Revenue Cycle Conference Co-Chairs:
Angela Confoey, Mount Auburn Hospital
Ames Ryba, RCM Healthcare Consultant
William Wyman, FHFMA, Lowell General Hospital

Program/Education Committee Chairs:
Catherine Robinson-Skeen, Steward Health Care Systems, LLC
Roger Boucher, Bank of America Merrill Lynch

Reform is a Game Changer: The New Rules for Best Practice

This year’s Conference is dedicated to helping revenue cycle professionals keep up-to-date with new best practice strategies in our ever-changing industry. We have five educational tracks from which to choose: Revenue Cycle, IT, Government, Physician and new this year, the CFO track. Our keynote speakers will deliver expert advice in keeping with the best practice theme; we will start our day with Jonathan Bush, CEO and co-founder of athenahealth, and enjoy lunch with a power packed panel of top revenue cycle experts from our country’s top performing hospitals. As always, we also have post-conference events including celebrity speaker Jim Rice, the chance to win BIG prizes, and our “Born in the USA” cocktail hour. You are sure to enjoy a great day of education, networking, shopping the vendor booths, and making new connections. We hope to see you there!

Friday, January 18, 2013
Gillette Stadium Clubhouse, One Patriot Place, Foxborough, MA 02035
CPE AND CEU credits: HFMA 6.5/CPE 7.8

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Save these Dates
February 15, 2013  Enterprise Performance Mgmt
March 15, 2013  Practice Management
Reform is a Game Changer: The New Rules for Best Practice

Friday, January 18, 2013
Gillette Stadium West Clubhouse
One Patriot Place, Foxborough, MA 02035

8:00–8:45 Registration, Breakfast and Networking
CFO Breakfast served in suite Blue72

8:45–9:00 Welcome and Chapter Announcements
Roberta Zysman, President, HFMA, MA-RI Chapter

9:00–10:00 Morning Keynote
Leadership, Culture, Results: Best Practices for a Successful Organization
What does it take to lead in an industry that is in a state of constant change and where the risks—and regulations—couldn’t be higher? How can today’s health care leaders move from a state of fear to creating a vision-inspired strategy that helps make health care work as it should? Join Jonathan Bush, CEO and Co-Founder of athenahealth, as he candidly explores these questions by drawing on lessons from the industry’s past and from his experience leading one of the most innovative companies in health care.

Jonathan Bush, CEO and Co-founder, athenahealth

10:00–10:15 Break and Networking

10:15–11:30 Morning Breakout Sessions

Revenue Cycle Track

Provider Payer Partnerships in Risk Contracting
A panel of providers and payers will discuss the challenges and lessons learned in the transition to risk contracts. As the percentage of revenue from risk payers accounts for a growing and even majority of health system business, there have been a number of changes in revenue cycle systems and provider-payer interaction. The transition from fee-for-service to risk is gradual and piecemeal so there is the need to manage and perform under continuing conflicting incentives. The panel will present experiences with different risk contracts including the Massachusetts demonstration to integrate care and align financing for dual eligible beneficiaries.

Moderator: Kathryn Gregoire, Senior Consultant, Culbert Healthcare Solutions, Inc.
Panelists:
Kevin Jourdain, JD, Managed Care Administrator, Sisters of Providence Health System
Jeanne O’Brien, Senior Contract Consultant, BMCHP
Philip Gaziano, MD, CEO, Accountable Care Associates
Anita Morris, Senior Vice President, Health Center COO

Physician Track

Outsourcing – Is it right for you? A Discussion: pros, cons, the selection process and best practices for outsourcing revenue cycle management for physician practices
Many hospitals and physician organizations turn to outsourcing to cut costs; however, it also can be a useful strategy with the potential for positive outcomes. Outsource for the right reasons, have clear objectives for the arrangement, use metrics that are meaningful and tap into expertise to bring best practices to your organization.

Moderator: Steve Levin, CEO, Connance, Inc.
Panelists:
Michael DeSocio, CFO, Beth Israel Deaconess Healthcare
Chris Annantuonio, Sr. Director, PFS and Revenue Cycle Operations, BMC
Tara Whitson, Director of Professional Billing, Lahey Clinic
Agenda Continued: Reform is a Game Changer

IT Track
Accountable Care Organizations – How ACO’s will affect information technologies and revenue cycle management
The Accountable Care organization is driven on the premises that a coordination of information technology best practices is a precursor for the ACO model. Revenue cycle management is dependent on the robustness of these systems abilities to be flexible to accommodate both internal and external contracting between providers, hospitals and payers. The focus is shifting to patient and population outcomes (disease management, needs of a population, wellness, etc.) versus the traditional orientation of healthcare (episodes of care, particular care settings, etc.). Integrated information across multiple care settings (PCPs, Home Care, Pharmacy, Ambulatory Surgical Centers, etc.) is needed to replace islands of automation. Come learn today’s best ACO IT practices.

Moderator: Robert Wambolt, Director of Technical Sales, MC AnalyTXs, Inc.
Panelists:
Philip Solomon, Senior Vice President, Healthcare Payment Specialists
Daniel Moriarty, CIO, Atrius Health Care
Additional Panelists: To Be Announced

Government Track
Developing a Health Insurance Exchange/Integrated Eligibility System (HIX/IES) under the Affordable Care Act (ACA)
One of the largest and more significant undertakings that have derived from the Accountable Care Act is the implementation of Health Insurance Exchanges. On January 1, 2014 individuals and families will have the ability to enroll in private or public health insurance through a streamlined process offered by Health Insurance Exchanges. Massachusetts was one of the first recipients of the 2011 Early Innovator Grants from the U.S. Department of Health and Human Services to develop the framework for their Exchange. Learn how states, including Massachusetts, are developing their Health Insurance Exchanges, the challenges encountered, and how the Exchange will impact health care.

Michael Tutty, MHA, PhD, Massachusetts HIX/IES Project Director and Director of the Office of Health Policy and Technology, University of Massachusetts Medical School
Scott Devonshire, Chief Information Officer, Massachusetts Health Connector

CFO Track
Patient Cash Collection Best Practice Strategies: A Round Table Discussion
This round table discussion will focus on best practices for patient cash collections, through both national and local perspectives. James Green of the Advisory Group will facilitate a discussion around how local hospitals are dealing with point of service cash collections, estimation of patient obligation prior to service, identification of charity, and patient loan / payment programs with the goal of reductions in bad debt, cash flow improvement and decreased days in A/R. This discussion will prepare you as a CFO with the tools necessary to proactively and creatively manage patient cash collections to achieve measurable benchmarks.

James Green, Senior Partner, Revenue Cycle Solutions Consulting Services, The Advisory Board

11:30–12:45 Luncheon, Vendor Time and Networking

12:45–2:00 Luncheon Keynote Panel
Support the Mission: Revenue Cycle Best Practice Initiatives shared by Our Nation’s Top Performing Hospitals
The “U.S. News and World Report Best Hospitals 2012-2013” placed Massachusetts General Hospital, Johns Hopkins, Mayo Clinic, and the Cleveland Clinic on their prestigious honor roll as the top four US hospitals for achieving top rankings in more than a dozen specialty areas.

This honor roll only recognizes 17 out of nearly 5,000 hospitals nationally for their excellence across multiple clinical specialties. Our power panel is made up of these best in class hospitals' revenue
Agenda Continued: Reform is a Game Changer

cycle executives who will share their secrets to best practice processes and the initiatives that have made a difference in the success of their organizations. In order to achieve best in class services, there must be a revenue cycle team equally as accomplished to collect the cash necessary to support the mission and services of the organization. This panel will share a behind-the-scenes glimpse into their success and challenges.

Moderator: Cara Sterling, Director of Healthcare Initiative, Harvard Business School
Panelists:
Rosemary Sheehan, Vice President, Revenue Cycle Operations, Massachusetts General Hospital (Partners Healthcare System)
Sandra Johnson, Vice President, Revenue Cycle, Johns Hopkins Health System
Craig Collins, Revenue Cycle Chair, Mayo Clinic Health System
Lyman Sornberger, Executive Director, Revenue Cycle Management, Cleveland Clinic Health System

2:00–2:15  Break and Networking

2:15–3:30  Afternoon Breakout Sessions

Revenue Cycle Track
A Case Study in Revenue Cycle Priorities and Process Improvements
UPMC is a US News and World Report top ten hospital and is known for its metric-driven and technology-enabled revenue cycle operation. In this case study presentation, the speakers will share how the organization successfully created a patient access process that improved the patient experience and the system’s financial results. In an environment of constant change and conflicting priorities, the focus will be on how the organization continues to adapt to current challenges and balances multiple projects and priorities.

Brooke Will, Revenue Cycle Coordinator, University of Pittsburgh Medical Center
Tina Brown, Vice President, Patient Access Operations, Convergent

Physician Track
Strategic Positioning for Today’s Physician Organizations
There are many changes occurring in the health care marketplace. These changes are coming to pass very rapidly and this in turn is forcing many physician practices to consider where their practice stands and what to do about its future. Declining reimbursement patterns and heightened competition are fueling concerns. Practices need to decide how they intend to position themselves in the future in order to maintain their net income, create new best practice processes and policies to meet the demands of reform and strategically market to the new healthcare consumer.

Jim Heffernan, Senior VP Finance and Treasurer, Massachusetts General Physicians Org.

IT Track
Leveraging Information Technology and Transforming the Revenue Cycle
Information technology is playing a major role in the evolution of healthcare delivery. This panel session will discuss the challenges and best practices of leveraging HIT to coordinate connectivity between providers, payers and consumers as a key enabler to improve revenue cycle efficiency. We will cover a wide range of topics, including the impact of the PPACA on healthcare informatics, updates on regional health information exchanges, Meaningful Use and IDC-10 initiatives. We will focus on cooperation between finance and clinical IT in developing robust yet economical platforms, minimizing revenue cycle disruption during system implementation/conversion, and deeper integration and collaboration between providers and payers.

Moderator: Joel Gardiner, Principal, Deloitte Consulting
Panelists:
Dr. Larry Garber, Medical Director of Informatics, Reliant Medical Group
Agenda Continued: Reform Is A Game Changer

Gerald Greeley, CIO, Winchester Hospital
Additional Panelists: To Be Announced

**Government Track**

**Don’t Get Caught Short- Best Practice Strategies for Short Stays and Observation**

As a result of RAC and MAC auditing practices, clinical decisions made by the treating physician to admit a patient are being criticized for inappropriateness. Auditors have claimed that patients receiving inpatient treatment should be treated on an outpatient basis causing obscurity with those who decide what clinical criteria are necessary to efficiently and effectively treat patients. The negating factors associated with short stay and observation denials have far reaching ramifications that complicate an already complex process. CMS acknowledges the issues associated with Outpatient vs. Inpatient and admissions for short inpatient stays and is actively pursuing an open dialogue. A panel discussion comprised of experts on Federal decision making and affected providers will address this topic by providing insight and best practices to keep your hospital from losing revenue.

Moderator: Kevin Dwyer, Director, Patient Accounts, Southcoast Hospitals Group
Panelists:
Gary Rosenberg, Attorney, Verrill Dana, LLP
Vicki Bailey, RN Manager, Case Management and Social Work, Lahey Clinic
Debra Conolly, Nurse Manager, Case Management, Mass General Hospital
John Zelem, MD, FACS, Executive Medical Director, Client Relations and Education, EHR

**CFO Track**

**Healthcare Cost Containment: The New Paradigm**

Please join this panel of thought leaders in the health care industry as they discuss recent reform efforts, both locally and nationally, and how the health care paradigm is changing on many levels. National health care reform has fundamentally changed the business of patient care. The recent Massachusetts cost containment bill will likely lead the way for national payment reform efforts in the coming months and years. The panelists each have a unique perspective on how the landscape is changing; the conversation will be both informative and interactive so feel free to prepare questions for our experts.

Moderator: Charley Murphy, Vice President, Arcadia Solutions, former Massachusetts House Majority Whip and Chairman of House Committee on Ways and Means
Panelists:
Steven Walsh, State Representative, Chairman, Joint Committee on Health Care Financing
David Seltz, Special Advisor on Health Care Cost Containment to Massachusetts Governor Deval Patrick
David Morales, Senior Vice President, Policy & Strategic Solutions, Steward Health Care System, Boston, MA
Terry Dougherty, Executive Director, Health Systems Transformation, UMass Medical Center; immediate past Medicaid Director, Commonwealth of Massachusetts
Cormack Coyle, MD, CEO, Emerald Physicians Group, Hyannis, MA

3:30–4:30  **Closing Speaker – Jim Rice, Former American League All-Star, MVP and Baseball Hall of Famer; beloved Boston Red Sox Power-Hitting Left Fielder**

4:30–7:00  **Post Program Networking and Cocktail Hour**

Please plan to stay for our “Born in the USA” post-program networking cocktail party! Bruce “The Boss” Springsteen is in the house!! Dine All-American style and enjoy this year’s themed specialty drinks. We have musical entertainment by Prime Time as well as a host of other FUN surprises. So come, mingle with your peers, and make friends and professional connections while having a great time!!!
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☐ Check here to have CPE confirmation sent to you

Cost
Rev/Phys/IT/Govt Tracks: HFMA members $130.00 and non-members $160.00
CFO Track: HFMA members $150.00 and non-members $180.00
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 11, 2013

Please make checks payable and return completed registration form to:
HFMA, Massachusetts-Rhode Island Chapter
411 Waverley Oaks Road, Suite 331B, Waltham, MA 02452
Telephone: (781) 647-4422  Fax: (781) 647-7222  Email: admin@ma-ri-hfma.org

Please Indicate Your Track Preferences (availability is on a first-come-first-served basis):

Morning Track:  ☐ Rev Cycle  ☐ Phys  ☐ IT  ☐ Govt  ☐ CFO
Afternoon Track:  ☐ Rev Cycle  ☐ Phys  ☐ IT  ☐ Govt  ☐ CFO

Attendee name

HFMA # (if applicable)

Title

Organization

Address

City
State
Zip Code

Phone
Fax

Email

☐ I would like to go paperless. Please email all my meeting notices.

Please note: Dress is business casual
Handouts will NOT be available at the meeting. Presentations will be online at www.MA-RI-HFMA.org for viewing and printing.

Contact the office if you are interested in a discounted hotel room rate at Gillette.