriented seminars, conferences, workshops and the industry's premier event, ANI: The Healthcare Finance Conference –at discounted member rates.
- More than 60 audio webcasts offered annually focusing on strategic and operational implications of activity in the current regulatory legislative and economic environments.
- More than 600 web-based lessons on topics ranging from Medicare billing to compliance to revenue cycle operations.
- Resource for exclusive HFMA resources unavailable elsewhere
- Networking opportunities with peers through specialized forums, local chapter events and educational opportunities
- Being associated with the HFMA brand, the premier association for healthcare finance professionals

HFMA is one of the best professional and personal investments you make. Visit hfma.org/join or call 800-252-4362, extension 2.

CHA UPDATE

Strategic Plan 2009-10

Laura Zehm, MBA

The CHA Board held its annual retreat at the Four Seasons Resort in Carlsbad, located just north of San Diego. The focus of the retreat was the strategic plan for the coming year, although other topics were also covered. The following is a summary of the plan's 5 goals.

Goal 1: Maintain and expand access to hospital services.

There are no surprises to the strategic issues related to this goal. These are the issues CHA has been struggling with since I have been on the Board and include: health care reform, Medicare and Medi-Cal payments [whether defense against arbitrary State cutbacks, defense and balance in the rollout of RAC audits or preparation for the 2010 expiration of Federal waivers], tax exempt status of not-for-profit hospitals, seismic mandates and emergency room call panel coverage. All of these address the need to protect hospitals from the onslaught of proposed regulations that result in ever increasing difficulty of simply providing the care that our communities rely upon us to provide.

Goal 2: Support quality, patient safety and value.

Pressure continues to build from consumer groups, business and legislators to have more information about the value of health care services being provided. This goal addresses the need for our industry to recognize that we need to respond to these pressures by being a part of the solution. The results will be much better for our industry and for our communities. The strategic issues addressed here include universal, rational and valid patient-safety and quality indicators. CHA encourages all California hospitals to participate in the California Hospital Assessment and Reporting Task Force (CHART). Also included are transparency of pricing and clinical outcomes data and the development of technology that supports the sharing of important health information among practitioners.

Goal 3: Improve physician-hospital relationships, alignment and clinical integration.

This goal addresses the need to keep the dialogue open and constructive between hospitals and physicians in this time where physicians and hospitals are both under financial stress. We must be able to consider new ways to work together, some requiring legislative support, to meet emergency room coverage demands and local physician shortages. California prohibitions on corporate practice of medicine make it among the few States that limit provider options to develop integrated solutions.

Goal 4: Increase health care workforce capacity.

This addresses the issue of limited workforce capacity due to a combination of current and projected workforce shortages plus legislation that adds pressure to the workforce requirements.

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Take National HFMA Certification Tests for FREE* Chapter Incentive Program for Certification – Effective August 2008

The HFMA Southern California Chapter would like to encourage its Members to take and pass the National HFMA Certification Examinations.

Why?

- To have our national office recognize your professional achievement
- To earn a healthcare professional title granted by an independent nationally recognized professional healthcare financial management organization, HFMA.
- To show your current employer what you have done to improve yourself and your knowledge of healthcare finance and increase your value to your employer.
- To demonstrate to yourself that you can do it.
- To meet our chapter goal of having as many certified members in our chapter as possible.

What will the Chapter do to encourage and support its members?

- The Chapter will encourage/reward you by reimbursing you for the cost of the exam when you pass the exam or reimburse you for half the cost of the test if you take it but don't pass - details below.*
- The Chapter will loan you the study guides, which are costly to buy on your own.
- The members of the Chapter Certification Committee will help and coach you on how to take the examinations.
- You can take the examination anytime and anywhere, as long as the time and location are agreed upon between you and your proctor. We have many willing proctors across Southern California to assist you.
- Help is a phone call and/or an e-mail away.

How will the Chapter help me pass/take the examinations and how much? **

- For each exam passed \$100 (\$125 after Jan. 1, 2009) will be sent to you after the Chapter receives notice from National HFMA that you have passed at least one of the exams.
- If you don't pass, you will be paid half of the exam fee for the first time only. You will be required to have borrowed the study guide prior to the exam for this reimbursement.
- The check will be mailed to you within 30 days of our receipt of your request as long as we have received notification by National of your exam status.
- Your membership status in the SoCal Chapter must be current when you request your incentive reward.
- Each member can receive up to 2 exams for free (Core and a specialty) as both are required to be certified.

For more information, please call Peter Lee, Chair Certification Committee at 818-991-4622 or e-mail him at peter.lee@prosperusrcm.com.

***The budget for this program is limited. A notice will be posted on our website when the funds have been exhausted.*

Welcome New HFMA Members

Maria Alizondo	Caban Resources, LLC.
Carol M. Jeske	Telecare Corporation
Marianna Kmbikyan	Glendale Memorial Hospital CHW
Erica A. Roach	CHLA
Aaron Neuharth	Irvine Medical Center
Reid Aaron	Doheny Eye Centers
Jeffrey D. Lawrence	GHX
Dennis Kikuno	Torrance Memorial Medical Center
Donovan Ayers	Clear Vision Information Systems, Inc.
Nancy P. Figueroa	Healthcare Resource Group
Jason S. Merkel	Affinity Bank
Karen Dizon-Villegas	Catholic Healthcare West
Lailani Payumo	Catholic Healthcare West
Linda Kaplan	Kaplan Communications Group
Alan Stearns	Lockton Companies
Tom Szostak	Toshiba America Medical Systems
Lou C. Sico	Kaiser Foundation Health Plan
Cindy Hirsch	CDR Financial
Diane P. Angone	Eisenhower Medical Center

Strategic Plan 2009-10

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Hospitals must maintain flexibility in meeting staffing requirements and will need legislative support in doing so.

Goal 5: Advance the operational effectiveness of CHA/CAHHS.
As with any successful organization, CHA/CAHHS strives to continuously improve. The areas of focus are membership retention and recruitment, encourage and maintain staff excellence, maintain a culture that sustains CHA's values and a flexible infrastructure and strengthening information services.

This is a lot to take on but CHA is up to the task. I know this because I have seen CHA address these same issues over the two years I have been on the Board. CHA has not shied away from any issue but has, over time, adjusted priorities as they must. We are fortunate to have strong CHA leadership.

Please call me if you have any questions or comments.

Laura Zehm, Vice President & CFO
Community Hospital of the Monterey Peninsula
HFMA Representative on the CHA Board
831-625-4915 or Laura.zehm@chomp.org