



EVERGREEN CHAPTER

American Association of Healthcare
Administrative Management
formerly American Guild of Patient Account Management

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THE EVERGREEN CONNECTION

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President's Message



Aloha and Hau'oli Makahiki! (Hello and Happy New Year!) I am so pleased that 2004 has finally arrived and I look forward to an exciting term as your President for the next two years. I promise it will be packed with outstanding educational sessions and increased opportunities for you to network with your peers. I'll apologize now in advance to those who will groan at my obsession with Hawaii and my use of Hawaiian words and phrases. I believe strongly in finding ways to enjoy life and have fun, even at work! Hawaii has a special place in my heart and life, and over the subsequent newsletters I'll open the door to this part of my life and share with you. Living in Hawaii, ohana is the one term that you'll hear a lot about that has special meaning to the locals. Ohana means family. In the blend of diverse cultures living on those islands the family unit, or ohana, is highly valued with great respect. Ohana is also used to reference groups of people that are bonded together as a family such as a club or church congregation. My theme for our AAHAM Chapter this year is, you guessed it, "Ohana!"

So this year you'll hear a lot about my top priority in life (even above work and AAHAM!) being my ohana. This month I selected my President's photo to include my oldest of my two sons. Jeremy is twenty-two years old (any single girls out there who's strengths include fiscal responsibility and highly motivated career



Lee Johnson, AAHAM President, with his son Jeremy, in Hawaii.

goals please apply) and having a great time with his surfboard in California, and yes by the way he's in his last year (hear that Jeremy, this is the LAST year) of college and will graduate to become a graphic artist earning "millions?" I'll share more about my ohana and my younger son, Josh, and my wonderful wife of 26 years, Pam in future issues.

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Our Evergreen Chapter of AAHAM is an important ohana consisting of healthcare professionals in our clinics, admitting departments, patient account departments and other finance areas. As healthcare professionals in this day and age we can find our very survival to be a real struggle. Time seems to move faster, the changes more frequent and the temptation is to withdraw our contact with the ohana because "we're just too busy." As your President my message is that in times like these "your AAHAM ohana is even more important to you." Someone in your AAHAM ohana is facing the same problems as you are right now. Someone in your AAHAM ohana may even know of a great resource or solution. Everyone in our AAHAM ohana can benefit from some tidbit of knowledge, a sympathetic ear and the mutual feeling of ohana. HFMA says there's strength in numbers, and for AAHAM I say there's strength in Ohana!

Our first meeting of the year is a big one that you cannot miss. It's our annual AAHAM – HFMA Joint Workshop & Meeting at the Sheraton Tacoma Hotel on February 18th – 20th. This year I was able to convince HFMA to lower the price and offer the option of only attending and paying a la carte per day to make it more affordable for our AAHAM ohana. So this year for the first time you can select to ONLY attend on Thursday (2/19) all day for only \$100, or you could ONLY attend on Friday (2/20) for the half day and only pay \$60! This is a wonderful opportunity for our AAHAM members to drive down to Tacoma for one day of education by nationally recognized speakers. You'll hear all about our hottest topics, SELF PAY SOLUTIONS, DENIAL MANAGEMENT, 2004 CPT and HIPAA. Thursday evening is the 3rd Annual Casino Night, an event worth the price of the meeting alone. I need you to take advantage of this opportunity to show that this pricing methodology is something the members want. Please print a copy of the brochure (available on <http://www.waakhfma.org/>) and complete your registration today. Join your AAHAM Ohana at this important event! ❖❖❖

National Focus Continues on Hospital Billing Practices

from WSHA

On December 17, the American Hospital Association released a statement of principles and guidelines on hospital billing practices. Prepared in response to a series of national media reports on hospitals overly zealously pursuing collections, the guidelines outline how hospitals can better serve their patients. The guidelines seek to assure hospitals communicate effectively, help patients qualify for coverage, ensure hospital policies are applied accurately and consistently, make care more affordable for patients with limited means, and ensure fair billing and collection practices.

In Washington, many of the billing practices, including some debt collection procedures, are governed by the state's charity care law. To help the Washington State Hospital Association (WSHA) answer questions on Washington hospital charity care practices, they are requesting hospitals send them their current policies. This request went out in a WSHA newsletter called Fiscal Watch on November 24 and again on December 23. To date WSHA has received only 28 policies. If you have not already sent WSHA your copy, please send one to Jane Feldman by fax at 206-283-6122 or e-mail to janef@wsa.org.



Uncompensated Care Management Solutions



PMSI is pleased to announce the addition of Darlene Wood, CPAM to our company as Manager of Special Projects. Darlene will be working to enhance PMSI's ability to provide quality uncompensated care management and billing solutions for facilities across the Northwest. Please join us in welcoming Darlene to the PMSI family! She can be reached at dwood@pacificmedicaid.com.

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Darlene Wood



AAHAM MEMBER NEWS

Our members of the AAHAM Evergreen Chapters are sharing their many and diverse talents with other healthcare professional organizations;



JADINE McLEAN, our wonderful registration person, is now in charge of registration for the Washington & Alaska Chapter of HFMA in addition to being our chapter registration person. Jadine graciously volunteered to share her energetic and creative talents that we have enjoyed in our chapter with HFMA.

GREG MOGA, our immediate past-president of our chapter, is serving as a Chapter Director of the Washington & Alaska Chapter of HFMA. Greg is the chairperson of the HFMA Committee C, in charge of Keynote Speakers.

JOYCE GIBB, our chapter secretary this year, continues to serve as the AAHAM-HFMA liason on the Board of the Washington & Alaska Chapter of HFMA.

MARCY NICOL, chapter past-president is also serving as a Chapter Director of the Washington & Alaska Chapter of HFMA. Marcy is the chairperson of the HFMA Committee B, in charge of Managed Care & Patient Financial Services.

What a compliment to our AAHAM Evergreen Chapter to have so many busy members willing to share their talents. ❖❖❖



A Note from the Director of Education

By Patty Rinard

I recently attended a workshop from the Healthcare Authority where they talked about the different generations of workers. I myself am a baby boomer. Born near the end of that generation, six of seven children. My parents were born in 1920. So I've always felt older than my years. In our house, Perry, Dean, Dinah and old blue eyes were the music. (Only the "older" generation knows who blue eyes is, he was the family favorite, if you don't know who he is ask someone older...they'll tell you.) There are 18 years between the oldest and youngest sibling. This in itself has made diversity of time be different for myself. I am just as comfortable with a 60 year old and a teenager.

I, the Director of Education for AAHAM do not possess a college degree. Ironic? Or is it? Ask yourself how many people in management of Patient Financial Services have college degrees? Or your staff members? Most of us who work in PFS management didn't start there. We started in the ranks. That's me—I'm the American Dream. I started at the bottom and worked my way up. When I began, I didn't envision myself in management. My children were small, and it was a job that paid the bills. But somewhere between Admitting, Financial Counseling, Reimbursement. I was hooked. I love to complain about healthcare, along with the rest of the world. But I love to make a difference. Do you? Where else can we get the satisfaction that you get from healthcare.....

So as your Director I asked myself where can I make a difference for you? If you are in management, my goal is to not only have the great workshops and quarterlies. But to find ways to help you. For my staff having easy materials, readily handy in small bites of education are hard to find. Most of these, I've had to make as I go. My commitment to you is to share education, to mentor the X & Y Generations, they will become us when we are gone. We need to help them step up to the plate, give them the breadth of education that most of us learned going up the ropes. To make our areas "the best of the best". To give excellent service and to know that they make a difference.

So during the next year you will see some new additions to our newsletters. We will be adding an Education Corner. AAHAM will also be looking into other ways to be your education resource center. As this is developed I hope that you will enjoy it, and that it will be useful to you and your employees.

Patty





December Meeting



Outgoing President Greg Moga
welcomes 2004-5 President
Lee Johnson

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Certified Members received special recognition



Introduction of 2004 – 5 Board Members



Joyce Gibb, Lee Johnson, Darlene Wood



Letter from the Editor



by David Cartier, Editor

I woke up in the dark and felt the cold rain as I walked out the door. Lily was waving her little hand as yelling bye bye at the top of her lungs like she would never see me again. Leaving the house under those circumstances is very difficult. But, if that is all, I have to say that I have it easy. I don't think that is the norm right now in Healthcare. Everyone is scrambling to get claims out and get cash in the door. Days are going up and so is bad debt. Fundamental safety net programs have vanished and premiums are rising. Do we have any good news to talk about? Where is the magic code that will make everything work?

We had our first board meeting of the year with Lee Johnson at the helm. He spoke of Ohana and community, knowing that we are all in this together. There are some pretty amazing people in our chapter who are there to lend a hand or ideas to get us all through. I am excited to be a part of the Evergreen Chapter for the next two years and get to know more of you as a Vice President. Please keep sending me your ideas, articles, ads and stories for the Evergreen Connection. I will be working closely with Corey Shank our new Director of Publications to get them out full of good information and the spirit of Ohana.


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Congratulations

Lee Johnson has been named Director of Patient Financial Services at Harrison Hospital in Bremerton.

Visit the AAHAM Website at

www.aaham.org



UPCOMING Meetings & Events

March 12thTarget Workshop “Billing Bootcamp” at Northwest Hospital

April 16thMailing of the Second Quarter Newsletter

May 5thBoard Meeting at 6:00 pm

May 6thQuarterly Meeting at Valley Medical Center

August 27thMailing of the Third Quarter Newsletter

September 15thBoard Meeting at 6:00 pm

September 16thQuarterly Meeting at Northwest Hospital

October 13th-15thAAHAM Annual National Institute in St. Louis

October 18th-22ndNational Patient Account Management Week

October 29thTarget Workshop “Annual Payor Panel” at Valley Medical Center

November 12thMailing of the Fourth Quarter Newsletter

December 1stBoard Meeting at 6:00 pm

December 2ndJoint AAHAM & HFMA Winter Meeting



AAHAM-HFMA JOINT WORKSHOP & MEETING February 18 – 20

This is the first year that you can select to only attend ONE day of this outstanding three day workshop and meeting. A few highlights of this include:

- Wednesday: HIPAA Privacy Enforcement by the Office of Civil Rights
- Wednesday: Committee B meeting to plan future PFS speakers and sessions
- Thursday: Keynote by Michael Rona, CEO, Virginia Mason
- Thursday: Keynote by Bobette Gustafson on The Changing Self Pay Market and Continuing Denial Management Challenges
- Thursday: Important Revenue Cycle Implications in the 2004 CPT Updates
- Thursday: HIPAA Transaction Set Oversight Activities by CMS
- Thursday: Building a New Self Pay World by Suzanne Lestino & Bobette M. Gustafson
- Thursday: Casino Night
- Friday: Beyond Denial Management by Suzanne Lestino & Bobette Gustafson





NEW BOARD MEMBERS

In the Hawaiian language "ohana" means FAMILY. The Hawaiian concept of the word family is so much bigger than the English word. "Ohana" is a wonderfully extended family, where relationships and roles interweave through the community like roots of the banyan tree. In Hawaii "Ohana" is also used to describe a group or organization. Welcome to the Evergreen Ohana in 2004.

Officers

President:
Lee Johnson



Formerly the Compliance Officer for Central Washington Hospital, Lee is the new Director of Patient Financial Services for Harrison Hospital in Bremerton, WA. Lee is currently the Treasurer for HFMA.



Vice President:
David Cartier



David is the General Manager. He joined Pacific Medicaid Services, Inc. in 1994 and was transferred in 1996 to manage Seattle operations. David has been involved in AAHAM both the Evergreen and the Inland Empire Chapters as Newsletter Editor for the past four years. He is a member of Oregon HFMA. David lives in Seattle with his family Terri, Lily and Bodey.



Second Vice President:
Ed Jose

Ed is with the University of Washington Medical Centers.



Secretary:
Joyce Gibb



Joyce is with Merchants Credit Association (MCA) and an active member of HFMA.



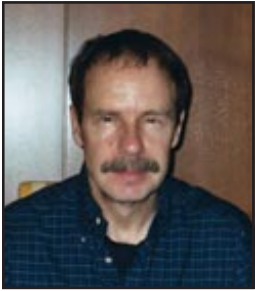
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Treasurer:

Larry Johnson



Larry is an Account Analyst with Swedish Health Services in Seattle. He is also a member of HFMA.



Chairman of the Board:

Greg Moga



Greg has represented hospitals and patients in Medicaid and Uncompensated Care issues since 1985. He is the past president of the Evergreen Chapter and been involved with AAHAM in many chapters for over 10 years. He is President of Pacific Medicaid Services, Inc. in Washington, Oregon and Hawaii as well as Outreach Services of Minnesota and Illinois. Mr. Moga's companies employ over 100 health care finance professionals handling all aspects of reimbursement on behalf of hospitals.



Board Members

Co-Director I

Government & Payor Relations:

Gary Smith



Gary is the Director of Billing and Regulatory Collections with HealthServciesNW, A Swedish / Providence partnership. He has 12 years of hospital revenue cycle experience. Gary has been working in Washington state and been a member of AAHAM for 3 years.



Co-Director I

Government & Payor Relations:

Debbie Williams



Director II

Membership Development:

Kim Walthew

Kim is the Director Of Business Operations at Highline Medical Enterprises (HME). The HME Billing organization provides full service Medical billing to the Highline Clinic Network, as well as to independent practices in the Puget Sound area. Kim has worked in the Healthcare field for 17 years; finding it to be challenging and rewarding work. She has been an AAHAM Board Member for 5 years serving as the Membership Chair. Special interests include spending time with her family; husband David, Grace (10), Gator (8) and Davie (13).



Director III

Ways & Means/Corp. Partners:

Larry Deneholz



Larry is the Assistant Vice President of Client Services for the Audit & Adjustment Company in Lynnwood, WA. He is also a member of HFMA.



Director IV

Publications:

Corey Shank

Corey is a graduate of the The Evergreen State College and started working with PMSI in 1999. Corey currently manages operations for PMSI including Pacific Billing Services. He is a member of the Evergreen and Inland Empire Chapters of AAHAM as well as HFMA. He lives in Spokane with his wife and (soon to be) two children.



Director V

Certification:

Jennifer Nies



Director VI, Education:

Patricia Rinard



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Patty is the Manager of Patient Financial Services for PeaceHealth, St. John Medical Center, PeaceHealth Medical Group. Of her career, she says "When I started in Healthcare, it was in Admitting and Switchboard at Monticello Medical Center. Other positions have been ; Account Rep; Phone team; Cashiering; Financial Counseling; Insurance Reimbursement, Medicaid/Healthy options reimbursement. Specialized in High Risk pregnancy reimbursement. Physician Credentialing and then Manager of the Customer Service Team, (PFS customer phones; Financial Counseling, Insurance Verification, POS collections, Collections and Administrator of our Charity program. Whew! Tired just reading it. How about been there, done that."



Committee Members

Andrea Gannon

Andrea is the Director of Patient Accounts for MultiCare Health System in Tacoma, Washington. MultiCare Health System has 600 licensed beds throughout their 3 hospital facilities and over 200 employed physicians. Andrea joined MultiCare in April 2002, bringing with her over 21 years of healthcare experience. Before coming to MultiCare, Andrea was Assistant Director of Account Maintenance at HealthServicesNW, Regional Business Office for Providence and Swedish Hospitals and Business Office Manager for Providence and Franciscan Medical groups. Andrea has spent most of her life in Washington. She currently lives in Puyallup with her husband, Norm and 15-year-old daughter, Alexi. Andrea joined AAHAM in 2002 and looks forward to serving as an educational resource for AAHAM's Board of Directors.



Steve Kasal



Steven has been the Director Central Business Services for Franciscan Health Systems since May 1997. His past positions include Business Office Manager Kern Medical Center, Director of Reimbursement for Paracelsus Healthcare Corporation, and Senior Reimbursement Auditor for Blue Cross of California. Steve has been involved in AAHAM for many years and has served on the Insight Users Group - SQL instructor for Patient Accounting and Patient Access, HFMA - Reimbursement Committee, California State UB82 Committee, as the Chairman California Healthcare Association State Payer Relations Committee and on the Washington State UB92 Committee.



Darlene Wood, CPAM



Darlene is the Manager of Special Projects and the newest member of the PMSI team. She has been involved with AAHAM and HFMA since the 70's and achieved her CPAM certification in 1977. She served on the National Board for 6 years and been on the Evergreen Board since the mid-80's. She recently retired from Patient

Financial Services Director for Harborview and University of Washington Medical Centers, a position she held since 1995. She held many positions within the PFS department during her career, moving from Statistical Clerk to Billing Clerk Supervisor, Manager, Associate Director and finally Director. She served on the Administrative Simplification committee and on many WSHA, State Government, AAHAM and HFMA committees.



Lyle Maichel

Lyle has been with Merchants since 1999. He is originally from Montana where he was Regional VP for Credit Service Company/Equifax. He moved to Seattle in 1992 where he worked for Airborne Express International Credit and Collections and then for the Corporate Marketing Division. Lyle wife is a Pulmonary/Respiratory Specialist at the Veterans Hospital.



Judy Veazie, CPAM



Judy is the Director at Sacred Heart Medical Center in Spokane and a former President of AAHAM. She is also a member of HFMA.



Maintaining Acceptable A/R Levels with FISS

from Gary Smith, HealthServicesNW

With Premera Blue Cross Medicare Part A's recent conversion to the Fiscal Intermediary Standard System from the Arkansas Part A Shared System, many facilities are experiencing increases to their Medicare A/R. Although Premera Medicare has backlogs in processing Part B claims and many are stating not to expect to get the Medicare A/R back to the preconversion levels, there are opportunities for facilities to improve their Medicare numbers. If adhered to, the following recommendations should improve your Medicare receivables:

Managers

- Review and trend the Claims Summary Report on a regular basis. Group the Status/Locations and ask questions, of staff or Premera Medicare, if any S/LOC or grouping starts increasing.
- Stay informed on how Premera Medicare is adjusting to and changing their processes in order to operate as efficiently as possible. Then make changes to your department's workflow, to maximize the affect of Premera Medicare's processes on the A/R. The best way to keep informed is by signing up for Premera Medicare's Listserv and reading the bulletins as they are distributed. Go to www.premeramedicare.com/stellent/groups/public/documents/associatedfiles/pm_p_news_email.asp to sign up.
- Ensure that your staff's work flow allows for and they are held accountable for completing the following;

Billers/Collectors

- Work the Return to Provider claims,

- S/LOC T B9997, daily.
- Check and initiate requests for medical records, S/LOC S B6001, daily.
- Monitor claims that have been moved to internal Premera Medicare location. These locations all start S M----. While Part A claims processing is current, there is approximately a 37 day backlog on Part B claims. Any Part A claim in a S/LOC, S M---- for more than 10 days and Part B claims in these locations for more than 37 days, should generate follow up activity with Premera Medicare. In order to work as efficiently as possible and continue reducing inventory, Premera Medicare is recommending that this follow up be submitted by fax to Jessica Toomey, 425 741- 4039. The fax should contain the HIC #, dates of service, type of bill and total charge amount.
- Claims cycling through multiple Common Working File sites should also be a concern, if they reach S/LOCs S B90M3 – S B90M9. These can also be faxed to Jessica.
- The faxing of specific claims to Premera Medicare is a temporary measure until Premera Medicare informs its providers otherwise.

If your facility uses Mutual Medicare as an FI, the recommendations above apply, with the exception of the follow up procedures. Mutual recommends that all claims in any of their internal locations, starting S M----, for more than 10 days should be called on. When calling Mutual try to maximize your time by having multiple accounts to check on. They are typically allowing follow up on 5 to 10 claims per phone call. ❖❖❖

Medicaid Denials

from Paula Holt,
Systems Coordinator,
Central Washington Hospital

Medicaid is denying inpatient claims for the missing digit in procedure codes. We have been told they have found the problem and have fixed the software. ACS, who handles the HIPAA transactions for Medicaid is sending them a list of the claims affected and DSHS will manually adjust the claims to get them back into the system. There may be an issue of timing; the DSHS fix vs. retransmitting claims. We have a need to receive payment prior to the 27th, which is the last working day of the month. DSHS said they will receive the list on February 6th and will have them back into the payment cycle by the week of the 16th.

There is also an issue of denials for missing J0 occurrence code with the baby's birthdates. Again, this is a problem on their side and is a larger issue. We were advised us to put the J0 in the occurrence code field, **but also in the comments field**. This will cause the claims to be manually reviewed. This will slow the process but at least they will not deny out. DSHS continues to work on these problems and assures us they will let us know when it is resolved. ❖❖❖





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