

Summer 2005

# Bama Chatter

The Newsletter of the Alabama Chapter  
Healthcare Financial Management Association

## See You At The Beach

If you aren't packing yet for the Alabama Chapter's Annual Institute, you need to start! We will again be meeting at the beautiful Sandestin Beach Hilton Golf and Tennis Resort in Sandestin, Florida from **Monday June 6** through **Thursday June 9, 2005**. It's going to be a GREAT meeting!

Lynn Brewer - *Enron Whistle Blower* - is the opening keynote on Tuesday. She is a former Enron executive and author of *House of Cards:*

*Confessions of an Enron Executive*, a riveting account of her career at Enron and her decision to blow the whistle on the illegal activity within the company.



Winston Groom - author of *Forrest Gump* will be the closing keynote on Thursday. He took the publishing world by storm when his novel flew to the top of *The New York Times* bestseller list and stayed there for 21 weeks. It has sold over 2.5 million copies in the United States alone on the heels of its blockbuster movie adaptation starring Tom Hanks. Attendees are invited to bring spouses, friends and/or family to hear him speak.

Dawn Walton has a great mix of exciting educational opportunities and entertainment for everyone planned, so don't miss it!

Although our room block has expired, you may call the resort at 1-800-367-1271 to check room availability. Please mention HFMA. Go online today at [www.alabamahfma.org](http://www.alabamahfma.org) and register.



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**hfma**

healthcare financial management association

**beyond  
the numbers**

**Alabama Chapter Website: [www.alabamahfma.org](http://www.alabamahfma.org)**

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Quarter page: \$100 per issue—Half page: \$175 per issue—Full page: \$300 per issue  
*Special discounts for long-term arrangements. Contact the editor for details.*

Please consult with the editor for the best way to send your ad electronically. Deadline for publication is shown below. *Bama Chatter* is published quarterly and is posted on the Chapter website at [alabamahfma.org](http://alabamahfma.org) for approximately 650 members.

**Publication Schedule**

ISSUE	DEADLINE	ISSUE	DEADLINE
June (Summer)	May 20th	December (Winter)	November 20th
September (Fall)	August 20th	March (Spring)	February 20th

The statements and opinions appearing in articles are those of the authors and are not necessarily those of HFMA, the Alabama Chapter, or the editor. The editor strongly encourages submission of material for publication. Articles should be submitted to the editor by the 20th of the month preceding the month of publication. The editor reserves the right to edit materials and accept or reject contributions whether solicited or not. Readers are invited to comment on any of the published material. Letters to the editor must be signed and are subject to condensation and editing. All rights reserved.

# PRESIDENT'S MESSAGE

## *The End of the Year*

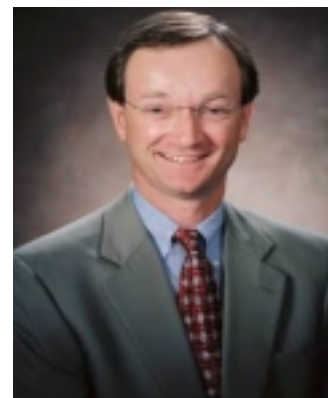
This is my final President's message for the June 2004 to May 2005 year for the Alabama Chapter. As I approach the end of my year as President, I have been told by many of you that the smile on my face has broadened. That smile seems to get bigger and bigger as I get closer and closer to having the title of Past President. I will not kid you; the job of President of such a successful chapter as ours can be difficult, especially as I juggle those duties with those of my paying job. However, I have thoroughly enjoyed this past year and the opportunity to serve the members of the Alabama Chapter as your President.

As difficult as the task of

President has been, it would be impossible without the hard work and dedication of the various officers, Board members, Vice Presidents and committee chairs. I would like to personally thank each and every one of you for taking an interest in the Alabama Chapter and for your efforts in assisting me to ensure the continued success of this great chapter.

Finally, I would like to wish my successor, Yolanda Rich, the best of luck as incoming President of this great chapter. I would also like to encourage all of the

members to support her as she leads the chapter over the next year and encourage all of you to get involved in the activities of



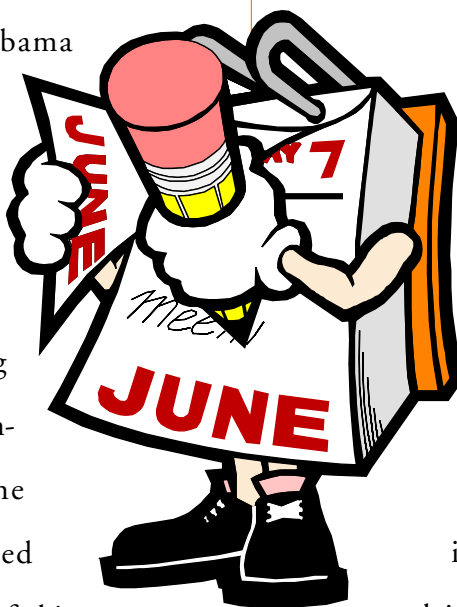
*Jon Kimsey, FHFMA, CPA  
President, Alabama Chapter HFMA*

the chapter. I would also like to thank my predecessor, Mitzi Winters.

Throughout my tenure in the officer rotation, she has held the position immediately in front of me. She has also served as a member of the Board of Directors and as Chair of the Technology Committee during my year as President. Her advice, counsel and, most important

of all, friendship has been instrumental in my role as a leader of this chapter.

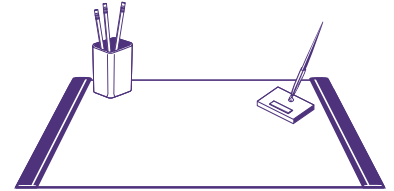
Jon Kimsey, FHFMA, CPA  
President (soon to be Past President)  
Alabama Chapter of HFMA





## FROM THE EDITOR'S DESK

by Vicki Parks, CHFP, CPA  
Publications Committee Chairperson



I am sad to say that this will be my last newsletter as the editor of the Bama Chatter. It has been a great year and I have learned a lot about our chapter. We had some wonderful

technical articles submitted to the Chatter over the last year and I want to thank each person that contributed. I know our members benefited from the wisdom that they were so willing to share. When you write articles for the Chatter, you not only earn points that apply towards your certification, but you also become eligible for a cash prize. The winners for the 2004/2005 year are:

**1<sup>st</sup> Place (\$100) Kenneth Tobias, PricewaterhouseCoopers, LLP — “FY 2005 Medicare Wage Index, Alabama Update”**

**2<sup>nd</sup> Place (\$50) Paul Graham, Baptist Health System, Inc.— “Regulations, Operational Issues & Politics, Outlook for 2005”**

**3<sup>rd</sup> Place –Tie (\$25) Kathleen Street, Children’s Health System — “HIPAA Security: The HIPAA Work Left to Do”**

**3<sup>rd</sup> Place –Tie (\$25) JC Rouse, Warren, Averett, Kimbrough and Marino, LLC — “Tax Preparation & Planning Made Simple”**

Thanks again to each of you for making this year a success. Have a great Summer!

**It's Not Too Late!!!  
Register TODAY!**

**HFMA's 2005**  
*Annual National Institute*  
June 26-30, 2005 • Las Vegas, Nevada

**H**HFMA's Annual National Institute (ANI) is being held June 26-30, 2005 in Las Vegas, Nevada. Come to Las Vegas and walk away with tools for your entire organization!

You'll hear from leading healthcare finance professionals who will give you the tools, practical solutions and approaches you need to achieve outstanding financial and operational results. You'll also find plenty of events for networking with your colleagues and sharing your experiences with other healthcare professionals. Remember, what happens in Vegas can improve your organization's performance!

ANI 2005 topic areas provide a wide range of ideas, tools and results for every facet of your organization. You'll go home with a comprehensive CD-ROM that contains handouts and tools from all six topic areas — that's complete information from 72 sessions! Print the Preview Brochure by going to [http://www.hfma.org/education/ani/finalbrochure\\_web.pdf](http://www.hfma.org/education/ani/finalbrochure_web.pdf) now!



# Moving Toward Excellence *In Patient Throughput*

by Jerry Smith, Director, Business Services and HIM  
St. Vincent's Hospital

## *Introduction*

"In the fall of 1991, the Andrea Gail left Gloucester, Massachusetts, and headed for the fishing grounds of the North Atlantic. Two weeks later, an event took place that had never occurred in recorded history. An unusually intense storm pattern catches some people unaware and puts them in mortal danger."<sup>1</sup> The event has come to be known as "The Perfect Storm" – a storm formed by a combination of escalating factors that became unmanageable due to its ferocity and intensity. The signs of a perfect storm are brewing in healthcare. An aging population of baby boomers, overcrowding in America's emergency rooms, homeland security issues, professional shortages, declining reimbursement, growing numbers of uninsured, hospitals operating in the red, hospital closings, healthcare consumerism, regulatory pressures, new standards, and patient admission diversions are all contributing factors to what the American Hospital Association calls a national crisis. Healthcare's "Perfect Storm" has been very evident at St. Vincent's Hospital in Birmingham, Alabama, as their struggle for increased capacity has made patient throughput a top priority. While nothing could be done to tame nature's fury, St. Vincent's is taking positive steps so that it will be one hospital that will not be capsized by the coming healthcare storm.

## *Background*

St. Vincent's, a voluntary non-profit, is part of Ascension Health. The hospital was founded in 1898 and was the first hospital to serve the Birmingham community. St. Vincent's is a comprehensive acute care hospital providing advanced services in cancer,

surgery, cardiology, and, women and children's care. The hospital had 20,292 patient discharges in Fiscal Year 2004 from a total of 292 staffed beds.

The St. Vincent's Throughput Committee was chartered in November of 2003 to tackle patient throughput challenges at St. Vincent's. Experiencing significant patient diversion hours in Critical Care, Med/Surg and ED, St. Vincent's diversion hours totaled 3,161 for the Fiscal Year ending 2004. And yet, admission requests continue to rise. The hospital is on track to grow admissions by 4% this year. Like many hospitals in the nation, St. Vincent's is facing a capacity crunch and patient diversion hours are a key symptom.<sup>2</sup> Capacity issues create a multitude of problems in addition to bed shortages including staff frustration and stress on safety and quality initiatives. Patient satisfaction also declined in 2003. In fact, most departments did not meet their patient satisfaction goals. Restoring high patient satisfaction and maintaining high quality and safety practices became important supporting initiatives of the Throughput Committee.

## *Project Goals*

The St. Vincent's Throughput Committee was chartered to implement process changes, technology solutions, and measurement instruments to improve enterprise patient throughput. The committee's goals were to provide patients with timely access to appropriate care, optimize patient flow, decrease patient diversion, improve patient satisfaction, improve the matching of staffing to demand, improve utilization of fiscal resources, and improve employee morale. In summary, the goal was to start the metamorphosis from consistent delays and gridlock to maximized efficiencies in St. Vincent's operations that would begin the path to providing a seamless patient experience.

## *Plan Development & Infrastructure Assessment*

The St. Vincent's Throughput Committee solution approach was based on exploring operations comprehensively and attacking the root of the problem. They did not want to put bandages on symptom areas. This was a revolutionary approach that came out of extensive research with the IHI,

Advisory Board, healthcare and general industry literature, and healthcare conferences. The committee attended throughput workshops held by the Health Care Advisory Board.

The first priority was to gain support across the hospital for moving toward throughput excellence. To gain enterprise support, the committee had to communicate in real-time when there were throughput issues, quantify the issues, and educate the entire staff to the importance of patient throughput improvement.

The immediate need to communicate in real-time across the enterprise when throughput issues arise caused an evaluation of St. Vincent's existing technology. In addition, the need for a real-time communications and process monitoring system was researched to address long-term process improvement plans. After evaluating several vendor systems that advertise patient flow, workflow, and capacity management solutions, the team decided that an adequate solution did not exist.

The decision was made to build a short-term primitive communication system using pop-up screens and mass paging. The long-term decision was made to contract with Awarix, a Birmingham-based healthcare technology company, to develop a comprehensive solution that would leverage existing systems and take advantage of RFID technologies to increase enterprise visibility. A single unit pilot program would allow the team to evaluate the Awarix solution as the foundation for future throughput improvements and process change sustainability.

In an effort to quantify the throughput problem, the committee placed a dollar estimate of gross revenue lost from patient diversion hours at \$20,231,393 for 2004.<sup>3</sup> This was communicated to the executive team and placed into the staff education program.

Educating the entire hospital about St Vincent's capacity crunch was the next priority. The commit-

tee created an online training program that explained the impact that throughput issues were having on patient experience. The training program focused not only on patient effects but the employee work environment and the hospital's bottom line. Key problem areas were afternoon admission gridlock, irregular admits, unplanned discharges, slow EVS bed turns, poor transporter response time, and slow response to ED transfer requests. The training program was mandatory for all staff.

### *Solution*

Seven Foundational Steps for Throughput Excellence were identified by St. Vincent's. The seven steps are as follows:

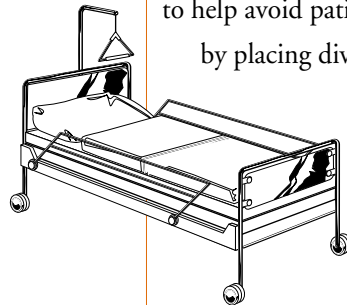
1. Communicate Real-time Bed Level Status Alerts
2. Maximize Resource Allocation: Staff and Equipment
3. Empower Bed Control
4. Improve Communication Channels Regarding Patient Status
5. Improve ED Admission and Patient Hand-Offs
6. Monitor and Report Throughput Metrics
7. Implement Communications and Process Monitoring Infrastructure\*

*\*The Throughput Committee contracted with a Birmingham based vendor called Awarix to create a solution that would accomplish their technology objectives.*

*The Awarix system leverages existing systems by using high visibility displays and RFID technology to create a real-time, reliable communications and reporting tool for throughput excellence.*

#### 1. Communicate Real-time Bed Level Status Alerts

A Bed Level Status communication program was designed to help avoid patient diversion by placing diversion



avoidance plans into action before gridlock occurs. The

Awarix solution provides a simple real-time model for communicating Bed Level Status. The Bed Controller simply clicks the appropriate level and the enterprise is notified real-time. In addition, changes in status and diversion hours can now be reported in real-time.

#### 2. Maximize Resource Allocation: Staff and Equipment

There are many occurrences at St. Vincent's where staffing does not match the demand. The national shortage of healthcare professionals has plagued several units within the St. Vincent's environment.

However, the decision was made to address transportation and its role in the discharge process. The staffing mix was balanced and all open positions were filled to meet the changes in focus for the department. The refocusing of central transportation was a fast way to help nurses. This was especially important for short staffed units.

Afternoon patient discharges were causing admission gridlock. More than 62% of patient discharges took place after 12:00 noon. Many of these were unplanned, adding to staff frustrations. These significant problems for throughput efficiency needed to be addressed.

Transportation of patient discharges was a problem for nursing personnel. More than half of all discharges were being handled by floor nurses (58%). The Throughput Committee implemented process changes to effectively shift 82% of the workload to Transportation Services.

### 3. Empower Bed Control

In 2002, the bed coordination function was the responsibility of Patient Access using non-clinical personnel. The Throughput Committee moved the function to Nurse Administration and then converted it to an RN position to help the communication process with patient placement. Bed control started off as a continuation of St. Vincent's historic bed coordination process that brokers patient bed demand with unit level nurse approval of bed placement. This process is phone intensive and time consuming for the unit manager, unit secretaries and the Bed Controller. Over the last six months, the competency and effectiveness of the role has grown and has been changed from one eight hour shift to two eight hour shifts.

The timeliness and accuracy of the ADT information that is provided due to the Awarix solution is



crucial for the empowerment of the Bed Controller. With Awarix, the Bed Controller will be able to begin execution of "phone call reduced" bed placement. The Awarix solution allows for the Bed Controller to see every unit at a glance making instant

decisions about supply and demand of beds. This is a much better view than simple lists of which beds are empty and are currently being cleaned. In addition, nurse management will be able to communicate back to bed control when they have specific requests to take beds offline due to low staffing or high acuity on their units. The screen below shows what the Bed Controller can see to make better decisions about patient placement. The green rooms are occupied, yellow rooms are planned discharges, and the icons indicate current clinical activity for the patients who are in each room.

### 4. Improve Communication Channels Regarding Patient Status

The first move to improve the communication channels regarding patient status was the creation of the St. Vincent's Care Planning Teams. The priority of the Care Planning Teams is to lead in the 75% by

12 discharge program. It was determined that if 75% of patients that are to be discharged in a day leave before 12:00 noon, afternoon gridlock would subside. The Care Planning Teams are led by Case Management. The purpose of the teams is to improve the accuracy and communication of patient status to all the roles involved. This includes planned discharge, making appropriate admittance decisions on observation patients, and noting when patients don't meet criteria to occupy critical care beds.

The Awarix solution is being used by the CPT Teams to communicate planned discharge and to notify staff when patients don't meet criteria to be in critical care. On the Awarix Patient Care Communication boards rooms will be marked yellow and date stamped with a scheduled discharge time by case management. In addition, when rooms are blue the patient is in observation and a decision needs to be made for admissions or discharge within 24 hours. This is extremely useful for questionable admit requests coming from the ED.

### 5. Improve ED Admission and Patient Hand-Offs

The Throughput Committee performed an analysis of the ED during June 2004. During June 2004, 69 patients left without being seen in the Emergency Room due to excessive wait times. If we assume that 44% of these patients would have been admitted on an average Med/Surg case of \$10,000 per discharge, then \$303,600 in Gross Revenue was lost for that month alone. Using an ER simulation to complete an infrastructure review, it was determined that adding an additional 29 beds would become inadequate within 5 years of completion based on trending volumes.

Awarix is being used to implement an enterprise “No Excuse Reporting” system. The key to implementing the more efficient reporting system will be the Awarix “Ready to Report” communication feature along with point and click report preparation. This will make it easy to give and receive reports and eliminate the batching of patient transfers from PACU and ED. In addition, the responses to nurse reports by receiving units are improved.

#### 6. Monitor and Report Throughput Metrics

A Throughput Report was created to be presented to the Executive Team. The report includes ALOS, 75% by 12, Discharges by Transportation, Press Ganey Scores, and Hours on Diversion by Unit. The report was generated every two weeks and has served as a bench mark for Throughput Committee evaluation.

Awarix has moved throughput reporting from a manual process to an automatic creation. The reports are embedded within the Awarix solution, and are accessible in real-time by each unit, and are broken down by unit and summarized for the enterprise.

#### 7. Implement Communications and Process Monitoring Infrastructure

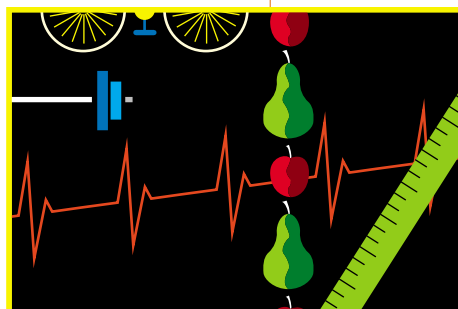
The Awarix pilot was implemented in September of 2004 on one Med/Surg unit with great success. The user acceptance of the solution has been universal and has had demonstrable, positive impact on ADT accuracy and the use of pending discharge as a discharge planning alert. During Q2 2005, the Awarix system was rolled out to the enterprise.

#### *Results*

During the past eleven months St. Vincent’s made impressive progress in all seven steps for building Throughput Excellence. The accomplishments included:

- Overall, a greater organizational awareness of throughput issues and changes needed for improvement have been affected.
- The Throughput Committee initiatives have significantly slowed diversion velocity to 35% from 119% in the prior year. Even though diversion hours have increased along with hospital admissions, the percentage increase in hours

as recorded in previous years has shown a dramatic slowdown. In addition,



Med/Surg has shown improvement in diversion hours over the last year. These slowing trends will continue to show improvement as Awarix is implemented throughout the enterprise. Benefits in patient satisfaction and employee morale are already being felt.

Other successful process changes include:

- Discharges by transportation increased from 42% to 82%.
  - Discharges before 12:00 noon increased by 10%.
  - ADT accuracy to within 7 minutes utilizing the Awarix Enterprise Visibility Solution providing accurate real-time census.
  - Increased number of pending discharges by 32% utilizing the Awarix Enterprise Visibility Solution providing important event triggers in the discharge process.
- Leadership in creating innovative technology that supports sustainability and resilience of process changes.



<sup>2</sup> Bonnie Darves, Capacity Crunch, Healthcare Leaders, October 2002, pp. 45 – 54.

<sup>3</sup> The Advisory Board Company, Optimizing Patient Throughput, Crafting a System that Builds Capacity, 2003, page 25

# HFMA Winter Institute

## Recap

by Eric Jeffreis

Vice President, Winter Institute

**M**arch Madness! St. Patrick's Day! HFMA Winter Institute! OK, so maybe it wasn't quite that exciting, but I really hope you enjoyed the Winter Institute. The Institute was held March 17<sup>th</sup> and 18<sup>th</sup> at the Embassy Suites in Birmingham. We had over 125 attendees for the two days, which was terrific attendance for the Winter Institute. I knew the event would be well received when word got out I was coordinating it but I had no idea it would be that successful. I guess a few of the attendees came out to see Miss America also.

The event kicked off Thursday morning with the Compliance Breakfast. Wayne Griffin from HealthSouth talked about the "Use of Health Informatics in Compliance Monitoring". Those who showed up a little later still had time to grab something from the continental breakfast



*Here comes Miss America – Our Keynote Speaker*

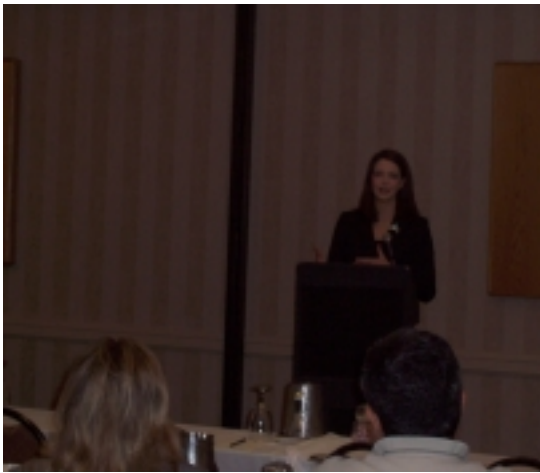
before the sessions began. The reward for sitting through 10 painful minutes of opening remarks from me was a chance to see Miss America – Deidre Downs!

We were thrilled to have Miss America as our keynote speaker. Deidre is a native of Pelham, Alabama and is about halfway through her year as Miss America. Deidre travels about 20,000 miles a month, to a different city every other day. The main focus of each of these stops is to promote her platform "Curing Childhood Cancer". She uses each of her opportunities to speak to raise awareness and research funds for the fight against cancer in children. After the question/answer session, Deidre spent a lot of time just mingling with the attendees. As a matter of fact, I saw several Miss Americas during the break, as wearing the crown seemed to be very popular. Unfortunately, I even saw a couple Mr. Americas (I won't mention names).

The morning session was wrapped up with Brian Bates from Baptist Health System updating us on the world of compliance and what to expect in the near future. Next, lunch was provided for all attendees as they chose whether to attend the CFO or PFS lunch. Hopefully, everyone enjoyed the sandwich buffet as well as the information provided by our speakers.



*Eric starting off the meeting*



*Miss America speaks*

Following lunch, everyone seemed to really enjoy our afternoon speakers during the CFO and PFS track. Topics during the CFO track included Hospital – Physician Joint Ventures; Lost Dollars in the Revenue Cycle; and Integrating Facility, Financial and Strategic Planning. The PFS track was also well received with topics including Every Day Challenges of the Revenue Cycle; Upfront Cash Collections; and What Mistakes Do Hospital Business Offices Make.

Thursday night provided a couple of different options for entertainment. Several attendees took advantage of the social at Ruth's Chris bar. Also that night, moms and dads had a chance to bring their own princesses back to meet Miss America. Deidre returned to perform, sign autographs, and take pictures with all of the children. If you didn't make it to this, you really missed out. It was like having Miss America as your child's personal baby-sitter. There were kids crawling all over her by the end of the night. She really took her time with all of the parents and children. I know you would all agree that the state of Alabama is well represented by Deidre.

The Friday session began bright and early at 8:00 a.m. as Jim Pool and John Lanier from Maynard, Cooper and Gale provided us with a 2005 Legal Update. This was followed by a discussion on Managing the Uninsured

Crisis by Noel Felipe with MedAssist. The final session of the Winter Institute was certainly one of the most enjoyable. Denene Cofield from Eastern Health System revved us up with her topic Your Mission, Your Mantra, Your Legacy. I can not tell you how many people have stopped me to let me know how much they enjoyed her.



*Miss America and Cindi!*

I certainly want to thank Denene as well as all of the other speakers who gave their time to make this an informative and enjoyable Winter Institute. I would also like to thank Mitzi Winters, Sherry Harper,

Carolyn Tolbert and everyone else that helped with the Institute. Finally, I would just like to thank the sponsors and all of those who attended. None of this would be possible if it were not for the financial support given to the Alabama Chapter of HFMA from our sponsors. I hope that the Winter Institute provided some entertainment as well as some practical tools to be used in the healthcare community. Thanks again for everyone's support of the Institute.





# www.alabamahfma.org

## Web Update

by Mitzi Winters, IT Chairperson

**P**lease remember to CHECK THE WEBSITE OFTEN FOR NEW INFORMATION. Soon we will be posting the dates of meetings for the upcoming HFMA year along with a lot of other new information and features.

### Don't Miss Our Webblasts

Please make sure your email information (as well as other pertinent information) is accurate in National HFMA's database. This is the source we use to alert you regarding upcoming HFMA events and news and it's recommended that you check their information periodically and update it as necessary. Go to [www.hfma.org](http://www.hfma.org) to verify the accuracy of your data.

### Job Bank

HFMA's Job Bank is on the bottom of our homepage. Guidelines to post an ad are on the website and in this issue of *Bama Chatter*. We have some new job postings in this issue and on the web page that you should check out.

### Tell Us What You Think...

Please feel free to send me your comments, suggestions or other feedback concerning our website. You can reach me via email at [mwinters@medassistgroup.com](mailto:mwinters@medassistgroup.com).

**Alabama HFMA Job Bank**

**4 jobs currently active.**

**Recent job posted: Director Patient Financial Services**  
24 May 2005

  [View Current Jobs](#)



# HFMA'S ALABAMA JOB BANK

## ***Are you having trouble finding the right person for your vacant position?***

**H**ave you tried the job bank for the Alabama Chapter of HFMA? There are two ways for you to advertise your vacant positions. You can post them on the web site or you can advertise them in the *Bama Chatter*. When you do both, you get a discounted rate.

### THE GUIDELINES FOR POSTING ADS ARE AS FOLLOW:

1. Ads will appear on the Web site for 30 days after posting or in one issue of the *Bama Chatter*.
2. All ads must be prepaid prior to putting them on the Web site or in the *Bama Chatter*.
3. A minimum of one week must be allowed prior to getting the ad on the Web site. Publication deadlines for the *Bama Chatter* are indicated on page 2.
4. Make sure that your email address is included with the ad for the web site. HFMA will allow interested parties to click on your email address to send attachments such as their resume.
5. The cost of placing an ad for 30 days or one issue is:
  - 0-100 words without logo \$50.00 / \$85 for both the web site and *Bama Chatter*
  - 0-100 words with logo \$75.00 / \$135 for both the web site and *Bama Chatter*
  - Above 100 words will be priced separately
6. The ad that you wish to place should be sent to the following email address  
[mwinters@medassistgroup.com](mailto:mwinters@medassistgroup.com)  
Please indicate if you want to place the ad on the web site, *Bama Chatter* or both.

7. Payment should be sent to:

Vicki Parks, Treasurer  
Alabama Chapter of HFMA  
Eastern Health System, Inc.  
50 Medical Park East Drive  
Birmingham, Al 35235

All ads should be received on an attached Word document and edited by the company placing the ad. HFMA will not be responsible for editing your ad, so please review it prior to sending it to us.



# ALABAMA JOB BANK

## Positions

### DIRECTOR PATIENT FINANCIAL SERVICES

Thomas Hospital, located in Fairhope, Alabama on the beautiful Eastern Shore of Mobile Bay, has an opportunity for Director of Patient Financial Services. Reporting to the Assistant Vice President of Finance / Revenue Management, the Director is responsible for organizing, planning and managing the daily operations of Patient Financial Services. The candidate must be a strategist, "champion" and integrator, a builder and leader, and provide the atmosphere that is necessary to attract and retain great employees.



The qualified applicant must possess a Bachelor's in Accounting, Business Administration or related field. Certification in HFMA or AAHAM preferred. Minimum of 6 years in healthcare required. Progressive patient accounting experience and supervisory experience required. In-depth knowledge of CPSI preferred.

Fairhope is located between Mobile, Alabama and Pensacola, Florida. We are also just minutes away from the beautiful beaches of the Gulf of Mexico!

Thomas Hospital offers excellent employee benefits including BCBS PMD with dental and pharmacy, 403(b), free long-term disability and free life insurance. Competitive wages offered!

Thomas Hospital — Attn. Human Resources  
P.O. Drawer 929 • Fairhope, AL 36533 • Fax 251/990-1588  
E-mail: [employment@thomashospital.com](mailto:employment@thomashospital.com)

Please visit our website: [www.thomashospital.com](http://www.thomashospital.com). Thomas Hospital is a drug free workplace.  
EOE/m/f/h/v

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### Director of Syndications

HealthSouth's Ambulatory Surgery division is currently seeking a **Director of Syndications** to join our dynamic Surgery team at the Corporate office. The person in this role will be responsible for coordinating the syndication process, preparing detailed financial analysis, preparing terms sheets for syndications, and MUCH more! Qualified candidates for this position will have 7-10 years of heavy Accounting experience, an understanding of partnerships and financial modeling, partnerships experience, and a preferred MBA or CPA. Healthcare experience is a plus but not required.

HealthSouth is one of the leading providers of outpatient surgery, diagnostic imaging and rehabilitative healthcare services with locations nationwide and abroad.

HealthSouth offers a comprehensive benefits package that includes 401(k), medical, dental, and vision insurance, and more. HealthSouth is an equal opportunity employer.

HealthSouth Birmingham  
E-mail: [employmentcoordinator@healthsouth.com](mailto:employmentcoordinator@healthsouth.com)  
Please visit our website: [www.healthsouth.com](http://www.healthsouth.com)

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### Director of Management Information & Analysis — Atlanta, Georgia

Peter Goodspeed Healthcare Recruiters, Inc. has been retained by the Georgia Region of Kaiser Permanente to recruit a Director of Management Information & Analysis. The position reports to the President of Kaiser Foundation Health Plan of Georgia and to the Medical Director of The Southeast Permanente Medical Group, the two top regional executives for Kaiser Permanente. The region serves 267,000 members, has 14 clinical sites and recently received an *excellent* rating from NCQA.

This is a new position and is responsible for data quality/data warehousing, management reporting and analysis, and internal management consulting/business change. The department will have approximately 25 FTE's. Candidates must have healthcare management consulting experience, ideally with a large national consulting company, and ideally healthcare operations experience with strong management, leadership and analytical skills. This is a very visible position in a fast paced and successful organization. Please send a resume in confidence to:

Peter Goodspeed  
Peter Goodspeed Healthcare Recruiters, Inc  
202 West Louisiana, Suite 207 • McKinney, Texas 75069  
972-562-4800-phone • 972-562-4808-fax • 214-766-1032-cell  
Email: [peter@petergoodspeed.com](mailto:peter@petergoodspeed.com) All inquiries are confidential

## CPAR Banquet Recap

### *Celebrating Excellence in Patient Accounting*

On May 6, 2005, the 7<sup>th</sup> Certified Patient Account Representative (CPAR) banquet was held at The Riverview Hotel in Mobile. This event was held to honor the participants from the southern part of Alabama who passed the tests administered in the Fall of 2004. The banquet had 43 attendees representing 8 different facilities.

Each attendee was individually recognized for passing the exam. The highest scoring participant from each exam is honored at the banquet with a special plaque. The highest score for the Fall 2004 administration was Georgi Maxwell from Providence Hospital, Mobile, Alabama. Congratulations to Georgi on this achievement.

Jeff St. Clair, Administrator and COO of Springhill Memorial Hospital, was the banquet speaker. He gave an entertaining and inspiring presentation on the importance of excellence in patient accounting and the vital role CPAR's play in health care. The banquet was co-hosted by Mitzi Winters, Executive Vice President - Revenue Cycle Services, MedAssist Incorporated and Paul Shorrosh, President, Database Solutions, Inc.

The CPAR Exam tests an individual's knowledge of patient accounting principles and practices. There are 100 multiple choice questions dealing with payer coverage issues as well as billing, collection and customer service. A score of 70 or more is considered passing. Success is reflective of personal motivation and diligent study along with a desire for professionalism. Please encourage others to study and take the next test in the Fall of 2005. Watch the Alabama HFMA Website for more information.

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Thanks to our Corporate Sponsors. Without their generous financial support, HFMA would be unable to provide quality programs and speakers.

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*Mark Your Calendars &  
Make Plans To Attend These Events*

# *Quarterly*

## **PROGRAM CALENDAR**

**June 2005 - November 2005**

June 6-9, 2005	<b>ALABAMA ANNUAL INSTITUTE</b>	Sandestin Beach Hilton Golf & Tennis Resort <i>Program Chair: Dawn Walton</i>
June 17, 2005	<b>HFMA CERTIFICATION EXAM</b>	Medical Center East Birmingham, AL <i>Contact: Bryan Karson</i> 205-838-3267
June 26-30, 2005	<b>ANNUAL NATIONAL INSTITUTE</b>	Las Vegas, Nevada
August 18-19, 2005	<b>SUMMER INSTITUTE</b>	The Hilton Huntsville, AL <i>Program Chair: Stephanie Martin</i>
November 17-18, 2005	<b>FALL INSTITUTE</b>	The Wynfrey Birmingham, AL

for details & to register for upcoming meetings, go to [alabamahfma.org](http://alabamahfma.org)

**Please take advantage of ONLINE REGISTRATION for Institutes,  
regardless of METHOD OF PAYMENT.**