Arkansas Chapter Spring 2015 Annual Conference

Wednesday, April 15, 2015

9:00 am – 4:00 pm  Golf Outing – Glenwood Country Club (Separate sign up)
5:00 pm  HFMA Committee meetings – Oaklawn Room Embassy Suites
5:30 pm  HFMA Board and Committee Chair Meeting – Oaklawn Room
6:30 pm – 7:30 pm  Networking Opportunities Sponsored by Corporate Sponsors – Grand Salon

Thursday, April 16, 2015

7:30 – 8:00 am  Registration – Convention Center Horner Hall Plaza Lobby
8:00 – 8:15 am  Welcome & Announcements – Tracy Young, HFMA President – Horner Hall

Keynote Speakers

Joint Session – Convention Center Horner Hall

8:15 – 9:30 am | Course SP1501
Healthcare Financial Management is a Marathon
Matt Jones, 7 Continent Marathon Man, MJI*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: During these challenging and changing times of unrelenting cost containment, increasing regulatory burdens, and an aging workforce, many are being asked to do more with less. Even so, the work must go on, as the services provided are vital to providing the highest quality of healthcare. Using a marathon as a metaphor Matt shares lessons, insights, and strategies that executives and leaders in Healthcare Financial Management can use to meet the present challenges. This is accomplished through Matt’s against all odds story of conquering cancer three times, running marathons around the world including San Diego, Rome, Tokyo, Peru, Australia, and Cape Town after relearning how to walk, and his research as a PhD candidate in Organizational Leadership.

Learning objectives: After this presentation, participants will be able to
• Discover three tools that will increase success and productivity.
• Learn how to create more effective relationships among staff, management, and coworkers.
9:30 – 9:45 am Break with Exhibitors – Convention Center Plaza Lobby

9:45 – 11:00 am | Course SP1502
State of HealthCare and National HFMA Update

*Joseph J. Fifer, FHFMA, CPA, President & CEO, HFMA*

CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

**Program Content:** As the nation’s healthcare transformation continues, all stakeholders are being challenged to go beyond their traditional roles. In this presentation, HFMA President and CEO Joe Fifer will share highlights of our newest research findings on value-driven health care, discuss the trend toward consumerism, and offer guidance for success in the context of ongoing healthcare industry realignment.

**Learning objectives:** After this presentation, participants will be able to
- Identify key strategic issues in healthcare finance.
- Describe the evolving roles of major healthcare stakeholders.
- Discuss implications of value-driven health care and consumerism for finance leaders.

11:00 am – 1:00 pm Lunch, Installation of Officers, Presentation of Awards & Trade Show
Convention Center Horner Hall & Plaza Lobby

1:00 – 2:15 pm | Course SP1503
Panel Discussion: Arkansas Managed Care

*Moderator: Steve Rose, CFO, Conway Regional Health System*
*Panelist: Paul A. Burnett, Vice President, Network Management, United Healthcare*
*Panelist: Randy Fuller, Director, Provider Reimbursement, AR Blue Cross Blue Shield*
*Panelist: Mark Johnson, VP, Network Services, QualChoice*
*Panelist: Matt Ungs, VP Contracting Mid-South, Cigna*

CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

**Program Content:** With change from the Affordable Care Act and an emphasis on quality, these panelists will discuss the evolving dynamics within the payor and provider community in the managed care arena.

**Learning objectives:** After this presentation, participants will be able to
- Understand the future managed care marketplace and what impact that will have on healthcare providers.
- Understand how quality measures will evolve and what value-based payment models hold promise for cost reduction & quality improvement.
2:15 – 2:30 pm | Break with Exhibitors – Plaza Lobby

2:30 – 3:45 pm | Course SP1504
Insights into Accounting Schemes and Scams
Jeffrey Roberts, Managing Director, BKD*
CPE Credits: 1.5 | CPE Type: Accounting and Auditing | Level: Basic | Prerequisites: None

Program Content: This session will cover fraud schemes committed by employees and other insiders that are serious problems in the United States and globally. According to the Association of Certified Fraud Examiners 2014 “Report to the Nations,” the healthcare industry is among the most frequently affected by embezzlement, corruption and other fraud, making it important for health care finance leaders to learn to understand and recognize the most prevalent schemes that often occur in or through the accounting/finance department. Examples of real frauds will be shared from a professional experienced in uncovering fraud along with practical fraud prevention tips for all participants.

Learning objectives: After this presentation, participants will be able to
- Gain knowledge to help recognize fraud when reviewing accounting transactions, financial reports and other records.
- Learn about the different types of fraud schemes and how they work.
- Understand the true cost of fraud to your bottom line.
- Learn practical internal control tips and fraud prevention techniques.
- Gain an understanding of fraudsters and their motives.

2:30 – 3:45 pm | Course SP1505
Two Midnight Rule – MAC Perspective
Debra L Patterson, MD, FACP, VP, Clinical Affairs & Medical Director, Novitas Solutions, Inc*
Tanya Brooks, Provider Outreach and Education Representative, Novitas Solutions, Inc*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: This presentation will review CMS requirement for inpatient hospital admissions under the “Two Midnight Rule” along with Novitas’ audit findings from the recent Probe and Educate project. Following the didactic presentation, the speakers will answer questions from the audience in an informal and interactive session.

Learning objectives: After this presentation, participants will be able to
- Understand the CMS requirements for inpatient hospital admission under the “Two Midnight Rule”.
- Understand results of extensive record review conducted by Novitas under the Probe and Educate project.
- Understand medical record deficiencies and strategies necessary for corrective actions to reduce error rates associated with short stay inpatient admissions.

3:45 – 4:00 pm | Break with Exhibitors – Plaza Lobby
4:00 – 5:00 pm | Course SP1506
Cost Reporting 101
Stacie Farnam, Regional Director - Reimbursement, Mercy*
Stefanie Jaeger, Senior Reimbursement Specialist, Baptist Health*
CPE Credits: 1 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: This presentation will cover the major sections of the cost report and describe how the sections work together to calculate settlement for Medicare and Medicaid. Wage index and uncompensated and indigent care cost computations will also be discussed with additional comments about how the information can be obtained. Prior cost report audit experiences will also be discussed.

Learning objectives: After this presentation, participants will be able to
- Identify the major sections of the cost report.
- Understand how the sections work together to calculate Medicare & Medicaid settlement.
- Describe information needed to complete cost report.

Revenue Cycle – Convention Center Horner Hall

4:00 – 5:00 pm | Course SP1507
Revenue Cycle Lightning Panel: Defining, Measuring, & Improving the Patient Financial Experience
Moderator: Melodi Williams, Regional Vice President, Avadyne Health*
Panelist: Lincoln Fish, Sr Vice President of Sales & Marketing, Avadyne Health*
Panelist: Mark Hartman, Principal, Spectrum Health Partners, LLC*
CPE Credits: 1 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content:
What is the Patient Financial Experience?
- Hospitals do a lot of work around the Patient Experience. Are we including everything we need to around the patient’s financial experience?
- What sort of discussions are we having with the patient pre-admission to prepare them financially for what they are likely to face?
- How would it change your facility if the patients felt that their financial experience was a positive one…or a negative one

How do we measure the PFX?
- In what specific areas do we need to understand the patient’s perception?
- How do we deliver the questions (when, where, what format)?
- How do you make sense of the data that you have captured?

Steps to improve the PFX once we have measured it
- How do we train our people to ask for money?
- What are you doing to ensure maximum collection BEFORE asking the patient for anything?
- Define your totally optimal Patient Financial Experience
Learning objectives: After this presentation, participants will be able to
- Understand the meaning of PFX and what it encompasses.
- Plan for PFX improvements and readily identify those which return the greatest “bang for the buck”.
- Evaluate their own institution in terms of the Patient Financial Experience.
- Drive PFX as a mantra within their revenue cycle.

5:00 – 7:00 pm  Networking Opportunities Sponsored by Corporate Sponsors – Horner

Friday, April 17, 2015

8:00-8:30 am  Registration – Embassy Suites Grand Salon

Joint Session – Embassy Suites Grand Salon

8:30 – 9:45 am | Course SP1508
Overview of Section 501(r) Final Regulations on Financial Assistance and Billing Collection Policies: Or, How I Learned to Love my Federal Tax Exemption
Mark Rukavina, Principal, Community Health Advisors, LLC*
CPE Credits: 1.5 | CPE Type: Regulatory Ethics | Level: Basic | Prerequisites: None

Program Content: The session will provide an overview of the final regulations, issued at the end of 2014, on the Section 501(r) requirements related to financial assistance and billing/collection policies. The presenter will also review changes and clarifications in the regulations and explore changes in practices non-profit hospitals might consider related to financial assistance in light of these ACA requirements and leading industry practice.

Learning objectives: After this presentation, participants will be able to
- Examine requirements under the ACA’s Section 501(r) rule.
- Clarify required revisions of financial assistance and billing/collection policies necessary to comply with the final regulations.
- Provide examples of leading practices to ensure that policies meet requirements on transparency and widely publicizing policies.
- Gain an understanding of the new scrutiny of the federal Consumer Financial Protection Bureau related to medical collections.

9:45 – 10:15 am  Break

Joint Session – Embassy Suites Grand Salon

10:15 am – 11:30 am | Course SP1509
Arkansas Legislative Update
Jodiane Tritt, VP / Government Relations, Arkansas Hospital Association*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None
Program Content: Arkansas Medicaid has seen significant changes since the initial passage of the Private Option in 2013. Those changes are set to accelerate with the establishment of the Arkansas Health Reform Legislative Task Force whose purpose is to recommend alternative health care coverage models for Private Option beneficiaries and explore/recommend options to modernize traditional Medicaid programs. With Republicans controlling all branches of state government, the changes are likely to be substantial. This session will focus on what those changes may look like and what can hospitals do to educate the task force.

Learning objectives: After this presentation, participants will be able to

- Understand future potential changes to current Arkansas Medicaid programs, including the Arkansas Private Option.
- Identify state reform initiatives impacting the state’s healthcare system

*About the Speakers:*

**Matt Jones** is the 7 Continent Marathon Man. He went from being a three-time cancer conqueror to relearning how to walk to running 6 marathons on 6 continents and is now back in training for his seventh marathon in Antarctica. He is now a life changing inspirational and motivational speaker that fires up, pumps up, and inspires audiences to achieve greater VICTORY! Baseball Hall of Famer George Brett said, “Matt is a true champion and his story inspires others to be a true champion.” Matt is also the founder of the REAL Leadership Academy, a PhD Candidate in Organizational Leadership, and author of Life’s a Marathon. He has spoken for several HFMA groups including ones in CA, IL, SC, UT, and CO.

**Joseph J. Fifer, FHFMA, CPA** is president and chief executive officer of the Healthcare Financial Management Association. HFMA provides the resources healthcare organizations need to achieve sound fiscal health in order to provide excellent patient care. With more than 40,000 members, HFMA is the nation’s leading membership organization of healthcare finance executives and leaders. In 2014, Fifer was named to Modern Healthcare’s list of the 100 Most Influential People in Healthcare. Prior to assuming his position with HFMA in June 2012, Fifer spent 11 years as vice president of hospital finance at Spectrum Health, in Grand Rapids, Mich. He also spent time with McLaren Health Care Corporation, Flint, Mich., as vice president of finance and Ingham Regional Medical Center, Lansing, Mich., as senior vice president of finance and CFO. Fifer started his career with nine years at Ernst and Young, also in Michigan. Fifer was Chair of the HFMA Board of Directors in 2006-07. An HFMA member since 1983, Fifer served as a chapter president and for two terms as an HFMA board member. A Fellow of HFMA and a CPA, Fifer received his bachelor’s degree in Business Administration from Saginaw Valley State University, University Center, Mich. Fifer is an active community volunteer and runner. Fifer and his wife, Katie, have three children: Sarah, Tom, and Joe-Joe.

**Steve Rose** is Chief Financial Officer of Conway Regional Health System, and serves as Treasurer of several of its related entities. His responsibilities include overseeing all financial operations as well as helping form the health system’s vision for the future. Steve was the first Arkansan to serve as National Chair of the Healthcare Financial Management Association, (HFMA) which he did during the 2013-2014 term, and currently serves as the Immediate Past Chair and Governance Committee Chairperson. A member of HFMA since 1985, Mr. Rose’s involvement with the National Association has also included serving on the Regional Executives Council (chair 2009-10), the National Advisory Councils, the Executive Council, the Board of Directors, the Executive Committee, the Audit and Finance Committee (chair 2011-12), the Strategic Planning Committee (Chair 2012-13), and the Healthcare Leadership Council (chair 2012-13). He has also served the Arkansas Chapter of HFMA as Director, Secretary, Treasurer, President-Elect, and President and Region 9 as Regional Executive. He has received the Follmer Bronze, Reeves Silver, Muncie Gold, and Medal of Honor merit awards. Mr. Rose is a Fellow of HFMA and a Certified Public Accountant. He holds a Bachelor of Science degree in Accounting from Arkansas State University, Jonesboro, Arkansas.

**Paul Burnett** is Vice President of Network Management for UnitedHealthcare and is responsible for the contracting of Hospitals and Ancillary Providers in Arkansas, Tennessee, SW Virginia, and Eastern Oklahoma. He has been with UnitedHealthcare for 9 years and reside in Arkansas. Prior to UnitedHealthcare, He worked in Hospital Administration with HMA (Health Management Associates) for 13 years at Southwest Regional Medical Center in little Rock, AR. Graduate of the University of Central Arkansas in Conway, AR.
Randy Fuller is a CPA, worked in Public Accounting with Rasco, Burris and Winter, CPA’s for 15 years, St.Vincent Infirmary 5 Years, And Chief Financial Officer for Arkansas Specialty Orthopaedics for 10 years before joining ABCBS June 1, 2010.

Mark Johnson joined QualChoice in 2011 as Manager of Network Services. He was promoted to Director of Provider Services in June 2012 and to his current position as V.P. of Network Services in April 2014. Responsibilities include establishing value-based reimbursement methodologies such as episode payments, patient centered medical homes, and provider risk sharing. His 14 years of experience include contracting and provider relations management positions with several local health plans. Mr. Johnson is a graduate of the University of Arkansas with a Bachelor of Science in microbiology and a graduate of the University of Arkansas at Little Rock with a Masters in Health Services Administration.

Matt Ungs is the Vice President, Contracting & Provider Services and manages the provider networks for the Cigna’s MidSouth market, comprised of Arkansas, Kentucky, Mississippi and Tennessee. Since Matt joined Cigna in 2009, the MidSouth market has been a leader for Cigna in establishing high performing accountable care relationships and innovative episodic payment arrangements in collaboration with health care professionals and delivery systems. Matt has over 20 years experience in health plan operations and network management, previously holding leadership positions with Prudential Health Care, Novant Health, and Coventry Health Care in southeast and midwest. Matt holds a Bachelor of Arts from Vanderbilt University (Nashville, TN), and Masters of Business Administration from Washington University in St. Louis. He is lives in his home state outside Nashville, Tennessee.

Jeffrey Roberts has been with BKD for over 19 years and is a Managing Director in the Forensics and Valuation Services practice. He is a CPA, Certified Fraud Examiner and is Certified in Financial Forensics. A considerable part of his practice involves helping companies address allegations of embezzlement, mismanagement, conflicts of interest and similar issues. He also consults and serves as an expert witness in issues involving accounting, auditing and other financial matters.

Debra Patterson is Vice President, Clinical Affairs and Executive Medical Director for Novitas Solutions, Inc., the Medicare Administrative Contractor for Part A & B services in Jurisdiction L (Pennsylvania, Maryland, DC, New Jersey, and Delaware) and Jurisdiction H (Arkansas, Colorado, Louisiana, Mississippi, New Mexico, Oklahoma, and Texas). In this capacity, she is responsible for oversight of Contractor Medical Directors, Medical Affairs, and Provider Outreach and Education. Dr. Patterson joined Novitas in 2012. From 1997 until 2012, Dr. Patterson served as Contractor Medical Director for the Jurisdiction 4 (Texas, Colorado, New Mexico, and Colorado) Medicare Administrative Contract with TrailBlazer Health Enterprises and its predecessor, Blue Cross Blue Shield of Texas. Dr. Patterson practiced general Internal Medicine in Dallas, Texas for 19 years before joining TrailBlazer.

Tanya Brooks is a Provider Outreach and Education Specialist with Novitas Solutions, Inc. She has over 15 years of experience with the Traditional Medicare and non-traditional Medicare programs as an Education Representative and Network Contract Manager. Her professional interest focus is on communicative approaches to educating the provider community and equipping them with the necessary tools they need to be successful. Her current responsibilities include servicing Part A Medicare providers.

Stacie Farnam, FHFMA is a Regional Director of Reimbursement for Mercy. With 15 years of reimbursement experience, she oversees internal cost report preparation, monthly close for accounts receivable and 3rd party, NPSR budget and analysis, 855 and enrollment among various other task and projects for 9 Mercy facilities in Arkansas and Kansas. She is a graduate of Arkansas Tech University in Russellville, Arkansas with B.S.B.A. degrees in accounting and marketing/management. She is a Fellow of Healthcare Financial Management Association.

Stefanie Jaeger is the Senior Reimbursement Specialist for Baptist Health and works on cost report preparation, analysis of new and existing Medicare regulations and appeal and settlement issues for hospitals, hospices, home health agencies and rural health clinics. She has worked on issues related to wage indexes, Medicare bad debts, interns and residents, organ transplants and disproportionate share adjustment. She has 12 years of experience in health care. Stefanie is a member of the American Institute of CPAs and Healthcare Financial Management Association. She is a graduate of Arkansas Tech University in Russellville, Arkansas with B.S.B.A. degrees in accounting and economics.
**Melodi Williams** is Regional Vice President for Texas and all other HFMA Region 9 states at Avadyne Health. Melodi started her career at Avadyne in operations as a project manager and workflow analyst with the company, eventually managing implementations for large customers. In late 2013, Melodi became a Senior Sales Engineer, before transitioning to this role full time. Prior to joining Avadyne, Melodi worked in the medical billing industry. She holds a bachelor’s degree in Economics from San Diego State University and is active in both the HFMA and AAHAM.

**Lincoln Fish** is the Senior Vice President of Sales and Marketing for Avadyne Health, and Co-Founder of Benchmark Revenue Management, one of the original companies that became Avadyne. He is a frequent speaker for HFMA, AAHAM, and NAHAM, and has served as a keynote for the Beryl Institute on Patient Experience. Lincoln is a successful entrepreneur with significant financial, customer service, and business development experience across a number of ventures. Among these ventures, he was the co-founder of Real Health Laboratories, one of the nation’s fastest growing consumer products companies. He also built a real estate software company, and began his career as Marketing Director for an international technical society. Lincoln is a graduate of the Wharton School of Finance and Commerce at the University of Pennsylvania. He recently served as Chairman of the HIMSS Revenue Cycle Improvement Task Force.

**Mark Hartman** is a Certified Public Accountant and earned his Bachelors of Business Administration from the University of Central Arkansas. He has been in Healthcare management since 1993. Mark served as an Audit Manager with a certified public accounting firm for eight years prior to his history in hospital management. Mr. Hartman has served in a variety of roles with various healthcare companies including Chief Executive Officer, Chief Financial Officer, Regional Chief Financial Officer and Executive Director just to name a few. Mark has worked with not-for-profit companies, for-profit companies, physician offices, independent hospitals, affiliated group hospitals and other healthcare companies. Mr. Hartman has expertise in various aspects of both financial and operational roles, including: having served as a Chief Executive Officer he has lead hospitals in both the not-for-profit and for-profit settings. He was successful in these hospitals through working with the Medical Staff and hospital employees to develop change which lead to improvement in both quality of care and financial outcomes. In Chief Financial Officer positions, Mr. Hartman has lead companies through significant financial turnarounds, outstanding improvements in revenue cycle processes, bond and other debt issuances, productivity system implementations, contract negotiations and business intelligence system implementations. At various clients Mark has provided merger and acquisition assistance serving in the due diligence process as well as providing the detail calculations regarding purchase price at both the preliminary and final steps. He lead the efforts of the financial reporting for a company going through the necessary filing with the U. S. Securities and Exchange Commission to enable them to obtain approval for the public issuance of their stock on the New York Stock Exchange. Mr. Hartman works with various civic, church and professional organizations. He remains active in Healthcare Financial Management Association having served as President of the Arkansas Chapter and is currently in the succession planning line to become Regional Executive for Region 9 in 2016. In 2012 Mark was awarded the prestigious honor of CFO of the Year for Large Private Companies by Arkansas Business.

**Mark Rukavina** is Principal of Community Health Advisors, LLC and holds an MBA from Babson College and a BS from the University of Massachusetts-Amherst. He is a member of HFMA and frequently presents to local HFMA chapters. Mark has extensive experience advising hospitals, healthcare providers, community coalitions, and policymakers on community health improvement. He’s a recognized expert on healthcare access, affordability, financial assistance, billing and collection, and community benefit requirements for tax-exempt hospitals. Mark has testified before the US Congress and the Consumer Financial Protection Bureau, published policy research, and is a frequent resource to policymakers and the media. Mark previously served as Executive Director of The Access Project a national, non-profit, and as Program Director for a partnership under a national demonstration program sponsored by AHA’s Health Research and Educational Trust. As an active member HFMA, Mark recently served on HFMA’s Medical Debt Task Force and their Price Transparency Task Force. He has regularly presented at HFMA’s Annual Networking Institute (ANI). Currently, he advises HFMA on their Patient Financial Communication initiative.

**Jodiane Tritt** joined the AHA executive team as vice president of government relations on October 4, 2010. Jodiane most recently served as Executive Director of the Center for Clinical and Translational Research at UAMS. Prior to that position, she was Director of Community Support for the Arkansas Department of Health (ADH). In her work at ADH, she was responsible for their legislative agenda and advocating on its behalf with legislators. She holds a law degree from the William H. Bowen School of Law and a Bachelor of Arts from Hendrix College.
HOTEL RESERVATIONS

Please make your own reservations with the Embassy Suites in Hot Springs (1-501-321-4430). A block of rooms has been reserved, so please mention that you are with HFMA to receive the rate of $134 for a single & $144 for double room. **Embassy Suites will accept reservations until March 15, 2015. After this date reservations will be taken on a space available basis. Please make your reservations as soon as possible.** Reservations may be made online at [https://aws.passkey.com/event/11783814/owner/11499914/landing](https://aws.passkey.com/event/11783814/owner/11499914/landing)

EDUCATIONAL CREDITS

Arkansas Chapter HFMA is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: [www.learningmarket.org](http://www.learningmarket.org).

Arkansas Chapter HFMA is registered with the Texas State Board of Public Accountancy as a CPE sponsor. This registration does not constitute an endorsement by the Board as to the quality of our CPE program.

(Sponsor number 009840)

*Prerequisites and advance preparation are not required unless otherwise indicated.*

*Depending on the track the participant attends, a maximum of 10 CPE credits is available.*

All courses are instruction method GROUP LIVE.

CPE Type is classified based on NASBA definitions. For the 20 credits (50%) rule by the AR State Board of Public Accountancy, the following CPE types qualify: Accounting, Accounting (Governmental), Auditing, Auditing (Governmental), Regulatory Ethics, Behavioral Ethics & Taxes. Chapter leadership is aware of these changes and committed to helping our CPA members meet the requirement each year by providing as many hours as possible in the specific categories listed above at each of our meetings, including annual Tri-State meeting and December CPA Focused meeting.

CPE SIGN-IN AND CERTIFICATES

To receive CPE credits, you must sign in for each individual session you attend. Sign-in registers are provided for those individuals who sign and check that they need a CPE certificate. Sign-in registers will be located in each session room. If your name is not printed on the register, be sure to print your name legibly on the one of the blank lines at the end and sign next to your name. CPE Certificates will be emailed to each participant following the meeting. Keep a copy of this program along with your certificate for your records.

SPEAKER PRESENTATION HANDOUTS

Handouts will be made available electronically 3 days prior to the meeting. All attendees will receive an email notifying them that the handouts are available on the Arkansas HFMA website at arkansashfma.org so you can bring to the meeting if you choose.

REGISTRATION DISCOUNTS

Multiple registrations from the same organization are eligible for a discount. The 1st and 2nd entire meeting registrants pay full price, then the 3rd and 4th registrants pay 50% of the registration fee and the 5th and any additional registrants pay 25% of the registration fee. Multiple registrants are encouraged to register at the same time to ensure they receive the discounts. Multiple registrations discounts do not apply to sponsor comps or one day registrations.

Any Past President of the Arkansas Chapter will be a discounted registration fee of $75. This is being done both as a thank you for your tremendous efforts in past service to the Chapter and to encourage your continued attendance to meetings. If you are registering as part of a multi-attendee entity the discount will be applied to the last person registered.

PARKING/SHUTTLE FOR THIS EVENT

The Embassy Suites offers open parking for overnight guests. They do offer complimentary shuttle to the Convention Center for attendees who do not wish to walk or drive over to the Convention Center. There is available parking on the street and across from the Convention Center.

**Business casual dress is appropriate for the meetings & events.**
2014-2015 CORPORATE SPONSORSHIP PROGRAM
The Corporate Sponsorship Program is designed to enhance the quality of the Chapter programs, newsletters, and other activities. Organizations can strengthen the Chapter by becoming a Corporate Sponsor.

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Meridian Leasing Corporation
Midwest Health Care, Inc.
Ponder & Co.
Receivable Recovery Services, LLC
The SSI Group, Inc.
Triage Consulting Group
UCP Enterprises
ARKANSAS CHAPTER HFMA SPRING 2015 CONFERENCE REGISTRATION

PLEASE REGISTER ON-LINE  (Credit Card, Mail Check & Sponsor COMP options)
Go to:  www.arkansashfma.org  then click on Education & Events then Calendar of Events
OR go to:
http://events.constantcontact.com/register/event?llr=fruupihab&oeidk=a07eaiwc6m8e7cf2761

*Registration Fee:
$125  HFMA Member (before 4/10)*
$200  Non-HFMA Member (before 4/10)*
$75   Past AR President (before 4/10)*

*All Registrations after the Friday before the meeting will be an additional $25 late registration fee when you register at the door.

Thursday or Friday only registration is available.  Call Tami Hill at 501-316-1229 for pricing for members and nonmembers.

*If taking advantage of discounts referenced in brochure, please follow these instructions below:

Multiple Registrations from Same Organization:

1st & 2nd entire meeting attendee – full price
3rd & 4th entire meeting attendee – 50% off
5th & over entire meeting attendee – 75% off

Submit AR HFMA spreadsheet template with attendee information to arhfma@sbcglobal.net. Submit a check or credit card information below for the total amount of all attendees. Contact Tami Hill to obtain the spreadsheet at arhfma@sbcglobal.net or 501-316-1229.

MAIL check payable to:  HFMA Arkansas Chapter
Attn: Tami J. Hill, Registrar
419 Natural Resources Drive
Little Rock, AR 72205

OR

Please charge my credit card for discounted registrations only:  (email to arhfma@sbcglobal.net)

Name on Card________________________ Card #________________________
Exp Date_____________ CVV Code_____________ Zip Code of Card_____________
Card Type____________Signature___________________________________________
Email address for CC receipt______________________________________________

REFUNDS AND CANCELLATIONS

If cancellations are received after April 10, 2015, only 50% of the registration fee is refundable.  Registrants who do not cancel or cancel day of or after the meeting has started (Wednesday) or fail to attend must pay the entire fee. Substitutions, however, are permitted. Registration forms and cancellations must be emailed. Phone and voicemail are not valid forms of communication. For more information regarding administrative policies such as complaint and refund, please contact Tami Hill at 501-316-1229 or arhfma@sbcglobal.net.