

The Newsbreaker

HFMA Arkansas Chapter Newsletter, Spring 2020

Note from the Editor

Well, I sure do wish I could start this newsletter by reminiscing about what a great time we had at our annual conference last month! As we are all dealing with the uncertainty and upheaval that this pandemic has caused, the connections and relationships that HFMA membership facilitates are more important than ever. That's why we have decided to dedicate this edition of The Newsbreaker to our wonderful sponsors. Their support is integral to keeping our meeting fees low, putting on exciting social events, and generally making our chapter what it is today. We are so thankful to them for their support, especially now that we aren't able to put on our in-person meetings.

As always, we want to encourage all our provider members to keep our sponsors top of mind when you are seeking services. To make that easier, we've included contact information and brief descriptions of all our sponsors at the end of the newsletter. This information is also available on our website at <http://www.arkansashfma.org/sponsorship>.

I hope that all of you and your families are doing well and staying safe, and I sincerely hope to see all of you in person again soon!

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President's Welcome

Greetings HFMA family,

Several people told me that your President's year flies by and boy were they right! Especially these last two months. They have felt like a whirlwind, which I'm sure all of you have felt as well. Being in the healthcare industry, we are used to change and learning to adapt. Over these last two months, the COVID pandemic has challenged every aspect of our industry in ways we never anticipated.

So many of you stepped up as innovators and leaders within our health care organizations and other organizations within our industry, to address these new challenges and meet the needs of our patients and family members. I know many who have implemented work from home opportunities for employees to keep them safe, while allowing our businesses to continue. Payors are implementing new COVID relief efforts and vendor partners have reached out to their clients to partner and offer help during this extraordinary time. Although we are facing so many challenges, it is extraordinary to see collaboration and change we are capable of in this time of need.



Jamison Ashley, 2019-2020 Chapter President

Due to all of the pandemic restrictions, we unfortunately had to cancel our Annual conference in Hot Springs. We were disappointed in having to make that decision but recognize the importance of doing our part to stay home, stay safe and save lives. As your chapter leaders, we are still committed to keeping you up to date on hot topics and professional education. We are working on adapting in order to accommodate the need for virtual meetings in the event the restrictions are extended.

I want to give a huge thank you to Michael Westerfield, our incoming president elect, and Tami Hill, our chapter manager, for working through the logistics of setting up our first virtual conference in a very short time frame. Also, thanks to the team at BKD for providing us a webinar platform and helping us set it up. They did a great job!

I am so proud to serve with such an amazing group of leaders, who are truly committed to serving our chapter and members. All of our board members, committee leaders and leadership team have done a fantastic job this year. Thank you so much for all of your dedication and support! It has truly been an honor to serve as your President this year!

In looking forward for things to come, our Summer conference is currently still scheduled for August 26th – 28th, 2020, in Hot Springs. Also, I am excited to introduce our incoming President, Vanessa Wagner. Vanessa has been a vital member of our leadership team for the last five years and I am so excited for you all to experience her leadership and to see our chapter grow. I hope you get involved and join us on the journey!

On behalf of the Arkansas chapter leadership, its board, and committee chairs, we are thankful for each of you and hopeful that all will stay safe and healthy.

All my best,

Jamison Ashley Arkansas HFMA Chapter President

Thank You, Volunteers!!

Thank you to all our 2019-2020 volunteer leaders for all their hard work this past year.

We are sorry that Jamison was not able to thank you in person at our Spring banquet. We also want to give a big shout out to Jamison Ashley for her outstanding leadership this past year too! We hope to have our installation of officers and recognition of sponsors at our Summer conference if all opens up!

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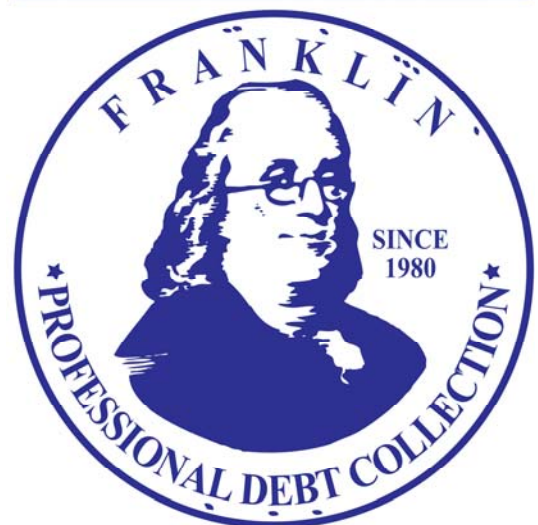
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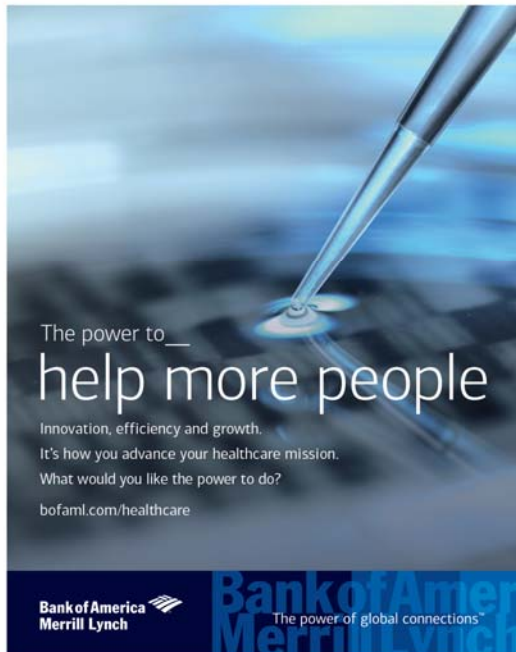
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Chapter News



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Thank You, Jamison!

One major downside to canceling our annual conference is missing out on the chance to extend our gratitude in person to Jamison Ashley for the amazing job she has done as our chapter president. Jamison has always been a dedicated volunteer and leader to our chapter, and we are so thankful for all her hard work.

The next time we get together (whenever that is!), make sure to let Jamison know how much you appreciate everything she does for our chapter!

Job Openings

As a benefit to our members, the Arkansas HFMA website posts current job openings from around the state and region. We hope you are checking it out frequently! Go to <http://www.arkansashfma.org/careers> to see what is currently posted—you could find an amazing opportunity to advance your career!

Stay In Touch!

Even though we aren't able to hold in-person educational events right now, HFMA still offers plenty of opportunities for online CPE. Both the national HFMA website and the Region 9 website have lots of upcoming webinars. Here's a sampling of what's coming up:

Annual Conference 2020: A Reimagined Virtual Experience

- June 24 & 26, July 15 & 17, August 12 & 14
- Gain clarity in a time of unprecedented uncertainty. Free attendance and CPEs for all HFMA members.
- Learn more here: <https://www.hfma.org/events.html>

Region 9 Monthly Webinars

- Tuesday, June 9—Evaluating your revenue cycle to concentrate on what really matters.
- Future webinars are scheduled for July 14, August 18, September 15, October 13, November 17, and December 15.
- Learn more here: <http://www.hfmaregion9.org/region-9-info.html>

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HFMA AR Spring Newsletter Article

Practical steps to address the financial impact of COVID-19

By David Shelton, CEO, PatientMatters

As the COVID-19 pandemic deepens, the business of healthcare is encountering unprecedented challenges that put the financial stability of hospitals and health systems at risk. The fluid realities we are experiencing have presented more complex and nuanced financial challenges across all aspects of care than we've ever seen before. But, even with the new mix of complexities, we must do our best to stay the course by focusing on each patient's financial capabilities.

The reality

The physical effect on COVID-19 patients, as with other serious illnesses, can be devastating but the damage doesn't end there. Patients' financial obligations for care further exacerbate the recovery process. Even when patients are insured, annual deductibles, co-pays, coinsurance, prescription medications and treatments not covered by insurance can be staggering.

In a recent [poll](#) conducted by the Harvard T.H. Chan School of Public Health, *The New York Times* and the Commonwealth Fund revealed just how much these costs can impact seriously ill patients and their caregivers. The key finding was that insurance alone is not enough to protect patients from the high costs of healthcare. Ninety-one percent of respondents had health insurance, yet 53 percent of this group struggled to pay their medical bills. More than one-third with insurance said they were forced to use all or most of their savings to pay for care. Some even faced the impossible choice of paying for medication or buying food for their families.

Focus on unique needs of the patient

As with clinical care, the ability to pay for care is different for each patient. Some patients are able to settle their bill at the point of service (POS). Others may need an extended payment time frame. Some will never be able to pay. Others recognize registering and settling their responsibility before POS is a plus that actually reduces financial anxiety.

Offering customized payment options based on each patient's unique circumstances not only greatly increases the provider's chances of collecting, it improves the patient experience and leads to higher satisfaction and future revenue.



Invest in front-end processes

You need to invest in the front-end processes that focus on the patient as an individual. The traditional one-size-fits-all approach to collection, where everyone is treated the same, no longer works. Instead, you must consider each patient's unique situation to identify a solution that works for them. Implementing patient payment plans that are personalized will balance patient needs with revenue goals.

There is a current need to assess each patient's ability to pay and offer feasible payment plan options to each patient. Obviously, if a payment plan is too burdensome, patients will eventually stop paying. Armed with knowledge of each patient's financial circumstances, providers can use a structured methodology that points to the most appropriate payment plans.

Personalized payment plans must take into account the patient's FICO score, 90-day payment history and any residual income. Technology is available that allows registration staff to categorize patients based on credit scores that indicate their propensity to pay, payment history on other debts and residual income that could go toward healthcare costs.

Providers must clearly explain payment plans to patients and guarantors. Financial conversations can be overwhelming for patients and uncomfortable for registration staff. Training and scripting will prepare registrars to counsel patients on their payment plan options, explain what to expect and help them make educated financial decisions. Registrars appreciate being given the tools to be successful. Tools not only help with improving collections, but increase staff job satisfaction and minimize turnover.

During crisis situations such as today, your front-end staff should be trained to not only answer financial questions but medical-related questions as well. By identifying potential for the disease upfront, before patients even step through the door, hospitals and clinics are able to:

- Communicate effectively within the facility and plan for appropriate patient care
- Monitor and manage potential for healthcare personnel COVID-19 exposure
- Inhibit the spread of the disease both within the facility and community

It's also imperative that staff are cross trained to prepare for resource shortages that may come about due to illness or other unanticipated needs.

The heavy financial load on patients, particularly those dealing with serious illnesses such as COVID-19, is a troubling. However, by implementing a personalized payment plan approach to



front-end collections, you can ease the financial burden, enhance the patient experience and measurably improve providers' financial performance.

These are demanding times for all of us, but healthcare providers and communities are resilient. If we stay the course, we will come out the other side stronger and more equipped to support and serve our communities together.

David Shelton serves as Chief Executive Officer for [PatientMatters](#). He has served in senior healthcare management for more than 15 years, with experience in operations, technology development, and manufacturing. His expertise includes delivering business growth, streamlining operational management, and generating profitability for PatientMatters and its healthcare clients.



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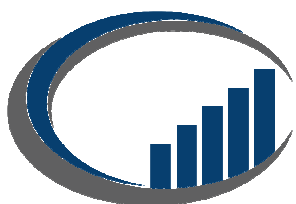
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D-MED Corporation has been providing Revenue Cycle Consulting and Management services since 1987. We can perform revenue cycle reviews to help insure your facility is maximizing reimbursement in an efficient and effective manner. We can then come back and implement all client approved recommendations and do a complete re-organization with the appropriate reporting and accountability processes.

D-MED Corporation also can place temporary Interim staff on site when you lose a Director of PFS, billers/collectors, Patient Access, as well as CFO's. We can back fill positions while going through a conversion, utilize a "swat team" for special projects or back-logs, etc. We would appreciate the opportunity to work with you.

EXPERIAN HEALTH

Taylor Bockweg

502-744-4847

www.experian.com/health

Experian Health empowers healthcare organizations with data and analytics platforms that provide transparent financial interactions with payers, patients and health consumers. Our clean and comprehensive data automates patient identification and revenue cycle operations, as well as powers patient relationship initiatives and patient self-service products that generate consumer satisfaction and loyalty.

FIRST COLLECTION SERVICES

John Dunkum

501-455-1658

www.fcscollects.com

First Collection Services, established in Little Rock, Arkansas in 1969, is a full service accounts receivable collection agency. We are a nationally licensed and bonded woman-owned certified (WBE) corporation. FCS is a leader in providing our medical clients cost effective, innovative collection services that produce maximum recoveries using industry knowledge, expertise and automated business systems. We specialize in First Party, Third Party Pre-Collect and Full Service Collections.

IMPACT HEALTHCARE SOLUTIONS

Phillip Thomas

318-255-7591 Ext. 324

www.impact-healthcare.net

Impact Healthcare Solutions is a leading national healthcare consulting and managed services firm. We are solely focused on helping you make your healthcare business an industry leader. We utilize our extensive experience with rural hospitals, community hospitals, healthcare systems, and physician practices, combined with our high performance infrastructure to create unmatched results for you in areas including revenue cycle management, provider enrollment, performance assessment, and much more.

MEDLYTIX

Alan Aycock

205-542-6545

www.medlytix.com

Medlytix is a healthcare predictive analytics company that is helping over 1,400 hospitals, health systems, and physician groups nationwide to locate missed and misidentified insurance coverage within your revenue cycle process. Our industry-leading technology improves your patient's experience while reducing your self-pay, denial, charity & bad debt claims, converting them into billable encounters. Medlytix offers a no risk and all reward proposition, bringing only upside to your healthcare facility/healthcare institution. Simply put, we identify MORE insurance for you to bill as we rescue your CA\$H before it becomes a timely-filing denial.

MEDUIT

Bret Whatley

251.421.7000

www.meditrcm.com

Meduit is one of the nation's leading revenue cycle management (RCM) companies, with 300+ years of cumulative experience in the healthcare RCM arena serving over 55 health systems comprised of nearly 500 hospitals and 55,000 physicians in 46 states. Meduit combines a state-of-the-art accounts receivable management model with advanced technologies and an experienced people-focused team that takes a compassionate approach to patient engagement.

Meduit significantly improves financial and operational performance, maximizing cash acceleration and ensuring that healthcare organizations can dedicate their resources to providing more quality services to more patients. For more information, please visit MeduitRCM.com or contact Bret Whatley at (251) 421-7000.

NTHRIVE

Victoria Rosato

215-896-6372

www.nthrive.com

nThrive® assists health care providers with performance and system improvement, and is the first company of its kind to offer comprehensive, Patient-to-PaymentSM solutions to the health care arena. nThrive provides all the technology, advisory expertise, services, analytics and education programs health care organizations need to thrive in the communities they serve. By integrating our expertise of the entire revenue cycle, nThrive unifies clinical and financial objectives, advises and drives performance with leading practices and analysis, and ensures sustainable change. We offer unmatched, tangible benefits for providers and, because we are independent, nThrive is not influenced by payor or provider owners. We provide solutions that are unbiased and aimed solely at what's best for our clients.

REVENUE SIMPLIFIED

Michael McCaleb

214-364-6184

www.revenuesimplified.com

Revenue Simplified maximizes the reimbursement for your hospital. Hospitals and Clinics with an out-of-date and/or inaccurate CDM (Chargemaster) may be billing services inappropriately, leaving revenue dollars on the table or overcharging...and potentially setting themselves up for an audit. A current Chargemaster with an accurate summary of charges and services – as well as current regulatory compliance updates – is imperative for error-free, compliant billing. Revenue Simplified's Chargemaster services are available for organizations requiring industry expertise for revenue cycle process improvements and workflow troubleshooting. Ask us about a free Chargemaster review for your organization.

THE SSI GROUP, INC.

Rich Ely

800-880-3032

www.thessigroup.com

SSI delivers solutions that increase the accuracy and velocity of data exchange among healthcare providers and payers, with the highest levels of security. A privately-held company since its founding 30 years ago, SSI is singularly focused on the healthcare industry. SSI's commitment to our clients' success is evident with nearly 50% of our clients relying on SSI solutions for 10 years or more. Our revenue cycle, EDI gateway, and clinical data interoperability solutions are among the best in the industry and help our clients effectively and efficiently manage their clinical and claims data.

TSI
Brian Floyd
800-521-1798
www.tsico.com

TSI is a market-leading provider of accounts receivable management and student loan servicing solutions. Our global operations are powered by our proprietary algorithms and best-in-class compliance management system. Our clients include Fortune 100 corporations, national and regional healthcare providers, financial institutions, state and federal government organizations, educational institutions, and small and medium-sized businesses.

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ACCESSONE
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Founded in 1948, Arkansas Blue Cross and Blue Shield, an independent licensee of the Blue Cross and Blue Shield Association, is the largest health insurer in Arkansas. Arkansas Blue Cross and its affiliates have more than 2,900 employees. The Blue Cross and Blue Shield Association is comprised of 36 independent, community-based and locally operated Blue Cross and Blue Shield Plans that collectively provide healthcare coverage for nearly 106 million members — one in three Americans. Our vision is a healthcare system that provides affordable and safe care for all citizens. Our mission is to provide individuals, families and organizations access to high-value health wellness services through innovative financing and delivery models.

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BESLER combines best-in-class healthcare finance expertise with proprietary technology to help hospitals recover more revenue. Our reimbursement and recovery solutions have delivered more than \$2 billion of additional revenue to hundreds of hospitals across the United States. We serve as advocates for hospitals, so that they, in turn, can better advance the health and well-being of their patients.

DOCUVOICE LLC
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DocuVoice provides targeted Reimbursement Solutions with a key focus on assuring hospitals maximize their appropriate reimbursement dollars. These solutions are provided by experienced business partner like Kiwi-Tek who provide remote coding services for Inpatient, Outpatient and Physician Office Coding needs. Also, FairCode who provide 100% Physician conducted DRG Chart (Pre-Bill and Post Coding) Audits. The bottom line is these solutions provide additional hard dollar gains with a significant Return on Investment (ROI).

3GEN CONSULTING
Patrick Wilkinson
314.680.5336
www.3genconsulting.com

3Gen Consulting, based in Houston, Texas, is a leading provider of end-to-end revenue cycle management services with proven expertise across multiple provider types. We have been providing customized outsourcing solutions to our partners since 2006 and we are ISO certified and HIPAA compliant. The services we provide are Medical Coding, Medical Billing, A/R and Denial Management, Credit Balance and Revenue Cycle Consulting. We have a professional team of 500+ certified medical coders and billing professionals working across 150+ clients.

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HRG's expertly crafted revenue cycle management services provide customized solutions for your healthcare facility's unique needs. Our client-centric service suite provides the tools needed to optimize any part of your Patient Financial Services (PFS) or Health Information Management (HIM) department and increases your organizations efficiency and profitability.

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Rita Dew

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NRA is an accounts receivable management company that has been successfully providing debt collection services, skip tracing and credit bureau reporting to America's leading companies for over forty years. NRA provides its clients with quality results, experience, leadership, and technology, including state-of-the-art infrastructure, telecommunications, and collections systems, ensuring the best the industry has to offer. Our services enhance clients' operating performance through improvements in cash flow, reduced operating expenses and increased profitability. EBO Solutions offers customized programs to meet your specific needs including, but not limited to: pre-authorization, A/R clean-up projects, prescreening for Charity Care, Insurance Follow-up, Early out/Self Pay Services, Settlement Programs, Commercial Insurance Follow up, Claim Resolution Management. Let us work with your facility to see what we can do for you.

REVCYCLE+

Lori Cross

816-581-6618

www.revplus.com

RevCycle+ (Overland Park, Kan.). RevCycle+ provides charge capture and coding services to outpatient settings including emergency departments and urgent care centers. The company combines intelligent coding technology with expert services for a solution designed to provide more accurate coding and improved financial outcomes for healthcare organizations.

RSource

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RSource helps U.S. health systems recover maximum dollars from all types of third-party-payer claims. RSource's Denial Recovery programs include solutions for accounts denied for COB and other reasons requiring patient involvement, and Clinical Denial accounts. For MVA, TPL, and Workers Comp – RSource's RCapture™ technology identifies unknown coverage and we can also bill claims electronically via specialized clearinghouses. RSource's Low Balance Program with proprietary advanced analytics--ClaimBrain™-- automates 60% of account activity, focusing staff on accounts that require manual work.

TOYON ASSOCIATES, INC.

Eric Smith

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Paul Stout

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