Program/Education Committee Chair:
Timothy Hogan, JD, FHFM, CHC, HVMA and Atrius Health

Program Coordinators:
Patrick McDonough, ProMedical, LLC
Jen Samaras, Patient Funding Alternatives
William Wyman, FHFM, Lowell General Hospital
**Your Compass for Navigating Turbulent Financial Waters for Revenue Cycle 2015**

**Friday, January 23, 2015**
*Gillette Stadium West Clubhouse, One Patriot Place, Foxborough, MA 02035*

<table>
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<tr>
<th>Time</th>
<th>Event</th>
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<tr>
<td>7:00–8:45</td>
<td>Registration, Breakfast and Networking</td>
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<td>8:45–9:00</td>
<td>Welcome and Chapter Announcements</td>
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<td>Deb Wilson, CPA, President, HFMA, MA-RI Chapter</td>
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<td>9:00–10:00</td>
<td><strong>Morning Keynote</strong>&lt;br&gt;The Politics of Healthcare and its Impact – What healthcare organizations need to know and how to prepare for Affordable Care Act (ACA) changes</td>
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<td>The Affordable Care Act was a plan to cover 30 Million Americans with expanded health insurance coverage. This expansion was not unfamiliar to Massachusetts as we had already undertaken the expansion of coverage and we are now tackling the reduction in healthcare cost trends. This session will present a balanced view of the healthcare landscape both locally and across the nation and the impact of the Affordable Care Act. The speakers will then take a deeper review of practical solutions of new payer models and specific cost reduction concepts. This transformation of the healthcare system is again a backdrop of American Politics - the discussion will cover how politics plays a role in the current and future state of the American healthcare industry.</td>
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<td><strong>Speakers:</strong>&lt;br&gt;Greg Sullivan, Research Director, Pioneer Institute</td>
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<td>Derek Haas, Project Director and Fellow at Harvard Business School and Founder of Avant-garde Health</td>
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<td>10:00–10:45</td>
<td><strong>Morning Panel</strong>&lt;br&gt;Utilizing Data to Improve Health System Performance in the Changing Healthcare Environment</td>
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<td>The aggregation of data collected by payers, providers and the government can truly revolutionize the future of health care. Ranging from more traditional data sources, such as EMRs and payment/claims systems, to more cutting-edge sources, such as clinical trials and DNA sequencing, the breadth and depth of data available today is unparalleled. By effectively leveraging this data, patients, providers, and payers can all make more informed decisions. This panel will explore the various sources and uses of healthcare data as well as how your organization can best use this data to improve outcomes and performance in the ever-changing healthcare environment.</td>
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<td><strong>Moderator:</strong>&lt;br&gt;Jon Puz, MBA, Vice President Shields Pharmacy Services</td>
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<td><strong>Panelists:</strong>&lt;br&gt;Lily Bradley, MBA, Innovation Fellow, US Department of Health and Human Services</td>
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<td>Graham Gardner, MD, MBA, Co-Founder and CEO of Kyruus</td>
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<td>Jack Caynon, JD, Partner and Co-Chair of the Health Law Group, Mirick O’Connell</td>
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<td>Michael Sherman, MD, MBA, MS, Senior Vice President and Chief Medical Officer, Harvard Pilgrim Healthcare</td>
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<td>10:45–11:00</td>
<td><strong>Break and Networking</strong></td>
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<td>11:00–12:15</td>
<td><strong>Morning Breakout Sessions (Choose one of five concurrent sessions)</strong></td>
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<td><strong>Revenue Cycle Track</strong>&lt;br&gt;Managing Today’s Compliance Landscape – How to succeed with compliance without losing focus on revenue cycle functions.</td>
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<td>This session will help revenue cycle leaders understand how to overcome the challenges of keeping up with today’s evolving compliance landscape. The session will provide strategies for balancing risk reduction while keeping compliance officers comfortable.</td>
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<td><strong>Speaker:</strong>&lt;br&gt;Shawn Barthel, Compliance Officer, Parallon</td>
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Physician Track

Clinical Documentation: The Foundation for Revenue Cycle Excellence

Clinical Documentation must be effectively managed for optimal revenue cycle performance. DRG and HCC assignment, quality and utilization measurements, value based reimbursement, medical necessity, professional services billing, compliance, and ICD 10 are all based on clinical documentation. Most hospitals have Clinical Documentation Improvement programs in place, but have narrowly focused on case mix index. This session will address how to effectively manage clinical documentation that drives the parameters on which healthcare revenue is increasingly based.

Speakers:
Thomas D. Sills, MD, President, Clinical Financial Resources, Inc.
Gayle Faro, Manager of Clinical Documentation Improvement and Coding, HIM Department, Lahey Hospital and Medical Center

IT Track

Healthcare.gov: Applying Big Data Expertise to Provide Solutions

This presentation will highlight real world examples of the challenges facing today’s business leaders when trying to turn “Big Data” into actionable data. Eric’s firm, MarkLogic, has a unique and valuable perspective on this challenge, as they were involved in the successful revamping and redeployment of healthcare.gov as part of the CMS roll out. We will cover challenges, lessons learned, what can be garnered from other industries, and how “Big Data” presents opportunities to ever changing Revenue Cycle Management challenges. The amount of data now available continues to grow each day – are you or your firms able to grow your ability to leverage this powerful opportunity?

Speaker:
Eric Austvold, Managing Director – Information Insights, MarkLogic

Government Track

The Affordable Care Act Changes Medicare DSH: How is Your Hospital Impacted?

The Affordable Care Act makes specific changes to the Medicare DSH Payment methodology. Effective for discharges occurring on or after FY 2014, hospitals will receive 25 percent of the amount they previously received. The remainder, equal to 75 percent of what otherwise would have been paid as Medicare DSH will become available for uncompensated care payments after the amount is reduced for changes in the percentage of individuals that are uninsured. Each Medicare DSH hospital will receive an uncompensated care payment based on its share of insured low income days. This session will examine the impact to Massachusetts and Rhode Island Hospitals and will discuss mitigation strategies to protect your hospital’s revenue stream.

Speaker:
Robert F. Gricius, Chairman, CEO, Found, NAVEOS

CFO Executive Track (pre-registration required)

Succeeding In the New Health Care Economy: Lessons from the Montefiore Experience

CMS reported in 2014 that Montefiore Medical System in the Bronx, NY saved a total of $24 million in the first year of the Pioneer ACO program, of which Montefiore reports they kept $14 million. The system spent 7.2 percent less than its benchmark in the first year, or about $100 per Medicare beneficiary per month – the best in the Pioneer ACO program. Montefiore has a long history of managing population health over the past 17 years. Their success has been based in careful analysis of clinical data, claims, and helping physicians manage the most complicated patients. In this session, Mr. Menashy will provide an insider’s look into the Montefiore ACO Journey and discuss what is up next on the radar of Montefiore – the Medicare Bundled Payments for Care Improvement Initiative and their lessons learned to date in implementing a bundled payment strategy.

Presentation and discussion lead by:
David Menashy, B.S., MBA, Associate Vice President of Finance, Montefiore Medical Center

Luncheon, Vendor Time and Networking
The Transformation of America’s Hospitals: Succeeding in the New Era

Healthcare providers are on the cusp of a New Era, heading toward a value-driven environment in which success is achieved through successful patient outcomes related to quality and cost management across the continuum of care. Success requirements for this New Era include the highest levels of hospital/physician integration, smart partnering decisions, efficient use of capital and effective risk management, aggressive cost structuring and management, and command and control of the care delivery process from start to finish. This session will take a look across the healthcare landscape and give a glimpse into the future healthcare and the Healthcare Company of the future.

Speaker:
Wayne Ziemann, Senior Vice President, Kaufman, Hall & Associates, Inc.

HFMA MAP – How do I MAP my Revenue Cycle

HFMA MAP is a program that provides industry-standard metrics or KPIs used to track your organization’s revenue cycle performance using objective, consistent calculations. This session will introduce the MAP program and discuss how providers have used the MAP Keys to improve their overall revenue cycle performance.

Speaker:
Sandra Wolfskill, FHFMA, Director, Revenue Cycle MAP at HFMA

Incident-To Billing: Managing Mid-Level Provider Billing

From the outside looking in, incident to billing can seem fraught with compliance pitfalls and not enough revenue upside. However, using mid-levels to boost your practices’ productivity doesn’t have to be complicated. This session will review how to compliantly boost revenue and productivity, as well as reviewing the pros and cons of mid-level billing.

Speaker:
Keira Anderson, CBO Director, Pentucket Medical Associates

An HFMA Carol: IT’s Impact on Revenue Cycle Past, Present, and Future

Panelists will discuss Information Technology’s prevalent and increasingly important role in driving success within the Healthcare Revenue Cycle. Each of the experts will draw upon their many years of experience in healthcare and technology that allow them to view this transition from the unique perspectives of a provider, vendor, and technologist. You will be provided expert insights and strategies for achieving success in the current and future environments, in addition to applying lessons learned from the past.

Moderator:
Michael Willette, Vice President, Patient Funding Alternatives

Panelists:
Neville Zar, VP of Revenue Operations, Steward Health Care
John Morey, Angel Investor, Founder of Microsoft Outlook
Brian Schuller, Manager of Marketing Support, Meditech

Cost, Reputational Damage, and Mitigation Strategies to combat Medical Identity Theft and Healthcare Data Breaches

An estimated 1.4M Americans were victims of medical identity theft in 2009 and that figure is largely thought to be underreported in the industry. Do you track and know the true cost to your organization in time to validate records, restore data integrity, and lost revenue? Data breaches can result in fines under HIPAA, but they also result in potential loss of patient/consumer trust, confidence and loyalty which can directly impact the revenue stream for your organization. This session will discuss specific strategies Revenue Cycle professionals should be undertaking to mitigate Medical Identity Theft and Healthcare Data Breaches.

Panelists:
Eli Katz, Vice President Enterprise Strategies, Experian
Timothy C. Hogan, JD, FHFMA, CHC, Compliance and Privacy Officer, Harvard Vanguard Medical Associates and Atrius Health
CFO Executive Track (pre-registration required)

Using Your Employee Benefit Plan to Improve Health and Reduce Hospital Costs

CFO’s know better than anyone that healthcare is under increasing pressure to drive costs out of their organization. Employer-sponsored health insurance is a significant portion of operating costs for an organization, especially at a time when operating margins continue to dwindle. Hospitals continue to provide more services in their benefits plans and pay a greater per-employee cost for benefits than other organizations. Healthcare also tends to have higher utilizers of healthcare services and typically a less healthy workforce. CFO’s and CHRO’s must undertake steps to move their spend to support wellness programs and decrease the year over year cost increases of providing insurance coverage. This session will highlight successes of Southcoast Health Systems in making this transition in their benefit design as well as a look across industries at best practices to improve health and reduce hospital costs.

Presentation and Discussion by:
Beth Barker, Director of Compensation and Benefits, Southcoast Health System
Erin O’Connor, Partner, Cammack Health

4:00–5:00
Closing Celebrity Speaker – Dave McGillivray

Everyone has a story to tell, for Dave McGillivray, it was his strong desire to be an athlete that led him to run across the country at age 23 … the year was 1978. The finish of that run led to the start of countless other journeys and challenges. McGillivray is unique in that he is both an accomplished athlete and an accomplished businessman. He knows what it takes to complete an endurance event and also the painstaking detail and management that go into a successful event, from a 40,000 person marathon to a 500 person charity walk. McGillivray is now Race Director of the BAA Boston Marathon and has directed many of the country’s most prestigious races.

- Learn to set goals, not limits in your life to help you excel both personally and professionally.
- Describe the recovery process and planning involved in planning an event of the scale of the Boston Marathon balancing the runner experience and appropriate levels of emergency preparedness.
- Understand how to overcome obstacles to achieve great things.

5:00–7:00
Post Program Networking and Cocktail Hour

Please plan to stay for our post program networking cocktail party! We have many surprises for you including signature drinks, great food offerings, and the sounds of great jazz brought to you by “Twilight”. Relax with your colleagues, make new connections, enjoy some favorites at the food stations and have a great time!
Your Compass for Navigating Turbulent Financial Waters

Friday, January 23, 2015
CPE and CEU Credits: HFMA 7.0 / CPE 7.0

Cost
HFMA Members: $140.00  Non-Members: $200.00
HFMA Student and Retiree Members: $25.00 (with HFMA #)

Payment (cash/check/credit card) is DUE on/before meeting date

Deadline for registration/cancellation: 4 p.m. Friday, January 16, 2015
Cancellation policy: attendees who send written cancellation notice up to one week prior to the program, will received a full refund.

Please make checks payable and return completed registration form to:
HFMA, Massachusetts-Rhode Island Chapter
411 Waverley Oaks Road, Suite 331B, Waltham, MA 02452
Any concerns or complaints can be addressed to admin@ma-ri-hfma.org  or 781-647-4422.
Or register and pay online at www.MA-RI-HFMA.org

Please Indicate Your Track Preferences (availability is first-come-first-served):
Morning Track:  ☐ Rev Cycle  ☐ Phys  ☐ IT  ☐ Govt  ☐ CFO *
Afternoon Track:  ☐ Rev Cycle  ☐ Phys  ☐ IT  ☐ Govt  ☐ CFO *
* CFO Track: Limited Space/Advance Registration Required. This session is for Senior Level Finance Staff of Provider Organizations Only.

Attendee name
HFMA
Title
Organization
Address
City  State  Zip Code
Phone  Fax
Email
Credit Card Number  Expiration Date
Name on Credit Card
Signature  ☐ Check here to have an CPE certification sent to you

Please Note: Dress is Business Casual. Handouts will NOT be available at the meeting. Presentations, if available, will be online at www.MA-RI-HFMA.org for viewing and printing.

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