

North Carolina HFMA



TarHeel News

Fall 2022 Edition

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About NCHFMA



Mission and Vision Statement

The North Carolina Chapter of the Healthcare Financial Management Association will be the leading resource for healthcare financial professionals by providing:

- Excellence in Education
- Opportunities for development of professional relationships
- Effective influence on healthcare policies

Our Values

- Excellence
- Innovation
- Integrity
- Respect
- Service
- Teamwork

check us out



A Message from the President-Elect

Christine Sibley



I'm writing this note while on the first day of my annual fall vacation, September 16, 2022. I love the fall. It's always been my favorite time of year. Growing up on the east coast of Canada, the first sign that fall was around the corner was the Halifax County Exhibition. The annual four-day exhibition is held the third week of August for four days, 7am - midnight. It's a family fun event with livestock displays & competitions, 4-H competitions (country folk will know what that is!), games, tasty treats, local entertainment and much more. The first hint of fall temperatures can be felt towards closing time, especially if you are working in one of the booths "on the hill." The first day of school (first Tuesday after Labor Day) looms just around the corner.

You are probably wondering what the Halifax County Exhibition has to do with NCHFMA. The Halifax County Exhibition has been run by the community of Middle Musquodoboit and local volunteers since 1884. In 2022 admission is \$6 for adults, \$5 for seniors, \$2 for children 6-12, and kids 5 and under are FREE!

NCHFMA is also a volunteer organization. We are celebrating our 65th anniversary this year. We exist for you, our members. Our goal is to be the leading resource for healthcare financial professionals in our state by providing excellence in education, opportunities for development of professional relationships, and effective influence on healthcare policies. We try to do this in a cost-effective manner, reducing barriers to access to the extent we can.

And just like the Halifax County Exhibition, we need many volunteers to give their time and input to be successful.

For years we have structured ourselves using the "**Matrix**" concept. This involves several councils and committees in what might be described as a checkerboard pattern. Each member of Matrix serves on a council and a committee. A member of the Board of Directors heads up each council which represents the six operating divisions of the chapter: Education, Membership, Programs, Volunteers, Communication, and Chapter Services. Each council has a set of service targets that support the Chapter's Strategic Plan. These involve several, if not all, of the four technical areas (Health Care Operations, Health Care Finance, Compliance, and Technology). The technical areas are represented by the committees of Matrix; these committees provide support to the councils. One member of each committee is designated as the chairperson for purposes of conducting committee meetings.

A Message from the President-Elect

Continued



In March 2020, Matrix received an update - **Matrix 2.0 - Collaborate, Network and Solve (CNS)**. We introduced the concept at our March 2020 Annual Meeting in Pinehurst. But within days of that meeting we were suddenly thrust into a new environment where in-person meetings were restricted, travel was prohibited, and healthcare, as an industry, was in rocky and uncharted waters. The COVID-19 pandemic put enormous pressure on the healthcare workforce. In an industry already facing a shortage of clinical staff, we saw increased burnout and exhaustion. Early in the pandemic some employees not directly providing care for COVID-19 patients were reassigned to assist in clinical areas, some employees had their hours reduced, and some were furloughed for a period of time. “Work-from-home” was a temporary solution that in some cases has evolved into a hybrid or permanent way of conducting business. As a chapter, we struggled to deliver on our mission. The 2020-2021 Chapter Board became the 2021-2022 Chapter Board. As our President at the time, Camey Thomason put it, “2020-2021 was the year that wasn’t.”

But we persevered and just as healthcare delivery adapted and innovated, NCHFMA is also adapting and innovating. We are a group of volunteers, but that group of volunteers cannot be just the Board. We need your input and your involvement.

We realize that stepping up to take on a volunteer role can be daunting. I certainly understand that. When I first became involved with NCHFMA, I was asked if I was interested in taking on a leadership role at some point. At the time, I was working full-time and getting my EJD in Health Law. And as many know, I was and continue to be active in the choral community – both as a singer and a board member. My response was - “ask me when I finish my law degree”. And as soon as I graduated, someone reminded me of that answer. Fast forward a few years - and here I am - President-Elect 2022-2023.

But everyone’s situation is different. Perhaps that question is not what we should be asking. I come from a Financial Services background. Several years ago, I was project manager on a multi-million-dollar company-wide initiative. When we first sat down to tackle the project, it was indeed daunting. We were turning the way we looked at our customers on end – introducing a new retail banking concept – Client Relationship Management. How do you change something that has been done the same way for many years in an organization of our size (we were the largest financial institution in Canada)? I think my then boss asked the right question – “how do you eat an elephant?” The answer “one bite at a time” – and with that perspective we reframed our approach and achieved success as well as international recognition for our efforts.

A Message from the President-Elect

Continued



So that's what we want to do – take a “bite-sized” approach to our volunteer efforts. We are not going to ask you to commit to a leadership role on day one; we are going to break things down into “micro-tasks”. Can you commit to helping with registration at one of our in-person events? (Bonus – free registration!). Do you know a speaker or a writer on a topic that is timely and relevant for our membership? Are you an avid golfer – do you want to organize the golf tournament at one of our meetings? Comfortable speaking in front of large groups? Would you like to introduce a speaker? Facilitate a panel? Not able to travel to in-person events? Are you good with technology? Can you help run a webinar? *[Did you know that your volunteer hours count towards Founders Points? Watch for a future article on this topic].* Whether you are an extrovert or an introvert, have one hour to give or multiple hours, we have a role for you.

Matrix 2.0 may have been short-lived, and we may eventually eliminate the matrix concept completely. Your NCHFMA Board is working with one of the Chapter Advancement Teams (“CAT”) to help us develop a focused strategic plan that will take our chapter forward and deliver the quality and quantity of services that you, our members, need and want. In the meantime, if you want to get involved – a little bit or a lot - reach out to me or any Board member. We will match you up with a Committee or Council chair and just like the Halifax County Exhibition, NCHFMA looks forward to a long history of partnership between the Chapter and its volunteers, delivering on our mission and helping to shape the future of healthcare for all.



Christine Sibley, MBA, EJD, CPA, CMA, FHMA
NCHFMA President-Elect 2022-2023

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Your 2022 – 2023 Board



Ken Vance, President

Camey Thomason, Immediate Past President

Christine Sibley, President-Elect

Jason Nelms, Secretary

Elaine Peeler, Treasurer

Elkin Pinamonti, Director of Membership

Wendi Bennett, Director of Programs

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Kent Thompson, Director of Education

Ty Carson, Volunteer Chair Counsel

Marc Brewer, Technology Committee Chair

Chris Johnson, Certification Chair

April York, Healthcare Operations Chair

Tom Henderson, Corporate Sponsor Chair



New Members!



Please help us in welcoming our newest members to the NCHFMA Chapter!

Joshua Baccus	AccessOne
Megan Serzan	Asheville Specialty Hospital
Renee Rogers	Atrium Health
Rebecca Whitley	Atrium Health
Tomain Murphy	Atrium Health
Wesley Warren	CenterWell, Home Health
Jonathan Wilhelm	Cerner
Dennis Keaton	CFM
Michael Toscano	Chiesi USA
Tracy Emmanuel	Citrin Cooperman
Michelle Mariea	Cognizant
Katie Condit-Jang	Cone Health
Amanda Dalton	Cone Health
Isabelle Morgan	Cone Health
Situ Shrestha	Cone Health
Wayne Yearwood	Dean Dorton Allan Ford PLLC
Deborah Vassar	Department of Veteran's Affairs
Tiffany Estes	Dixon Hughes Goodman LLP
Kimberly Headen	Duke University Health System
Cheryl Jordan	Duke University Health System
Hannah Meyer	Duke University Health System
Kevin Timp	Duke University Health System
Courtney Long	Ensemble
Teshania Denman	Ensemble
Jennifer Green	Ensemble
Jennifer Hitch	Ensemble
Kristen Monroe	Ensemble
Shari Sievenpiper	Ensemble
Marlena Sloan	Ensemble
Christine Starnes	Ensemble
Heather Williams	Ensemble
Robert Granko	Geisinger
Austin Gardner	Geisinger
Harshita Patel	Guidehouse

New Members!



Please help us in welcoming our newest members to the NCHFMA Chapter!

Jonathan Zimmerman

Patricia Killion

Mike Darlington

Jennifer Hausman

Tina Aldridge

Brittney Anglen

Charlotte Nicks

Kinya Stainback

Candice Torres

Greg Condit-Jang

Elizabeth Johnson

Heather Burns

Michael Braly

Deanelle Thompson

Hunter LaBranche

Kimberly Coon

Casey Ball

Parker Marsh

Calvin Hamilton

Linda Gadsden

Christina Sigmon

Dedra Gaines

Guidehouse

HCA Healthcare

Huron

LABCORP

Mayo Clinic

Mayo Clinic

Mayo Clinic

Mayo Clinic

Mayo Clinic

MedCost, LLC

MedicoCX

Mission Health

Nordic Consulting Partners

Optimum Healthcare IT

Oracle Cerner

Parallon

PARDEE - UNC Health Care

PNC Bank

Premier Inc

RSM US

Texican, Inc.

Wake Forest Baptist Health

Call for Volunteers!

NCHFMA needs your help!

If you have questions about how to get involved, please reach out to Ty Carson (Volunteer Counsel Chair) at Ty.Carson@GetixHealth.com.

2022 Summer Meeting Highlights



“Back in the Saddle & Back to the Basics”

We had an amazing turnout for NCHFMA’s 2022 Summer Meeting in Myrtle Beach. Here are just a few of the highlights from our time at the beach:

- The Board came in a day early to go through HFMA Chapter Advancement Team training (C.A.T.) with the goal of improving service to our membership.
- Victory for NC Child, a nonprofit organization working to eliminate the barriers that stand in kids’ ways, thanks to great participation in our first charity 5k. Thanks to the organizers and everyone who participated!
- As always, golf was a hit! Proceeds from the tournament went to Helping Hand of Myrtle Beach which aims to assist individuals and families with immediate, short-term needs such as food, rent, utilities, and other specialized services.
- Members also had a blast playing volleyball on the beach. Shout out to the Orange Team on their victory!
- Our “Back in the Saddle” evening social event was filled with food, music, games, and dancing. Even our tiniest members got in on the fun.
- Matrix 2.0 was a success! We had a great turnout and even managed to recruit some new Chapter volunteers.

Mark your calendar for next year’s Summer Conference, which will be held August 23–25, 2023.



Upcoming Events



Networking Event (in-person)

October 27, 2022

Camel City BBQ

Winston-Salem, NC

HFMA Region 4 2022 Women in LeadHERship Summit

November 2-4, 2022

Annapolis, MD

Medicare Workshop (IPPS)

November 11, 2022

Location TBD

2022 Eastern Regional Conference

November 13-16, 2022

Asheville, NC

Medicare Workshop (OPPS)

December 15, 2022

Virtual

NCHFMA 2023 Spring Meeting

March 22-24, 2023

Pinehurst, NC

NCHFMA 2023 Summer Meeting

August 23–25, 2023

Myrtle Beach, SC

Call for Volunteers!

NCHFMA needs your help!

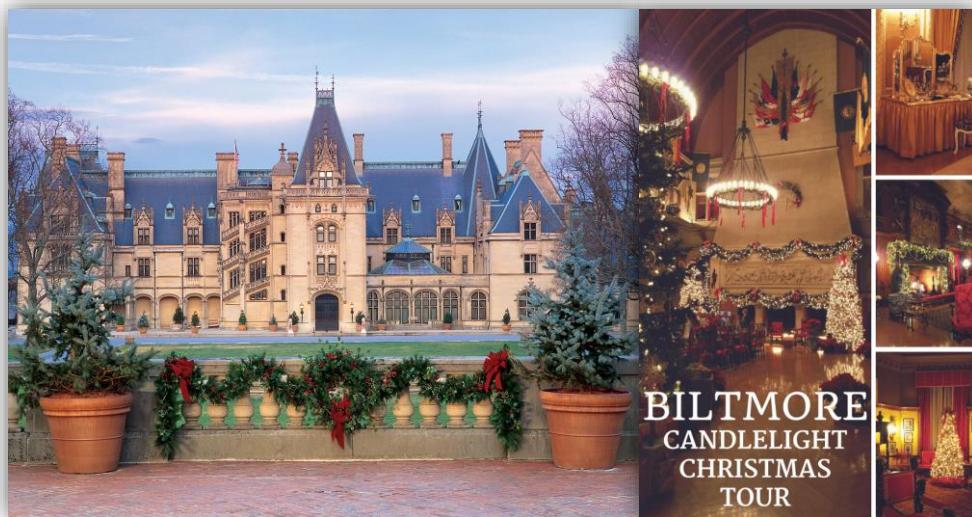
If you have questions about how to get involved, please reach out to Ty Carson (Volunteer Counsel Chair) at Ty.Carson@GetixHealth.com.

2022 Eastern Regional Conference



Join healthcare financial professionals from North Carolina, Virginia-DC, Maryland, West Virginia, Kentucky, and South Carolina, for amazing educational and networking opportunities at the 2022 Eastern Regional Conference in Asheville, NC November 13 - 16. Some of the highlights of this incredible event are as follows:

- **Volunteer Project - Operation Christmas Child:** Join us on Sunday, November 13th from 2 to 4pm as we assemble shoeboxes for Samaritan's Purse Operation Christmas Child. If you are unable to attend on Sunday, there will be additional opportunities to pack a shoebox on Monday afternoon or Tuesday morning.
- **Opening General Session "Air Force One: Zero Fail Mission":** Join us at the opening general session as Col. Tillman (the nation's 12th Presidential pilot) shares his first-hand account of piloting President George W. Bush on September 11, 2001.
- **Dinner Grove Park & Biltmore Candlelight Tour (Nov 14th, 5pm - 11pm):** Begin the evening with a delicious dinner prepared by the culinary staff of the Grove Park Inn, followed by a Candlelight Tour of the Biltmore Estate and discover a unique destination nestled in the Blue Ridge Mountains.
- **Bootleggers Rendezvous (November 15th):** Grab your flapper or gangster gear and join us for an evening of fun and fellowship as the sound of jazz fills the exhibit hall. From the 1920's to the 2020's...we'll be celebrating with games, food, dancing, and local brews.



To register, please visit <https://tinyurl.com/2022EasternConf>. Should you choose to pay at the conference a late fee of \$100 will be assessed. To avoid a late registration fee, register and pay the conference fee no later than October 14th.

October In-person Networking Event

October 27, 2022



NC HFMA PRESENTS OUR 2022 Fall Networking Event

Join other healthcare professionals
and earn *CPE credit* for a round
table presentation on:

No Surprises Act and Pricing Transparency

Speaker: Stephen White, Ott Cone &
Redpath, P.A.

Thursday, October 27th

5:30p-7:30p @
Camel City BBQ
701 N Liberty St, Winston-Salem, NC

Food and drinks to be
served!

John Lloyd, NCHFMA Compliance Chair

Vice President - Healthcare Solutions at Wakefield and Associates

Welcome to the HFMA Compliance Corner! The Compliance Committee is excited about providing quarterly updates related to healthcare compliance. In the upcoming newsletters, we will dive into various compliance-related issues such as surprise billing, cyber security, Medicare secondary payer, managing remote employees, and violence in the workplace. Let's kick this newsletter edition off with some information related to pricing transparency.

Hospital price transparency is now a requirement from the Centers for Medicare & Medicaid Services (CMS). As a result of this new requirement, providers should be going beyond the rule to ensure transparency meets patient demands as transparency is part of the patient experience and builds trust in provider organizations.

In addition to providers providing price transparency, effective July 1, 2022, the Coverage Rule requires that health plans and health insurance issuers must publicly disclose pricing information for covered items and services in specified formats for plan or policy years beginning on or after January 1, 2022.

Listed below are some steps that can increase the provider patient experience and ensure you are complying with the regulatory requirements.

Educate your teams on how to discuss pricing and the financial responsibility of the patient: Patients now have the ability to access hospital and insurance plan pricing. For providers it is important to educate your teams on how to discuss healthcare costs, pricing, and patient financial responsibility. Providers will also need to offer patient options to cover the cost of services including payment arrangements and financing options.

Create easy access: Pricing transparency tools should be online, easy to find and navigate to, and optimized for a variety of platforms, such as smartphones and tablets.

Patient Education - Patients have long been overwhelmed by unexpected medical expenses that they did not plan for prior to receiving services. Price transparency offers a solution to patients who wish to prepare and plan for the cost.

Track metrics related to pricing transparency: Create metrics to include the utilization rate for the number of patients who utilized the transparency tool versus the patients who received the service. For scheduled procedures, compare the diagnosis at time of scheduling with the final diagnosis. It is also a good practice to look at the competitors in your particular market regarding pricing.

Make the pricing information easy to understand for both the patient and provider: If the pricing details you post online are too complicated, patients will continue to call patient representatives with inquiries.



Hockey and Healthcare Finance: Two Traditions Return to Denver

Geneva Schlabach, CEO, VISPA

Summer in Denver is known for festivals, perfect weather, and baseball games at Coors Field. This year Denver welcomed two other summer traditions: a National Hockey League (NHL) title and HFMA's Annual Conference.

As healthcare finance's most important event, HFMA Annual returned to its traditional late-June schedule in the Mile High city. Attendance was back to pre-COVID levels and enthusiasm was high for new technology applications that enable healthcare revenue cycle teams to work smarter and more productively.

With staffing shortages atop every finance leader's checklist, attendees eagerly met with new machine learning, robotic process automation (RPA), and artificial intelligence (AI) solution providers to optimize existing IT systems and achieve greater operational efficiency. Any automation that tackles healthcare revenue cycle staffing shortage was a hot topic in the HFMA exhibit hall.

One attendee intentionally scheduled meetings with vendors she didn't know just to learn what was available in the industry. Other attendees sought out new ways to reengineer their revenue cycle processes to avoid hiring more staff or falling behind in cash flow. Questions such as, "how is your RPA technology different" and "does the system suggest actions to take" were common across two days of dedicated exhibit hall sessions.

While advanced revenue cycle automation does boost productivity and reduce human errors in the revenue cycle process, healthcare provider organizations still must prioritize effective staffing practices that don't stretch employees too thin. One attendee from SCL Healthcare mentioned that improvement comes down to "leadership and a strong team." The organization built a three-year plan that leverages existing technology and staff versus simply buying new tools.

Building team effectiveness for better denial management was another popular topic in Denver as payer denials remain a cumbersome and complex problem. Revenue cycle leaders are energized to catch-up post pandemic and implement new strategies that finally level the playing field between provider and payer. This is a common mindset that was also demonstrated at HFMA's 2022 regional events.

The VISPA team has attended, spoken and sponsored several regional HFMA events thus far in 2022. And we have several more in-person HFMA events planned. We are consistently inspired by the passion, dedication and commitment of healthcare revenue cycle professionals. Here are the four most common themes we've heard.

- Automation plays a pivotal role in today's revenue cycle.
- Staffing challenges remain a driving force behind revenue cycle automation.
- Transparency between revenue cycle vendors and healthcare providers is paramount.
- Remote workers are the new normal and we need technology to support them.

5 Best-Practice Steps to Automate Prior Authorization

Paul Shorrosh, MBA, MSW, CHAM, Founder and CEO, AccuReg

Preventing no-authorization denials and getting patients timely, quality care is no easy feat. As payers increase prior authorization requirements, providers struggle to hurdle escalating barriers to scheduling care, incurring millions of dollars in administrative costs and lost revenue.

Worse, patients are caught in the crossfire. While payers say the intent of prior authorization is to control healthcare costs, one-third of physicians surveyed said prior authorization requirements led to a serious adverse patient event.* And when no-auth denials come knockin', guess who foots the bill? The *surprise bill*, that is. You guessed it. Patients.

Why Providers Need Intelligent, Automated Prior Auth

Despite the 278 transaction standard readily available for years, and the tremendous cost savings adopting electric transactions would bring, insurers continue to maintain arcane, convoluted prior authorization processes. Hospital groups are calling for government oversight to enforce the use of electronic transactions and to regulate payer response times, but in a time where hospitals are drowning in staffing shortages and managing constricted budgets, they can't afford to wait for a lifeline.*

Instead, providers have looked to technology companies to build automation tools using robotic process automation (RPA) and intelligent rules engines to navigate the ever-changing labyrinth of payer portals, rules and requirements. Many EHRs provide work queues for staff to manually complete prior authorization processes, which still rely heavily on human intervention—putting a strain on already short staff. Others solve for parts of the problem, one for determination, one for submission, another for retrieval. None deliver a comprehensive solution.

It doesn't have to be that way. Using intelligent automation, technology can solve for determination, submission and retrieval. Providers need real solutions, not more empty promises or misconstrued artificial intelligence.

5 Best-Practice Steps to Automate Prior Authorization

Step 1: Demographic Audit

It's critical to have automated quality assurance measures in place to audit patient data before prior authorization submissions. If not, you're susceptible to rework, denials and lost revenue.

An integrated first step of the prior authorization process, quality assurance:

- Automatically audits 100 percent of patient registrations to identify and prevent financial and administrative errors
- Alerts staff in work queues with errors and payment risks along with instructions for resolving issues
- Automatically re-audits registrations after any changes
- Uses pattern recognition analysis to continuously update automated rules engine to prevent recurring errors and related rework

Continued

Step 2: Eligibility Verification

Eligibility verification consists of two levels of automation: eligibility verification, plus benefit mapping. An intelligent rules engine analyzes remit data and isolates likely denial-causing payment risks before they occur.

Eligibility verification provides:

- Benefits verification on 100 percent of accounts
- General and targeted service verification
- Automated batch and manual real-time submission
- Self-pay verification
- Found coverage and coverage change detection
- Benefit threshold alerting
- Coordination of benefits alerting
- RTE, 270/271, HL7 transactions
- Benefit post-back to EMR

Step 3: Determination

Arguably the most critical and time-consuming step in prior authorization, hospitals dedicate a significant number of resources to determine when an account requires authorization. Automating determination reduces time spent on the phone, at the fax machine and searching payer websites to get patients authorized for the services they need—faster and with fewer denials.

Automated determination:

- Automatically determines if authorization is needed using rules that are payer- and employer-specific to ensure rules are as current as possible to predict and prevent denials
- Offers flexible options for grouping and sorting work to meet the unique needs of each customer (e.g., by payer, patient alphamix)
- Notifies staff within their work queues when authorization is needed
- Enables staff to easily look up when auth is needed by payer to reduce manual processes

Step 4: Submission

Automated submission:

- Standardizes manual and fax-based authorizations through a single web portal
- Automates the generation and submission of web forms for easy staff upload
- Guides staff through payer rules and requirements, providing necessary forms and questionnaires, while pre-populating data as available
- Provides staff insight into the status of submissions within their work queues (i.e., appended/additional documentation needed)
- Customizes rules that alert to specific payer and employer plan needs
- Provides in-depth, real-time reporting on key authorization metrics, including payer turn-around time, coverage determinations and authorization requirements

Continued

Step 5: Retrieval

Automating retrieval eliminates the need to manually check status on payer portals. Intelligent automation can do the work for you, monitoring response status and retrieving the authorization or denial number, along with additional documentation requests.

Automated retrieval:

- Eliminates manually checking status on portals
- Delivers automated responses into staff work queues, including auth status, denial number or instruction if further documentation is required
- Enables clinical staff to proceed to service more quickly with less staff resources
- Eliminates time on hold, waiting for returned phone calls and manual updates to spreadsheets
- Allows staff to reallocate time to managing submissions to improve accuracy and likelihood of approval

Providers can't afford to wait for government intervention to regulate prior authorization. Using intelligent, end-to-end automation to automate the five best-practice steps of prior authorization reduces costs, alleviates staffing challenges and gets patients the care they need when they need it.

**Gellman, M. (2021): "Doctors say prior authorization led to life-threatening delays in care." Modern Healthcare*

WE NEED
YOU!

WE NEED
YOU!

WE NEED
YOU!

The NCHFMA Communications Council is working on the Winter TarHeel Newsletter and would love for you to contribute! We are in need of relevant healthcare articles and any member news you would care to share.

Articles submitted by chapter members can earn you **CASH!** The Awards Committee annually awards cash prizes of \$500 for 1st place, \$300 for 2nd place, and \$100 each for two honorable mention papers.

Please email Ashley Sanders, Director of Communications, with your submissions, or with any recommendations for future TarHeel news content: asanders@revecore.com



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THANK YOU FOR YOUR INVESTMENT IN OUR CHAPTER!!!

For further information or questions regarding partnerships, please contact Tom Henderson, Partnership Committee Chair:

336-858-0088 · partnerships@nchfma.org

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