



hfma™ wisconsin chapter
healthcare financial management association

news and profiles

may/ june 2012

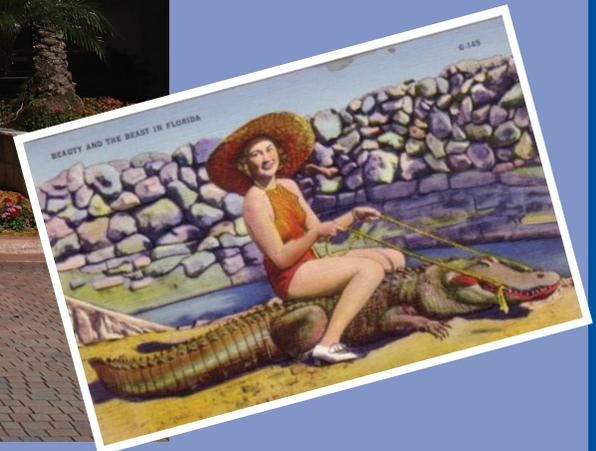
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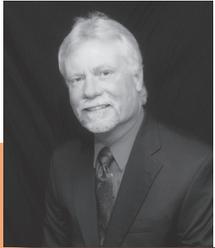
**national hfma
leadership
training
conference
ft. lauderdale, fl
april 22-24, 2012**

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President appreciates chapter support

Special thanks to all who have participated



Art Mertig
Wisconsin HFMA Chapter President
Controller
Memorial Medical Center/ Hayward Area Memorial Hospital and Water's Edge

When Pam Brindley called last week and told me that I had one more President's message to write, I wasn't sure what to say. I have tried to use this column to let the membership know what the benefits of membership in the HFMA Wisconsin Chapter could be and how they could enhance that experience through getting involved in Chapter events. My involvement with this Chapter has been extremely beneficial to my career and I hope it has been a benefit to my employer as well. I could not have been involved at the level I have without the support of my CFO and Memorial Medical Center, Inc.

With that said I want to use this format to express a message of a more personal nature. Over the course of the past few years I have had some personal challenges that you in the HFMA family have helped me to endure, rebuilding a home after a lightning strike was a major challenge and I received many messages of support and offers of assistance. Recently, I lost a family member after a lengthy illness and again the support from my HFMA family was overwhelming. As a Healthcare Finance Professional, I know that the clinical side of the business exists, but during this recent episode I got to see firsthand what really goes on in what I previously referred to as the "dark side". Over the course of 21 days in the Cardiac ICU, I was amazed at the caring and compassion that the nursing staff exhibited, and through it all they

treated us with respect and dignity, while maintaining a positive attitude. I know that I could not face the things they do on a daily basis, and so for any of you who have worked in the clinical side of healthcare you have my respect and gratitude. Who would have ever thought that finance wasn't the most important part of healthcare?

I want to thank everyone who volunteered to serve as Officers, Directors, Committee Chairs or members over the past year we could not do this without you. In May at the annual meeting, we will have the pleasure of installing the new officers for Fiscal Year 2013. Bruce Lorenz and his leadership team have just returned from LTC, where they were busy preparing to lead the chapter through the next year. I hope you will join me at the annual meeting in welcoming them as they lead us forward. I would also like to encourage all of you to consider attending the Annual National Institute to be held June 24 – 27, details for that event can be found on the National Website.

As I stated earlier this is my last President's message and it has been a great year for me. I will still be involved and help out where ever needed. As for my next assignment, Jim Nelson has assured me there is a seat open in the Past Presidents lounge and that I can be his assistant. I look forward to seeing everyone in May.

Leadership Matters

National HFMA theme introduced for upcoming year



L. Bruce Lorenz/ FHFMA, MBA
Wisconsin HFMA Chapter President-Elect
Vice President of Finance/ CFO
Grand Itasca Hospital and Clinic

The leadership training conference team was greeted with a light misty rain in usually sunny Fort Lauderdale, Florida. Sunny skies did prevail and the team was treated to an inspirational welcome by incoming national chairman, Ralph Lawson. Ralph's theme for the next year, "Leadership Matters", was evidenced in his passion for people as he noted the difference that we can each make in our daily lives.

Ralph's welcome set the stage for a thrilling presentation by Doc Hendley, a man that embodies the "Leadership Matters", theme as he explained his intense drive and commitment to help millions of children throughout the world get clean drinking water. You can be inspired by what this man has accomplished by doing a google search and reading about the profound impact that Doc has had on our world.

Your chapter representatives networked with other chapter leaders and learned what national HFMA has in store for the next year. The team discussed priorities for our chapter, driven by the needs of our membership and we wrestled with how to create a responsible budget that will be presented to our board in May.

We're excited about the opportunities of the new chapter year. It's a great time to be a part of Wisconsin HFMA!



Conference Comment:

I thought the LTC was very informative and helpful. Attending training sessions specific to the roles/responsibilities of a Chapter Treasurer was beneficial. The Chapter Treasurer Roundtable discussion was also valuable because it provided an opportunity to see how QuickBooks is actually used to manage funds and to hear helpful hints from other Treasurers. I also enjoyed getting to know the other LTC attendees better.

Ron Wilczek
Assistant Treasurer
Director of Sales/ Alliance Collection

HFMA Leadership Training Conference

Wisconsin Chapter is all work and no play



Above left: Various watercraft could be rented on the beach at the hotel.

Above: The hotel pool offered calmer waters and was possibly less salty than the ocean.

Left: The vendor area during a break.

Below left: A freighter awaits entry into the Port Everglades.

Below: Kevin Boren and Shawn Gretz are amused with Steve Backus who is texting the wrong directions to Bruce.





Above left: Bruce Lorenz diligently spell checks Kevin Boren's board meeting minutes.

Above: Tom Tanel and Kevin Boren contemplate skipping the next session for a dip in the ocean.

Left: After dinner Carmen surprised everyone with a ride on her yacht pictured in the background. Actually, a local commented that they thought the "row boat" belonged to Stephen Spielberg.

At the end of the day on Monday, board members met for the planning session.

Left side:
Jim Nelson,
Pam Brindley,
Steve Backus,
Carmen Wolf,
Shawn Gretz.

Right side:
Ron Wilczek,
Kevin Boren,
Bruce Lorenz,
Tom Tanel.



New editor takes over news and profiles

Newsletter objective focuses on chapter involvement



Pam Brindley/ CHFP, CPAT, CCAE
News and Profiles Editor
Account Executive
Avadyne Health

In the March/ April News and Profiles you might have read Dave Cartier's farewell letter. He states that he will "fade into nothingness." I sincerely doubt that will happen especially after all the years of service Dave and Phil Rohs have given to this chapter. I would to thank them for all the hours of work they put into getting out six editions each year. As your new editor I will do my best to continue that mission.

The primary chapter focus is on education while the secondary goal is to capture the chapter experience and help established members get to know new members. In the newsletter, the content will be directed to communicate those goals. I just came from the Leadership Training Conference with several days of great newsletter sessions. Networking in a full room of chapter newsletter editors was amazing. The first Illinois Chapter has an outstanding newsletter with three people as news anchors which is the key to their success. At present, I am a staff of one. If any member is interested in either joining the newsletter staff or in contributing articles, I welcome any and all who may volunteer their effort and time.

Some conference sessions focused on involving chapter members more with the newsletter. The West Michigan Chapter concentrates each issue

on the Member Experience while the DC Virginia Chapter features a Facility Spotlight and also a Meet the Town article that is tied to that facility. Another chapter focused on unique activities their facilities are doing within the community.

You don't have to be unique or extraordinary in order to contribute your story or experience. The newsletter needs input from everyone to create an interactive experience that will benefit and involve all of the chapter. So, send articles, notes, scribbles, drawings, photos, your pet dog- anything within reason will be considered for publication. The goal is to get to know one another better, but that can only happen with your participation.

So, if you receive a phone call or e-mail from me asking for a contribution, please seriously consider helping out. Once again, also consider becoming part of the newsletter staff. The Lone Ranger at least has Tonto, Batman has Robin, The Three Stooges have Curly... you get the idea.

Lastly, with this electronic edition of the newsletter, I am experimenting with a new design and layout. This is a work in progress and will hopefully evolve during the next several issues.

You can contact me at pbrindley@avadynehealth.com or feel free to call 515-669-9396.

Sponsor Spotlight:

Rycan



Marg Louwagie
Administrative Assistant/Coordinator
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PO Box 306
Marshall, MN 56258
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marg.louwagie@rycan.com

Rycan, a leader in healthcare revenue cycle software for over twenty-five years, has built its reputation by providing best-of-breed solutions encompassed by a level of customer support that is unparalleled in the healthcare industry. From critical access hospitals to large disparate health systems, Rycan's customer driven approach ensures a solution that is tailored to your organization's unique needs.

We offer web-based software for every step of the revenue cycle process. Increased customer satisfaction is obtainable with our Patient Charge Estimate and Eligibility Verification modules that provide transparent pricing and reduce the risk of claim denials and carrier rejections. Our Claim Submission, Claim Scrubbing, and Coordination of Benefits modules combine to produce a powerful claim management solution for submitting, validating, and processing your facility's claims. Effortlessly gather and manage your remittance advice using our ERA Retrieval and Remittance Management modules. Our Denial Management and Audit Management modules equip your facility with the tools needed to combat denied and audited claims. Take control of your facility's contracts and model new payment terms using our Contract Management module. Lastly, bring together all of your facility's revenue cycle data and gain a better understanding of your financial health with our Reporting & Data Mining module by analyzing reports and utilizing a dynamic decision support system.

Through our hands-on approach, Rycan ensures that your real-world business office problems are solved with our comprehensive solutions, maximizing your reimbursement while increasing your productivity. Contact us today to see why at Rycan, we have a better solution.

Does the revenue cycle impact the total patient experience?

And are hospitals missing the financial opportunity?



Steve Chrapla, CHFP
First Illinois Chapter
Director Third Party Solutions
Avadyne Health

According to Jennifer Robinson, Senior Editor for the Gallup Management Journal, “for over 20 years or so, healthcare organizations have realized providing exemplary medical care isn’t enough to engage hospital patients. That’s because, from the patient’s perspective, excellent medical attention is the least a healthcare organization can offer. Many hospitals recognize this and now focus on the patient experience.”

So, what is the “Patient Experience”?

The Beryl Institute collaborated with healthcare professionals and practitioners at hospitals around the county to develop a definition.

Patient Experience – The sum of all interactions, shaped by an organization’s culture, that influence patient perception across a continuum of care

This statement and effort is so powerful that 93% of healthcare leaders say patient experience is among their top 5 priorities. Additionally, HealthLeaders Media Patient Experience Leadership Survey indicated 45% of healthcare executives see this as a priority 5 years from now.

As consumers spend more and more of their disposable income on monthly health insurance premiums, higher co pays and out of pocket expenses, they are demanding more from their chosen “provider.” In addition, the landscape around experience in healthcare is shifting dramatically in part due to the Hospi-

tal Consumer Assessment of Healthcare Providers and Systems survey (HCAHPS) and the pending value-based purchasing program that will link payments to clinical care. This will, in the future significantly impact the market basket index, that is used to annually adjust the Medicare Inpatient Payment Rates. The level of reimbursement hospitals receive from their largest payer will be directly tied to the HCAHPS survey.

Healthcare economists are advising hospitals with the advent of healthcare reform and future reimbursement levels, one of their financial objective hospitals will need to achieve is to generate positive returns under government reimbursement policies. This places increased significance on the outcomes of HCAHPS surveys and hospitals will need to take a more proactive step in managing their operations as they are reflected within the survey.

The HCAHPS survey consists of 27 questions that cover everything from the cleanliness of the patient room, to nurse-patient communication, to pain management. However there are 2 questions, by their nature transcend the entire spectrum of the healthcare delivery system.

- Rate the hospital on a scale from 0 to 10.
- Would you recommend the hospital?

The responses to these questions can definitely be impacted by the administrative processes within the Revenue Cycle. Remember the revenue cycle representatives are usually the last contact with patients upon completion of their healthcare experience. While the time line for the HCAHPS survey requires the survey to be administered within 6 weeks of discharge, there is ability, for a deliberate

focus on the patient interactions by the revenue cycle representatives, stressing the organization's culture and responsiveness to assist with the administrative challenges patients deal with, to influence the patient's perception of the hospital.

This is not only good business sense from an accounts receivable management position, but also allows for a world class customer service environment that is proactively managing the patient's account portfolio; in contrast to an approach that just puts out the fires and is limited to responding to questions and focused only on the immediate collection of a debt. Make no mistake collecting everything that is due is important but realize the collection of an out of pocket patient liability or even one entire patient account balance has far reaching effect on greater future reimbursements.

In fact hospital revenue cycle representatives are the final personal touch points that usually occur between patients and the hospital.

You need to ask these questions:

- Are these touch points/encounters being used to positively support the hospital's mission statement?
- Is there active participation with patients during these encounters to shape the hospital's reputation and brand?

The answer to these questions all center around how to guide the patient's journey through the healthcare reimbursement maze to find the most appropriate solution for the patient's situation. This journey can be accomplished through the use of specific tools that focus on enhanced communications and a comprehensive resolution of the patient's account. By using people-driven, technology supported services you can achieve a high level of patient satisfaction. Through this satisfaction you can enhance both patient and physician loyalty to the hospital.

The loyalty of these patients can unlock huge future potential revenue sources. The patient life time revenue value is the amount of revenue a patient can

expect to generate for a hospital over their lifetime if they choose to utilize the same hospital for all the medical needs. With the impact of consumerism in healthcare this lifetime revenue value is becoming an important part of hospital's reputation management process and strategic marketing initiatives.

What are things you need to do to maximize the revenue cycle impact on the patient experience as well as protect your future patient lifetime revenue potential?

- Educate all employees of the patient experience initiatives especially the revenue cycle representatives and their impact on the outcomes.
- Create an environment that fosters patient loyalty as a critical outcome.
- Design a patient centered revenue cycle process that is focused on customer service excellence while resolving all patient concerns.
- Integrate HCAHPS survey completion within the patient revenue cycle communication process.
- Utilize technology to support the customer service function with call centers personnel trained and motivated to achieve established goals.
- Insure all third-party service providers are fully supporting your mission and your initiatives to enhance the patient experience.
- Explore social media sites to communicate your message and encourage patients to be positive spokes persons for your organization.

Remember your reputation matters and what your patients are saying is crucial and these experiences are still be formed long after the patient leave the hospital. That is why revenue cycle operations are critical to effective Total Patient Experience initiatives.

Avadyne Health provides customer service solutions for hospitals nationally that improve profitability while enhancing the Total Patient Experience. Call Steve Chrapla at (847) 395-7655 to learn more about our Patient Experience and Reputation Management programs and how they can assist your organization.

CMS 3-day payment window for wholly owned or wholly operated physician practices

By: Mary Cronin, Director
BESLER Consulting

If you have a wholly owned or wholly operated physician practice, you need to be aware of the new Medicare three-day payment window which was published in the Federal Register (Volume 76 No. 228) on November 28, 2011 as a part of the “Medicare Program; Payment Policies Under the Physician Fee Schedule, Five-Year Review of Work Relative Value Units, Clinical Laboratory Fee Schedule: Signature on Requisition and Other Revisions to Part B for CY2012” final rule.

Per the Federal Register: “Under the 3-day payment window, a hospital (or an entity that is wholly owned or wholly operated by the hospital) must include on the claim for a Medicare beneficiary’s inpatient stay, the technical portion of any outpatient diagnostic service and non-diagnostic services related to the admission provided during the payment window. The new law makes the policy pertaining to admission-related non-diagnostic services more consistent with common hospital billing practices.”

The payment window is only 1-day for non-subsection (d) hospitals (which is a hospital not paid under the Inpatient Prospective Payment System - psychiatric hospitals and units, inpatient rehabilitation hospitals and units, long-term care hospitals, children’s hospitals and cancer hospitals).

Per 42 CFR 412.2(c)(5)(i) - “An entity is wholly owned by the hospital if the hospital is the sole owner of the entity. An entity is wholly operated by a hospital if the hospital has exclusive responsibility for conducting and overseeing the entity’s routine operations, regardless of whether the hospital also has policymaking authority over the entity”.

The 3-day payment window policy applies to services related to the admission including all diagnostic services and clinically related non-diagnostic services, other than ambulance and maintenance renal dialysis services, which would be paid for under Medicare Part B and that are provided by a hospital (or an entity wholly owned or operated by the hospital) to a patient. This is not limited to physician offices or clinics; it includes any Part B entities that provide diagnostic or related non-diagnostic services which would include a variety of entities such as clinical laboratory facilities, ambulatory surgical centers, and diagnostic centers.

Wholly owned or wholly operated entities which provide diagnostic services have always been subject to the payment window. This final rule is to encourage hospitals to bring any other wholly owned or wholly operated Part B entities into compliance with the 3-day payment window policy. Rural Health Clinics and Federally Qualified Health Centers are not currently included under the 3-day payment window since they are reimbursed through an all-inclusive rate.

For services provided within the 3-day payment window the wholly owned or wholly operated entities will be reimbursed the professional component for CPT/HCPCS codes with a Technical Component (TC)/Professional Component (PC) split. For codes without the TC/PC split the facility rate will be paid to avoid duplicate payment for the technical resources involved.

The three-day payment window does not make any changes to the billing of surgical services under the global surgical rules. Although if the sur-

gery were performed within the three-day payment window then the surgery itself may be subject to the three-day window.

The hospital is responsible for notifying the practice of related inpatient admissions for a patient who received services in a wholly owned or wholly operated entity within the 3-day window prior to an inpatient stay.

Beginning on January 1, 2012 CMS payment modifier "PD" (Diagnostic or related non-diagnostic item or service provided in a wholly owned or wholly operated entity to a patient who is admitted as an inpatient within the 3 days, or 1 day) is available and wholly owned or wholly operated entities should begin to append the modifier to claims as appropriate. The modifier is not required until July 1, 2012 but CMS encourages hospitals and their wholly owned or wholly operated entities to work toward establishing the necessary internal processes to ensure compliance by the deadline.

The charges related to the technical component of all outpatient diagnostic services and admission related non-diagnostic services provided within the 3-day payment window must be included on the inpatient claim.

A hospital must also include the cost related to the technical component of all diagnostic and admission related non-diagnostic services furnished by wholly owned or wholly operated entities in the

3-day payment window on their cost report.

The final rule contains a number of examples regarding under what type of arrangement the 3-day payment window applies based on various relationship structures.

Since providers are required to start applying the PD modifier to their claims by July 1, 2012 this is an issue that needs to be addressed immediately. For many providers this will not be an easy process since the wholly owned or wholly operated entities are often on different information systems than the hospital.

As hospitals and physician groups continue to align, affiliate and otherwise comingle business relationships, each should be aware of the billing requirements and how it could affect their practice. Documentation of the business relationship, including policies and procedures should include a position on the billing practices is warranted. In addition, as providers are ramping up efforts to acquire physician practices, careful consideration of the effect of this reimbursement mechanism should be considered during the strategic planning and negotiating process.

If you would like more information on the 3-day payment window and how it might affect your facility or affiliation, please contact Mary Cronin at mcronin@besler.com or 732-839-1217.

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Direct bank placements as a tax-exempt financing alternative

Mark Slesar
Institutional Markets Group
BMO Harris Bank

For many tax-exempt borrowers, the current competitive banking and low interest rate environments are providing an opportunity to finance new money projects or refinance existing debt through direct bank placement (DBP) bonds.

A DBP structure is essentially a direct loan from a commercial or investment bank at a tax-advantaged interest rate. The spread over a variable or fixed index is determined based on the credit quality of the borrower and the tenor of the put period. Additionally, a tax multiplier is applied to the rate and is dependent upon whether a transaction is considered bank-qualified or non-bank-qualified, and varies by financial institution based on the institution's tax position. As a tax-exempt bond, the financing must be issued under a qualified authority with bond counsel determining a security's tax-exemption qualification.

Many commercial banks currently have an oversupply of deposits and wish to offset these by increasing assets. Specifically, there is a demand for high credit-quality rated tax-exempt securities by banks, resulting in decreased credit spreads paired with attractive terms and conditions for DBPs. Additionally, new regulations are providing banks with incentives to shift away from issuing letter of credit with the anticipated implementation of Basel III in 2015 which will require financial institutions to increase liquidity and capital requirements for letters of credit.

Reduced Risks, Historically Low Rates

Borrowers with new financing needs should consider DBPs, particularly if they have an existing concentration in variable-rate demand bonds (VRDBs). Unlike a traditional VRDB structure, DBPs have no daily or weekly remarketing risk, no counterparty risk and no disclosure requirements.

Organizations weighing their refinancing options should also consider DBPs, particularly if they have outstanding bond issues with 15 years or less in amortization. And if their credit quality is strong enough, borrowers may have the opportunity to fix rates for the remaining life of the bonds at the current historically low fixed rates.

Borrowers evaluating DBPs should weigh their options with financial institutions experienced in tax-exempt financing. Such institutions* will be familiar with bonded debt that is on parity with existing outstanding debt and will understand how to structure a DBP appropriately. Finally, borrowers will need to give careful consideration of required performance covenants and event of default triggers.

For more information, visit BMO Harris Bank Healthcare Banking Solutions at www.harrisbank.com/healthcare.

United States Department of Treasury Regulation Circular 230 requires that we notify you that, with respect to any statements regarding tax matters made herein, including any attachments, (1) nothing herein was intended or written to be used, and cannot be used by you, to avoid tax penalties; and (2) nothing contained herein was intended or written to be used, and cannot be used, or referred to in any marketing or promotional materials. Further, to the extent any tax statement or tax advice is made herein, BMO Harris Bank N.A. and its affiliates do not and will not impose any limitation on disclosure of the tax treatment or tax structure of any transactions to which such tax statement or tax advice relates. BMO Harris Bank N.A. and its affiliates do not provide legal advice to clients. You should review your particular circumstances with your independent legal and tax advisors.

Mark Slesar has over 25 years of experience in healthcare and leads the Institutional Markets Group for BMO Harris Bank.



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JOHN OSEN, DIRECTOR OF PATIENT FINANCIAL SERVICES, ASPIRUS INC.



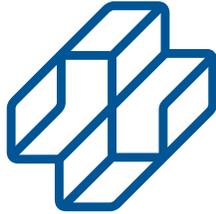
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HFMA Annual Spring Conference
“SUPREME DECISIONS!”
May 23-25, 2012
Blue Harbor Resort, Sheboygan, WI

- Kim Byas, American Hospital Association - “Buckle Up for a Bumpy Ride: Federal Issues in Health Care”
- Steve Brenton, Wisconsin Hospital Association - “Wisconsin’s Health Care Environment: Challenges and Opportunities in a Climate of Uncertainty”
- Ann Grill, Press-Ganey - “Taking P4P and HCAPS to Whole Hospital Accountability”
- Sarah Hull & Rick Cameron, Navigant Consulting - “Market Driven, Value Based Physician Compensation”
- Gary Moss & Rebecca Mauer, KPMG - “Electronic Health Record and Attestation of Meaningful Use”
- Theresa Custer, Living as a Leader - “Inspiring Others Through Reward and Recognition”
- Robert Schile, CliftonLarsonAllen - “Current Events with HealthCare Reform - Focus on Proposed CMS Rules”
- David Snow, Hall Render - “Hot Topics - Regulatory and Compliance Update”
- Ralph Wuebker, MD, Executive Health Resources - “Critical Readmissions Strategies for Hospital Leadership: A Step-by-Step Approach to Reducing 30-day Rehospitalization Rates”

NEW: Registration is only being accepted online at: <http://hfmawisconsin.com/Events.html>

Program Sponsored by:
ProAssurance, Hall Render, Killian, Heath & Lyman and MMIC Group

Brochure on-line:

http://hfmawisconsin.com/uploads/HFMA_Booklet_Rev.pdf

Program Location

Blue Harbor Resort
725 Blue Harbor Drive
Sheboygan, WI 53081
Phone: 920.452.2900 / 866.701.2583
www.blueharborresort.com
Reservation Code: 7A99WL

Reserve your room by April 28 2012, to receive discounted room rate of \$124 single/double. Be sure to mention "Wisconsin HFMA" when making your reservation



Blue Harbor Resort is in the heart of Harbor Centre. From I-43 North or South, exit on Hwy 23 East. Turn right (South) on 8th Street. Follow 8th Street over the drawbridge and circle the rotary to South Pier drive.

From the North

Traveling South on I-43 towards Sheboygan, take exit 126, which is Hwy 23 going East, turn right on 14th Street going south and then left onto Indiana Ave., which brings you to the traffic circle at South Pier Drive.

From the South

Traveling North on I-43 towards Sheboygan, take exit 123, which is Hwy 28 going East, turn right onto South Washington Street, left on South Business Drive and right on Indiana Ave, which brings you to the traffic circle at South Pier Drive.

Social Activities

Wednesday, May 23, 2012

10:00 am (tee times vary) Golf Outing - The Bull at Pinehurst
6:00-7:30 pm Dinner (included in cost for Educational Registration)

Thursday, May 24, 2012

6:00-7:00 pm Cocktail Reception
7:00 pm Dinner
8:00 pm Awards Presentation
8:20 pm Installation of Officers and Directors
8:30 pm Remarks by 2012-2013 President
8:45 pm President's Reception

Friday, May 25, 2012

12:00 pm Door Prizes - Must be present to win!

Golf at THE BULL

Registration is only being accepted online at: <http://hfmawisconsin.com/Events.html>

The Bull at Pinehurst Farms
One Long Drive
Sheboygan Falls, WI 53085

\$85 for 18 holes, includes green fees, cart, prizes, T-Shirt (S-4XL Men's & Womens).
(Lunch and beverages are on a cash basis)

Shirt Order Deadline: May 9th

You will be contacted with your actual tee time and pairing. Questions regarding golf should be directed to Brad Taylor at bradt@stcol.com or 608-692-5064

Note: A limited number of golfers will be accommodated. Program registrants will be given priority. Golf registrations are required by May 1, 2012

Wednesday, May 23

10:00 am
Golf at The Bull at Pinehurst in Sheboygan Falls
6:00-9:00 pm Reception
6:00-7:30 pm Dinner

Thursday, May 24

7:30 am
Continental Breakfast
8:00 pm
President's Welcome

8:30-10:00 am
Steve Brenton "Wisconsin's Health Care Environment: Challenges and Opportunities in a Climate of Uncertainty"

10:00-10:30 am
Break

10:30-12:00 Noon
Keynote: Kim Byas "Buckle Up for a Bumpy Ride: Federal Issues in Health Care"

12:00-1:00 pm
Lunch and Awards

1:00-2:30 pm Breakouts

Session 101

Gary Moss and Rebecca Mauer
"Electronic Health Record and Attestation of Meaningful Use"

1:00-2:30 pm Breakouts

Session 102

Theresa Custer
"Inspiring Others Through Reward and Recognition"

2:30-2:45 pm
Break

2:45-4:00 pm Breakouts

Session 201

Sarah Hull and Rick Cameron
"Market Driven, Value Based
Physician Compensation"

2:45-4:00 pm Breakouts

Session 202

Ralph Wuebker
"Critical Readmissions Strategies for
Hospital Leadership: A Step by Step
Approach to Reducing 30-Day
Rehospitalizaion Rates"4:00-5:30 pm
HFMA WI Board Meeting6:00-7:00pm
Coctail Reception7:00-8:45 pm
Dinner, Awards and Installation of Officers

Friday, May 25

7:30-8:30 am
Breakfast

8:30-10:00 am

Keynote: Rob Schile "Current Events with HealthCare Reform - Focus on Proposed
CMS Rules"10:00-10:30 am
Break

10:30-Noon Breakouts

Session 301

Anne Grill
"Taking P4P and HCAPS to Whole
Hospital Accountability"

10:30-Noon Breakouts

Session 302

David Snow
"Hot Topics - Regulatory and
Compliance Update"12:00-12:15 pm
Door Prize Giveaway - Must be Present to Win!

Officers & Board of Directors

Special thanks to our Officers and Board of Directors for the 2011-2012 Calendar year.

Officers

| | |
|-------------------------|--------------|
| President | Art Mertig |
| President - Elect | Bruce Lorenz |
| Secretary | Carmen Wolf |
| Treasurer | Tom Tanel |
| VP Programs | Shawn Gretz |

Directors

| | |
|--------------------------------|----------------|
| Northern District | Mike Bovee |
| Western District | Mary Koenig |
| Eastern District | Jim Dietsche |
| Southern District | Julie Wilke |
| Southeastern District #1 | Mike Everson |
| Southeastern District #2 | Todd Nova |
| Southeastern District #3 | Lori Wink |
| Director-at-Large #1 | Scott Edin |
| Director-at-Large #2 | Diane Lunde |
| Immediate Past President | Jim Nelson |
| Prior Past President | Bud Zeisberger |
| WHA-Ex Officio | Brian Potter |

Upcoming Events

2012 Fall Meeting
September 26-28, 2012
The Madison Concourse Hotel
Madison, WI

2013 Winter Meeting
January 23-25, 2013
Radisson Hotel
Green Bay, WI

2013 Annual Meeting
May 22-24, 2013
Osthoff Resort
Elkhart Lake, WI

Program Coordinators

| | | |
|------------------|------------------------------|------------------------|
| Heather Peterkin | Shawn Gretz, VP of Education | Pam Ott, Program Chair |
| Karen Brunow | Robert Gulig, Social Chair | Wendy Schultz |
| Stephanie Chedid | Gary Lewins | Brian Stephens |
| Anthony Cooper | Diane Lunde | Eric Summers |
| Sherry Evenson | John Lynch | Matt Wahoske |
| Mike Everson | Leif Nygaard | |

For more information on this program, contact program chair:
Pam Ott / St. Nicholas Hospital / pott@sns.hshs.org / 920.459.4729

Important Announcements

Register by May 11 and receive an Early Bird Discount for Members:

- Make your hotel reservation by April 28th to receive the best rates! \$124 for a standard. Call 920.452.2900 and mention Wisconsin HFMA.
- WI-HFMA is going Green. One week prior to the meeting, presentations will be made available through an online link.
- We take Program Evaluations seriously. This program has been assembled based on your feedback.
- Business casual attire is appropriate.
- 10 CPE credits are available.

Conference Registration

Registration is only being accepted online at: <http://hfmawisconsin.com/Events.html>

| | | |
|------------------------------|----------------------------|---------------------|
| Members Rates Before May 11: | Member Rates After May 11: | Non Member Rates: |
| Full Program \$175 | Full Program \$225 | Full Program \$275 |
| Thursday Only \$125 | Thursday Only \$150 | Thursday Only \$175 |
| Friday Only \$50 | Friday Only \$75 | Friday Only \$100 |

Sponsor registration: As a sponsor of HFMA Wisconsin you were mailed free program registration certificates. To use these certificates register online and select the option for 'Sponsor (Free Certificate)' and then mail the certificate to: Mary Kaja PO Box 1604 Madison, WI 53701

To view HFMA Wisconsin sponsors visit: <http://hfmawisconsin.com/Sponsors.html>

Platinum Sponsor: 6 complimentary program registrations Gold: 4 complimentary program registrations
Silver: 2 Complimentary program registrations Bronze: 1 complimentary program registrations

We accept all major credit cards and checks. Please make checks payable to HFMA Wisconsin and mail to: Mary Kaja PO Box 1604 Madison, WI 53701

HFMA REFUND POLICY: A full refund of the registration fee, less a \$25.00 processing charge, will be granted if a cancellation is received up to 5 days prior to the meeting. A 50% refund, less a \$25.00 processing charge will be granted if a cancellation is received up to 48 hours prior to the meeting. No refund will be granted if a cancellation is received less than 48 hours prior to the meeting. Substitutions with the same organizations are allowable. Exceptions to this policy may be allowed at the discretion of the VP of Programs, in consultation with the Program Chair and the President of the Wisconsin HFMA Chapter.

**Wisconsin Chapter, Healthcare Financial Management Association
2012-2013 Sponsorship Program
June 1, 2012 – May 31, 2013**

Thank you for considering our sponsorship program, which will provide you with heightened visibility to our membership and will help us continue to provide top-quality educational programs while keeping registration fees to a minimum.

The sponsorship program ensures sponsors can participate at a variety of levels and receive value for their support and involvement in Wisconsin HFMA activities.

HFMA offers three Chapter Programs each year (September, January and May) except in a year when there is a Mega Conference. In the year of a Mega Conference, HFMA offers two Chapter Programs (September and May) instead of three. The next Mega Conference is scheduled for January 2014.

PLATINUM

Sponsorship Fee - \$5,000

(LIMIT OF SIX PLATINUM SPONSORS)

- Wisconsin HFMA web page listing with your company's logo/description and a link to your company's web site
- A full page ad in the Member Directory
- A listing in the Chapter Resource Directory (\$200 for each additional listing)
- Sponsor Spotlight article in the Chapter newsletter describing your company
- Invitation to interact with the Wisconsin HFMA Board at the Winter Meeting
- Program sponsor for one of the three annual Chapter Programs (shared with one or two other Platinum sponsors)
- Signage and/or booth at all Chapter Programs
- Verbal and written recognition at all Chapter Programs
- Preferred status on the Underwriting with Recognition Program opportunities with a paid sponsorship by June 1, 2012
- Six complimentary program registrations (expire May 31, 2014)
- Two additional Chapter directories (additional directories upon request, subject to availability)
- 8 X 10 appreciation plaque
- First right of renewal until June 1, 2012

GOLD**Sponsorship Fee - \$3,500**

- Wisconsin HFMA web page listing with your company's logo and a link to your company's web site
- A half page ad in the Member Directory
- A listing in the Chapter Resource Directory (\$200 for each additional listing)
- Sponsor Spotlight article in the Chapter newsletter describing your company
- Signage and/or booth at Annual (May) Chapter Program
- Verbal and written recognition at all Chapter Programs
- Preferred status on Underwriting with Recognition Program opportunities (after Platinum)
- Four complimentary Chapter Program registrations (expire May 31, 2014)
- Two additional Chapter directories (upon request, subject to availability)
- 5 X 7 appreciation plaque

SILVER**Sponsorship Fee - \$2,000**

- Wisconsin HFMA web page listing with a link to your company's web site
- A 1/3 page ad in the Member directory
- A listing in the Chapter Resource directory (\$200 for each additional listing)
- Written recognition at all Chapter Programs
- Preferred status on Underwriting with Recognition Program opportunities (after Platinum and Gold)
- Two complimentary Chapter Program registrations (expire May 31, 2014)
- Two additional Chapter directories (upon request, subject to availability)
- Appreciation Certificate

BRONZE**Sponsorship Fee - \$1,000**

- Wisconsin HFMA web page listing
- Listing in the Chapter directory and Chapter Resource directory (\$200 for each additional listing)
- Written recognition at all Chapter Programs
- Preferred status on Underwriting with Recognition Program opportunities (after Platinum, Gold and Silver)
- One complimentary Chapter Program registration (expires May 31, 2014).
- Two additional Chapter directories (upon request, subject to availability)
- Appreciation Certificate

Thank you for considering participation in the Wisconsin Chapter HFMA Sponsorship Program. If you need additional information about the Sponsorship Program, please contact a Sponsorship Committee Co-Chairperson:

Jim Brick at (262) 542-6508 or Mark Herder at (414) 359-3166

Please complete the sponsorship enrollment form below, and mail together with your check to:

Jim Brick
P.O. Box 589
Waukesha, WI 53187

Make checks payable to HFMA – Wisconsin Chapter

CORPORATE SPONSORSHIP ENROLLMENT FORM

PLATINUM - \$5,000 SILVER - \$2,000
 GOLD - \$3,500 BRONZE - \$1,000
 ADDITIONAL RESOURCE DIRECTORY LISTINGS - \$200 EACH

I am a WI HFMA member I am not a WI HFMA member (Non-member sponsors will be added to WI HFMA distribution lists in order to receive important announcements and event information)

I am currently an HFMA sponsor and wish to renew my sponsorship at the current level using the same company and contact information as last year. (If this is checked, you do not need to fill out this form. Please also indicate on the Resource Directory form if you'd like to use last year's information, or you may provide updated information if needed).

My check is enclosed in the amount of \$_____

Signature: _____ Date: _____

Company: _____

Address: _____

City, State, Zip: _____

Company Web-Site: _____

Contact Name: _____ Title: _____

(PLEASE PRINT)

Telephone: _____ Fax: _____

E-mail: _____

WISCONSIN HFMA 2012-2013 CHAPTER RESOURCE DIRECTORY

(DUE OUT OCTOBER 2012)

HFMA BENEFIT FOR SPONSORS

The Board of Directors recognizes and greatly appreciates the value, expertise and support of our sponsor/business associate members and strongly encourages our provider members to consider utilizing their products and services before using similar services of companies outside our membership. As a HFMA Sponsor benefit, the Wisconsin Directory includes ONE FREE Resource Directory listing, where sponsors will be listed exclusively for our Wisconsin members. You may also purchase additional listings in separate categories for \$200 each.

Please use the information as it appeared in the 2011-2012 Chapter Resource Directory

Yes _____ If no, please complete the information requested as it will appear in the Resource Directory.

Please check the Level of your organization's HFMA sponsorship:

Platinum _____ Gold _____ Silver _____ Bronze _____

Sponsor Organization Full Name:

(Please print)

Authorized Contact _____

Street Address _____

City _____ State _____ ZIP _____

Phone (_____) _____ Fax (_____) _____

Email: _____

Web address: _____

WISCONSIN HFMA 2012-2013 CHAPTER RESOURCE DIRECTORY LISTINGS

Please fill out a separate section for each category under which you would like to be listed (categories are listed on the following page). **YOUR FIRST LISTING IS FREE**. Additional listings, under different categories, will require an **extra \$200 per listing and a different 50 word description, if desired**.

You may select from the following categories indicating your organization's type of service. Remember, the first one you choose will be your free listing. Additional categories will require an additional \$200 and 50 word description, if desired.

Accounting Services

Auditing Services

Benchmark Data Services

Collection and AR Recovery Services

Consulting Services

EDI Products/Services

Education/Training

Facilities Design and Construction

Financial Services

Insurance Products/Services

Investment Banking

Legal Services

Patient Record Products/Services

Reimbursement Services

Other Services (please write in your own description)

Category 1 (FREE LISTING):

Please attach a Word document in an email summarizing a description of the services/product offerings of your organization in 50 words or less to jim.brick@creditmgt.com. **Descriptions over 50 words will be edited to fit.** Please type your company name and "HFMA Resource Directory Summary" in the subject of your email.

Category 2 (\$200):

Submit any new information that you would like in this listing, including a different company name/division or contact information below:

Name: _____

Contact name: _____

Address: _____ City _____ State ____ Zip _____

Email: _____ Phone: _____

Please attach an additional Word document in an email summarizing another description of the services/product offerings of your organization if desired. **Please keep the description to 50 words or less. Descriptions over 50 words will be edited to fit.**

Category 3 (\$200):

Submit any new information that you would like in this listing, including a different company name/division or contact information below:

Name: _____

Contact name: _____

Address: _____ City _____ State ____ Zip _____

Email: _____ Phone: _____

Please attach an additional Word document in an email summarizing another description of the services/product offerings of your organization if desired. **Please keep the description to 50 words or less. Descriptions over 50 words will be edited to fit.**

Please copy of this sheet if you would like to include additional listings.

Directory Ad

Wisconsin HFMA Platinum, Gold and Silver sponsors may place an ad in the Membership Directory as part of their membership benefits. Please make sure your ad meets the required specifications. If you would like to keep the same ad that appeared in last year's directory, please indicate below.

Please use the ad as it appeared in the 2011-2012 Membership Directory. Yes_____

If no, please format your ad according to your membership level and email it to Jim Brick at jim.brick@creditmgmt.com.

FILE FORMAT: EPS or PDF

RESOLUTION: 300 dpi or greater

BLACK AND WHITE FONT AND GRAPHICS ONLY

SIZE: Platinum members receive a full page advertisement
REQUIRED SIZE: 4.5" x 8"

Gold members receive a half page advertisement
REQUIRED SIZE: 3.5" x 4.5"

Silver members receive a 1/3 page advertisement
REQUIRED SIZE: 2.5" x 4.5"

State Collection Service, Inc.

What do you look for in a partner?



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If you're looking for a partner you can trust to fulfill your collection needs,
why not select one that has been recognized time and time again by industry leaders?

Call us today at 800-477-7474 or visit us at statecollectionservice.com!

A better STATE for your bottom line.

* HFMA staff and volunteers determined that this product has met specific criteria developed under the HFMA Peer Review Process. HFMA does not endorse or guaranty the use of this product.

HFMA Sponsor List (2011-2012)**Platinum**

Hall, Render, Killian, Heath & Lyman
MMIC Group
ProAssurance Wisconsin Insurance Company

Gold

Availity L.L.C.
BMO Harris Bank
CBE Group
Clear Medical Solutions
Harris & Harris, Ltd.
McGladrey
OptumInsight™
Rycan
Wisconsin Health and Educational Facilities Authority (WHEFA)

Silver

Cleary Gull Advisors, Inc.
Eide Bailly LLP
HRS/ Erase, Inc.
LarsonAllen LLP
ProSource/J.C. Christensen & Associates
Quarles & Brady LLP
von Briesen & Roper, s.c.
WIPFLi LLP
Ziegler

Bronze

Alliance Collection Agencies, Inc.
Americollect
Amphion Medical Solutions
Avadyne Health
Bay Area Healthcare Consulting/EBB Coding Solutions
Credit Management Control, Inc.
Outreach Services
State Collection Service, Inc.
Tri-State Adjustments, Inc.