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arkansas chapter

Revenue Cycle Seminar

January 23, 2025

8:30 am – 9:45 am | Course RC2501

Coding Pitfalls

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

Program Content: This presentation will discuss and analyze common coding pitfalls and strategies to combat. By understanding common issues hospitals can identify opportunities for ensuring accuracy and compliance, while optimizing revenue efficiency.

Learning Objectives: After attending this session, participants will be able to

- Understand common coding issues and strategies to combat.
- Understand the importance of coding audits.
- Understand the vital role of the chargemaster in ensuring coding compliance.

Jenny Guthrie, MBA, RHIT, CHC is a veteran healthcare executive who holds an MBA from Harding University, a Bachelor of Business Administration from UA-Monticello, and an Associate of Science in Medical Record Technology from the UAMS. For more than 22 years Jenny has been dedicated to ensuring revenue integrity and improving outcomes. Her extensive knowledge spans the entire revenue cycle, from front-end to back-end operations, alongside a deep understanding of state and federal compliance regulations. Jenny served as Director of Hospital Operations for Baptist Health Medical Center – Drew County prior to July 2024, when she was recruited to serve as VP, City President for Citizens Bank in Monticello. In her new role she leads the Citizens Bank team in Monticello, fosters community relationships, and supervises lending in southeast Arkansas. Outside of her full-time work, Jenny still serves as consultant with Revenue Integrity Management Resources since 2021. Jenny has been a member of ACHE, HCCA, AHIMA, and HFMA. She has served multiple terms on the AR HFMA Revenue Cycle and HERe Committees. Her leadership, combined with a passion for delivering expert operations and exceptional results, makes Jenny an invaluable resource for the organizations she supports in achieving financial integrity and compliance.

10:00 am – 11:15 am | Course RC2502

Price Transparency: What is new in 2025

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

Program Content: This presentation will include a high-level overview of the 2025 changes to federal healthcare price transparency regulations.

Learning Objectives: After the session, participants will be able to

- Better understand the background of federal healthcare price transparency policy.
- Identify and understand updates to price transparency regulations.

Victoria Duffel has 17 years of healthcare experience which includes cost reporting, charge capture, revenue reconciliation, claim audit, documentation integrity, CDM implementations, contract management and price transparency. She is currently leading the Price Transparency team at Forvis Mazars. She has extensive experience related to revenue integrity and fraud, including contract management implementation experience for critical access hospitals to large-sized hospitals with a complex payor mix, daily revenue reconciliation with custom tools, unique revenue leakage and charge capture technique and fraud, waste, and abuse.

12:15 pm – 1:30 pm | Course RC2503

Regulatory Compliance and Finance – A Balancing Act

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

Program Content: The number of regulations imposed on health systems seems to expand exponentially every year. At the same time, the challenges of providing quality health care and covering the costs of that care continue to increase. Yet, hidden within plain sight is your physician advisor and care management team whose role is to help overcome these challenges, ensuring patients receive the right care in the right setting and the provider gets paid equitably for that care. In this session, Dr Hirsch will discuss the intersection between finance, compliance, and case management, outline the roadblocks, and provide a map for ensuring success in all those areas.

Learning Objectives: After this session, participants will be able to

- Understand how to bridge finance and case management divide achieving compliant financial and clinical goals.
- Decipher the flaws in the commonly used KPIs and provide alternatives.
- Explain medical necessity and its importance in the provision of care.
- Ensure a compliant process for shifting financial liability to the patient.

Dr. Ronald Hirsch is a Vice President of the Regulations and Education Group at R1 RCM Inc. Dr. Hirsch was a general internist and HIV specialist and practiced in Elgin, IL. He was Medical Director of Case Management at Sherman Hospital in Elgin, IL from 2006 to 2012, and also served on the Medical Executive Committee. Dr. Hirsch is certified as a physician advisor by the American College of Physician Advisors, certified in Revenue Integrity by the National Association of Healthcare Revenue Integrity, and on the Advisory Boards of the American College of Physician Advisors and National Association of Healthcare Revenue Integrity. He is on the editorial board of RACmonitor.com and the editor of the ACPA Update monthly newsletter. He is the co-author of The Hospital Guide to Contemporary Utilization Review, with the third edition published in 2021. In 1996, he was a guest on the Jerry Springer show.

1:45 pm – 3:00 pm | Course RC2504

Robotic Process Automation in Healthcare: Transforming Operations for the Future

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

Program Content: In today’s rapidly evolving healthcare environment, organizations are under increasing pressure to streamline operations, reduce costs, and enhance the patient experience—all while maintaining high-quality care. Robotic Process Automation (RPA) has emerged as a powerful tool to achieve these goals by automating routine and repetitive tasks that consume valuable time and resources. This presentation will explore how RPA can be leveraged within healthcare to transform revenue cycle management, billing, claims processing, and administrative workflows. Michael Laukaitis, Director of Revenue Cycle Analytics, Accounting, and Quality Assurance at UT Southwestern, will walk attendees through the practical applications of RPA, sharing real-world examples of how automation has improved efficiency, reduced human error, and increased revenue generation. Attendees will gain insights into the steps needed to implement RPA, the challenges and best practices for success, and the return on investment (ROI) that can be expected. Whether you’re just beginning your RPA journey or looking to scale your existing automation strategy, this session will provide actionable takeaways to improve healthcare operations through RPA.

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

- Understand the basic concepts and functionality of Robotic Process Automation (RPA) in healthcare.
- Identify the key areas within healthcare revenue cycle management where RPA can drive operational efficiency.
- Learn the step-by-step process for implementing RPA, including best practices for overcoming challenges.
- Explore real-world case studies of successful RPA initiatives and their impact on revenue generation and workflow optimization.
- Assess the potential ROI of RPA in healthcare and how to measure its success over time.

Michael Laukaitis is an experienced leader in healthcare IT and revenue cycle management, currently serving as the Director of Revenue Cycle Analytics, Accounting, and Quality Assurance at UT Southwestern Medical Center. With over 20 years in the healthcare field, Michael has been a driving force behind the integration of robotic process automation (RPA) to streamline operations, increase efficiency, and optimize revenue cycle processes. His work in RPA has led to enhanced workflows, reduced manual tasks, and notable revenue gains for the organization. Michael's expertise spans from data analytics and machine learning to quality control, making him a thought leader in leveraging technology to improve healthcare operations.

3:15 pm – 4:30 pm | Course RC2505

Revenue Cycle Collective

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

Program Content: This peer-to-peer think tank style session is an opportunity for healthcare leaders to come together to learn, share, and grow. Connect directly with other hospital financial executives and revenue cycle leaders as we candidly discuss today's challenges including denial management, staffing shortages, technology solutions, and brainstorm practical, real-world tactics together.

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

- Revamp denial management to optimize revenue.
- Discover creative ways to mitigate the negative impact of staffing shortages.
- Develop new creative ways to address current industry challenges.
- Discover how technology can define the future of revenue cycle management.

Terri Meier 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, including integration, strategic planning, and overall performance. Terri also instructs the Revenue Cycle Certification Program for UC San Deigo Extended Studies and serves as the SBO (Shared Business Office) Best Practice Leader for Epic. Terri's revenue cycle experience spans more than 43 years. She is skilled in all aspects of end-of-the-end revenue cycle financial management, workflow process improvement, training and developing organizational talent.

LOCATION: Arkansas Hospital Association
419 Natural Resources Drive, Little Rock, AR 72205
(Maximum seating 60, registration will stop at that point)

LUNCH: Box lunch will be served at 11:15 am – 12:15 pm

BREAKS: 15-minute breaks at 9:45 am, 1:30 pm, 3:00 pm

PRESENTATION HANDOUTS: All speaker presentations will be emailed to registered attendees within 72 hours of the meeting. Please download and print if you would like handouts for the actual session.

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.

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Prerequisites and advance preparation are not required unless otherwise indicated.
A maximum of 7.5 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.

PLEASE REGISTER ON-LINE

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Or go to:
https://cvent.me/4lL3nd

***Registration Fee:** $75 AR HFMA Member
$150 Non-HFMA Member

***Deadline for registration and payment is January 20, 2025**

REFUNDS AND CANCELLATIONS

If cancellations are received after January 20, 2025, the registration fee is not refundable. **Registrants who do not cancel or fail to attend must pay the entire fee.** Substitutions, however, are permitted. Registration forms and cancellations must be emailed to the address below. 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.