



arkansas chapter

Arkansas Chapter Summer 2024 Conference

Wednesday, August 21, 2024

- 9:00 am – 4:00 pm **Golf Outing – Gary Brooks Memorial Golf Tournament
Spring makeup - Glenwood Country Club (separate sign-up)**
- 5:00 pm **HFMA New Member Meet & Greet – Executive Board Room**
- 5:30 pm **HFMA Board and Committee Chair Meeting – Executive Board**
- 6:30 pm – 7:30 pm **Networking Opportunities Sponsored by Corporate Sponsors – Event
Center B**

Thursday, August 22, 2024

- 7:30 – 8:15 am **Registration & Breakfast – Event Center B**
- 8:15 – 8:30 am **Welcome & Announcements – Melodie Colwell, HFMA President –
Event Center A**

General Session – Event Center A

8:30 – 9:45 am | Course SU2401

Health Care Fraud Investigations

Ben Seale, Special Agent, FBI*

Peyton Tucker, Supervisory Special Agent, FBI*

CPE Credits: 1.5 | CPE Type: Auditing | Level: Basic | Prerequisites: None

Program Content: This presentation will cover some real-world examples of fraud in the healthcare environment. While illustrative and educational, these cases will hopefully help providers learn to adopt a questioning mind and also be aware of some of the larger fraud schemes that have happened in Arkansas lately.

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

- Understand how fraud schemes have been perpetrated in the past.
- Identify some of the red flags/indicators of fraud schemes including those based on forensic analysis.
- Understand professional skepticism and investigation.

9:45 – 10:00 am Break & Networking with Exhibitors & Attendees – Event Center B

10:00 – 11:15 am | Course SU2402

AI Demystified: Unlocking True ROI and CDI Excellence

*Michael Gao, CEO, SmarterDx**

*Terri Meier, AVC Revenue Cycle, UAMS Health**

*Paula Alonso, Sr. Director Coding and Revenue Integrity, UAMS Health**

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

Program Content: A lot has changed since MS-DRGs were first introduced almost 15 years ago. The list of medical codes has ballooned, new quality measures were introduced, endless new technologies went live, and to top it all off, there was a global pandemic.

To put it mildly, it's been a wild ride. And it's taken a toll: According to the 2023 AHIMA Health Information Workforce Survey, two-thirds of survey respondents report understaffing, and three-quarters report high burnout and employee dissatisfaction.

AI has sparked new hope, but it has also sparked questions that health systems need answered to embrace the new technology: Will AI replace my CDI team? Is it as accurate? How do we fund it?

The team at the University of Arkansas for Medical Sciences has been there: Join Terri Meier, CHFP, CRCR, LSSGB, assistant vice chancellor revenue cycle at UAMS, and Michael Gao, MD, CEO and co-founder of SmarterDx, to learn how UAMS answered those big questions about AI, as well as how AI can empower CDI teams to do their best work, reduce manual processes and accurately capture true ROI.

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

- Understand how AI can empower CDI teams to practice at the top of their license and even elevate control of documentation and coding.
- Understand how emerging payment structures like contingency-based pricing can alleviate funding concerns.
- Understand how UAMS introduced AI to their existing workflow in weeks while maintaining team size.
- Understand how AI can automate clinical reasoning at scale for high accuracy, with required CDI team validation of recommendations for added confidence.

11:15 am – 12:30 pm Lunch & Networking with Exhibitors & Attendees – Event Center B

Financial – Catherine & DeGray Room

12:30 – 1:45 pm | Course SU2403

What You Wanted to Know about Rural Emergency Hospitals

*Derek R. Pierce, CPA, FHFMA, Partner, Forvis Mazars**

*Michael K. Westerfield, CPA, FHFMA, Partner, Forvis Mazars**

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

Program Content: In December of 2020, Congress established a new hospital designation to combat losses of essential services in rural areas caused by hospital closures. The Rural Emergency Hospital (REH) designation became effective January 1, 2023. This presentation is designed to help participants understand what led to the creation of the REH, what it is and how it is paid. We will spend time discussing conditions of participation, payment methodologies and touch on frequently asked questions and hot topics.

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

- Understand and communicate the history of the REH designation.
- Understand the basic conditions of participation for an REH.
- Discuss REH payment policy and how it is applied.

Revenue Cycle – Event Center A

12:30 – 1:45 pm | Course SU2404

Outsmarting Eligibility & Benefits Verification Denials

*David Mistkawi, Vice President of Access Management Solutions, The SSI Group, LLC (SSI)**

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

Program Content: A staggering 48% of denied claims are patient access related, according to the latest SSI data, underscoring the critical need for strategic intervention in this area.

These denials not only result in financial losses but also impact patient satisfaction. Join us to explore actionable measures, best practices, and the latest industry updates that will empower your team to outsmart eligibility-related denials. By the end of this session, attendees will be equipped with the knowledge and skills to improve their front-end processes, ensuring a smooth and efficient patient access experience.

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

- Gain insights into the root causes of eligibility-related denials and the impact they have on the healthcare revenue cycle.
- Learn practical steps and strategies to prevent eligibility-related denials, including how to leverage technology for accurate and efficient eligibility verification.
- Discover best practices for improving patient access processes, from initial patient contact to final insurance verification, to ensure accurate eligibility determination.
- Identify the latest industry trends that affect eligibility verification and denial management.
- Learn from real-world examples and case studies that highlight successful strategies for reducing eligibility-related denials and improving the patient financial experience.

1:45 – 2:00 pm Break & Networking with Exhibitors & Attendees – Event Center B

Financial – Catherine & DeGray Room

2:00 – 3:15 pm | Course SU2405

Medicare Reimbursement: Optimizing your Medicare Bad Debts Log

*Clint King, CPA, Partner, HORNE**

*Christian Robbins, FHFMA, CSPR, Manager, HORNE**

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

Program Content: In this session, HORNE will discuss the general reimbursement terminology and the general strategy to approach the Medicare bad debt log. This session will be focused on how Providers can optimize their Medicare reimbursement through the types of Medicare bad debts that can be claimed on the Medicare cost report.

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

- Understand requirements for a Medicare bad debt to be correctly claimed on the Medicare cost report.
- Understand documentation requirements to claim a Medicare bad debt.
- Understand criteria that Medicare administrative contractors use to disallow claimed bad debts.

Revenue Cycle – Event Center A

2:00 – 3:15 pm | Course SU2406

Exploring a Revenue Cycle “Reset”

*Tamie Young, FHFMA, Vice President Revenue Cycle, Stillwater Medical**

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

Program Content: As healthcare providers continue to experience increased costs, payer challenges, reduced staffing and respond to increased patient expectations, the time has come to consider an internal “Reset” to secure revenue cycle operations for our future. In this session attendees will learn how Stillwater Medical is realigning its focus on people and processes.

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

- Understand how a formal revenue cycle assessment led to restructuring revenue cycle teams.
- Identify a field-tested approach to revenue cycle redesign.
- Define the key responsibilities for an effective revenue integrity department.
- Identify key steps in shifting focus from denials management to denials prevention.
- Understand tough payer decisions, strategies and the importance of community relationships.
- Consider ideas for succession planning and the revenue cycle model of the future.

3:15 – 3:30 pm Break & Networking with Exhibitors & Attendees – Event Center B

General Session – Event Center A

3:30 – 4:45 pm | Course SU2407

Funding Healthcare in Arkansas – A Hospital System Perspective

Brent Beaulieu, CFO, Baptist Health*

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

Program Content: This presentation will share an approach to understanding, managing and working to change the unique and challenging healthcare financing environment in Arkansas. This approach includes using publicly available data to paint a clear picture of funding shortfalls, and communication strategies for key stakeholders.

Learning objectives: After this presentation, participants will

- Understand how healthcare funding in Arkansas compares to the national average from a hospital system perspective.
- Understand options to communicate with key stakeholders regarding the broader healthcare funding challenges in Arkansas.

**5:15 – 7:15 pm Networking Opportunities Sponsored by Corporate Sponsors –
Main Line – Oaklawn Racing Casino Resort**

Friday, August 23, 2024

8:00-8:30 am Registration & Breakfast – Event Center B

General Session – Event Center A

8:30 – 9:45 am | Course SU2408

Charting the Course: Expedition into Coordination of Benefits (COB) Denials - Discovering Proactive & Reactive Strategies for Seamless Navigation

Derek Johnson, Director, RCM Consulting, RI*

Crystal Koehn, Manager, Self-Pay, RCM Consulting, Providence*

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

Program Content: In the ever-changing realm of healthcare, providers confront the roadblocks of payers while navigating patients' COB denials. This session is designed to equip attendees with practical strategies and insights to tackle these challenges head-on, leading to improved financial outcomes and patient experience. During this engaging session, industry experts will share their experiences and expertise in leveraging partnerships and patient cooperation to turn patient liability into cash. Participants will discover innovative approaches to clean up self-pay AR and enhance revenue recovery by identifying creative ways to locate and address COB Denials. The session will explore both proactive and reactive strategies for managing patient liability. Based on analytical findings, attendees will learn the importance of a proactive approach in scouting, isolating and preventing COB Denials. By implementing proactive strategies, attendees can proactively anticipate and address patient liability, leading to improved financial outcomes and patient satisfaction. Furthermore, this session will address the critical pain point of COB denials, offering process improvement recommendations to ensure complete resolution. Participants will learn actionable steps to optimize their COB denial processes proactively and reactively, leading to increased reimbursement and streamlined operations. Additionally, attendees will see how one multi-state health system handled their current dilemma using alternate patient engagement strategies, allowing them to work upstream and manage the concurrent process. This interactive and informative session will empower revenue cycle team members to refine their self-pay AR management approach using a comprehensive blend of proactive and reactive strategies. They will leave with practical takeaways and actionable strategies that can be implemented within their organization, enabling them to unlock revenue potential, improve patient financial experiences, and achieve sustainable financial success.

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

- Comprehensively understand self-pay AR clean-up strategies and how they can be implemented to enhance revenue recovery within healthcare organizations.
- Employ effective techniques for turning patient liability into cash through partnership and cooperation, improving financial outcomes and patient experience.
- Identify creative approaches to locate accounts within self-pay receivables, enabling efficient and targeted efforts in revenue collection.
- Apply practical insights on scouting and engaging patients, including meeting them where they are and appealing to their financial responsibilities.
- Have a clear understanding of process improvement recommendations for COB denials, enabling participants to optimize resolution rates and streamline operations.

9:45 – 10:15 am Break

10:15 – 11:30 am | Course SU2409

General Session – Event Center A

A Genius Way to Work: Unlock the Power of Productivity

Geneva Schlabach, CEO, Vispa*

CPE Credits: 1.5 | CPE Type: Personal Development | Level: Basic | Prerequisites: None

Program Content: If you've ever asked yourself "Is there a better way to work?" then this presentation is for you. The productivity tool you didn't know you had is at your fingertips, and participants will leave this session ready to empower their teams in a way they didn't know was possible. The best part of all, your innovation won't get lost, but rather unleashed.

We all know that healthcare needs a shift, but what the industry is missing is unlocking the inner genius that lies within each of us. In this session, you will learn your unique areas of genius, competency and frustration that will in turn lead to more joy and less misery at work. You will also see the importance of seating people at the table where they should be seated. The best part? In unlocking your team's superpowers, you will shake off the guilt (i.e., what one feels when they don't have all the "genius" required to do something) and judgment (i.e., what we place on others when they don't have what we have). These feelings of guilt and judgment frequently plague executives who have team members in the wrong roles.

Participants will identify their unique working genius through a simple assessment prior to the presentation and walk away with an arsenal of best practices that will help them to capitalize on their unique skills and abilities in the workplace. Increased efficiency, reduced burnout and happier employees are just some of the short-term byproducts of this exercise. In the long-term, these are just the building blocks of where unlocking your team's inner genius can take you. Like Malcom X said, "The future belongs to those who prepare for it today."

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

- Uncover your inner genius (AKA your superpower), which ensures that innovation won't get lost at your organization.
- Understand the three stages of work—ideation, activation and implementation—and how to best capitalize on each of these in the workplace.
- Understand how working in your unique genius will bolster morale, which in turn leads to mitigated burnout and increased retention at your organization.
- Understand how unleashing your genius allows you to master the art of getting things done at work, such as more effective meetings and smoother workflows.
- Empower your team members to work in their unique geniuses, which will foster creativity, reduce burnout and enable everyone to operate at the top of their game.

**About the Speakers:*

SA Ben Seale has been an FBI Special Agent since 2018. SA Seale spent his first five years in the Jackson Field Office before transferring to the Little Rock Field Office in 2023. SA Seale has worked various violations to include public corruption, complex financial crimes, and healthcare fraud.

SSA Peyton Tucker has been with the FBI for the past 15 years. SSA Tucker was originally in St. Louis, Mo where he worked White Collar/Public Corruption matters while also being a part of the Evidence Response Team and Crisis Negotiation Teams. SSA Tucker transferred to Little Rock in 2015 where he has worked Domestic Terrorism, Counterintelligence, White Collar and Public Corruption matters. SSA Tucker was also the Senior Team Leader for the Evidence Response Team for 5 years. SSA Tucker supervised the Joint Terrorism Task Force for two years and is now the supervisor for the White-Collar squad where he supervises Special Agents working cases involving Public Corruption, Civil Rights, Complex Financial Crimes, and Health Care Fraud. Prior to joining the FBI SA Tucker graduated from Harding University with a degree in Accounting, worked at Alltel and then graduated from the University of Arkansas Law School.

Michael Gao, MD, is the co-founder and CEO of SmarterDx, a clinical AI company that helps health systems capture the most accurate and complete diagnoses for 100% of charts. Prior to SmarterDx, he was an Assistant Professor of Medicine at Weill Cornell and Medical Director for Transformation for New York-Presbyterian where he led AI and automation projects across clinical, operational, and revenue cycle domains.

Terri Meier, CHFP, CRCR, LSSGB, is the Assistant Vice Chancellor Revenue Cycle for University of Arkansas for Medical Sciences where she is responsible for overseeing and directing the overall functions of the UAMS revenue cycle. Terri also currently instructs the Revenue Cycle Certification Program for UC San Deigo Extended Studies. Prior to joining UAMS, Terri served in multiple revenue cycle leadership roles with UC San Diego Health, Stanford Health Care and Oregon Health and Science University (OHSU). Terri holds a certification in Healthcare Financial Management from Oregon Graduate Institute, Certified Healthcare Financial Professional (CHFP), Certified Revenue Cycle Representative (CRCR) from HFMA, and is a LEAN Six Sigma Green belt. Terri has been a member of HFMA for over 20 years.

Paula Alonso, RHIA, CCS, CHC, is Senior Director of Hospital and Professional Coding/Revenue Integrity for University of Arkansas for Medical Sciences where she is responsible for ensuring thorough and timely charge capture and directing all coding activities for both facility and professional staff. Prior to working at UAMS, Paula was Director of Health Information Management at St. Vincents Infirmiry (CHI) in Little Rock, AR. During her 25 years at UAMS, Paula has held several positions including the Director of Health Information, Clinical Billing Compliance Officer, and Assistant Vice Chancellor for Revenue Cycle. She holds a bachelor's degree in organizational management, is a Registered Health Information Administrator, Certified Coding Specialist and holds a Certification in Healthcare Compliance.

Derek Pierce has nearly 20 years of experience in the healthcare industry with Forvis Mazars and predecessor firms and serves as its Southwest Regional Industry Leader. His responsibilities include overseeing go-to-market efforts in a 5-state region, directing audit engagements for small standalone hospitals as well as regional health systems. He assists in budget preparations for small and midsize hospitals and helps prepare feasibility studies and profitability analyses. He also provides reimbursement and other consulting services, including testing hospitals' internal records for disproportionate share reimbursement eligibility. Derek is knowledgeable in the healthcare regulatory environment and speaks regularly on healthcare audit, accounting, and reimbursement topics. He is a member of the American Institute of CPAs, Arkansas Society of Certified Public Accountants, and Healthcare Financial Management Association (HFMA), where he is a past president of the Arkansas chapter. Derek is certified as a Fellow of HFMA (FHFMA). Derek serves as treasurer of the board of Independent Case Management, Inc., a nonprofit organization providing support services for individuals with disabilities and their families. He also serves as treasurer of the board of Arkansas Foundation for Medical Care. He is a graduate of Tulane University, New Orleans, Louisiana, with an M.Acc. degree.

Michael Westerfield is a member of the Forvis Mazars Healthcare Practice. He has more than 13 years of experience working exclusively with healthcare industry clients. He provides assurance and consulting services to hospitals ranging from small standalone providers to large regional systems. His consulting and reimbursement services include cost report preparation and review, which involves testing hospitals' internal records for disproportionate share reimbursement eligibility. He also conducts wage index reviews, pricing projects, and service line analyses. Michael is knowledgeable in the healthcare regulatory environment and speaks regularly on healthcare audit, accounting, and reimbursement topics. He is a member of the American Institute of CPAs, Arkansas Society of Certified Public Accountants, American College of Healthcare Executives (ACHE) and Healthcare Financial Management Association (HFMA). He is a past president of the Arkansas Chapter of HFMA and is certified as a Fellow of HFMA (FHFMA). He also serves as vice president of Junior Achievement of Arkansas, a nonprofit organization whose purpose is to inspire and prepare young people to succeed in a global economy. Michael is a graduate of University of Central Arkansas, Conway, with an M.Acc. degree.

David Mistkawi has decades-long experience working in finance and healthcare revenue cycle positions. David has been with SSI since 2015 as the Vice President of Access Management Solutions. In his role, David is instrumental in providing the company with market intelligence and helping to identify and deliver on client operational and financial objectives. He earned his MBA from the Leonard N. Stern School of Business at New York University and has a double major in finance and marketing from the Portland State University School of Business. He currently resides in Portland, OR.

Clint King is a partner in healthcare services at HORNE. He oversees audits primarily for healthcare and nonprofit organizations. He specializes in providing insights through data analytics in audit and revenue cycle consulting projects. He also has an in-depth experience with complex healthcare revenue recognition issues, patient receivable functions and related cash flow improvement opportunities. Clint joined the firm in 2007 and has worked with hospitals and other healthcare facilities on numerous healthcare reimbursement and consulting projects. Clint earned his Bachelor of Science in Accounting and Master of Professional Accountancy from the University of Southern Mississippi.

Christian Robbins is an assurance manager for HORNE's healthcare group with a primary focus on Medicare Bad Debt Reimbursement and Consulting. He specializes in performing lookbacks on previous fiscal year cost reports, compiling current fiscal year cost reports and processing millions of lines of data. Additionally, he helps hospitals recover millions of Medicare Bad Debt dollars that is owed to them and yet to be claimed. Christian joined the firm in 2017 and has more than five years of experience with Medicare Bad Debt Logs, Cost Reports, DSH surveys, Community Health Needs Assessments, BPCI consulting and niche healthcare consulting projects. Christian earned his Bachelor of Science in Business Administration from Mississippi College.

Tamie Young is a Vice President for Stillwater Medical in Stillwater, Oklahoma. She is responsible for the continuity of revenue cycle departments and patient business processes across the health system's hospitals and clinics. Prior to joining SMC in 2009, Tamie enjoyed a successful consulting career assisting hospitals and clinics nationwide to design improved revenue cycle processes and realize the importance of providing patient focused business services in their communities. Tamie also served as Director of Patient Financial Services at 2 facilities within a large Oklahoma health system for more than 10 years. Ms. Young's career history in leading revenue cycle teams to achieve dramatic operational and receivable improvements also drives her passion for community education where she is honored to share her knowledge and "life lessons" to help others navigate the business of healthcare. Tamie is a Past President of Oklahoma's Healthcare Financial Management Association chapter, served on HFMA's National Advisory Council and currently represents the Oklahoma Chapter on the Region 9 Conference Planning Committee.

Brent Beaulieu is the chief financial officer for Baptist Health, which is Arkansas' most comprehensive health care system with 12 hospitals and more than 250 points of access across the state. In this role, his responsibilities include all finance, revenue cycle, supply chain, risk management, and real estate activities in the organization. Beaulieu joined Baptist Health in 2007 as assistant vice president of finance and has been part of leading the system's financial operations ever since. Prior to joining Baptist Health, Beaulieu spent nine years as a certified public accountant specializing in health care matters with a predecessor to the international accounting firm Forvis Mazars. He received a degree in accounting from Harding University. Beaulieu also lends his expertise to Ronald McDonald House Charities of Arkansas where he began serving on the finance committee in 2021 and joined the full board for 2022. Beaulieu is past president of the Arkansas chapter of the Healthcare Financial Management Association, and he also served on the national Principles and Practices Board from 2013-2016. He was a member of the Health Care Expert Panel for the American Institute of Certified Public Accountants from 2010-2013.

Derek Johnson is an accomplished and seasoned revenue cycle and healthcare consultant for R1. He has demonstrated quantifiable success in cash yield, turnaround leadership and process improvement at Academic Medical centers, community hospitals and leading national healthcare providers. Derek is passionate about partnering with providers on strategy and operations to achieve measurable results. Prior to R1, Derek worked for Acclara and over the last several years helped grow the consulting services at Colburn Hill Group. In these roles, he has led projects in patient yield, denials management, backend operations, frontend operations, analytics, and software implementation. He led a denials management project at a large AMC that delivered a 30% improvement on the initial denials rate and contributed to \$150M of incremental cash in 9 months. Most recently he is serving as the Executive Director overseeing patient billing at a \$27B health system, improving year over year post-service patient collections by 9.5% or \$67M. Derek received his Master's in Public Policy from the University of Chicago and his BA from Colgate University where he played Division 1 soccer. He spent two formative years in Cambodia serving as a Peace Corps volunteer and currently lives in Rhode Island with his wife, two kids, and dog.

Crystal Koehn is a seasoned revenue cycle manager with 22 years of experience in healthcare. Starting from cash posting, Crystal has held various roles in billing, denials, and business management. Specializing in Medicare, Medicaid, and commercial billing, Crystal has led successful projects, including a program that recovered \$35 million in denials within five months. Currently pursuing a Bachelor's in Healthcare Business Administration, Crystal is passionate about improving patient experiences and navigating complex insurance processes. Outside of work, Crystal enjoys family time, reading, and line dancing. Diligent and compassionate, Crystal advocates for patients and caregivers, embodying Providence's mission of "know me, care for me, ease my way" in healthcare billing.

Geneva Schlabach is the co-founder and chief executive officer of Vispa, She has been influential in laying the foundation for the company's mission-driven culture and accelerated growth. A creative strategist and visionary with a passion for excellence, Geneva delights in coming alongside hospital finance executives to face their most pressing challenges head-on. A key differentiator in Geneva's approach is her ability to help leaders unlock their inner "geniuses" through an assessment tool to guide them in living out their full potential at work, which in turn bolsters team morale and long-term organizational success. Leaning into her extensive training as a certified professional coach, Geneva has helped teams overcome common challenges that keep executives up at night such as burnout, financial setbacks and staffing. A prolific speaker and traveler extraordinaire, Geneva appreciates sharing her learnings and customers' successes at industry trade shows and meetings across the country. She is an active member in the Healthcare Financial Management Association, and enjoys traveling to various national, regional and state conferences. Whether she's taking the stage in a packed-out exhibit hall or leading a workshop for a hospital finance team, Geneva is inspired by pushing leaders to be the best versions of themselves.

HOTEL RESERVATIONS

Please make your own reservations with Oaklawn Racing Casino Resort in Hot Springs (1-501-623-4411). A block of rooms has been reserved, so please mention that you are with Healthcare Financial Management Association (HFMA) and use booking ID# HFMA Room Block to receive the rate of \$130 for a single & \$130 for double room. Online booking reservations is available at <https://book.rguest.com/wbe/group/1971/Oaklawn-Jockey-Club/auth> ID: BKG768 Password: 67041128. Oaklawn Racing Casino Resort will accept reservations until August 6, 2024. After this date reservations will be taken on a space & rate available basis. Please make your reservations as soon as possible.

EDUCATIONAL CREDITS



Health Care Financial Management Association-Arkansas Chapter 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.NASBAregistry.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 10.5 CPE credits is available.*

All courses are instruction method GROUP LIVE.

All sessions will incorporate an element of participant engagement, and there will be time for questions after each session.

CPE Type is classified based on NASBA definitions. The AR State Board of Public Accountancy requires license holders to complete a minimum number of hours in certain subject areas. The chapter has determined that the following CPE types fall within these subject areas: Accounting, Accounting (Governmental), Auditing, Auditing (Governmental), Regulatory Ethics, Behavioral Ethics & Taxes.

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 must 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

Oaklawn Racing Casino Resort offers valet parking for overnight guests. There is self-parking available also.

BUSINESS CASUAL DRESS IS APPROPRIATE FOR THE MEETINGS & EVENTS.

2024-2025 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.

Diamond Sponsors

AHA Services, Inc.

Bank of America

CompleteCare, Inc.

Firstsource

Forvis Mazars

Impact Healthcare Solutions

Mid-South Adjustment Co., Inc.

MSCB, INC

Professional Credit Management, Inc

Gold Sponsors

Crews & Associates, Inc.

Elevate Patient Financial Solutions

EnableComp

EngageMED, Inc.

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JPMorgan Chase Bank N.A.

Knowtion Health

Professional Consulting Services, Inc

Revenue Integrity Management Resources

RMC of America

Welch Couch & Company

Silver Sponsors

AblePay Health

Meduit

Xtend Healthcare

Bronze Sponsors

Arkansas Blue Cross and Blue Shield

Economic Recovery Consultants, Inc.

Hollis Cobb Associates, Inc.

ARKANSAS CHAPTER HFMA SUMMER 2024 CONFERENCE REGISTRATION

PLEASE REGISTER ON-LINE (Credit Card & Mail Check options) (Sponsors using complimentary registrations will be issued a discount code to register)

Go to: www.arkansashfma.org then click on Education & Events

OR go to: <https://cvent.me/B5NZBz>

***Registration Fee:**

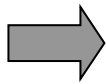
\$250	Conference Registration (before 8/16) *
\$125	ARHFMA Member & ARHFMA Sponsor (before 8/16) *
\$75	Past ARHFMA President (before 8/16) *

***All Registrations after the Friday before the meeting will incur an additional \$25 late registration fee.**

Thursday or Friday only registration is available. Call Tami Hill at 501-231-0200 for pricing for members and nonmembers. Checks and Credit Card are the only forms of payment accepted.

***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

Please contact Tami Hill at arhfma@arkansashfma.org or 501-231-0200 if you want to do multiple registration discounts and you will be issued a discount code to register.

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

REFUNDS AND CANCELLATIONS

If cancellations are received after August 16, 2024, only 50% of the registration fee is refundable or still payable. **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 cancellations. For more information regarding administrative policies such as complaint and refund, please contact **Tami Hill at 501-231-0200 or arhfma@arkansashfma.org.**