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INSIDE
THIS ISSUE

HFMA ANI 2011
PAGE 4

Membership Update
PAGE 6

Annual Chapter
Planning Meeting
PAGE 7

Handling Cal Child
Services and
Reimbursement
PAGE 12

Challenge Yourself
To Be Certified
PAGE 14

Sponsorship
Opportunities
PAGE 16

NEWSBRIEF

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

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JULY 2011

P R E S I D E N T ' S W E L C O M E

Steven Blake, FHFMA, CPA

Welcome and Happy New Year! Fiscal Year 2012 promises to be a great year for the Southern California Chapter of HFMA.



2012 is off to a great start. We finished FY 2011 hitting 100% of the chapter goals for the year. A record number of members took their exams and achieved advanced membership status. We exceeded our goals for education hours and membership continued to grow. At the Annual National Institute in Orlando, the Chapter received numerous commendations including the C. Henry Hottum Award for Educational Improvements as well as Gold Awards for both Membership Growth and Certifications.

In addition to our regular general education sessions (August, November and March), we hosted the combined Northern and Southern California **Fall Conference** and committed to planning combined Fall Conferences with the **Southern California and San Diego Chapter Fall Conference** starting with **September 11-13, 2011 at the Hyatt Regency in Long Beach**. We are excited about this new opportunity for collaboration with other chapters.

The Chapter has presented several webinars this year in order to reach members who are unable to travel or get away from the office. These have proven to be very successful and helped members stay up to date on many current topics. We have adopted an innovative approach to pricing which allows institutions to register a common portal for a nominal amount that provides web-based education to a group for a single rate per log-on. Additionally, the combined chapters in California will be piloting some webinars this year on a statewide basis.

Also, our Chapter General Education session will be a full day at the **Hyatt Regency in Irvine on August 11, 2011**. We have started a series of institutional based training based on nationally recognized workbooks starting with the Revenue Cycle which will be offered as an optional track at this session.

Our Chapter Committee members work extremely hard to come up with topics and speakers for our programs. We hope that we are able to allow you to stay up to date on our ever-changing healthcare environment and encourage everyone to take advantage of our website as it contains listings of educational events, copies of Newsbriefs, Membership information, our photo gallery, and a listing of our Officers and Board members and Committee Chairs.

Finally, I would like to draw everyone's attention to a **change in the date** for the upcoming **Region 11 Symposium, January 29 to February 1, 2012**.

Thank you.



Steven Blake FHFMA, CPA
President, HFMA, Southern California Chapter



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2011 FALL CONFERENCE

HOLD THESE DATES! SEPTEMBER 11-13, 2011

— *Jim Moynihan, Fall Conference Chair* —

This year's Fall Conference, returns to the beautiful Hyatt Regency Long Beach! Our format will be slightly different in 2011 as conference attendees who historically paid extra to attend Sunday pre-conference sessions will now be able to attend Sunday afternoon sessions as part of the regular conference session fee.

Fifteen breakout sessions and multiple general sessions make this conference an educational bargain for all attendees!

Sponsor opportunities are still available and vendors who want to participate should contact Sponsorship Chair and former SOCAL HFMA President Rick Lash at Rick.Lash@cshs.org.

This year's keynote speaker will be **James Robinson, Ph. D., Kaiser-Permanente Distinguished Professor of Health Economics, University of California, Berkeley.**

Dr. Robinson is a nationally known expert on healthcare delivery. His presentation is entitled "Results to Date of ACO Implementation and PPACA In California and Nationally."

The national health reform law presented Accountable Care Organizations (ACOs) as one of its key elements for promoting quality and coordination of care while controlling costs. Dr. Robinson will report on ACO development and progress to date.

Back by popular demand, our panel of health care experts will tackle the issue of healthcare reform in a panel presentation entitled: "California State and Provider Responses to ACOs and Health Care Reform." The Patient Protection and Affordable Care Act (PPACA) will have a huge impact on state governments, and virtually all participants in the healthcare delivery system: health plans, hospitals, managed care medical groups, individual physicians and ancillary care entities. Our distinguished panel of industry experts will comment on and discuss Accountable Care Organizations and other impacts of healthcare reform.

Our panel consists of **David Maxwell-Jolly**, Ph. D., Deputy Secretary, California Department of Health and Human Services, **Wells Shoemaker**, MD, Medical Director, California Association of Physician Groups, **Duane Dauner**, CEO, California Hospital Association, **Patrick Johnston**, CEO, California Association of Health Plans, and **Lisa Folberg**, VP, Medical and Regulatory Policy, California Medical Association.

Another general session will include a California regulatory update from **Ed Heidig**, Interim Director, Department of Managed Health Care (DMHC). Our Medicare speaker for 2011 will be **Betsy Thompson**, MD, Ph.D., Chief Medical Officer, Medicare region 11.

The final general session speaker is **Cheryl Mann**, President, Goals Insight, whose presentation is entitled "Be the Change: Lead Your Team to Health Care Reform Success." Cheryl will discuss the challenges of leadership facing HFMA members.

The winning formula of MANY breakout sessions (15 in all) provides our attendees with tools to be used back at the office. The breakout sessions are divided into three tracks; Patient Financial Services, Finance and Managed Care. All our courses are designed to enable our attendees to return to their health systems with ideas and tools that can be implemented to complete our work better and faster!

Register on line at www.hfma-cafallconf.org. See you in September!

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HFMA ANI 2011

Eric Delgado

This year's ANI was held at the Gaylord Palms Resort in Orlando, Florida on June 26th–29th. If you were unable to attend the conference, mark your calendars now for next year's ANI at the Mandalay Bay Resort in Las Vegas, Nevada on June 24th–27th, 2012. ANI provides an excellent opportunity to network with fellow colleagues, learn new strategies to meet the challenges ahead, and also have fun!

Healthcare reform and the need for improved quality of care, reducing cost, and enhancing value were all addressed at the preconference workshops, breakout sessions, and keynote speaker addresses. With a record setting number of 27.5 CPE's to be earned, the educational opportunities were tremendous.

Believe to Achieve

The incoming HFMA Chair, Greg Adams, FHFMA, introduced this year's theme – **Believe to Achieve**, which was inspired by his involvement in sports. It came to him while he was wearing one of his son's old high school baseball t-shirts and the team's motto for that year was "believe to achieve". Greg knew that that motto was the perfect theme for this time in healthcare. We need to "believe in the possibility of a better future, no matter how great today's challenges may seem." He told the audience to "believe in you" and have the confidence to step up and meet the challenges of the new era of healthcare. Most importantly, Greg said we need to "believe in each other". He emphasized that it is difficult to achieve things alone, but working together as one team, we can accomplish great things.

It takes Quality Leadership to Produce Quality Results

Sunday's opening general session speaker was Maureen Bisognano, President and CEO at the Institute for Healthcare Improvement. Maureen spoke about waste in hospitals and said one to three percent of every hospital operating budget is waste which could be eliminated without negatively impacting anything. Healthcare leaders need to see new ways and new designs for delivering healthcare in order to eliminate the defects and inefficiencies that cause waste.

She listed six primary categories of waste:

- Delays
- Rework (including refilling of forms or multiple moves of patients to different beds)
- Overproduction
- Movement (such as unnecessary transport of people, products, or information)
- Defects (e.g. medication errors or healthcare-associated infections)
- Waste of spirit and skill (defined as not addressing hassles in daily work, such as hunting and gathering of supplies)

Believe to Achieve



Maureen stressed that healthcare leaders need to look at their operations from a new perspective in order to see the waste that exists and continue to look for ways to reduce and eliminate waste which will have a positive impact to the bottom line.

Teamwork and Leadership

Mike "Coach K" Krzyzewski, the head coach at Duke University and U.S. Olympic championship basketball teams, was the Monday keynote speaker who shared his insight and experience on leadership and teamwork. Coach K reminded us not to forget the fundamentals when forming your team. Always say please and thank you. Remember that everyone is important and everyone has ownership. He said that "the best decisions are made by leaders who surround themselves with strong

Continued on page five

HFMA ANI 2011

Continued from page four

talent and respect the opinions of each person on their team." He also said that for healthcare leaders to make an impact, they need to feel what they do in their hearts. We all chose this profession and our actions affect people's access to healthcare and we can help to make care affordable for everyone.

The other two keynote speakers at the conference spoke about our impact on reforming healthcare (Peter Orszag, PhD, former Director, Office of Management and Budget) and the necessary tools needed to be a successful leading change (Mark Thompson, author of *Success Built to Last*). Mark outlined 5 steps for managing change:

1. Define Reality
2. Build Buy-In
3. Mentorship
4. Building Trust
5. Define Value

Mark also said we need to follow the three "R's" with turmoil and change – Responsible – Responsive – Reliability. As healthcare leaders we are all facing a great deal of change and by helping our teams reach their greatest potential during this period, we can make a difference in transforming our healthcare delivery system.

In addition to the great keynote speakers and all the breakout sessions, there was time for networking and fun too. Every day there was a reception with tasty hors d'oeuvres and the opportunity to meet new members from other chapters and exchange ideas and network. The exhibit hall held over 400 companies offering solutions and ideas that could be taken back to the hospital. On Monday night, ANI attendees piled into chartered buses and headed over to the House of Blues for a night of entertainment, food and fellowship. A great time was had by all.

There was a Chapter Presidents Dinner and Awards on Tuesday night where our chapter was presented with four awards:

- **Award of Excellence for Certification: Gold**
- **Award of Excellence for Membership Growth and Retention: Gold**
- **C. Henry Hottum Award for Educational Performance Improvement**
- **Helen M. Yerger Special Recognition Award – Improvement**

The last night was the Annual Chair's Banquet where the incoming board was installed. After a delicious dinner, all attendees enjoyed an evening of live music and dancing.

I have to say, this year's ANI exceeded my expectations. I attended many breakout sessions and left with a renewed sense of passion for what we all do in Healthcare Finance. While we have many challenges and changes ahead, if we approach them with the "**Believe to Achieve**" attitude, great things can be accomplished!

Leadership Training Conference in New Orleans

Scott Ujita



The Leadership Training Conference (LTC) is an HFMA National sponsored event. This training prepares future chapter members for various leadership roles in the local chapter. Each LTC has breakout sessions for the President, President-Elect, and Treasurer as well as the Program Planning, Membership and Newsletter Chairs. From May 15th to the 17th, the Southern California Chapter sent eight members to train in New Orleans: Steve Blake, Scott Ujita, Jim Moynihan, Kathy Hammack, Kristina Cabral, Eric Delgado, Sam King and Greg Labow.

Each LTC is packed from morning to evening with classes. I attended the President-Elect boot camp that started at 10:00am Sunday morning with regional planning time. This was a great time to meet all of the incoming Presidents and President-Elects from across Region 11, which is made up of a total of seven HFMA chapters. Education continued throughout the day. Sunday ended at 5:00pm and I attended the session on, "How to Enhance the Volunteer Experience." The remaining two days of LTC were equally rewarding. There was so much to learn about each of the six tracks that National had to offer. Our Southern California group also had some time to talk about the upcoming year. I believe that the 2011-2012 chapter year is going to be a very exciting and rewarding one for each of our members. I encourage each of you to take advantage of our education sessions and also to get involved this year.

If you are interested in getting involved in the chapter this year in any way, you can contact me via telephone at 925-685-9312, or via email at scott.ujita@toyonassociates.com. We will be sure to find a place that can use your talents.

Membership Update

Greg Labow, HFMA

The Membership Committee got off to a great start at the Chapter Planning Meeting June 10th. We had seven people participating and committing to stay active throughout the year. This is significantly larger than recent prior years but we would like to expand and are always looking for new volunteers. I am supported by Kristina Cabral as Co-Chair for the committee. A number of potential initiatives and ideas were discussed during that initial meeting.

One major initiative is the Membership Contest with an opportunity to win the Grand Prize of a week in Puerto Vallarta and \$1,000 toward travel expenses thanks to the generous support of Progressive Management Systems and CMRE. For every new member you sponsor, you earn an additional opportunity to have your name drawn for the Grand Prize. For the next few months there is a special reduction in membership for new members so make sure they take advantage of this as soon as possible. Make sure your new member has your member number to include on their membership application. If you have misplaced your membership card that has your number, you can always contact Lori Kuwahara by e-mail or at 323-266-4362. Look for the contest "flyer" in this issue of *Newsbrief* for more information. Last year's winner of the Grand Prize was Daniel Galles from Prime Healthcare Services and 2nd place went to Ed Gajudo from Tri-City Regional Medical Center. Ed won complimentary registration for the three educational programs this year in August, November and March.

Another initiative that begins in July is to contact ex-members who have not yet renewed their membership. HFMA National provides a grace period for payment of dues through mid-July. However, if someone still has not renewed by that time, their name is dropped from the member roles. If you still have not had the opportunity to renew, please do so today. It is easy to do and will provide you with the continuation of the benefits you have come to enjoy from HFMA.

This year we will be reinstating a past practice of contacting new members and welcoming them to the chapter. This provides us with an opportunity to hear what our new members needs are and provide information regarding our chapter's programs and activities. We will also make sure these new members know that beginning this year, the three educational programs will be free to them as a way to welcome them to the chapter. Ideally we will also get these members involved in the chapter which is the best way to derive the greatest benefit from your membership. It is also planned to reach out those members who are transferring in from other chapters across the nation and to provide similar information.

A New Member Breakfast is currently slated for the November Program. This will provide an opportunity for new members to meet and interact with our Chapter Leadership and to learn more about the chapter. A hot breakfast will be served. We are also discussing the potential of other new member functions at our other programs so watch closely for those announcements.

Lastly, we will begin an initiative to contact non-members who have attended some of our programs in the past. We will provide information regarding the many benefits of HFMA and encourage them to consider joining HFMA. This outreach will be through both mailings and telephone contact.

As you can see, there is a lot going on in Membership and we look forward to others volunteering to help us in these efforts.

Annual Planning Meeting Update

— Alice Dunlap, CHFP —



On June 10, 2011, the HFMA Southern California Chapter conducted its annual kick off and planning meeting. Those that were in attendance had the exceptional opportunity to hear George Colman from The Law Offices of Stephenson, Acquistio & Colman speak. He outlined his prior history as chapter president and noted the many opportunities he has had since to remain actively involved in leadership activities over the years. It was a rare opportunity to hear his perspectives on the changes in healthcare and the effects on financial management.

Next up on the agenda was Debby Chanen, FHFMA. She presented the new theme for the year – **Believe to Achieve**. In order to be successful in the new healthcare environment we are facing, Greg Adams, the HFMA chair, encourages us to do the following:

- Believe in ourselves
- Believe in our organization's mission and others who share our dedication to achieving the mission
- Believe in the possibility of a better future for healthcare

Debby encouraged each member present to challenge ourselves to achieve these beliefs and share them with other members and those people we encounter in our daily lives. This new world of healthcare will certainly offer the opportunities to accept those challenges.

Along this same theme, Debby discussed chapter memberships. She expressed that chapters are the heart and soul of the HFMA organization, encouraging each member to actively participate in the chapter and reach out to recruit new members for the organization. Through membership there are many educational

and networking opportunities to stay abreast of the coming changes and allow the HFMA members to be nimble enough to enact policies necessary to address these coming changes.

Debby outlined a number of the excellent educational opportunities offered by HFMA. These range from certification to the ANI to the annual virtual conference, ongoing seminars, webinars, and e-learning opportunities. It is the goal of the chapter to bring even more of these events to its members to keep abreast of the current changes in healthcare. According to Dick Clarke, DHA, FHFMA, President and CEO, HFMA, the goal of these educational opportunities is to allow people at all levels of a healthcare organization to capitalize on the content for strategic planning by the CFO and to operationalize that strategic message at the director and manager levels.

HFMA certification is one way to attain this goal. As many of you know, HFMA has restructured the certification process. Each member is encouraged to review the new process and take steps to achieve certification. HFMA certification is a stepping stone to Fellowship status in HFMA. At the meeting, two newly certified members were present. Congratulations to Lisa Ba and Sujeethnath Lingutla for their achievement!

Next, Debby reviewed recent changes to the HFMA website and encouraged all members to spend time reviewing the new content on the website, which includes a new Google-powered search engine to make it easier to find the information you are looking for. As healthcare reform evolves and we are faced with many uncertainties, HFMA strives to provide quality information to help its members manage these changes. Articles such as *Continued on page eight*

Grabbing the Reins of Your Self-Pay Populaton

— Tyler Eppley, CSI Financial Services —

While Patients and Hospitals Struggle with Debt, There is a Win-Win Solution

The term “Perfect Storm” has been used many times during the current economic downturn. It is especially true when referring to the increasing challenges patients are facing while trying to afford healthcare.

Consider this: *Employers are offering fewer benefits, which results in employees paying higher deductibles and more out-of-pocket medical expenses. Despite reduced insurance coverage, healthcare costs continue to increase, exacerbating the burden of medical expenses on the patient. The Milliman Medical Index reports that healthcare costs for a typical family of four increased 7.2 percent in 2009 to an all-time high of \$18,074.*

With unemployment at a 27-year high, fewer patients have any form of health insurance, forcing more patients to use their rapidly dwindling savings to pay for the majority, if not all, of their healthcare expenses. Patients are doing their best to pay their obligations and avoid being sent to collections, however, there are fewer lenders in the market and the Credit CARD Act of 2009 has made it more difficult for most consumers to obtain credit.

Patients who are not able to meet the provider’s minimum payment guidelines are being referred to collections, which in turn contributes to a deteriorating hospital-patient relationship.

The Perfect Storm shows no signs of letting up. As Health Care Reform becomes reality, insurance companies will be required to insure more people, resulting in even higher deductibles and additional strain on patients and the hospitals that will have difficulty collecting payment from the patients. A survey by AMN Healthcare revealed that approximately 70 percent of healthcare executives believe reform will hurt their facility’s financial stability.

ClearBalance by CSI Financial Services, which provides patient-friendly loan programs, reports that the volume of loans being processed has risen dramatically over the past few years while the average loan amount has dropped from approximately \$1,500 to \$850 per patient. This statistic demonstrates that the rising cost of healthcare combined with challenging economic conditions makes it difficult for patients to pay a lump sum payment of nearly any size.

While the Perfect Storm continues, the sun is beginning to shine on self-pay patients and hospitals. Healthcare providers are embracing with greater enthusiasm patient financing programs that give patients the ability to pay out-of-pocket expenses over time, which also can help reduce their bad debt and, importantly, also reduce their A/R days.

The relationship between a healthcare provider and patient is critical to the provider, the patient, and the community at large. Giving patients a financing option with greater flexibility to pay their self-pay balance will not only help preserve that relationship and improve the revenue cycle, but also increase census as patients continue to look for affordable healthcare.

Annual Planning Meeting Update

Continued from page seven —

“Continuing Uncertainty Dominates the Healthcare Landscape” (March 2011 *HFMA*) and “Success under Reform through Revenue Cycle Excellence: Don’t Make Hope a Strategy” (May 2011 *HFMA*), are designed to keep members informed.

HFMA values the input of their chapter members. Debby shared that there will be new Local Information Links, where chapters can provide input to HFMA’s Health Reform Advisory Committee. This includes the following:

- Local perspective on the impact of the reform law
- Ramifications and response strategies
- Input and comment on HFMA positions
- Comment on potential HFMA services

Look for more on this new input opportunity.

To wrap up, using the final quote from Debby’s presentation, “We can’t provide the care and compassion for patients...but we can help provide the means, we can doggedly fight for adequate funding, we can try to correct a massively flawed payment system.... **That’s why membership in HFMA is so important. It makes my job so much easier and rewarding, and I know it does yours as well.**” Fred Lucky, FHFMA, Senior Vice President, Kansas Hospital Association.

Believe to Achieve: increase your participation in HFMA today. Join a committee and contribute your best practices.

Certification Column

— Alice Dunlap, CHFP —

HFMA is looking for a few good members...to become certified! The HFMA Southern California chapter has a goal to increase the certification levels of its members. To do this, the chapter is reaching out to large organizations that will promote and support the certification process. Additional coaching classes have been scheduled for August 11, 2011, November 2011 and March 2012 at current educational events. The chapter is looking into webinars as coaching classes as well for those members who just cannot get to the educational events. We currently have 39 members listed on the HFMA Southern California website as certified, including 24 fellows. We would like to add your name to the list!

HFMA is offering incentives to increase our chapter membership certification. Be sure to read Sam King's article in this issue of *Newsbrief* on the specifics of the incentives.

There are many benefits to becoming certified. Certification provides you with a nationally recognized professional title of a Certified Healthcare Finance Professional. Certification displays increased value to your employer with increased industry knowledge. A personal challenge achieved is always worthwhile.

The course material provides an excellent in-depth review of the entire revenue cycle and healthcare finance management process. As a certified HFMA member, it has brought me considerable credibility in my work environment. I found the course materials a validation of my revenue cycle experience. Read on for feedback from our newest certified members:

Lisa Ba has been an HFMA member for a little over 1 year. She currently works at USC as an accounting/finance manager. She chose to become certified because it consolidated all her relevant knowledge and experience into a nice curriculum. Her continued goal is to remain current with HFMA certification requirements and participate in chapter activities. The various webinars, educational events throughout the year, and the HFMA publication helps to attain this goal. She would encourage members who wish to become certified to work with Sam King, the certification committee chair, Debby Chanen, and other active members. Additionally, she encourages members to go to the coaching sessions and create a study plan to follow.

Sujeethnath Lingutla has been an HFMA member for three years. He works with Prime Healthcare Services as a Corporate Project Manager. He chose to become certified in order to prove mastery in the field of healthcare finance. His next goal is to attain Fellow status next year to show a continuous interest and commitment to the field of healthcare. As progress towards this goal, he has become actively involved in the Certification Committee in order to support the chapter goal of increasing the members who are CHFP. HFMA has also offered him the opportunity to become active in HIMSS, where he serves as co-chair for sponsorship and program planning committees and committee member in marketing and web development committees. He has already begun to attain Founders Points. He would encourage members to become certified because "getting CHFP will increase personal satisfaction through increased confidence and personal growth. It will create enhanced career mobility. You will also be recognized by your employer and colleagues for your mastery over the subject and, of course, it is good to have a CHFP next to your name... Looks good right!"

If you have questions about becoming certified, you can review the HFMA website at www.hfma.org/certification/ or contact Sam King at sjking@uci.edu.

SET FOR THE HYATT IRVINE • AUGUST 11, 2011

Education Program #1

Educational Program #1 will provide a full day of networking and educational opportunities this August. Those who can only spare half a day out of the office can register for the morning sessions only but the afternoon sessions are worth staying for!

In addition to a general session regulatory update there are **six breakout sessions** and **two special all-day tracks**. Sam King, FHFMA, will be your instructor for the new certification requirements for the HFMA Certified Healthcare Financial Professional exam. Our chapter is providing a \$70 rebate for those who complete the course to help support your certification goals! Vickie Morgan, FHFMA, will teach a second all day program, "Mastering the Revenue Cycle". Our chapter provides this course for on site training and the pricing for this program is designed to encourage a hospital to bring multiple front line staff for education. Participants will learn key issues impacting the revenue cycle and know the specific tools to use for often encountered problems and challenges that delay payment. Session fees include a participant workbook.

The **General Session speakers** for the August 11th, 2011 course are Paul R. DeMuro, CPA, MBA, JD, FHFMA, FACMPE, Latham & Watkins LLP and Matt Absher, Director of Reimbursement Programs, California Hospital Association.

Paul DeMuro will provide a timely update on the continuing rollout of Healthcare Reform legislation, regulation and related topics. Topics include value based purchasing, Accountable Care Organizations, and the application of biomedical informatics to these new developments.

Matt Absher will speak about the California State Budget and the impact on providers of the latest developments in Sacramento. He will also share the latest developments on the state's Hospital Fee Program.

Our **breakout sessions** cover subjects of interest to our Government Programs, Finance and Revenue Cycle professionals. Session speakers and topics include the following:

SESSION 1a **How to Benefit from the California Pre-Existing Condition Insurance Plan**

Andrew Fitch, Senior Associate and Craig Partridge, Senior Associate, Triage Consulting Group

This session will provide an overview of the eligibility and enrollment requirements for the new federally-funded California Pre-Existing Condition Insurance Plan (CA PCIP). Participants will gain an awareness of the short-term resources available to uninsured patients in order to develop strategies at identifying self-pay patients at the point-of-service that may qualify for CA PCIP coverage.

SESSION 2b **Cost Management: Achieving Reductions Ahead of the Curve**

Brian S. Channon, Senior Vice President, Kaufman Hall & Associates

This session will provide practical guidance on how hospitals and health systems can identify and implement untapped savings opportunities, while remaining in control of the cost-reduction process.

SESSION 3a **Medicare and Medi-Cal Updates**

Speaker from Hooper, Lundy & Bookman, PC

This session will provide an update on the final Inpatient Prospective Payment System (PPS) rule that is effective 10/1/2011. The session will also cover the status of the Medi-Cal rate cut litigation that is pending before the Supreme Court, California budget proposals that impact reimbursement and summarize recent Medicare litigation.

SESSION 4b **Cost Saving Initiatives – Alternative Energy Solutions & Reduction Strategies**

Robert S. Ronan, Chief Operating Officer, New England Energy Management, Inc.

This session will cover how hospitals can reduce their energy consumption and realize sustainably energy savings.

- Load Management Systems • ROI • Lighting • Chillers
- Available Rebates & Tax Deductions • Co-Generation

SESSION 5a **Overview of Medi-Cal DRG Project**

Kevin Quinn, Vice President, Payment Method Development, ACS, a Xerox Company

This session will provide an in-depth overview of the current work to produce a DRG payment system for Medi-Cal.

SESSION 6b **Navigating the Challenges of 5010 and ICD-10 Implementation**

Cedrial Moore, Director, Dell Services Healthcare Consulting

This session will highlight the importance of a robust enterprise-wide implementation plan to take advantage of operational benefits and minimize potential negative impacts from the mandated transition to ICD 10 diagnosis and procedure codes and version 5010 of the X12 transaction standards.

This promises to be an excellent session and on-line registration is available at <http://www.cvent.com/d/mcqns1>

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healthcare financial management association

Southern California Chapter

The Southern California Chapter of HFMA is pleased to announce two programs available for hospitals and health systems for onsite staff training.

- We provide the instructors
- We instruct using HFMA developed curriculum
- You provide the classroom space

The target audience consists of staff level associates from Patient Access, Case Management, Patient Accounting and Financial Counseling. This is an opportunity to provide a foundation of Revenue Cycle knowledge for both new and long term employees. We recommend a maximum of 30 attendees per session in a classroom setting at your facility.

COURSES INCLUDE:

1) Mastering the Revenue Cycle —

From Key Practices to Clean Claims to Denials Management

Four hours of in-depth training covering revenue cycle basics, coordinating data for clean claims and understanding and managing denials.

- **Part 1- Revenue Cycle 101**
- **Part 2- Coordinating Data for Clean Claims**
- **Part 3- Understanding and Managing Denials**

2) Excellence in Customer Service

Four hours of in-depth training covering customer service best practices.

- **Part 1- Understanding Our Customers**
- **Part 2- Patient Centric Process**
- **Part 3- Words and Phrases to Avoid**

Participants will receive a workbook for their use in class and as a post course reference. Each course consists of case studies and interactive exercises. The time required is 5 hours in one working day providing approximately 4 hours of education plus breaks.

Courses are offered for a fixed fee per day of \$700.

Workbook cost per attendee: \$30.

For more information and/or to schedule a course, contact Victoria Morgan, FHFMA at hltconsult@aol.com.

HFMA SO. CALENDAR

2011 EVENTS

August 11 / Chapter Educational Program 8:00am-4:00pm, Hyatt Regency, Irvine

August 18 / Chapter Webinar - Lunch & Learn 11:30am-1:00pm – See website for more information

September 11-13 / Fall Conference Hyatt Regency, Long Beach

September 22 / Chapter Webinar - Lunch & Learn

October 19-21 / Education Outreach Session Locations TBD

October 28 / CFO Roundtable 11:30am-1:30pm – Location & Topic TBD

November 17 / Chapter Educational Program II Location TBD

2012 EVENTS SAVE THESE DATES

January 29 - February 1, 2012 / Region XI Symposium Caesars Palace, Las Vegas

March 22 / Chapter Educational Program III Center for Healthy Communities, Los Angeles

April 18-20 / Education Outreach Session

April 27 / CFO Roundtable

June 25-28 / HFMA's Annual National Institute Mandalay Bay Resort and Convention Center, Las Vegas

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

Handling California Children's Services Claims and Appropriate Reimbursement

— George Colman, Esq., Partner —
Law Offices of Stephenson, Acquisto & Colman

After some research and conversation with Children's Medical Services' personnel, I was able to qualify the process and procedure with respect to California Children's Services, and the issues involving the ability of health care providers to be reimbursed whether they are paneled facilities or non-paneled, and irrespective of the fact that the physicians who render the care are paneled or not.

I am told the mission and long standing policy of California Children's Services (CCS) is to provide authorization for necessary services for individual patients, (ages from birth to 21), who are receiving emergency medical services that have the identified CCS diagnosis. It is clearly recognized, that where a patient is eligible for CCS and its elective process, there should be minimal, if any, issues relative to the authorization or the payment for services. Despite this, there is an identified problem for many providers throughout the state.

The problem arises when emergency services are rendered, a CCS diagnosis is applicable, and a particular provider may not be paneled for the particular services, or may be paneled, but not for a long term or inpatient treatment for those services. In addition, there are difficulties presented when the physician providing the services may not be paneled. There is also an additional problem that arises when the health plan denies the claim because the patient allegedly has a CCS diagnosed condition; this is a carve out from the health plan. The response to the plan in this instance, is that only the California Children's Services Medical Director and assigned personnel, can determine whether it is an appropriate CCS diagnosis or not; a denial by a health plan is contestable, when the diagnosis that they denied is not CCS eligible.

In the course of my investigation and discussion with CCS personnel, I explored several levels of CCS provider services, and the many hospitals that may or may not be eligible for the particular services.

- **Special facilities:** The special facilities are those facilities that provide special services, ophthalmology, *otology*, orthopedic services, and other specialized care.
- **Community facilities:** They are approved to provide services for a term "lesser adult." These are patients 14 through 21, who really do not need essential pediatric care.

- **Community facility:** They treat patients of all ages from birth through 21 with limited NICU capability; services and care can be rendered based on an emergency, for a limited period of time. Some of the services in the Community facility can be authorized for continuing care, however, in most instances, after the emergency care, the initial stay, and the patient is stabilized, a transfer will be authorized to what is termed a Tertiary facility.
- **Tertiary facility:** A "full scope" California Children's Services facility paneled for all purposes, and generally the physicians are paneled as well. For example, Northridge Medical Center, a CHW hospital, was recently approved for a pediatric trauma center; it will be offering more rapid treatment for children with life threatening injuries and increasing their chances of survival. The only facility in the San Fernando Valley where youngsters with critical traumatic injuries can have immediate and around the clock care with physicians specializing in emergency medicine, anesthesia, orthopedics, neurosurgery, and with registered nurses and respiratory therapists with expertise in pediatric care. In essence this is a definition of a Tertiary facility, having all levels of NICU and PICU (pediatric intensive care unit). For obvious reasons all Children's Hospitals are considered paneled tertiary facilities.

It appears in the discussions with CCS staff, the circumstance of non-payment seems to arise out of a lack of understanding by healthcare providers and/or their personnel, as to how to best handle, register, and verify the CCS eligible, or potential eligible patient. The patient of course has to be Medi-Cal eligible, or covered through some health care program like Healthy Families, in order to fall under the California Children's Services jurisdiction and eligibility. If there is a CCS diagnosis, which is a carve out from the health plan, there is CCS liability. However, the recognition must be made as to whether or not a particular facility is a Tertiary facility and paneled for all services, or a Community facility, that may be non-paneled, and therefore only able to provide emergency care for a limited period of time, and until a patient is stabilized. In those instances, it is *highly recommended* that contact be made with the CCS program in the participating county. For example in Los Angeles County, Dr. Edward Bloch specifically can be directly contacted at 626-569-6012 with an Email address: ebloch@ph.lacounty.gov. He is readily available to review any case with every facility in Los Angeles County to cover those circumstances when a CCS

Continued on page thirteen

California Children's Services Claims

Continued from page twelve

eligible condition requires continuing care, and the facility is limited paneled or non-paneled. The failures and problems seem to arise when communication of these issues is not done until after the accounts are billed, or months after the patient is discharged. This is what creates the problem of a denial that many facilities are faced with. The point to be made, is to set up a proper process and procedure for the CCS eligible patient under an emergency service condition, so that appropriate authorization and communication can be completed, and reimbursement can be obtained.

Many facilities have non-paneled physicians, although paneled hospitals generally require that there be paneled physicians available to provide the service for eligible CCS patients who arrive with an emergency condition. If a hospital does not have a paneled physician available, there is a CCS policy that allows for retroactive approval for physicians to be paneled for the particular service. "A temporary physician approval process." can be obtained from the Department of Health Services, Children's Medical Service Network; Bulletin No.: 158, revised on March 21, 2006. For further research and information, the statutory basis for the program is the Robert W. Crown California Children's Services Act. (California Health & Safety Code §123800, et seq.)

One of the major problems for providers is when a CCS patient or their parent produces an insurance card, and the billing of the insurance company occurs; the claim is denied because there is a "CCS carve out." Under the circumstances, it makes sense that at the time of the patient's admission, a process for communication with CCS, must be in place if there is a diagnosis that fits within CCS guidelines. Contacting CCS at the time of the treatment and certainly prior to the discharge of the patient to seek approval for that treatment, is a must.

In contacting CCS, we are sometimes told in our capacity as attorneys that the hospital is not paneled, and if it was paneled it would have a contract or some document or agreement that would reference that particular situation. However, in doing a review with many provider clients, it seems no one can find a contract that would apply to these circumstances. Upon investigation, we have been able to find letters to some individual hospitals, its medical director, or a pediatric or a NICU unit that defines the authorization. For example, a letter may state the following: "This is to inform you of the Children's Medical Services Program decision to grant approval to the neonatal intensive care unit at 'hospital A' as a Community NICU which is effective as of the date of this letter. The decision is based on your documentation as submitted to CCS." Other conditions in the letter cover submission of data relative to morbidity and

mortality, on-call schedules of the neonatal clinician, and other information that is generally a continuing responsibility of the facility. Generally speaking, this is the only documentation that we have been able to find. It has been confirmed by CCS that some of the documentation relative to the implementation of the program is old, and they in fact may not have hard copy documentation of a contractual nature either. In conclusion, a provider needs to work under the regulation and set up a functional process and procedure so as to obtain authorization to effect appropriate reimbursement. For further information or discussion, contact George Colman at gcolman@sacfirm.com.

SOUTHERN CALIFORNIA HFMA NEWS

The Southern California Chapter of HFMA services a large and diverse geographic area spanning more than 40,000 square miles. In addition, the greater Los Angeles is rated the worst area in the nation for commuting by car. We have experienced decreasing attendance at our face to face, quarterly meetings and were interested in offering alternative means to provide Chapter member education.

To better service the education needs of our 1,300 Chapter members, the HFMA Southern California Board decided to expand its geographic education outreach program using a webinar format.

To date, we have provided the following webinars:

- 7/21/10 WEBINAR
Encore Healthcare Reform's Impact on Hospitals
- 8/3/10 WEBINAR
5010 and ICD-10
- 10/12/10 WEBINAR
Patient Safety & RAC, MIC, MAC & ZPIC Audits
- 11/9/10 WEBINAR
First Coast Audit and Transition Update (Medicare cost reports)
- 1/27/11 WEBINAR
Charity and Health Reform

Our next webinar is "Beyond Bailouts and Healthcare Reform – Moving Forward with Capital Financing Projects" and is scheduled for August 18, 2011, 11:30-1:00pm (PST). We hope you will be able to attend and look forward to receiving any suggested topics for future webinars.

TriWest Provider Services

Online Referral/Authorization Submission Made Easier

TriWest Healthcare Alliance (TriWest) made several upgrades to the online referral/authorization submission tool to improve the user experience and save providers time when submitting requests online.

These improvements include:

- The user no longer needs to enter an asterisk after typing your entry in the Member ID, Provider, Group, or Facility ID fields. In the Member ID field, you can enter:
 - Sponsor's Social Security Number
 - Department of Defense (DoD) identification number (DoD-ID)
 - First nine digits of the DoD Benefits Number (DBN)
- Users may also search for the member by clicking the *magnifying glass tool*
- More entry fields now have drop-down menus. These new menus have been pre-loaded with favorites based off your previous selections. You can simply make a selection from the drop-down menu or you can begin typing in the entry field and the drop-down menu will open and filter the list as you type.
- Users can quickly use the drop downs for selecting "favorites" or use the *magnifying glass tool* for expanded search capabilities and add to your favorites. This applies to referring and servicing providers, request types and procedure codes.
- There are new help information links for data entry fields.
- There is an expanded field length for additional detail view.

TriWest has also updated the *Online Referral/Authorization Reference Guide* to reflect these changes.

TriWest has online tools and a dedicated team to assist providers in registering for our secure website and learning how to submit their requests online. For more information on how to register, go to www.triwest.com/provider.

For more information on online referral/authorization requests, go to http://triwest.server.tracorp.com/esem/2010tutoriallinks/Review_index.html for an online demonstration focusing on the recent changes to the online submission tool. You can also take a Secure Website-Referrals and Authorizations webinar by going to www.triwest.com/provider/ProviderSeminars/WebinarRegistration.aspx.



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.

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It's Easier Than You Think

Challenge Yourself To Be a CHFP

Sam King, HFMA

A Certified Healthcare Financial Professional (CHFP) is described by HFMA as "designed for mid-level healthcare finance professionals who aspire to the executive level or desire confirmation of financial management expertise."

Starting January 2011, the restructured CHFP certification program requires that a candidate successfully complete one (1) comprehensive certification exam, and holds a current and active HFMA membership. The Certification test is administered in locations throughout the Southern California region. You may obtain more information from the HFMA website (<http://www.hfma.org/certification/>).

You can enhance your career and professional development by becoming a CHFP:

- 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.
- To have our national office recognize your professional achievement.

Our chapter has a dedicated Certification Committee standing by ready to assist you in getting a CHFP designation. The chapter encourages and rewards you by reimbursing you \$250 for the application, testing, processing fees. Should you not pass the exam the first time, the chapter will reimburse you \$100 of the retesting fee. In addition, the chapter will purchase a license for you for the online study guides at no cost to you (a \$195 value). Funds are limited on a first-come, first-served basis.

The chapter also supports your efforts in becoming CHFP certified by offering several coaching sessions a year. The upcoming coaching session is scheduled for Thursday, August 11, 2011 at the Hyatt Regency in Irvine.

When you complete this coaching session, **you'll receive a rebate of \$70 for the full day program. So now the real question is – "why not"?**

We are here to assist you. It's just a phone call (949-933-6048) or an email (sjking@uci.edu) away.

Don't wait. Challenge yourself and get certified!

MEMBER-GET-A-MEMBER CONTEST

HFMA SOUTHERN CALIFORNIA MEMBERS CAN WIN A TRIP TO PUERTO VALLARTA, MEXICO



THE SOUTHERN CALIFORNIA CHAPTER OF HFMA, IN ASSOCIATION WITH SPONSORS **PROGRESSIVE MANAGEMENT SYSTEMS** AND **CMRE, INC.**, WILL GIVE MEMBERS A CHANCE AT WINNING THE FOLLOWING PRIZES:

1ST PLACE

A trip to Puerto Vallarta, Mexico. Included in this trip give-away are 7 days / 6 nights in a beach-front condo in Puerto Vallarta and \$1,000 towards travel expenses.

2ND PLACE

One free admission to all three 2012-2013 Southern California Chapter Educational Programs.

HOW TO WIN

Refer a new member to our Chapter – Each new member who lists you as their sponsor gives you an additional chance for the drawing at the end of the year. The more sponsored new members you have, the better the chance to win the grand prize. Each new member will be required to provide your name and your HFMA member number at the time of registration. If you don't know your member number, contact Lori Kuwahara at 323-266-4362. We encourage you to have them join via the National HFMA website at: www.hfma.org/imembership

The contest begins on June 1, 2011 and ends on April 30, 2012

On April 30, 2012, we will draw the winner. We will announce the winner of the trip give-away at the chapter's Annual Awards Dinner.* Please take advantage of this trip give-away. You'll be introducing your friends and colleagues to the finest healthcare financial management organization in the country while helping our local Chapter to grow; a win-win situation for all.

Steven R. Blake, FHFMA, CPA, President, HFMA, Southern California Chapter

*If the member with the most sponsored new members does not win the grand prize, he/she will receive the second place prize.

CORPORATE SPONSOR PROGRAM



hfma™

healthcare financial management association
southern california chapter

**2011-2012
Corporate Sponsorship
Program**

The Southern California Chapter of the HFMA is now accepting applications for corporate sponsorship. Companies that participate in the Corporate sponsorship program strengthen the chapter while increasing their own corporate visibility. As a corporate sponsor you will be listed on the corporate sponsorship page on the SoCal website with a link to your corporate website. In addition to the visibility provided on the web site you will be featured in each chapter *Newsbrief* on the Corporate Sponsorship page.

The Southern California chapter of HFMA has over one thousand members who receive the *Newsbrief* and visit the chapter website on a regular basis, which includes non members from around the country.

Becoming a corporate sponsor will increase your company's visibility to healthcare finance professionals and will also enable the Southern California Chapter of HFMA to continue providing excellent education programs and networking opportunities at reasonable rates.

For more information, please see the 2011-2012 CORPORATE SPONSORSHIP PROGRAM and BENEFITS column to the right or you can contact James M. Cummings, Sponsorship Chair at cummingsllc@aol.com.

WHY BE A CORPORATE SPONSOR?

Visibility is a powerful advantage, and as a sponsor of the Southern California Chapter of the Healthcare Financial Management Association (SCCHFMA), you gain exposure to a select audience that is over 1000 members strong, consisting of CEO's, CFO's, Patient Financial Services Directors, and other healthcare finance professionals. You emerge as a leader by demonstrating your support of professional education and quality programs.

As an SCCHFMA sponsor, a wealth of recognition opportunities are yours to explore. At minimum, you will see your organization's name and logo on pertinent marketing materials and gain on-site acknowledgement and signage at educational conferences. Additional promotional opportunities are available, depending on the category of sponsorship you choose.

With your support and technical expertise, SCCHFMA can continue to thrive and provide more valuable services to our members and other healthcare professionals. The Southern California Chapter is proud of its previous affiliations with sponsors and looks forward to hearing from you.

All sponsorships are received with great appreciation and in good faith, as we are managers of your investment.

I. CATEGORIES AND BENEFITS OF CORPORATE SPONSORSHIP

BENEFITS	BRONZE \$1,000	SILVER \$2,500	GOLD \$3,500	PRESIDENT'S CLUB \$5,000
Posting at all chapter meetings according to sponsorship category.	X	X	X	X
Listing of sponsor according to level in all Chapter program brochures.	X	X	X	X
Listing of sponsor according to category in each issue of the Chapter newsletter and on Chapter website.	X	X	X	X
Option to sponsor an Information table at all chapter education events.				X
Free registration certificates (as shown) at each of the three Chapter General Education Programs, excluding Educational Outreach programs.	(1)	(2)	(3)	(5)
Quarter (1/4) page ad in every newsletter.				X
Option to host a hospitality suite at any Chapter educational program, with President's approval (i.e. sponsoring company will pay fees of hospitality suite).				X
Special ribbon and/or name tag designating Chapter Sponsor.	X	X	X	X

C O R P O R A T E S P O N S O R P R O G R A M

II. CORPORATE SPONSOR INFORMATION SHEET

START DATE This Corporate Sponsorship Program begins on June 1, 2011 and runs through May 31, 2012.

DETAILS OF THE PROGRAM Enrollment period will be throughout the chapter year. An email announcement will be sent to all chapter members and vendors listed in the current membership directory. Selected vendors who have expressed an interest in sponsoring past HFMA events will also be contacted.

PAYMENTS Payments are due with application / agreement, and can be submitted at any time during the chapter year. Quoted rates assume a full year's sponsorship at the various levels. Sponsorship agreements can be entered into at any time during the chapter year. The donation amount will be prorated based on time remaining in the chapter year. A confirmation letter will be mailed after the potential sponsor commits to the agreement. The sponsor will be sent a "thank you" once the payment is received. The website will be updated to reflect sponsorship agreement within a week of receiving payment.

FOR MORE INFORMATION Contact James M. Cummings, Sponsorship Chair, HFMA, Southern California Chapter, at cummingsllc@aol.com.



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healthcare financial management association
southern california chapter

Corporate Sponsor Application

PLEASE COMPLETE AND RETURN THIS FORM TO:
James M. Cummings, SCCHFMA Sponsorship Chair
20638 Merridy Street, Chatsworth, CA 91311

NOTE: Please make checks payable to "HFMA Southern California Chapter"

SPONSOR'S COMPANY NAME _____

CONTACT NAME _____

CONTACT PHONE NUMBER _____

BILLING ADDRESS _____

CITY | STATE | ZIP _____

E-MAIL _____

WEB SITE ADDRESS _____

We would like to participate at the following sponsorship level:

PRESIDENT'S CLUB (\$5,000) **GOLD (\$3,500)** **SILVER (\$2,500)** **BRONZE (\$1,000)**

We would like to make two installment payments.

For more information: James M. Cummings, Sponsorship Chair, HFMA SoCal Chapter, at cummingsllc@aol.com