President’s Message  Jan Strope

Continuing with our National HFMA Chairman’s theme, Making It Count, and following in Past President Susan Cunningham’s footsteps, I would like the WV Chapter to again serve the community at the January meeting in Charleston. We will have a silent auction and 50/50 drawing to benefit Charleston’s YWCA Sojourner’s Shelter for Homeless Women and Families. I have supported this charity for many years and feel that I have an obligation to use my role as President of the WV Chapter of HFMA to “Make It Count”. I encourage your participation in the effort and thank you in advance for your support.

Our recent Joint Meeting with the Central Ohio Chapter of HFMA at Oglebay Resort and Conference Center in Wheeling was a GREAT SUCCESS. We had 160+ in attendance, including exhibitors and speakers. The education sessions were outstanding, there were many network opportunities available, and the exhibit hall actually overflowed into the conference room hallway. There was a huge amount of planning involved to pull this off and I want to again thank both Chapters’ program planning committees for all of their hard work. We received high ratings from the attendees regarding the quality of this educational conference that we could not have provided at such low cost without the valuable sponsors from both Chapters.

At the January meeting, we will have a short meeting of the members to vote on a proposed change to the WV Chapter Bylaws. The Board has approved this change and we have approval from National HFMA. This change would affect the 2010 – 2011 slate of officers. The Treasurer has always been in the Officer rotation, you moved through the chairs starting with Treasurer/Secretary, Vice President, President-Elect, and President. With the proposed change, the Treasurer will be taken out of the rotation and can serve in this capacity for a maximum of two (2) two year terms. The Vice President title will be replaced by Secretary. This change will accomplish two important objectives: 1) encourage more members to move into Chapter leadership – some members do not want to be Treasurer but are interested in leadership while others are not interested in leadership, but are willing to be the Treasurer, 2) the Treasurer will have more continuity than one year which will give the Chapter higher consistency in accounting treatment along with time to enhance our existing financial policies.

It’s not too late to register for HFMA’s Region 4 Mid-Atlantic meeting from November 9 – 11, 2009, at The Grove Park Inn in Asheville, NC. If I don’t see you there, Happy Holidays to you and your family, and I will look forward to seeing you January 20 – 22, 2010, at our Charleston meeting!!
Hospitals have turned to new technology to better serve their patient populations by segmenting outstanding receivables. As with any solution, hospitals are asking whether it is helpful or hurtful to the patient’s financial relationship with a healthcare provider.

Fortunately, leading hospitals are turning to advanced segmentation strategies to strengthen their community and patient relations, provide an unbiased approach, and improve their bottom line.

One of these hospitals is INTEGRIS Health, a large healthcare system in Oklahoma with 14 hospitals. After implementing a patient segmentation strategy in 2004, their organization has virtually eliminated all customer service complaints related to their financial experience. How? They use an automated probability of payment model across all of their hospitals in order to apply the proper collection activities to each patient.

Smarter Segmentation Based on Payment Likelihood

Predictive modeling is used to segment patients by using data elements to predict future behavior—in this case paying their hospital bills. The use of predictive modeling tools is growing significantly in healthcare, with hospitals using its results to improve their revenue cycle and prevent fraud.

In a nutshell, predictive modeling is simply an equation used for scoring and ranking patients, based on payment likelihood. Hospitals using predictive modeling to determine payment likelihood typically leverage three key performance indicators (KPIs):
- History of behavior
- Medical data available
- Age of account (30, 60, 90 days)

In addition, most are also leveraging third-party services that offer credit and financial information. By adding these additional attributes to their modeling, hospitals can better derive payment advice specific to their patient population.

With the use of predictive modeling, it is possible to examine groups of patients and determine their payment likelihood. These results will allow facilities to segment out patients with high probability of payment and approach them differently than they would a patient with low probability of payment.

It All Hinges on Communication

A patient’s impression of a healthcare facility is determined by their experiences, both with their clinical treatments and their financial interactions. Both rely on communication.

To establish a level of trust, a hospital’s frontline staff must be able to establish the appropriate financial relationship with each patient based on advanced segmentation to effectively and politely communicate their financial responsibility, if any. If not done well at the onset, a patient is quickly frustrated and the relationship is off to a poor start.

Instead, organizations must equip their staff with systems to rapidly identify the appropriate collection strategy for each patient, at that specific point in time. If they qualify for financial assistance, patients should be told their options and enrolled immediately, whenever possible. For the remaining patients, registrars should provide payment options, if needed, and/or remind the patient of their financial responsibility.

Communication doesn’t stop after the patient leaves the hospital. Hospitals know that a billing statement can either strengthen or weaken their satisfaction with your facility. One of the largest complaints from patients is the vague or cryptic information on their billing statements. And, the harder it is for them to understand, the less likely they are to pay it in a timely fashion.
Billing statements offer today’s hospitals an opportunity to demonstrate their commitment to patient satisfaction. With informative statements based on the patient’s appropriate collections strategy, patients will respond more quickly and favorably.

Hospitals today need to improve how they communicate not only with their patients, but also the community they serve.

Thus, INTEGRIS and other health care organizations are curing potential media misperceptions by reaching out to educate and build awareness within their service area. For example, local consumers are saving significant dollars on healthcare annually through the hospital’s charity care programs. This generosity is widely unknown by the general public. It is to everyone’s advantage to make this fact known in the community.

Best Practices in Segmentation: A Case Study

At INTEGRIS Health, they have achieved a reputation for excellence in their communication of financial responsibilities with patients. Using predictive modeling to segment their patient population since 2004, INTEGRIS now applies the proper collections activities to each patient account.

“We wanted our patients to have a positive experience with INTEGRIS’ administrative and financial operations, as well as our clinical side,” stated Brent Grimes, Corporate Director of Patient Financial Services at INTEGRIS. “Today our segmentation strategy is consistent across all facilities and patients, providing an unbiased approach to our patient relations. Using a probability of payment segmentation strategy, our staff can have straightforward and sensitive discussions with our patients, resulting in a better outcome for all. Since implementing our segmentation strategy, our patients are happier and less stressed as they understand their financial responsibility, but most importantly we have a mutually agreed upon plan to eliminate surprises.”

INTEGRIS is focused on communicating its financial assistance offering and related screenings as part of its admissions process. Due to the nation’s economic recession, more patient populations need hospitals’ charity care and/or other financial assistance programs to help cover the gap between billed charges and what their insurance plan pays. Thus, INTEGRIS is communicating its financial assistance options to patients much earlier than before.

On the frontend, INTEGRIS uses a predictive modeling solution to segment each patient as they enter their facilities based on their probability of payment. They are quickly able to identify qualified charity care accounts, offer payment options to those who need them, and ultimately make all patients aware of their financial responsibility at the onset of their relationship.

After a patient leaves their facilities, INTEGRIS uses predictive modeling on the backend to determine the best strategy for collections, e.g., the number of phone calls, letter series, when an account should be tagged as bad debt or presumptive charity, etc. By communicating with each patient in a unique manner based on the financial responsibly established at registration, a patient’s dignity is maintained as well as INTEGRIS’ bottom line.

Automation Delivers Consistent, Unbiased Results

Smarter segmentation is achieved only by automating the process, making it consistent and unbiased. With an automated system, the guesswork is removed and staff must follow a predetermined process that applies to all patients in a particular segment, regardless of age, race, education, etc.

In conclusion, all segmentation is not equal. Exclusively relying on credit histories isn’t likely to yield the financial, community, and patient satisfaction results that healthcare networks are looking to achieve. Understanding a patient’s payment likelihood can, just ask INTEGRIS Health.
The Benjamin Hotel in bustling midtown Manhattan was the site of the 2009-2010 Region IV Fall President’s Meeting. Presidents and Presidents Elect were treated to a fast paced weekend packed full of training, education and experiencing New York City on August 30, 2009 through September 1, 2009.

Roger Stroud and the North Carolina Chapter hosted WV President Jan Strope and President Elect Danielle Heston-Raddish with their counterparts from Virginia, Maryland and Kentucky as well as Regional Executive Cathy Zito and Regional Executive Elect Kent Thompson to discuss new information from National HFMA and conduct Region IV business.

National HFMA Representative Eileen Crowe and National HFMA Board of Directors Representative Sarah Hull reviewed updated HFMA Products and Services and National Board of Directors initiatives. Eileen and Sarah also recorded Region IV successes and concerns to communicate back to National HFMA.

Region IV Representatives reviewed Chapter Based Score Card (CBSC) elements and discussed Davis Chapter Management System (DCMS) Requirements. Also discussed were Chapter By-laws and the Regional Operating Agreement.

Cathy Zito led a discussion about the effect of Mid-Atlantic Regional Meetings on host chapter’s education hours in the CBSC process. Regional Representatives will continue to review options to offset the peaks and valleys in this measure and are considering offering a regional webinar in the 2009-2010 Chapter Year to test the waters.

The Region IV Group also elected the 2011-2012 Regional Executive while in New York. WV Chapter President Jan Strope will serve as the 2011-2012 Regional Executive.

The 2009-2010 Fall President’s Meeting was packed full of meetings and Regional Business but attendees also made time to sight see, enjoy dinner in Manhattan restaurants and a Broadway Musical.

The 2010-2011 Fall Presidents meeting will be held September 12-14, 2010 at the Lost Pines Resort in Austin, TX to be hosted by the West Virginia Chapter and current President-Elect Danielle Heston-Raddish.
We have a Winner!!

Guess who is going to Nashville??

Marcie Blankenship was the proud winner of the 2010 ANI registration. WV HFMA members who attended three of the five 2008-2009 education programs were placed into a drawing to win the registration fee to Nashville. Marcie was the lucky winner. She is the Patient Financial Services Manager at CAMC. If for some reason she is unable to attend, Lisa Simmons was the second name pulled.

Congratulations!!!!

Tammy Anderson
Registration Supervisor
Charleston Area Medical Center
304-388-2727
Tammy.anderson@camc.org

Randy Hornsby
Business Development
PCB
800-837-1937 ext 321
rhornsby@rossman-pcb.com

Angelia McGrady
Senior Regional Business Office Coordinator
Genesis Healthcare
304-778-2344
Angie.mcgrady@genesishcc.com

Test Your Knowledge

1. Accounts receivable is a ____________________
   A. Secured asset  B. Performing asset  C. Nonperforming asset  D. Liability

2. Goals must be all of the following EXCEPT?_______________
   A. Defined  B. Measurable  C. Achievable  D. Easy
The WV Chapter of HFMA is running a special campaign this year. Our goal is to have at least 2 members take a certification exam. National HFMA has added taking exams for certification to the Chapter Balanced Score Card for 2009/2010. The certifications that can be obtained are Certified Healthcare Financial Professional (CHFP) and Fellow of the Healthcare Financial Management Association (FHFMA).

The Board of Directors purchased 2 sets of study guides for the exams to be shared among the members. The guides purchased are as follows for the 2009/2010 year: 2 copies of the core study guide, 2 copies of the PFS guide, one copy of the Accounting and Finance guide and one copy of the managed care study guide. Please contact Danielle Heston-Raddish if you are interested in borrowing the guides.

The Chapter will also reimburse Chapter members who successfully pass a certification exam if not reimbursed by their employer.

Special note: HFMA is looking into making the study guides in an electronic format in 2011.

The WV and Ohio Chapters of HFMA held their fall education program at the Oglebay Resort in Wheeling on September 23-25, 2009. There were a total of 169 attendees for the 3 day event. The keynote speaker was Dr. Tom Atchison, from Atchison Consulting. He did an outstanding job discussing “Leadership Solutions for Today’s Healthcare Environment”. During the conference there was a CFO Forum and a PFS Forum. The panelists discussed the various current topics that have affected their facilities. It was open to discussion with the audience and was a great success. Other speakers consisted of Dr L. Christopher Plein, Dean Owrey, Seth Sharpe, Dr Terry Fouts, John Augustine, Robert Emrich, Mary Brutscher, Mike Gire, Keynote Speaker: Bryan Reardon, Robin Bradbury and Bob Farrington. Thursday afternoon activities included a golf outing, Zumba lessons and park activites. The evening entertainment was a fantastic Corn Hole tournament and dancing with Mr X. Thanks to all who helped to make this meeting the success that it was. Please enjoy the pictures of our members and highlights of the Oglebay Park and Zoo.
West Virginia Chapter – HFMA
2009-2010 Corporate Sponsors

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NCO Financial Systems
United Collection Bureau
The Wellington Group, LLC
Personal:

Name: Becky Hammer
Title: Chief Financial Officer
Hospital Name & Location: Davis Memorial Hospital; Elkins, WV
Hospital Website: www.davishealthcare.com
College Attended & Degree: Davis & Elkins College; BS in Finance & Accounting
HFMA Member: Yes, since 1983

About Your Health System:

What is new and exciting at your health system?

We are always busy at Davis Memorial Hospital. On the clinical side, we recently installed a new digital mammography and a 64 slice CT system which everyone (especially the radiology department) is excited about. We’ve also formed a partnership to expand cardiology services in our community thereby eliminating some unnecessary out of town trips for our patients.

Last year we engaged a consulting firm to assist us with Point of Service and Emergency collections and have installed software to identify patient propensity to pay. By doing so, we hope to see an increase in our self pay collections. Collections on the front end have increased from $300,000 per year to in excess of $1.9 million.

Our information department is committed to providing us with software that meets the definition of “meaningful use” to qualify for stimulus funding. Some of the applications we have in progress are CPOE, an ambulatory EMR and a system that will allow us to easily distribute results to our physicians.

While many facilities struggled with overall finances last year, Davis Memorial has a positive bottom line through the first half of the year.

What is it like to work for your health system?

I would describe our facility as a family. We care about each other and our patients. Outsiders often comment on how friendly and caring the staff is at Davis.

What are some of your department and organizational goals this year?

From an operational perspective my number one priority is to have a positive bottom line. Keeping abreast of healthcare reform is also at the top of the list. Other initiatives include continuing to improve upon the technology implemented this year. We also introduced lean six sigma training to our managers and we have a number of ongoing projects that will increase efficiency and hopefully decrease cost.

About Your Career:

What is your business philosophy?

To work hard and appreciate your staff. Without them, we would not get the job done.
What is the best way to keep a competitive edge?

Know your business and what your patients (customers) want. We provide a service. Patient satisfaction and quality are a given in this industry.

How do you measure success?

Many ways. Bottom line, patient satisfaction, Press Ganey surveys, or hearing the little lady down the road say she was pleased with her experience.

What has been your toughest business decision?

Layoffs. It is not easy to tell someone he/she no longer has a job.

What has been your biggest business lesson learned?

That you can’t make a profit at everything! Also there are individuals who can’t always be pleased.

What is your career advice?

Start at the bottom and learn everything about the job. Don’t be afraid to roll up your sleeves and tear something apart and put it back together.

Admit your mistakes. And if you need help there are organizations that can assist.

What do you like least about your job?

All the paperwork.

What do you like most about your job?

My staff and the fact my job is never the same from day to day.

When you were a kid, you thought you would grow up to be a veterinarian.

More About You:

What is your pet peeve?

People who don’t commit to their job.

What are you greatest passions in life?

Preservation of farmland, mountains, waterways, and historical sites. Managing my farm of over 40 alpacas.

What is your favorite quote?

“No Farms no Food.”
Member Spotlight

Continued:

**What is your favorite movie and book?**

Gone with the Wind is my favorite movie and book.

**What is your favorite way to spend your free time?**

Horseback riding in remote sections of the Monongahela National Forest.

**If you could meet anyone, who would it be?**

Robert Redford. He is on the Board of the National Resources Defense Council.

**If you could change one thing about yourself, what would it be?**

To be more patient and tolerant on a personal and professional level.

**About HFMA:**

**What do you like most about HFMA?**

Networking with fellow members. HFMA is a great way to make contacts, learn and meet with vendors and sponsors.

**What can HFMA do to make itself better?**

Meetings can be challenging as we are all busy from a logistical and a cost perspective. Also, HFMA will need to accommodate the learning methods of our younger members.

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**Calendar of Events**

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<tr>
<th>Event</th>
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<th>Dates</th>
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<td>Days Inn, Flatwoods, WV</td>
<td>October 28, 2009</td>
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<tr>
<td>Region 4 Mid-Atlantic</td>
<td>Grove Park Inn, Ashville, NC</td>
<td>November 9 - 11, 2009</td>
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<td>Winter Education Conference</td>
<td>Marriott, Charleston, WV</td>
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<td>Revenue Cycle Workshop</td>
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<td>Leadership Training Conference</td>
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<td>Spring Education Conference</td>
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<tr>
<td>Annual National Institute</td>
<td>Nashville, TN</td>
<td>June 20 - 23, 2010</td>
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Test Your Knowledge

Answers
1. C. Non performing asset
   A/R is a non performing asset because they create no economic benefit for an organization

2. D. Easy
   Goals are developed to move organizations to a higher level of performance, thus they are not always easy.

In Memory of Walter R. Mitchell, Jr

Mr. Mitchell passed away October 8, 2009 at the age of 85, at CAMC Teays Valley Hospital in Hurricane WV. He was a Hospital Financial Systems Consultant and a past National Chairman of the American Association of Hospital Accountants. He is survived by his wife of 52 years Georgia Mitchell and son Gregory Walter Mitchell MD of St Petersburg, Fl.

The Funeral services were October 12, 2009 at he was laid to rest at the Valley View Memorial Park in Hurricane. Mr. Mitchell was an instrumental member of the West Virginia Chapter of HFMA since 1963. Mr. Mitchell had served the Chapter in various capacities including the position of President twice in 1967-68 and 1978-79.

In addition to being the recipient of the Follmer Bronze, Reeves Silver and the Muncie Gold Founder Merit Awards, Mr. Mitchell was awarded the Founders Merit of Honor for outstanding service to the Chapter, the community, and the healthcare industry in 1987.

To honor Mr. Mitchell for his many years of faithful and dedicated service to the West Virginia Chapter, the Walter R. Mitchell Jr. Award was developed in 1991 and is presented annually. The Board of Directors presented the award to a Chapter member for the first time in 1991 who demonstrated the best “well rounded” member including their contribution to the Chapter, other professional organizations, their employer and community service

- Belinda Bennett

Did you know?

Did you know that one in four people in Texas (24.1%) do not have health insurance in 2008. And fewer than one in 20 in Massachusetts (4.1) lack coverage?

Did you know the Uninsured rate for children ranged from 2.1 in Massachusetts to 20.2 in Nevada. What is Massachusetts doing right?

Did you know that in the United States there are 78 million people under the age of 18 and 7.3 million do not have healthcare coverage?

Did you know that in the United States there are 37 million people over the age 65 and only 525,161 do not have healthcare coverage?

Did you know that the median household income in 2008 for West Virginia is $37,989, next to the lowest in the United States, beating out Mississippi at $37,790?
President
Jan Strope 304-347-1550

President Elect
Danielle Heston-Raddish 304-624-2960

Vice President
Keith Morgan 304-346-0441

Secretary/Treasurer
Sandy Michaels 240-818-9792

Board Members
Belinda Bennett 304-469-8620
Mike Robbins 443-561-2030
Okey Silman 304-473-2127
Jay Richmond 304-388-6250
Lisa Simmons 304-598-6247

Committee Name: Chairs
Advisory and Nominating Mike Robbins
Awards Jill Epstein

Awards

Sponsorship Alex McFadden
Financial Review Mike Robbins

Internet Steve Meadows

Member Services Linda Dugan

Mid Atlantic Julie Shaw
Newsletter Belinda Bennett

Program and Entertainment Becky Hammer

Revenue Cycle Diana Cesa

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