Arkansas Chapter Spring 2017 Annual Conference

Wednesday, April 19, 2017

9:00 am – 4:00 pm  Golf Outing – Glenwood Country Club (Separate sign up)

5:00 pm  HFMA Committee meetings – Oaklawn Room Embassy Suites

5:30 pm  HFMA Board and Committee Chair Meeting – Oaklawn Room

6:30 pm – 7:30 pm  Networking Opportunities Sponsored by Corporate Sponsors – Grand Salon

Thursday, April 20, 2017

7:30 – 8:00 am  Registration – Convention Center Horner Hall Plaza Lobby

8:00 – 8:15 am  Welcome & Announcements – Brian Fowler, HFMA President – Horner

Keynote Speakers

Joint Session – Convention Center Horner Hall

8:15 – 9:30 am | Course SP1701
Federal and State Government Relations Update
Bo Ryall, CEO, Arkansas Hospital Association*
Megan Cundari, Senior Associate Director, Federal Relations, American Hospital Association*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: With a new presidential administration, there will be many regulatory and legislative changes on the federal level. These changes will involve may involve repeal of the Affordable Care Act and the insurance coverage of many people nationwide and in Arkansas. The speakers will outline these changes from the federal level and the effects of those changes on the state of Arkansas. Also, the speakers will provide information concerning the Arkansas legislative session and the impact on new laws and hospitals.

Learning objectives: After this presentation, participants will be
• Informed of changes implemented by a new presidential administration.
• Instructed on ways to effect the legislation being considered by Congress to repeal and replace the Affordable Care Act.
• Updated on laws enacted by the Arkansas General Assembly.
• Educated on new Medicaid policies being implemented in Arkansas.

9:30 – 9:45 am  Break with Exhibitors – Convention Center Plaza Lobby
9:45 – 11:00 am | Course SP1702

HFMA National Update: Thrive
*Tammie Galindez, AVP, Value Based Care Solutions, National Director, HFM, Conifer Health Solutions*

CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

**Program Content:** Healthcare finance professionals today face considerable challenges, from new payment models to innovation to consumerism. Rather than looking at such challenges as obstacles, healthcare leaders can choose to view them as opportunities to learn, grow, and leverage their skills to improve the health of their communities. To that end, this presentation will focus on current challenges and the opportunities they offer to truly thrive—on the personal, professional, and organizational levels.

**Learning objectives:** After this presentation, participants will be able to

- Describe current challenges and opportunities facing healthcare finance professionals and other healthcare leaders.
- Identify HFMA resources to support chapters and healthcare stakeholders in their efforts to meet challenges and take advantage of opportunities.
- Discuss how a commitment to thrive can help individuals meet their personal and professional goals.

11:00 am – 1:00 pm   Lunch, Installation of Officers, Presentation of Awards & Trade Show
Convention Center Horner Hall & Plaza Lobby

1:00 – 2:15 pm | Course SP1703

Cybersecurity Best Practices and Privacy Rules
*Cindy Boyle, CPA, CIA, CITP, CISA, Partner, BKD, LLP*
*Craig Lair, Managing Shareholder, Rose Law Firm*

CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

**Program Content:** The presenters will cover 10 cost effective strategies for risk reduction that you can implement as well as relevant privacy rules for the Healthcare industry.

**Learning objectives:** After this presentation, participants will be able to

- Understand a few key types of cyber attacks.
- Identify some good questions to ask their IT departments.

1:00 – 2:15 pm | Course SP1704

Revenue Cycle of the Future
*Julie Kay, Vice President, Revenue Cycle Services, Cerner Corporation*

CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None
Program Content: What is the future of Revenue Cycle? Will bundled payments replace FFS? Will denials matter? Will we need claim forms? How do we engage the patient? Health care reform no doubt has impacted how we do business. Expansion and the federal health care exchange have certainly increased “eligibility” and likewise, we have experienced payment cuts and larger out-of-pocket patient liabilities. To withstand this tsunami of change we have to be prepared to improve performance and efficiency throughout the revenue cycle. Providers today must be more innovative in their approach to care, just as we as financial leaders must be innovative in our approach to a clinically integrated revenue cycle. It’s our responsibility to help care teams understand that in this new era of health care, each clinical action results in a financial transaction, and learn together, how we can realize the full value of each.

Learning objectives: After this presentation, participants will be able to
- Understand the numerous changes that will affect the revenue cycle of the future.
- Begin to formulate a plan to address future changes.
- Garner ideas and solutions from networking with colleagues and HFMA members.

2:15 – 2:30 pm  Break with Exhibitors – Plaza Lobby

2:30 – 3:45 pm | Course SP1705
Broadband Technology: Why and How
Hunter Babin, President, Telconnections, Inc*
Edward Anderson, CFO, Johnson Regional Medical Center*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: The presentation covers three main areas: 1) the background of broadband technology and its impact; 2) the regulatory environment by which federal subsidies have evolved; 3) the two main federal programs available to provide funds for rural hospitals, rural skilled nursing facilities, and urban institutions that support rural medical facilities. Presentation will also cover the basic steps on how to apply for federal funds including some basic determination of eligibility. The presentation will provide detail of the Federal Communications Commission Universal Fund as administered by the Universal Services Access Corp. This will include information about the program of which $400 million is allocated for rural medical. The presentation will discuss the eligibility requirements to apply for and receive the federal USAC funds. We will also discuss the two most common programs available for rural hospitals or consortia of urban and rural hospitals that are primarily rural. We will discuss the four steps required to apply for these funds. The presentation will conclude with a case study from Johnson Regional Medical Center in Clarksville, AR. Edward Anderson, the CFO of JRMC will review information on the program as well as challenges to consider before committing to the process.

Learning objectives: After this presentation, participants will be able to
- Understand the context of broadband technology.
- Understand the regulatory environment for rural broadband subsidies.
- Understand the two main federal programs/grants for rural medical broadband.
- Understand the basic steps to apply for federal monies for rural broadband.

2:30 – 3:45 pm | Course SP1706
Engaging New Consumer Patients Through Retail Medicine
Kitty Cawiezell, Executive Vice President, MDsave*
Mark Lamb, Regional Director - MDsave*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: This presentation will analyze how the consumer healthcare patient will affect the healthcare market going forward. How does episode of care pricing affect the high deductible/cash pay patients utilization of healthcare services? What happens when a facility decides to be completely transparent in pricing with patient volume, revenue, and managed care contracts? What types of facilities are currently working with the consumer driven patient? How does an open healthcare marketplace affect healthcare and the patient’s quest for value?
Learning objectives: After this presentation, participants will learn

- How and what happens with open healthcare marketplaces and the pros and cons to consumer focused healthcare.
- How their system can capture the high deductible and self-pay patients as well as their payment upfront.
- How they can compete in a new consumer driven healthcare model for their share of the cash pay patient.
- How transparency can put an end to patient confrontation at point of registration over patient payment.
- How an open marketplace can end same day outpatient surgery cancellations.

3:45 – 4:00 pm  
Break with Exhibitors – Plaza Lobby

4:00 – 5:15 pm | Course SP1707  
Crossing the Ethical Boundary: Insights From Fraud Investigators  
*Angela R. Morelock, CPA, CFE, CFF, ABV, Managing Partner, BKD LLP*  
*Lindsay Kemper Ewert, CFE, Managing Consultant, BKD LLP*

CPE Credits: 1.5 | CPE Type: Behavioral Ethics | Level: Basic | Prerequisites: None

Program Content: This presentation will share insights from the trenches into the world of internal embezzlement and financial statement fraud based on our experiences investigating white-collar crime. Using real case studies of those who have crossed the ethical boundary, we will explore some root causes as well as prevention tips. Using real documents from actual fraud cases, we will focus on the most common issues we investigate in the health care industry and explore the people who perpetrate these issues.

Learning objectives: After this presentation, participants will be able to

- Identify key red flags associated with embezzlement and fraud.
- Understand the methods used to embezzle from and defraud health care organizations, in addition to methods used to manipulate financial statements.
- Identify tips to detect financial statement fraud and what the next steps are once fraud is detected.
- Understand the different motivations of financial statement fraud perpetrators.
- Obtain tips to help protect their organizations from embezzlement and fraud.

4:00 – 5:15 pm | Course SP1708  
5 Things Medicare Advantage Plans don’t want you to know  
*Ed Norwood, President, ERN/The National Council of Reimbursement Advocacy (NCRA)*

CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: A comprehensive program on administrative laws that relate to timely reimbursement and prevent improper denials. Increase your proficiency in Medicare Advantage regulations that prohibit Medicare from engaging in unfair payment patterns and claim settlement practices.

Learning objectives: After this presentation, participants will learn

- How to request internal CMS prompt payment policies, and Standard Operating Procedures under the Freedom of Information Act.
- How Federal laws that statutorily deemed post stabilization services are authorized when Medicare Advantage Plans (MAO) fail to respond to authorization requests timely.
- How Federal timeframes MAO emergency reimbursement and appeals.
- How to overcome Observation vs. Inpatient and Readmission Denials.

5:00 – 6:30 pm  
Networking Opportunities Sponsored by Corporate Sponsors – Horner
8:00-8:30 am  Registration – Embassy Suites Grand Salon

8:30 – 9:45 am | Course SP1709
Update on MACRA implementation and similar value based payment initiatives
Steve Spaulding, Executive Vice President & Chief Health Management Officer, Arkansas Blue Cross Blue Shield*
CPE Credits: 1.5 | CPE Type: Specialized Knowledge & Application | Level: Basic | Prerequisites: None

Program Content: This presentation will provide an update on the implementation of MACRA that began on January 1, 2017. It will also include information and updates on value based compensation programs being considered by ABCBS and other payers, and the reason that stakeholders should be planning for the move away from fee for service compensation.

Learning objectives: After this presentation, participants will be able to
- Understand the purpose and expectations of MACRA, and a view on how this may or may not be impacted by the change of administration in Washington DC
- Understand new compensation and incentive programs being evaluated for potential implementation by payers. These new programs are focusing on reducing the value of fee for service reimbursement in favor of incentives that promote more efficient use of resources, and elimination of waste and duplication that are not the focus of fee for service arrangements.

9:45 – 10:15 am  Break

10:15 am – 11:30 am | Course SP1710
Using the 2017 OIG Work Plan to Protect Your Revenue Cycle
Tonya Gierke, Attorney, Friday, Eldredge & Clark*
CPE Credits: 1.5 | CPE Type: Regulatory Ethics | Level: Basic | Prerequisites: None

Program Content: This presentation will cover the role of the OIG in combatting waste, fraud and abuse in healthcare, an overview of the 2017 OIG Work Plan with a particular focus on Medicare and Medicaid, and how to use the Work Plan as a guide to identify potential target areas for denials and protect your current revenue stream.

Learning objectives: After this presentation, participants will be able to
- Understand what the OIG Work Plan is and how to access it.
- Understand how to utilize the OIG Work Plan in planning audit activities and assessing potential vulnerabilities in the current revenue stream.
About the Speakers:

**Bo Ryall** is president and CEO of the Arkansas Hospital Association. He has been with the Association since 2005 and was named president in 2010. He holds a bachelor’s degree from the University of Arkansas at Fayetteville and a master’s degree in public administration from the University of Arkansas at Little Rock. Bo also served as the chief lobbyist on the state level for Arkansas hospitals and was previously executive director of the HomeCare Association of Arkansas. He currently serves as the chairman of the Health Care Providers Forum, is a member of the Health Care Industry Council of the Federal Reserve Bank of St. Louis, is an Arkansas Regional Organ Recovery Agency board member, and is a past-president of the Arkansas Society of Association Executives.

**Megan Cundari** is the senior associate director, federal relations for the American Hospital Association (AHA). She has been a member of the Federal Relations department at the AHA since 2001 and has been lobbying Congress for the last 12 years. In addition to advocating the full range of AHA’s legislative and regulatory agenda, her specific issue areas include Medicaid and the Children’s Health Insurance Program (CHIP). Prior to her work at the AHA, she spent five years in campaign politics, working for a Chicago-based political consulting firm. She graduated from the University of Illinois, Urbana-Champaign, where she majored in political science and economics.

**Tammie Galindez** is Associate Vice President, Practice Management, Value Based Care, for Conifer Health Systems in Frisco, Texas. She also serves as an elected director on HFMA's National Board of Directors. A member of HFMA since 2002, Ms. Galindez has service the national association as a member of the National Advisory Council. At the chapter level, she has served as the South Texas Chapter president and as chair and member of various committees for the Gulf Coast, First Illinois, and South Texas Chapters. She is also a recipient of HFMA's Medal of Honor as well as the Follmer Bronze, Reeves Silver and Muncie Gold merit awards. Ms. Galindez has worked for nearly 20 years to help healthcare systems improve the health of their revenue cycle and aid in their transition to value-based reimbursement. She holds a bachelor's degree of business administration in finance from Florida Atlantic University and is a candidate at George Washington University for a master's in health administration.

**Cindy Boyle** is a partner with BKD accounting and consulting firm. Her national practice group, IT Risk Services, provides IT Security services, Cyber Security consulting, Service Organization Control examinations and other IT and internal control assessments. She obtained her accounting degree from Arkansas State University in Jonesboro. Cindy is a CPA, Certified Internal Audit (CIA), Certified Information Technology Professional (CITP) and Certified Information Systems Auditor (CISA).

**Craig Lair** is a Member and the Managing Shareholder of Rose Law Firm, a Professional Association. His practice involves advanced tax issues, including federal and state tax controversy, corporate transactions, estate planning, and business planning. He earned dual graduate degrees of an M.A. in Economics from Duke University and, a J.D. with High Honors from Duke University. Mr. Lair obtained a B.B.A. degree in Accounting, summa cum laude from Harding University. Craig is a certified public accountant (CPA) – inactive status and an adjunct professor of law at the University of Arkansas at Little Rock Law School.

**Julie Kay** is the Vice President of Cerner Revenue Cycle Services and plays a key role in business development by assessing client needs and crafting strategies to improve revenue cycle operations. She impacts Cerner and its clients by translating market dynamics, identifying appropriate action and helping health care organizations of all sizes realize results. Prior to joining Cerner, Julie spent over 27 years in revenue cycle operations on the acute and ambulatory spaces, working with and supporting both investor owned and not-for-profit entities. Her tenure also includes roles with revenue cycle consulting and service providers. Julie is an accomplished executive with strengths in operations, strategic planning, financial management, and organizational leadership. Since 2001, Julie has been an active member of the Healthcare Financial Management Association (HFMA). She has participated in the American Health Lawyers Association, The Federation of American Healthcare Systems Finance Committee and served on the National Uniform Billing Committee. Julie is a frequent speaker at national industry events and has been published in HFM, The Journal of Healthcare Administrative Management, Healthcare Management Technology and AHIMA Journal.

**Hunter Babin** is the owner and founder of Telconnections, Inc. Telconnections is a client-focused technology and telecom advisory firm founded in 2003. Hunter services as the principal consultant and offers independent and objective consulting services with no agent relationships with telecom carriers or equipment providers. Hunter’s primary focus is on securing federal subsidies for rural broadband for medical institutions and municipalities, telecom service and cost reduction audits, telecom equipment selection and project management. Hunter previously served in management positions with two Fortune 500 companies including Cisco Systems and is experienced in telecom and information technology. Recent projects have included the securing of federal funds for two state-wide mental health organizations and for a regional medical center, negotiating a ten-fold increase in internet capacity for a rural hospital while reducing costs, implementing telecom and web services for organizations and delivering other cost-saving measures. Hunter has a Bachelor of Arts and a Master of Public Administration from the University of Arkansas at Fayetteville.
Edward Anderson has been in senior management for the past 27 years. Mr. Anderson has been Interim CEO/CFO of Atoka Memorial Hospital in Atoka, Oklahoma and Administrator/CEO of Linden Municipal Hospital in Linden, Texas. Mr. Anderson served as Assistant Administrator/CFO of Hopkins County Memorial Hospital in Sulphur Springs, Texas; Administrator/CFO of BMA of Greenville in Greenville, South Carolina; Assistant Controller of Colonial Hills Hospital in San Antonio, and Management Analyst at Bethany Medical Center in Kansas City. He is a member of the state health insurance plan management steering committee, utility commissioner for Clarksville Light and Water, past chairman of the River Valley United Way, past chairman of the Clarksville Chamber of Commerce, and past board member of Arkansas HFMA. Edward holds an MBA from the University of Houston at Clear Lake, And a B.S.B.A. in management and accounting from Missouri Wester State University.

Kitty Cawiezell has created programs to directly import consumer goods from China for top US retailers: Target, Kroger, Wal-Mart, Meijer’s, Dollar General, Family Dollar, and Dollar Tree. She has developed powerhouse brands in the US top manufacturers including Quaker, Ralston, and Coca Cola and understands retail operations from every aspect. Ms. Cawiezell chose to bring her expertise into healthcare, and has worked with leading companies such as Astra Zeneca and Glaxo Smith Kline. She has witnessed first hand the continual decline of reimbursement for medical services by commercial insurance, as well as Medicare. Partnering her experience to drive business in the consumer markets with her big “pharma” experience; Ms. Cawiezell is dedicated to helping hospital systems transform themselves from a fee for service mentality to a friendly consumer retail environment. Her experience enables her to set strategies to capture cash revenues, as the payors continue to narrow networks and deductibles continue to increase. Ms. Cawiezell has a BA in Communications coupled with an education certificate. She attended the University of Central Iowa on a full academic scholarship. She was recognized as a top scholar and was an editor for the University Newspaper.

Mark Lamb's healthcare industry career spans 12 years across the pharmaceutical, medical device and health tech sectors. He had a variety of assignments with Forest Pharmaceuticals before transitioning to a strategic position with Medtronic within their diagnostic and patient monitoring division. He has garnered significant sales, business development and operational expertise which has provided him a broad foundational grasp of the complex and evolving dynamics of the healthcare market place. Mark joined MDSave 18 months ago, as an Implementation Manager. He was promoted to Regional Director shortly thereafter and currently manages a team of 4 Account Managers across 8 states in the Southeast and Mid-Atlantic. He is responsible for business development, including identifying prospective independent hospital and IDN clients, negotiating contracts with the C-Suite and overseeing the implementation of the MDSave system. Mark is a self-proclaimed patient advocate. He recognizes that in the wake of the ACA there are specific demographic segments representing patients who had never faced challenges of either healthcare access or securing affordable medical treatment. He believes passionately in the value proposition represented by MDSave to their provider partners and patients.

Angela Morelock has more than 20 years of experience and leads BKD’s forensic accounting and investigations team providing fraud investigation and prevention, complex litigation support and forensic accounting services for a variety of business clients. She regularly provides consulting and expert witness assistance to attorneys in a variety of litigation matters. Angela and her team have investigated some of the largest fraud cases in the U.S. Her clients include the FBI, United States Department of Justice and Offices of the United States Attorney. Health care has been a key industry focus throughout Angela’s career, and she has performed numerous fraud investigation, fraud prevention, valuation and operational consulting project for health care organizations including hospitals, home health agencies, community health centers, long-term care facilities and physician practices. As a Certified Fraud Examiner (CFE) and Certified in Financial Forensics (CFF), Angela is responsible for resolving a wide range of allegations of fraud and white-collar crime. Angela is a Certified Public Accountant (CPA) and also has an extensive background in business valuation, and earned the AICPA’s accredited in business valuation (ABV) designation.

Lindsay Kempner Ewert is a managing consultant in BKD’s Forensics & Valuation Services (FVS) division and leads the Dallas office FVS practice. She has more than nine years of experience providing business valuation, forensic accounting, fraud investigation/detection, dispute analysis and litigation support services in a variety of industries, including health care, manufacturing/distribution and oil and gas. As a Certified Fraud Examiner (CFE), she has conducted forensic and fraud investigations involving billing schemes, FCPA/Anti-Bribery matters, inappropriate use of corporate assets and chief executives’ misconduct. She has performed business valuations for the purposes of dispute resolution involving physician practices and back office practice management companies. Lindsay has also worked with and helped various clients in fraud detection and prevention through internal controls analysis, use of technology/software and conducting thorough interviews. She performs fraud risk assessments in order to determine her clients’ susceptibility to various types of fraud and provide improvement plans.
Ed Norwood is President of ERN/The National Council of Reimbursement Advocacy. He has been recognized as a unique and distinctive authority in transitional leadership and administrative laws that govern the healthcare delivery process. Few have blazed the trail of success in the same inimitable style as Ed. With an entrepreneurial story which is both entertaining and inspiring, Ed has a seasoned, realistic perspective that inspires people: “It’s never too late to become what they might have been” (Eliot.) Multi-faceted, with a creative ability to inspire his audience, Ed combines his healthcare influence and expertise with his passion to help providers advocate for medically appropriate healthcare pursuant to federal and state laws.

Steve Spaulding has executive responsibility for all matters that involve working with the provider community and is the executive lead for driving care transformation for the enterprise. His responsibilities include alternative payment initiatives, primary care initiatives, commercial pharmacy, enterprise business intelligence, provider compensation, provider network operations, medical management and clinical affairs activities, and Health Advantage. Spaulding joined Arkansas Blue Cross and Blue Shield in 1983 as a group marketing representative and was regional executive of the Hot Springs office from 1995-2002. He was named vice president of internal operations in 2003 and was senior vice president of enterprise networks from 2009 to 2016. In January, 2017, he was promoted to Executive Vice President and Chief Health Management Officer. Spaulding has a bachelor’s degree in business administration from Alma College in Alma, Mich., and attended the University of Michigan Ross School of Business Executive Education Program. He is a certified health consultant and chartered life underwriter.

Tonya S. Gierke joined Friday, Eldredge & Clark in August of 2016 after serving for over a decade as a Corporate Compliance Officer, Risk Manager, and Privacy Officer in a hospital setting. Tonya has also practiced law in the area of medical malpractice. In addition to having experience in healthcare compliance and legal matters, Tonya’s nursing career includes experience in pediatric oncology, emergency department, and flight nursing. Her practice area covers healthcare law including Stark, Anti-kickback, physician and hospital contracting, compliance and other regulatory matters.
HOTEL RESERVATIONS

Please make your own reservations with the Embassy Suites in Hot Springs (1-501-321-4403). A block of rooms has been reserved, so please mention that you are with AR HFMA (Group code HFM) to receive the rate of $136 for a single & $146 for double room. **Embassy Suites will accept reservations until March 19, 2017. After this date reservations will be taken on a space available basis.** Please make your reservations as soon as possible. Reservations may be made online at [http://embassysuites.hilton.com/en/es/groups/personalized/H/HOTESES-HFM-20170418/index.jhtml?WT.mc_id=POG](http://embassysuites.hilton.com/en/es/groups/personalized/H/HOTESES-HFM-20170418/index.jhtml?WT.mc_id=POG)

EDUCATIONAL CREDITS

Arkansas Chapter HFMA is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: [www.learningmarket.org](http://www.learningmarket.org).

Arkansas Chapter HFMA is registered with the Texas State Board of Public Accountancy as a CPE sponsor. This registration does not constitute an endorsement by the Board as to the quality of our CPE program.

(Sponsor number 009840)

*Prerequisites and advance preparation are not required unless otherwise indicated.*

*Depending on the track the participant attends, a maximum of 10.5 CPE credits is available.*

All courses are instruction method GROUP LIVE.

CPE Type is classified based on NASBA definitions. For the 20 credits (50%) rule by the AR State Board of Public Accountancy, the following CPE types qualify: Accounting, Accounting (Governmental), Auditing, Auditing (Governmental), Regulatory Ethics, Behavioral Ethics & Taxes. Chapter leadership is aware of these changes and committed to helping our CPA members meet the requirement each year by providing as many hours as possible in the specific categories listed above at each of our meetings, including annual Tri-State meeting and December CPA Focused meeting.

CPE SIGN-IN AND CERTIFICATES

To receive CPE credits, you must sign in for each individual session you attend. Sign-in registers are provided for those individuals who sign and check that they need a CPE certificate. Sign-in registers will be located in each session room. If your name is not printed on the register, be sure to print your name legibly on the one of the blank lines at the end and sign next to your name. CPE Certificates will be emailed to each participant following the meeting. Keep a copy of this program along with your certificate for your records.

SPEAKER PRESENTATION HANDOUTS

Handouts will be made available electronically 3 days prior to the meeting. All attendees will receive an email notifying them that the handouts are available on the Arkansas HFMA website at arkansashfma.org so you can bring to the meeting if you choose.

REGISTRATION DISCOUNTS

Multiple registrations from the same organization are eligible for a discount. The 1st and 2nd entire meeting registrants pay full price, then the 3rd and 4th registrants pay 50% of the registration fee and the 5th and any additional registrants pay 25% of the registration fee. Multiple registrants are encouraged to register at the same time to ensure they receive the discounts. Multiple registrations discounts do not apply to sponsor comps or one day registrations.

Any Past President of the Arkansas Chapter will be a discounted registration fee of $75. This is being done both as a thank you for your tremendous efforts in past service to the Chapter and to encourage your continued attendance to meetings. If you are registering as part of a multi-attendee entity the discount will be applied to the last person registered.

PARKING/SHUTTLE FOR THIS EVENT

The Embassy Suites offers open parking for overnight guests. They do offer complimentary shuttle to the Convention Center for attendees who do not wish to walk or drive over to the Convention Center. There is available parking on the street and across from the Convention Center.

BUSINESS CASUAL DRESS IS APPROPRIATE FOR THE MEETINGS & EVENTS.
The Corporate Sponsorship Program is designed to enhance the quality of the Chapter programs, newsletters, and other activities. Organizations can strengthen the Chapter by becoming a Corporate Sponsor.

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The SSI Group, Inc.
VHC
Xtend Healthcare
ARKANSAS CHAPTER HFMA SPRING 2017 CONFERENCE REGISTRATION

PLEASE REGISTER ON-LINE (Credit Card, Mail Check & Sponsor COMP options)
Go to: www.arkansashfma.org then click on Education & Events then Calendar of Events
OR go to: http://events.constantcontact.com/register/event?llr=fruupihab&oeidk=a07ec83pn0g57f7ec58

*Registration Fee: $125  HFMA Member (before 4/14)*
     $200  Non-HFMA Member (before 4/14)*
     $75   Past AR President (before 4/14)*

*All Registrations after the Friday before the meeting will be an additional $25 late registration fee when you register at the door.

Thursday or Friday only registration is available. Call Tami Hill at 501-316-1229 for pricing for members and nonmembers.

*If taking advantage of discounts referenced in brochure, please follow these instructions below:

Multiple Registrations from Same Organization:
1st & 2nd entire meeting attendee – full price
3rd & 4th entire meeting attendee – 50% off
5th & over entire meeting attendee – 75% off

Submit AR HFMA spreadsheet template with attendee information to arhfma@sbcglobal.net. Submit a check or credit card information below for the total amount of all attendees. Contact Tami Hill to obtain the spreadsheet at arhfma@sbcglobal.net or 501-316-1229.

MAIL check payable to: HFMA Arkansas Chapter
Attn: Tami J. Hill, Registrar
419 Natural Resources Drive
Little Rock, AR 72205

OR

Please charge my credit card for discounted registrations only: (email to arhfma@sbcglobal.net)

Name on Card_________________________ Card #___________________________
Exp Date____________ CVV Code_____________ Zip Code of Card____________
Card Type____________ Signature________________________________________
Email address for CC receipt______________________________________________

REFUNDS AND CANCELLATIONS

If cancellations are received after April 14, 2017, only 50% of the registration fee is refundable or still payable. Registrants who do not cancel or cancel day of or after the meeting has started (Wednesday) or fail to attend must pay the entire fee. Substitutions, however, are permitted. Registration forms and cancellations must be emailed. Phone and voicemail are not valid forms of communication. For more information regarding administrative policies such as complaint and refund, please contact Tami Hill at 501-316-1229 or arhfma@sbcglobal.net.