

GATEWAY GATHERINGS



hfma greater st. louis chapter
healthcare financial management association

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**MAKE A
DIFFERENCE**

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From Our President...

It is hard to believe that my term as your chapter President is about to end. Yet when I look back on all the things that the committees have accomplished this year, I really don't know how they got it all done over the past 6 to 8 months. I have been working with a terrific bunch of people who are really dedicated to your chapter and want to make things better—and have achieved that this year!

Here are a few highlights:

- A revised and updated website
- A revised version of the Membership Directory
- A new look and format for this newsletter, Gateway Gatherings, which is issued quarterly
- A new sponsorship plan that increased sponsorship dollars and the number of sponsors participating
- A monthly communication email to give you more timely updates
- Conversion of our chapter financials to the version of QuickBooks used by National HFMA

...and the list goes on.

I can't say thank you enough to all of the people who have worked on all of the committees this year. We have the potential of achieving some awards this year for the Chapter, but will not know whether our efforts are recognized by the national office until June and ANI. I hope to see some of you there and Teri Reger, incoming Chapter President, will certainly let you know how we did.

Teri and her incoming Board and committees have already established a strategic plan and goals for next year and I have full confidence that they will continue to build on the successes of past years. Please support them as they work to improve the chapter—and get involved to assist them!!!

Kathy L. Hughes, FHFMA
President, Greater St. Louis Chapter
Healthcare Financial Management Association



Committee Chairs 2007-08

Archive Committee

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MEMBERSHIP SPOTLIGHT:

By Joanne Hollett, Membership Chairperson

NEW MEMBERS:

Patricia Friley, Wisconsin Physician Services
Alan Shearon, Talx Corporation
Kathleen Devries, Barnes-Jewish Hospital
Lisa Stellmacher, Barnes-Jewish Hospital
Paul Esselman, Cejka Search
Roseann Mabry, Officeteam Healthcare
Kurt Schultz, Rehabcare
Kimberly Willis, Endurance US Healthcare
Patrick Burke, Self-employed Consultant
Elizabeth Wikoff, St. John's Mercy Medical Center
Kirsten VanHoogstrate, St. John's Mercy Medical Center

Please welcome the members to our chapter if you see them at an HFMA program or event!

There are plenty of opportunities to volunteer for committee work, which benefits the chapter and helps you develop relationships with your peers. Committees to consider are:

Communications - Debbie Watson, Chair
Programs - Lisa Haug, Chair
Social - Tracy Packingham, Chair

Our membership makes us a strong organization and working together, we can "Make A Difference."

NEWSBRIEFS



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DIAMOND



GOLD



SILVER



Greater St. Louis Chapter HFMA Board Members for 2008-2009 Chapter Year

Based on the chapter's election results, your Board members for the next chapter year, which starts June 1, 2008, are:

President	Teri Reger
President Elect	Tami Knobbe
Vice President	Lisa Haug
Secretary	Rebecca Phillips
Treasurer	Nancy Guhman
Past President	Kathy Hughes
Directors	Barb Auer-Thompson, Laura Holt, Sue Richardson, Rosemary Hakenwerth, Bill Hamm, and Joanne Hollett.

Please give all of the Board members your support as they start planning for next year.



MORE NEWS...

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BRONZE



Commentary: Non-Profit Hospitals Need to Toot Their Own Charity Horn

By: Tina Eller, Senior Revenue Cycle Strategist, SearchAmerica

In 2008 you are hearing much about healthcare's failures from the politicians, media, and others. In their minds, the healthcare community is doing a poor job and needs to be dramatically reformed. I couldn't agree more. We have failed, but not where Americans may think we have.

Our 'F' belongs in our lack of public relations showing Americans the billions spent in charity care programs, and the associated belief that even non-profit hospitals are more focused on margin than mission.

Hospitals today do an outstanding job serving all of their patients. Most people don't realize how exceptional our healthcare is until they receive medical care outside of the United States. These experiences, even in the most civilized nations, usually include lengthy waits for services (sometimes more than a year!), unclean or archaic facilities, and almost always bureaucratic staff with no hint of a smile.

We need to remind the United States that we should be proud of our independent healthcare services. In 2008, don't just watch the news and let the politicians speak on healthcare. We have a responsibility to join in the discussion.

Who should the leading spokesperson be? Surprisingly, it may not be the hospital president or award-winning doctor, but its CFO and their revenue cycle staff. For who else could speak authoritatively on the dollar value of uncompensated care given by the hospital in recent years?

Charity Program – Huh?

If you ask the average American if non-profit hospitals in their area provide services at no charge to the indigent population, they would most often look confused at the question and certainly lay all credit for serving the uninsured/underinsured community at the foot of government – 'isn't that what Medicaid is for?' Unfortunately, few people know about the billions of dollars that hospitals, especially non-profits, give back each year to their community in the form of free or discounted services.

It is like the saying if a tree falls in the forest with no one around, did it actually happen. If hospitals provide care on their own dime, and no one hears about it....did it actually happen?

Thus, in this year where healthcare and Iraq will dominate most discussions and debates, I urge you and your colleagues to make the billions spent on hospitals' charity care programs a point a topic of discussion at your next social gathering, kids' soccer match or class reunion.



MORE NEWS...

Rumblings from Congress & the IRS

You are no doubt aware of the increased scrutiny rising from Washington. The updated IRS Form 990 and public statements by members of the Senate Finance Committee are just several examples of the government's increasing monitoring of the nation's healthcare providers. For the past year or more Senate Finance Committee Chairman Max Baucus, D-Mont and Sen. Charles Grassley, R-Iowa have spoken of the 'magical' 5% of annual revenues that non-profit hospitals should be required to allocate to free care for those unable to pay.

The bottom line is that the government is following poor public perception of healthcare and adding fuel to it with its current activities. Unfortunately, good news doesn't sell...so we must do our part to comply with their new regulations but not lose focus of the bigger issue -- public opinion.

Choose More Than One

Just as doctors take a oath to serve those in need, healthcare organizations have a shared passion, or mission, to deliver quality care to its patients, to make a difference in their lives.

For non-profits, it's not just about margin. Unfortunately the public, and to be honest sometimes our staff, forget that it is not the balance sheet alone that steers the organization.

More than ever, hospital CFOs need to picture themselves at a buffet not a wedding reception. They can freely choose multiple desserts in whatever quantity, not just a single piece of cake.

This is how they should view their hospital's margins and charity programs. Hospitals can place both on their plate side-by-side, and neither is of more or less importance. In fact, just like ice cream and apple pie, both are better when served together.

How, you ask? When non-profit hospitals focus their collections on only those patients who are able to pay (removing those who qualify for charity and Medicaid in advance), their collections rates and margins dramatically improve while their bad debt decreases.

The revenue cycle is an important way to support a non-profit hospital's mission. It needs to develop processes and use technology to identify and enroll all qualified patients for charity care, and focus 100% of its collection efforts on patients with the means to pay for services. Tax-exempt hospitals are not asked to give away the "farm" but to simply serve those who need assistance.

The bottom line is that hospitals need to be proud of the services they bring to everyone, whether they can afford them or not. In 2008, I challenge you to be more vocal about the positive aspects of our healthcare systems. After all, if we don't toot our own horns it is clear that the politicians and media won't.

Tina Eller is a Senior Revenue Cycle Strategist, SearchAmerica, and has worked in healthcare, both physician and provider spaces, for 15 years. Ms. Eller's expertise is in helping organizations drive initiatives within the Revenue Cycle focusing on the self pay population and Consumer Driven Healthcare. She is a frequent speaker at healthcare forums as well as contributor to a number of healthcare publications on the topics of Revenue Cycle best practice, challenges in the industry, etc.



MORE NEWS...

Notes from the annual HFMA Leadership Training Conference

By Teri Reger, FHFMA

San Antonio, Texas welcomed HFMA leaders from all across the country April 13-15, 2008 for the annual Leadership Training Conference. National HFMA presented an outstanding conference highlighted by messages from President and CEO, Richard Clarke and National Chairman-Elect, Robert Broadway. Mr. Clarke summarized the HFMA Healthcare Finance Outlook in the United States for 2008-2013. Mr. Broadway spoke passionately about his 2008-2009 chairman's theme "Making Connections". Throughout the two day conference, attendees participated in training sessions preparing them to lead their HFMA chapters in the coming year. The annual HFMA Leadership Training Conference provides education for a number of the chapter officers as well as many committee chair positions. Attendees from the Greater St. Louis Chapter brought home countless ideas to share and put into action that are focused on the Chapter's mission to provide quality education and opportunities for professional development and networking to its members. Additional information about the Leadership Training Conference and the HFMA Healthcare Finance Outlook 2008-2013 can be obtained at www.hfma.org.



Greater St Louis Board members and committee chairs attend national's LTC (Leadership Training Conference) in San Antonio. Pictured from left to right in front of The Alamo are Lisa Haug, Teri Reger, Tom Sale, Tami Knobbe, and Tracy Packingham.

LEGAL LINES

*Submitted by Gerald J. Bamberger, Attorney
Patient Financial Services St. Johns Mercy Health*



A NEW TACTIC TO NEGOTIATE MEDICAL BILLS

Plaintiff's personal injury attorneys have always been creative in their attempts to secure maximum recoveries for their clients including the negotiation of discounts from healthcare providers on medical bills related to their client's personal injury claims and settlements. But the latest tactic was the filing of a lawsuit by a patient against the hospital under the legal theory of declaratory judgment, asking the court to find that the hospital's billed charges were excessive and for the court to determine what the proper amount of the charges are. This is an offshoot of the numerous class action suits throughout the country prompted by attorney Richard Scruggs of Mississippi.

The patient's attorney settled his client's personal injury claim and offered to pay to hospital \$3,000.00 in full payment of its billed charges of \$9,299.45. The hospital had not filed a statutory lien on the personal injury claim. In response to the attorney's settlement proposal, the hospital said it would accept 80% of its billed charges. Rather than pay that amount or disregard the claim completely, the attorney, on behalf of his client, filed the declaratory judgment suit.

It is the writer's opinion that a declaratory judgment is an equitable action and not a proper way to litigate the issue, that being one at law in which it is the responsibility of the healthcare provider to prove up its claim by showing the rendition of its services and the reasonable value thereof. In this instance the hospital filed a motion to dismiss the declaratory judgment lawsuit together with a counterclaim against the patient for the full amount of its charges plus interest. In its investigation of the claim following the filing of the lawsuit by the patient, it was determined that the patient's attorney, in his demand for settlement to the insurance company, submitted medical bills totaling some \$13,000.00 including the full amount of the hospital's charges and obtained a settlement of \$73,460.46. Thus, the patient is attempting to make a profit on the hospital's charges in addition to her recovery in the underlying personal injury claim.

But, did the patient consider the risk to herself by filing the suit? If a judgment is rendered on the counterclaim, it may be for substantially more than the billed charges and it will be on her credit record and will negatively affect her in the future. We'll see how it plays out.



UPCOMING MEETINGS

May 21, 2008:

Board Meeting
SSM Corporate Office 2:30pm to 4:30pm



UPCOMING EVENTS

April 24

Chapter Happy Hour
Elephant Bar—West County Center
4:30pm—8pm

May 14 - 16

Greater St. Louis and Show Me of Missouri Chapters:
The Annual Joint Spring Conference
St. Charles Convention Center

June 23 - 26

HFMA ANI
Mandalay Bay Resort
Las Vegas, NV

September 22

Chapter Golf Outing
Winghaven Country Club

***CHECK OUT OUR NEW
CHAPTER WEBSITE
WWW.HFMASTLOUIS.ORG***

