President’s Message

Happy Spring to all the MountainWest Chapter members

What a beautiful time of year, things starting to bud, bloom, blossom and grow. I love the colors and smells of Spring! Even though the weather is not quite sure what season it wants to be.

It was so great to see so many of you at the Utah Healthcare Alliance conference in St. George a couple weeks ago, the weather was beautiful and the conference was GREAT! We had fantastic speakers enlightening us on the Power of Positivity, the new rulings and regulations of 501(r), changing the Status Quo (leaving things better than you find them), CMS Programs to be aware of, the Utah ACO’s positions in Utah, How to Thrive with Change as well as Communicate better, and last but not least our Legislative Update, literally hot off the press (less than 10 hours from close of the session). The Committee as always did a great job of putting this together. If you are missing these, you are really missing out...but there is always more to come, so make sure you get the dates set on your calendar to join us for more great programs this year.

Have a great Summer, plant some seeds and enjoy the rewards. Shauna Wardrop, CRCE-I, President, MountainWest Chapter.

Points of Interest inside this issue:

April: Child Abuse Prevention Awareness Month

2016 Certification Dates

AAHAM Mountain West Chapter By-Laws
2016 Calendar of Events:

Important Dates and information:

- Payer Breakfast Meeting
  Friday May 6, 2016 – Intermountain Healthcare
  Lake Park Building

- AAHAM Summer Conference
  Friday June 10, 2016 – Natural History Museum of Utah

- Payer Breakfast Meeting
  Friday August 5, 2016 – Ronald McDonald House

- AAHAM/HFMA Annual Women’s
  (Date and location still to be determined)

- AAHAM Winter Conference
  Friday November 11, 2016 – University of Utah Guest House

Special Events and Activities

- March/April
  “Child Abuse Prevention Month”

- May/June
  “National Foster Care Awareness Month”

- July/August
  Ronald McDonald House
  “Wish List” and “Pop Tabs” Collections

- September
  Half Marathon or 5K Run / Walk for Foster Kids & Orphans

- October
  “Breast Cancer Awareness Month”
  Race For the Cure

- November/December
  Marines “Toys for Tots”
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AAHAM is the premier professional organization in healthcare administrative management. Your one-stop resource center for information, education and advocacy in the areas of reimbursement, admitting and registration, data management, medical records, patient relations and so much more.

AAHAM was founded in 1968 as the American Guild of Patient Account Management. Initially formed to serve the interests of hospital patient account managers, AAHAM has evolved into a national membership association that represents a broad-based constituency of healthcare professionals.

Professional development of its members is one of the primary goals of the association. Publications, conferences and seminars, benchmarking, professional certification and networking offer numerous opportunities for increasing the skills and knowledge that are necessary to function effectively in today’s health care environment.

AAHAM actively represents the interests of healthcare administrative management professionals through a comprehensive program of legislative and regulatory monitoring and its participation in industry groups such as ANSI, DISA and NUBC. AAHAM is a major force in shaping the future of health care administrative management.
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Healthcare Alliance Seminar
March 9th – 11th, 2016
St. George, Utah

Coral Canyon Golf Course Tournament Winners!
Wednesday, March 9th
12:00 – 5:00 pm

Team with the lowest score:
Steve Harward
Vince Donohue
Nate Empey
Jeremy Meacham

Team with the highest score:
Courtney Bouy
Dennis Bouy
Cody Thornock
Aaron Howell
Matt Yei  
Centralized Appeals Unit, RCO/Intermountain Healthcare

Where do you go for sun, golfing and education in the middle of March, plus enjoy near 80 degree weather!!! Why the Annual Healthcare Alliance Seminar. If you missed this year’s conference, we hope you will attend next year!! There was a lot of laughing, comradery and competition during both the golf tournament (in Beautiful Coral Canyon Golf Course) and during the conference seminars.

What makes for a positively pathologically positive persuasive prognosticator of prodigiousness….. Why, none other than Dr. Paul Jenkins. “Dr. Paul” opened the conference in a positively positive position! His session focused on illuminating the how and whys behind positive thinking. What a way to get the crowd in a positive mood.

Are you in search of the one special thing that will make you or your organization stand out? Frank Keck specializes to help individuals succeed by being the “Driving Force as a catalyst in the discovery of who you are (or your team/organization) and why you exist. It’s what gets us out of bed in the morning.” His unique and inspiring presentation was a journey into who we are and what we represent, as individuals or organizations.

Have you ever wondered what 501R means to you (or even what it is)? If you did, Klare Wagner presented the “In’s” and “Out’s” of the IRS’s proposed regulations of financial assistance and emergency medical care policy requirements under the Patient and Affordable Care Act. Klare offered an insightful presentation on the impacts of the proposed rules.
What is HRRP and the Two Midnight Rule? And, what do either of them have to do with CMS (Centers for Medicare and Medicaid)? If you needed or wanted to know, Dr. Masood Safaee was there to explain all the intricacies of both programs with CMS and what providers face during the coming year.

John Borer presented a payer to provider perspective of the financial aspect of the Medicaid program and how the program is tied to both state and federal funds. With SB180, the creation of ACOs were created, but How are they funded? What is their risk? All of these and many more questions were answered during the session.

Closing out the first day, was Diane Passey’s truly engaging session Thriving Change. Change Happens, and while we all know that, most tend to resist in some way or another. Diane offered helpful tips on how to deal with change and in fact, thrive in change. It was a perfect session to close out a wonderful day.

After a wonderful breakfast to start our day, Jeff Johnson opened the morning session on the power of communication. With such useful principles such as “Be present to be effective!, “Understanding Who is the Real Leader (ask those who follow), “be the one person difference, “ and learning about the 5 critical rules of body language (Such as smiling) as well as knowing when to “Step Back, Step Up and Step Out”. Jeff presentation was a reminder to avoid communication pitfalls in order to become more effective as leaders and followers.

Dave Gessell, Utah Hospital Association, closed out the conference with an update on the 2016 legislative changes affecting our industry.

If you missed out this year, we encourage you to come next year. With so many changes occurring in our industry, it is wonderful time to listen to experts, laugh, share our stories and develop- strategies and solutions that help improve our effectiveness. We all need to learn to step back, step up and step out.
Healthcare Alliance Seminar – Speaker Bios

Keynote Speaker:
Dr. Paul Jenkins Pathological Positivity

Dr. Paul Jenkins works with organizations and individuals to establish and maintain habitual patterns of positive perception and focus that increase happiness, engagement, productivity, profit, and ultimate achievement of professional and personal life missions. With two decades of experience as a professional psychologist, Dr. Paul (as he is known to clients and his audiences) lays out the how and the why behind the art and science of being constructive in an often destructive environment. It is like having an owner’s manual for your brain – one you can actually read, understand, and apply. You understand your own mind and improve its functioning on purpose. His deeply thoughtful writing, engaging and fun keynote addresses, powerfully practical breakout seminars, individual and corporate coaching and counseling are profound and simple. His clients, readers, and audiences get an iron grip on powerful Pathological Positivity principles that make an immediate difference in their personal and professional lives.

Frank Keck
The People Whisperer

It all began in Mrs. Stannard’s 4th grade class. Frank was asked a question by his friend Todd, and not wanting to draw the attention of everyone else (and thus making that other student feel demeaned), Frank whispered in Todd’s ear some helpful information. (This was not during a test, we do not condone cheating!) Todd perked right up and gasped loudly enough for everyone to hear, “Ah, now I get it!” Todd went on to incredible heights that year in 4th grade and Frank realized the value of “whispering.” Ms. Tighe’s English class, junior year of high school. Frank is entered in an original comedy speech contest, does 10 minutes of impromptu speaking and wins the competition. Frank learned the value of making people laugh as a way of keeping their attention and impacting their memories. Fast forward to 1979, Kiel Auditorium in St. Louis, MO. Frank is attending a Zig Ziglar conference and sees how Zig can inspire thousands of people at once by speaking to a group of people (as opposed to just Todd). Frank realized the power of speaking to groups of people. 1990 and Frank is working for an international training company. He is being taught how to facilitate their signature training program. Frank’s mentor and boss, Steve, keeps telling Frank the same things over and over, and then making Frank practices them over and over. He makes Frank tell him how using these new skills have helped him be a better facilitator. Frank learned the importance of an ongoing learning cycle to improve behavior. 2006 and Frank receives his Certified Speaking Professional designation from the National Speakers Association. This confirms with Frank and thousands of others what Zig taught Frank back in St. Louis. You can get anything you want in life by helping other people get what they want. Frank is passionate about leaving people better then he finds them. He is an outstanding connector and facilitator. Frank has gathered years of experience with all kinds of groups making him an expert – the People Whisperer. Frank wants to be a catalyst in the pursuit of Idealness, whether that means a personal journey or a company aching for change.

THE SUMMIT - Spring 2016
Klare Wagner
501R what does it mean for you?

Klare Wagner is the Manager of Financial Assistance for Intermountain Healthcare. Previous to her current role, Klare worked with Intermountain Self-Pay and Specialty Billing departments. Klare spent much of the past year successfully implementing 501(r) for Intermountain Healthcare. Klare has a Bachelor’s Degree in Business Administration from Utah State University. Klare is a native Utahan, growing up in Logan and now living in Salt Lake City. Klare enjoys spending time with her husband Dan, three children, and two small dogs.

Masood Safaee, MD
The CMS Programs that should concern you in 2016

Dr. Safaee currently serves as the System Physician Advisor for Intermountain Healthcare since 2010. Intermountain Healthcare is an internationally recognized, nonprofit system of 22 hospitals, a Medical Group with more than 185 physician clinics, and an affiliated health insurance company. Their 33,000 employees serve patients and plan members throughout Utah and southeastern Idaho. In his role, Dr. Safaee has helped to develop the Intermountain Physician Advisory Service (IPAS), which conducts a secondary review, participates in the appeal process and provides physician education. He is currently Board member of the National Association of Physician Advisors (NAPA). Dr. Safaee graduated from National University, Tehran Iran and completed his residence training in Internal Medicine at Pinnacle Health, in their affiliation with Pennsylvania State University. During this time, Dr. Safaee served as the Chief Resident.

John Borer
Utah Medicaid ACOs
A Payer to Provider Perspective

John Borer is the Actuarial Service Director for the University of Utah Health Plans. In this role, John is responsible for working with Department of Health representatives, employer groups and executive leadership. His primary responsibilities include analyzing and monitoring the financial performance of the Medicaid plan, and developing initial and renewal projections for individual and large group products. John has over 20 years of actuarial experience including serving as the Chief Actuary for PEHP in Salt Lake City, and the Actuarial Director for WellPoint in Woodland Hills, California. Within these roles, he was responsible for valuation and forecasting, trend and loss ratio tracking, renewal and RFP development, and new product pricing. John earned his Bachelor of Science degree in Pure and Applied Mathematics from Stevens Institute of Technology in New Jersey, and is a Fellow of the Society of Actuaries (FSA). In his spare time, John enjoys kiteboarding throughout the western United States.
Healthcare Alliance Seminar – Speaker Bios cont.

Diane Passey, Thriving Change

Diane Passey, LCMHC - is a Licensed Clinical Mental Health Counselor. She obtained her Bachelor’s degree from the University of Utah, and her Master’s of Mental Health Counseling from the University of Phoenix. Diane has over 10 years of experience working as a counselor, and enjoys working with children of all ages from 5 - 85. She worked for five years with Domestic Violence related issues for both perpetrators and victims and was granted a Peace on Earth award by the Salt Lake Domestic Violence Coalition. She has worked extensively with developmentally and intellectually delayed adults and teens. Diane is a member of Third District Judicial Outreach Committee; subcommittee on Divorce Education for Kids. She is the co-creator of curriculum for the Court’s Divorce Education for Kids program, and is an instructor for the Divorce Education for Parents program. Diane is a certified Laughter Yoga instructor, and enjoys finding humor in most situations. Diane likes working with adults, teens, and older children who present with a variety of issues related to depression, anxiety, relationship issues and life stress.

Jeff Johnson, Communication Power

Jeff Johnson is a nationally acclaimed motivational trainer, speaker, and facilitator. He is a veteran in the credit and collections industry, and currently is the Chief Sales & Marketing Officer at Hawes Financial Group in Springfield, Oregon. Hawes Financial provides management, marketing, finance, and accounting services to its affiliate companies, which collectively employ over 260 people. Prior to his activities at Hawes Financial, Jeff had over 10 years of experience as the Manager of Client Relations for Columbia Ultimate Business Systems, a premier provider of collection and receivable management software. Before serving with Columbia Ultimate, Jeff worked as a Director of the International Division of the Franklin Covey Leadership Center in Salt Lake City, Utah, where Jeff worked with many Fortune 500 companies to better improve internal processes through pinpoint training. Originally from Colorado, Jeff earned his degree in Business Management with a minor in Human Resources from Brigham Young University. He is a certified 7-Habits Trainer and has numerous professional memberships, including the Healthcare Financial Management Association (HFMA). Presently, Jeff serves as Oregon HFMA President elect and on HFMA regional committee, and is on the Leadership Track, a five-year course culminating in Jeff’s service as Oregon HFMA President. When not working, Jeff enjoys running, cross fit and spending time with his amazing wife and five children.

Dave Gessel, Legislative Update

Dave Gessel currently serves as the Executive Vice President at the Utah Hospital Association (“UHA”). He has previously served as the Vice President of Government Relations and Legal Affairs for UHA. He has also worked as an attorney for a major Utah law firm as well as Legislative Director for a U.S. Congressman. Dave has also been actively involved in a number of federal, state and local political campaigns. Dave received his Bachelors Degree from the University of Utah, his Masters Degree from Rutgers University and his Juris Doctorate from the University of Virginia. Dave is a recognized health law and corporate law expert. Dave has been appointed to a number of state and local government committees and is active in civic and community affairs.
At Accretive Health, our goal is to help our healthcare provider clients deliver the highest quality care, serve their communities, and do so in a financially sustainable way. We strive to prepare them for the changing dynamics of the healthcare industry, particularly the challenges and opportunities presented by the shift to value-based reimbursement.

**Our Clients**
Our solutions—be they revenue cycle management, physician advisory services, or population health—are designed and delivered for the benefit of our clients. One component of our end-to-end revenue cycle management solution, for example, includes shared service offerings based out of 10 centralized process centers. Leveraging shared services—such as medical coding and transcription, patient financial services, and processing Medicaid eligibility—helps our partner hospitals drive greater efficiencies from their operations and better serve their patients.

**Their Patients**
U.S. hospitals and physician groups face numerous challenges to providing superior patient care, including high numbers of uninsured and underinsured patients, ongoing healthcare reform efforts, and the rise of health insurance exchanges. Through advocacy efforts on behalf of our hospital partners, Accretive Health has helped more than 250,000 formerly uninsured patients obtain coverage for their care.

**Their Communities**
Founded by Accretive Health employees, Accretive Helping Hands is an organization whose mission is to partner with healthcare and social service providers to assist patients and their families in ways that extend beyond the episode of care. Recent projects have included home construction, building children’s bicycles, and volunteering at local food pantries.

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As the annual Healthcare Access Personnel Week approaches, I reflect on the importance of the Patient Access Staff and their essential role in the healthcare industry. As we pause to show appreciation for our frontline workers, it occurred to me that they are not always fully appreciated within the Healthcare industry. When I think in comparison to the level of appreciation shown to other healthcare professions, such as nursing, I realize the lack of understanding and appreciation regarding Patient Access Staff and the importance of their duties as it relates to patient care and the fiscal outcomes of healthcare organizations.

I recently saw this picture floating around social media with a caption “Only nurses can appreciate this!” It sparked a fire within me, as all too often the work of front line staff is either forgotten or undervalued. Ask anyone in the admitting department about gowning up to work with MRSA or C-Diff patients and they will share the joys of dawning the gear and gowns before entering a patient room, especially those units who do bed side registrations in the ED.

The Patient Access profession includes a wide scope of positions and varying titles throughout the industry. From Scheduler to Receptionist, Greeter to Registrar, or even Insurance Verification and Pre-Registration Staff, they are the face of Patient Access. Ultimately there is one common thread that holds this essential unit together, we are the first interaction with the patient, and as such can make or break that patient encounter and the success of all other departments after us. What an enormous responsibility to have!

Here at our local 65 bed facility, a registrar’s day is different each day, and often changes rapidly moment to moment. Sometimes the volume of knowledge needed to efficiently and accurately do our job is overwhelming. Ask the new hire just handed the enormous training binders, which of course only include the common scenarios. The less common, unknown, and blue moon events will happen daily as well, you can be sure. Our registration system, Meditech, includes 9-10 pages of data for the registrar to review with the patient includes 9-10 pages of data for the registrar to review with the patient and update as needed. Bring in a new patient to the organization, and those same 9-10 pages become a ticking time bomb of pressure.
Appreciation for an Essential Part of Healthcare cont.

Get the patient’s information, accurately, with a smile, while keeping up in conversation, and get them on their way before they become impatient! Within the registration process, the registrar must understand why we collect certain data and how it impacts billing or statistics, as patients are sure to ask why you need to know things like their religion or ethnicity. At least within our community based facility, staff must learn the tact that comes with registering neighbors and friends who can get frustrated that we ask for an identification card—“You know who I am!”

Just as nurses must know all the ins-and-outs of infection control, registration staff must also deal with very sick and possibly contagious patients, but on a far different level. You are not walking into their space gowned up; they are walking into your space ungowned and unmasked. Patient Access staff must be prepared to run for vomit bags, get an unwilling patient to wear their mask, disinfect pens, clipboards, chairs, desks and more; all of which requires proper knowledge of various disinfectant cleaners and best sanitation practices. When dealing with the bedside registrations for admissions and the ED, the same knowledge clinicians have with gowning up is required of the registrar. While masked and gowned we still must be high performers in customer service, smiling through the mask and tactfully asking patients questions that they don’t want to deal with in their moment of illness or pain. What ethnicity are you? Who is the subscriber on your insurance? Where do you work? If empathizing with a patient who is level nine on the beloved smile/frown pain chart and ready to vomit—I am sure they don’t care that we are trying to ensure their account is accurate.

In the background of every Patient Access rep’s mind, while courteously working through patient interactions and avoiding lengthy patient wait times, is the pressure to get it right. All of it. Every piece of information we verify or update can make or break a process further down the line for every department after us. And we know it. Fail to find the right record, and clinicians down the line will not have the right information they need to safely and accurately treat the patient; testing results can’t be filed right, causing extra work for other staff. Transpose some numbers or assign the wrong payor code, and you are sure to get unsympathetic emails from Patient Accounts, and increase the workload for those working rejections and denials. Oh yeah—we do that too! Failed to secure that authorization? Not a fun moment when you become aware of a $10,000 claim that just got written off, due to a missing authorization. The need for accuracy is key to the success of any Patient Access Team and more importantly to the success of the organization.

While I certainly appreciate the care and compassion of clinicians within the Healthcare industry, each spring I stand on my soap box and proclaim the well deserved and often lacking appreciation which should be shown to our front line staff in the Patient Access profession. They start the process for each patient walking into our organizations and as such are essential to our success!

They are the compassionate listeners for patients who simply want to stop and tell someone about their bad day or streak of bad luck. They are the researchers, going above and beyond to find out what the patient is supposed to be here for today, where they should be and at what time. They drop their workload in a moment’s notice to personally escort a nervous patient to the right location. They calm them down and ease their anxiety before they get to the clinicians. They are the face of Patient Access and I encourage all healthcare professionals to take a moment this year to join with me in appreciating and recognizing all they do.
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Save the Dates

2016 Certification Events

**Webinars:**

- **CRCE-I, Credit/Collections**
  April 8\(^{th}\) 9 AM

- **CRCE-I Revenue Cycle Management**
  May 6\(^{th}\) 9AM

**EXAM Periods:**

- **July 11-22, 2016**
  Registration due April 15, 2016

- **November 7-18, 2016**
  Registration due August 15, 2016

**CRCP Sessions**

- University of Utah BSB Bldg.
- 10:00am to 11:00pm
  - April 8 and 15\(^{th}\)
  - May 6\(^{th}\) 13\(^{th}\) 20\(^{th}\) and 27\(^{th}\)
  - June 3\(^{rd}\) and 17th

**CRCS Sessions**

- University of Utah BSB Bldg.
- 9:00am to 10:00am
  - April 4\(^{th}\) and 18\(^{th}\)
  - May 9\(^{th}\) and 16\(^{th}\)
  - June 6\(^{th}\) 13\(^{th}\) and 20th

Scheduling for in-person tutoring and study sessions will be done as requested, to arrange. contact Karen Pruett ([karen.pruett@imail.org](mailto:karen.pruett@imail.org)) or Erin Selin ([erin.selin@imail.org](mailto:erin.selin@imail.org))
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Our practice has a network of resources located throughout the world, providing clients with the expertise of the entire group.

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• Integrated Delivery Systems
• Physician Practice Groups
• Managed Care Organizations
• Health Care Captives
• Clinical Trial Administrators

Client Services
Marsh’s HealthCare Practice clients can take advantage of a number of practical services. Tailored to the needs of the individual client, our services include:
• Strategic risk and exposure analysis
• Enterprise risk consulting services
• Loss control and prevention surveys
• Process Improvement for existing loss control programs
• Clinical trial risk management and compliance
• Creative risk financing
• Captive development and management services
• E-health and HIPAA insurance and clinical risk management services
• Claims management and consultation
• Educational programming — onsite and via teleconferencing
• Information management and state-of-the-art technology

THE SUMMIT - Spring 2016
Save the date!

The second annual Children’s Service Society

“Keep Children Safe 5K and 10K Fun Run/Walk” at beautiful Draper Park!

Website to Register:

https://www.eventbrite.com/e/css-keep-children-safe-fun-runwalk-5k-10k-fundraiser-tickets-19697290125

Raise funds and awareness to help prevent child abuse and neglect through programs that empower family and caregivers to provide the best possible environment for children. This annual fundraiser is bound to be fun for the entire family, work team, individuals or even teams of rivals! Prizes, characters and snacks will be waiting at the finish line.

More info coming soon!
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AAHAM is a major force in shaping the future of health care administrative management. Professional development of its members is one of the primary goals of the association. Publications, conferences and seminars, benchmarking, professional certification and networking offer numerous opportunities for increasing the skills and knowledge that are necessary to function effectively in today’s health care environment.

Visit our website at http://aahammtnwest.org/membership/ for upcoming events, opportunities, and education on why membership matters.

Visit the national website at http://www.aaham.org/Home.aspx to see the advantages of becoming a National Member.
By-Laws of the MountainWest Chapter
of the American Association of Healthcare Administrative Management

Article I
Membership

Section I - Membership
A. Any member in good standing of the American Association of Healthcare Administrative Management may become a member of the MountainWest Chapter.
B. Associate members, defined as members who pay only local dues and who do not belong to the national American Association of Healthcare Administrative Management, shall be entitled to receive all local publications and letters, member rates at seminars, and may vote in local elections.
C. Applications for membership shall be made on application forms specifically for the purpose.

Article II
Fees and Dues

Section I - Fees and Dues
A. An application fee for membership shall be determined by the Executive Committee.
B. An application fee must accompany each application for membership.
C. If an application is not accepted, the application fee shall be refunded.
D. Annual dues for members and associate members in good standing shall be established by the Executive Committee.
E. Annual dues are due and payable at the beginning of each calendar year.

Section II - Delinquent Dues
A. If the dues of any member or associate member remain unpaid for thirty (30) days after final notice of delinquency from the Treasurer, their membership shall be terminated and notification will be sent to the member.
B. If the delinquent dues are paid in full by February 28, the member will be reinstated without penalty.

Article III
Voting

Section I - Eligibility
A. Only members in good standing whose dues are current shall have voting rights. Associate members in good standing shall have voting rights on local matters and elections.
B. Proxy voting for eligible members shall be permitted in writing on an approved form provided by the Executive Committee.
C. Voting may, at the discretion of the Executive Committee, be conducted by ballot through the mail, provided that at least thirty (30) days notice is given for such voting.

Section II - Majority
A. All matters except as otherwise specified in these By-Laws, shall require a simple majority vote for settlement.
By-Laws of the MountainWest Chapter of the American Association of Healthcare Administrative Management

Article IV
Meetings

Section I - Annual Meeting
A. There shall be an annual meeting of the Chapter as soon as is practical after the first day of November of each year.
B. Notice of this meeting shall be in writing to each member in good standing and shall be issued at least thirty (30) days prior to the scheduled date.
C. Results of Chapter elections for officers and members of the Board of Directors are to be announced during this meeting.
D. Any new and old business of the Chapter shall also be transacted during this meeting.

Section II - Special Meetings
A. Special meetings of the Chapter may be called by the President, a majority of the Executive Committee or not less than one-third (1/3) of the voting membership.
B. Notice of special meetings shall be in writing to each member in good standing and shall be issued at least thirty (30) days prior to the scheduled meeting.

Section III - Meeting Place
A. The Executive Committee shall designate the site of any annual regular or special meeting.

Section IV - Quorum
A. One-tenth (1/10) of the members in good standing with voting rights shall constitute a quorum, provided a majority of the Executive Committee is present.
B. A majority of the Executive Committee shall constitute a quorum for a meeting of the Committee.

Article V
Executive Committee

Section I – Executive Committee
A. The Executive Committee consists of the Chairperson of the Board and four (4) elected officers of the Chapter: President, Vice President, Secretary, and Treasurer. Only members who are full-time employees in the healthcare industry shall be qualified to hold office.
B. Elected officers shall be full-time employees in the healthcare industry and will be members in good standing of the national American Association of Healthcare Administrative Management.
C. The immediate Past-President of the Chapter shall serve as Chairperson of the Board of Directors for the two (2) years immediately following his/her term of office. He / She shall have voting privileges during his/her term as Chairperson of the Board of Directors.
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Section II - Board of Directors

A. The number of Directors that shall constitute the complete Board of Directors shall be six (6). Directors shall be current national or associate members in good standing of the Chapter and of the American Association of Healthcare Administrative Management.
B. There shall be a right to temporarily, as needed, increase the number of Directors by a majority vote of the Executive Committee. These temporary Board appointments shall not exceed the normal two (2) year term of an elected Board Member.
C. Each Director shall be elected to serve his/her term of office and/or until his/her successor is elected by the membership.

Article VI
Power and Duties of the Executive Committee

Section I – Executive Committee

A. The President shall preside at all general membership meetings of the Chapter and at meetings of the Executive Committee. He / She shall be an official member of all Committees, standing and/or special. He / She shall call meetings, issue executive policy and provide leadership to the members of the Chapter. He / She shall consult with the Executive Committee and keep them fully informed so all programs and activities of the Chapter may be coordinated. He / She shall strive to guide the Chapter to accomplish all objectives outlined in the Chapter's By-Laws.
B. The Vice-President shall perform all the duties of the President in the President’s absence. He / She is responsible for assisting in assembling the information for the Chapter Excellence Application submission and for informing the Executive Committee of the ongoing status of the Chapter.
C. The Secretary shall attend all sessions of the Board of Directors and Executive Committee and all general membership meetings and act as clerk thereof. He / She shall give notice of all board meetings as required by these By-Laws and shall perform such other duties as may be prescribed by the Executive Committee, Board of Directors or the President.
D. The Treasurer shall be responsible for all monies of the Chapter and for the disbursement of these monies. He / She shall receive and acknowledge all monies due and payable to the Chapter. He / She shall deposit all monies in an account in the name of the Chapter in a local bank approved by the Executive Committee. He / She may reimburse expenses for business of the Chapter as authorized by the Executive Committee.

Section II - Board of Directors

A. There shall be six (6) members of the Board of Directors who shall be elected at the Chapter’s annual meeting or by ballot. It shall be the duty of each Director to attend all Executive Committee meetings, to promote and encourage an increase in membership and to help in the development of the Chapter.

Section III - Term of Office

A. Each of the Executive Officers shall be elected bi-annually. The term of office shall commence January 1. Each of the elected Officers shall be elected for and serve a term of two (2) years and may serve two (2) consecutive terms in the same office.
B. An Executive Officer may serve for more than one (1) consecutive term, but not more than two (2) consecutive terms in the same office.
C. Each member of the Board of Directors shall be elected for and serve a term of two (2) years. An individual member may serve up to two (2) consecutive terms in the same office. Terms of office will alternate so that three (3) members shall be elected each year. The term of office shall commence January 1st.
D. Each Officer or Director shall remain in his/her elected position for the designated time unless he / she shall cease to qualify of his/her position or he / she is deemed no longer a member in good standing by the Executive Committee.
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Section IV - Executive Committee Vacancies

A. If any member of the Executive Committee shall, for any reason, vacate his/her office, the President shall appoint a member in good standing to fill the unexpired term of that position.

B. If the immediate Past-President cannot serve as Chairperson of the Board of Directors, the President shall appoint another Past-President to serve the term as Chairperson of the Board of Directors.

Section I - Nominating Committee

A. The President shall appoint up to three (3) members in good standing of the Chapter to act as the Nominating Committee.

B. The Nominating Committee shall nominate a slate of candidates for election. These candidates will be nominated for the positions of President, Vice President, Secretary, Treasurer, and three (3) of the six members of the Board of Directors. These positions are to serve two-year terms. In off-year elections, the Nominating Committee will present another slate of candidates to fill the other three (3) Board of Director positions for two-year terms. All candidates shall be members in good standing of the national American Association of Healthcare Administrative Management.

C. The Nominating Committee shall prepare and mail ballots to the general membership for election. All members and associate members in good standing shall receive ballots.

D. Any voting member may write-in an eligible chapter member for election to any office listed on the ballot.

Section II - Membership Committee

A. The Membership Committee shall consist of a Chairperson, appointed by the President, and up to three (3) members in good standing, which shall be appointed by the Chairperson of the Committee.

B. It shall be the purpose of the Membership Committee to report all matters relating to the membership of the Chapter and to promote the increase of membership of the Chapter and in the American Association of Healthcare Administrative Management.

C. The Membership Committee shall be responsible for processing the applications of new associate members and for notifying associate members of their yearly dues to renew membership.

Section III - Education Committee

A. The Education Committee shall consist of a Chairperson, appointed by the President, and up to three (3) members in good standing, which shall be appointed by the Chairperson of the Committee.

B. It shall be the purpose of the Education Committee to develop and recommend to the Executive Committee all programs and/or outlines for workshops, institutes and seminars in accordance with the goals of the Chapter and the American Association of Healthcare Administrative Management.

Section IV - Publication Committee

A. The Publication committee shall consist of a Chairperson appointed by the President, and such other members in good standing as the Chairperson of the Committee shall appoint to assist him/her.

B. It shall be the purpose of the Publication Committee to assist all other Committees, including the Executive Committee, in developing and distributing all literature pertaining to activities of the Chapter and the American Association of Healthcare Administrative Management.
Section VI - Other Committees or Assignments

A. The President and the Executive Committee, during their term of office, shall have authority to appoint special committees relative to the objectives of the Chapter and the American Association of Healthcare Administrative Management.

B. The President and the Executive Committee, during their term in office shall have the authority to assign special tasks to members in good standing for appropriate study and/or such action.

C. Subject to the Chapter’s By-Laws, the President shall have the authority to make appointments to all Committees.

D. The term of all Committee members shall expire at the end of the calendar year unless otherwise provided for by direction of the Executive Committee.

E. Associate members may be appointed to a Committee by the President and/or the Executive Committee, but may not be the Chairperson of said Committee.

Add elements of each committee not listed above and also information from the ways and means committee.

Article VIII
Amendments

The By-Laws of the Chapter may be changed, amended or repealed by a two-thirds (2/3) majority of the voting members at the annual meeting, by ballot, or during any special meeting called for that purpose.
Writers Needed

Do you like to write? Do you have an interest or area of expertise?

Several times a year, the AAHAM MountainWest Chapter publishes

“The Summit”

We need to hear from our members!

Topics could include healthcare reform, registration or billing practices, audit advice, creating a better work environment, increasing productivity and job satisfaction, humor in the workplace, or even about what being a member of AAHAM means to you.

PUBLISHING IN THIS NEWSLETTER WILL BE REWARDING!

Please send your articles to erin.selin@imail.org or call (801) 442-1339 for more information.

2016 Board of Directors

Erin Selin, CRCE-I CCT
Board Chairman
(801-442-1339
erin.selin@imail.org

Shauna Wardrop, CRCE-I
President
(801) 918-6408
swardrop@cardonoutreach.com

Katie Harwood
Treasurer / Website
(801) 587-6655
katie.harwood@hsc.utah.edu

Edna Flores
Secretary / Community Benefit Chair
(801) 442-8508
edna.flores@imail.org

Nicole Cole
Vice President
(801) 442-8502
nicole.cole@imail.org

Amy Mitchell, CRCE-I
Voting Board
(801) 587-6486
amy.mitchell@hsc.utah.edu

Cody Thornock, CRCE-I
Voting Board / Legislative Chair / Website
(801) 387-6439
cody.thornock@imail.org

Karin Pruett
Voting Board / Certification Chair / Social Media
(801) 387-6435
karin.pruett@imail.org

Kelly Howard
Voting Board / Corporate Partners
(801) 442-1425
kelly.howard@imail.org

Matthew “Alex” Yei
Voting Board / Education Chair
(801) 387-6417
matt.yei@imail.org

Teresa Rivera
Voting Board / Education Committee
(801) 446-7705 ext. 214
trivera@uhin.org

Kimberly Scott
Member Chair / Membership
(435) 688-4137
kimberly.scott@imail.org

Marie Diamond
Member Chair / Newsletter
(801) 442/1419
marie.diamond@imail.org

THE SUMMIT - Spring 2016