

Northwest Outlook



hfma™ washington / alaska chapter
healthcare financial management association

June - October
2007

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Publication Objective

The NW Outlook is the official publication of the Washington/Alaska Chapter Healthcare Financial Management Association. Our objective is to provide members with information regarding Chapter and national activities, with current and useful news of both national and local significance to healthcare finance professionals and to serve as a forum for the exchange of ideas and information.

President's Message

by Greg Moga, President



It is my great privilege to address you, for the first time, as President of the Washington/Alaska Chapter HFMA.

I am pleased to take my place as 53rd in the line of Chapter Presidents, after John Nutter (52), and to be followed by a great line-up of leaders: Grant Baumgartner (54), Jim Heilsberg (55), and Brad Becker (56). I am proud to have come to know so many of our past Chapter leaders, from John Tiscornia (24) to Lori Mitchell (31), Libbie Loux (37) to Al Hanson (38), Teresa Bigelow (42) to Tom Dingus (48)- to name just a few. I hope that each of you will see in yourselves the potential to join this terrific group and lead your Chapter in the coming years.

HFMA is much more to me than the products and seminars offered at the Chapter, Regional and National levels. In the 20+ years that I have been a member, HFMA has become personal for me, inspiring me to develop my career on the solid base of a network of friends and colleagues all across the country. The cornerstone to that base and to my career is our Washington/Alaska Chapter- certainly the friendliest HFMA Chapter in the US!

Of course, **HFMA: It's Personal** was the theme adopted in 2003 by then-National HFMA President Dave Canfield. Our current National Chair, Mary Beth Briscoe, has adopted **Courage To Make A Difference**- which properly highlights the fine character and intrinsic integrity of so many of our members. HFMA has identified so many themes that speak to the challenges facing healthcare finance, and is the backbone to all of us who have devoted our careers to making a difference in our communities.

I have many plans and goals as I lead our Chapter. These plans include initiating our first annual CFO-only lunch or dinner event, which our

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www.waakhfma.org

Contributing Writers

Greg Moga
Jim Heilsberg
Tim Howden
David Morgan
Peggi Ann Rufener

THANK YOU!!!

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members Lori Mitchell and Paul Ishizuka have agreed to co-host; sponsoring a state-wide "Road Show" by our highest-rated speaker, Day Egusquiza, at hospitals in the 3 corners of the State; revamping our Chapter leadership roles, possibly making our Treasurer a 2-year officer position, outside the leadership rotation; presenting overarching themes for our meetings so that we ensure that we cover more of our members' educational needs; preparing for June 2009, when we will again welcome HFMA's Annual National Institute (ANI) to Seattle; and- the list goes on.

But most importantly, my priority as your Chapter President is **you**- our member. I am here to make sure that the Washington/Alaska Chapter HFMA helps you to build your career, your competence, your own network of friends and colleagues in the healthcare finance field. Please call, send an e-mail or letter, and talk to me at our next meeting- I am there to serve each of you!

But I Digress...

by Tim Howden | GHCH

My wife has decided that I need to clean my home office (well, really a collection of boxes full of information (wife: junk) collected over the past 30 years). Those who have been in my real office can understand and appreciate the enormity and the daunting nature of this undertaking. I suspect that her new-found desire for minimalism stems from the fact she spent the two months cleaning out my mother's 4,000 square foot house which was packed to the rafters (and above) with a lifetime of stuff, some emotionally valuable, some financially valuable, some that needed to be kept in the family, and some that was just odd (Styrofoam takeout containers washed and stacked).

So, I come by my tendency to accumulate genetically (which did make me deadly in Monopoly as a kid). And, like terminal MPB (male pattern baldness), you cannot fight genetics. You can hide it, but you cannot fight it.

But I digress.

I started slogging through the detritus of my career and all the things I thought I might need some day. And still do.

I began working in healthcare on 6/13/1977,

my 7th wedding anniversary (according to my wife, it was the 2nd best anniversary present ever: employment). 72 hours after my last accounting final, I was the Controller and CFO of a small (well, itty-bitty) hospital in Southern Oregon which no longer exists. (The hospital, not Southern Oregon which, to my knowledge, is still there, helping to separate me from California).

In accounting texts, there are answers in the back of the book. In the hospital's books, there weren't, just more blanks to be filled in literally. A manual system. For many of you who have never worked with a manual system, think no computers, several pencils and lots of erasers. (It does not help to be dyslexic.)

But I digress.

I picked up the November, 1976 (don't ask, don't tell) copy of HFM (Hospital Financial Management) the journal of the Hospital Financial Management Association. I will be always amazed by HFMA's ability to increase the size of the tent and expand the group and to do it without having to order new letterhead. True financial managers.

But I digress.

Update issues: controlling health care costs; Medicare and Medicaid reform (the problems of rising medical costs are so severe that only the federal government is in a position to address them). Hospitals in some states would find that state government has more financial difficulties than the federal government. (Page 2); full body CAT Scans are experimental and would not be reimbursed by Medicare; the Medicare deductible will raise a record 19% to \$124; the Social Security Tax would remain at 5.85% on a base of \$16,500.

The lead article discusses a method of reducing hospital malpractice insurance. Other articles of interest: one discussing whether cost-reimbursed hospitals can still have a breakeven point (Insert own joke and derisive laughter here.) and the testimony of James Whitman, FHFMA to the Council on Wage and Price Stability (picture of the author on page 6).

Another item of interest: Jim Mefford and Alex Ford passed the Fellowship exam and became Fellows of HFMA with all the rights, responsibilities

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and privileges attached thereto.

Looking through this magazine was like suddenly hearing The Starland Vocal Band on the radio.

On further reflection, in the words of the great, late 20th century philosopher, Lawrence Peter Berra: Alt's deja vu, all over again.

Harborside Conference Center - Bremerton

by *Peggi Ann Rufener* | Cascade Medical Center

The Fall Meeting was held September 26-28 at the Harborside Conference Center. They say location is everything – waterfront view, fairly nice weather, easy walk from the ferry and great networking opportunities.

On Wednesday we had the opportunity to attend two different sessions. I chose to listen to Medicaid Enforcement and Program Integrity. It was an interesting topic and quite informative. I also listened in on the EHR discussion. Wow! Do we still have a way to go to understand all of the rules/regulations/laws!

Wednesday evening we had a great attendance at the LCC. Participation in the LCC is a great way to meet other members and offer your services to volunteer for different Chapter “jobs.” It is also the most effective way to influence the topics, speakers and social activities for future Chapter events.

Thursday we had an excellent Key Note Presentation - Reaching Up, Reaching Out: A forest canopy scientist’s perspective on innovation and communication by Dr. Nalini M. Nadkarni. Based on the applause alone, I would say she was very well received.

As usual the remainder of the meeting was full of great presentations and wonderful networking opportunities. The turnout was excellent and attendee feedback was very positive.

Of special note: Our social event on Thursday was a Murder Mystery dinner with a 60’s theme. We had

prizes for costumes and for the folks with the most ‘outlandish’ tales of the ‘who done it’. This was a lot of fun! It is rumored that Mary Ann Yates has photos...!



Please plan on attending our next meeting November 29th!!

I Don't Have Time

by *Jim Heilsberg* | INHS

Over the years I have found myself say these words to myself and to others. There is no question that the pace of work has picked up. Budgets are getting tighter and people are being asked to do more. If there ever was a time where time was a precious commodity, now is that time.

Time studies have been done and shown that even with time being less available, there is more time wasted by all levels of employment in new areas such as ebay, internet surfing, gambling, personal email, etc. Businesses are continually putting tools in place to monitor employee activity along with policies and signed commitments that try to restrict employees to just work.

As I pondered this, a question came to mind. What is the right balance of work and personal activities and can there be a balance at work?

For every study that has been done about time management there is another study talking about what employees value and that is flexibility of an employer to allow for personal issues.

Lets face it, we spend a majority of our life at work. We spend more time with people at work then we do with others. We now spend more with our computer then with people in many cases. Why is it a surprise that we find people wanting or maybe needing to have a balance of work and personal with their new friend, the computer.

With more time at work and a shift of all members

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of the household at work, we find less time for doing what is needed to live. We are often at work at times when businesses are open locally but there is a new phenomenon of call centers that is challenging us differently than the past.

Think about it, in the past we had people we called and they had time to help us and they were local so we could go and talk to them after work as well and discuss issues in person.

Now we call a call center and first have to work through an automated attendant, often never talking to a person. When we do get a person, it is often only a front entry person that speaks broken English that results in a frustrating exchange of information that does not result in a solution to our problem. We are then transferred to another person in hope of gaining a solution. Often times we are lost in transition to this person and then faced with option of trying the gauntlet of the auto attendant one more time. There are also times, we are left on hold for minutes and sometimes up to half an hour.

When is the best time to make these calls? Often it is during our normal work time.

We are squeezed from all angles. When we look through a new set of glasses we can see why people are trying to do legitimate needed things during work.

Take a moment yourself and count how many minutes a day you think about home issues, take personal calls from home or for home related issues or for the emergency from wherever that is not related to work. On top of that count times you daydream, or potentially daydream, to answer personally related emails.

When we are honest, we find we spend more time on personal things than we realize. Is it a surprise that others at all levels of the business need this personal time.

So the normal answer is to have people do it on their break. 15 minutes in the morning, 15 in the afternoon and 30 for lunch. Often times it is difficult to get through the auto attendant in 15 minutes.

What then is the answer? Employers of choice help employees find a balance. There are times when stuff has to be done both personal and work. They put trust in their employees and have them be responsible to get the job done but also get what is needed for home. Trust of employees....wow what a

concept and one that we know from our accounting and fraud training that most all are trustworthy in most cases but can also be untrustworthy in the wrong situation. Key to trust is putting in controls that allow all to be motivated to be trustworthy but at the same time, those that are not trustworthy will be caught before major issue happens.

It seems that the answer lies in setting up systems that allow for employees to be trusted but also includes appropriate controls to help motivate those that might be tempted to not be honest to be motivated more to be honest than to be dishonest.

It also seems that we need to allow people to have time to do personal things and balance them with work time. To be so restrictive as to say all has to be done on breaks may not work. This flies in the face of legal issues of making sure people get their breaks that are documented and away from their work station but as we look at the realities of personal issues, there may need to be creative thinking of documentation of break times as well as give and take of time when people are obviously distracted by personal issues they may use "work" time and then other times they will be more productive during work time.

We will always be dealing with exceptions. We will always have 5% of the people that will bypass rules and be problems. What we want to be careful of in my opinion is to not make rules that will require the 95% that are normally compliant to be unfairly restricted and feel as if they were chastised for doing something wrong when they had done nothing and in fact had been doing the right thing.

Answer in a nut shell – trust, flexibility, appropriate monitoring and balance. When all is said and done and we have all finished the run, it will not matter how well we kept the pace but rather how we ran the race. To be known for catching or punishing others will pale to trusting and caring for a sister or brother. So take time to care and trust and love so that when you look down from above, your heart will be filled with light instead of another reason to fight.

My prayer is that each of us will find ways to keep balance in this time of increased pace and that we will not lose sight of why we are in the game anyway. ■

Alaska Healthcare Watch



This column is intended to share and
inform the Chapter Members about
Alaska healthcare financial news

*Written by David Morgan,
Reimbursement Director,
Southcentral Foundation*

*Edited by, Cathy LeMay,
Patient Accounts Director,
Southcentral Foundation*

State of Alaska Medicaid Program Update

(First Health Services Corporation)

The Payment Error Rate Measurement (PERM) review of Alaska's Medicaid Program is a mandatory audit instituted in response to the Federal Improper Payments Information Act of 2002. All states are reviewed on a rotating basis once every three years. Alaska's first review period will begin in January 2008.

If records from your facility are selected for review, bear in mind the following issues:

- Documentation requested will be for claims paid by Medicaid from Oct. 1, 2007, through Sept. 30, 2008.
- Requests for medical records will come from Livanta, the contractor hired by the Centers for Medicare and Medicaid Services (CMS) to conduct the review.
- Sharing patient records with Livanta for review is not a breach of patient privacy. In fact, you are required by federal law to provide these records.
- Documentation must be submitted within 90 days of Livanta's request. The State encourages us to turn in documents within 30 days to allow time to make any corrections before the deadline.

Past PERM studies have shown that the reasons for most payment errors are lack of response or insufficient documentation. Even legitimate claims count as errors if CMS doesn't receive the requested medical record documentation on time.

If you have any questions about PERM please contact Randall Schlapia, Deputy Director of the Division of Health Care Services at (907) 334-2461.

Effective October 1, 2007, and as required by Federal Law, Medicaid outpatient drugs will be reimbursable only if non-electronic prescriptions are executed on tamper resistant paper. Additional guidelines to be issued by CMS are pending.

Recipient Support Services (RSS) may be authorized for high-risk Chronically Mentally Ill (CMI) adults or Severely Emotionally Disturbed (SED) children in need of one-to-one observation for up to 24 hours per day. If there is:

- A multi-axial diagnosis on Axis I/II which may include substance use/abuse
- History/frequency of violence with context of occurrence
- Assaultive/threatening behavior (current presentation)
- Violent delusions or command hallucinations

Providers will continue to submit requests for RSS

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to Division of Behavioral Health (DBH) regional Coordinators.

All service requests may be deferred to the DBH psychiatric clinical director for review. Additional information regarding the policy clarification/ authorization criteria for high-risk CMI adults and SED children can be found on the First Health Services Website at: <https://alaska.fhsc.com/providers/provupdates.asp>.

Alaskan lawmakers fight ongoing battle to contain and lower cost of health care and Medicaid Costs reported. Alaska legislators are reviewing universal health care system bill sponsored by state Sen. Hollis French and Johnny Ellis, in an attempt to get a “jump start on the 90-day session” next year. The bill was presented at a late summer Senate Health, Education and Social Services Committee.

The proposed bill would required all residents to obtain health coverage and the State would subsidize plans for low-income residents. The bill would create a health care board that would determine subsidized plans for low-income residents. A health care board created by the bill would determine which medical services would be covered under the subsidized program and that would certify private coverage plans that meet State requirements.

This board would oversee the Alaska Health Fund, which would include contributions from state and federal sources, employers and employees. The contributions would fund a sliding-scale voucher system. Residents would be able to use the vouchers to obtain coverage from the Alaska Health Care Clearing House, a “marketplace” of various certified policies, according to the Anchorage Daily News. The legislators believe that this plan will reduce health care costs for all Alaskans. We will detail the bill and report its progress. Reprinted with permission from <http://www.kasiernetwork.org>

Lyman Hoffman, Senate Finance Committee Co-Chair received the first progress report the Department of Health & Social Services (DHSS) is making

under Senate Bill 61. Several work tasks were developed by the Finance Committee as outlined in the recommendation prepared by the Pacific Health Policy Group.

The next Alaska Healthcare Watch will include a Q &A session with Senators Hoffman and Olson on what actions are planned to control and reduce health care costs and Medicaid expenditures in the next Legislative session beginning January, 2008.

4th Annual HFMA Anchorage Educational Event:

Join us for the 4th Annual Anchorage HFMA meeting on October 30th & 31st at the Sheraton Anchorage Hotel. The program is robust, the speakers are dynamic, the topics are timely and the networking opportunities are unsurpassed. We anticipate a strong turnout so please register early!

Here are some meeting highlights –

- Reform US Healthcare ... Or Else
- Alaska Updates:
 - Medicaid Program
 - PERM Project and Program Integrity Audits
 - Telehealth in Alaska
- Medicare Update: What’s Changing From a Compliance Perspective
- Cost Based Reimbursement: Medicare Audit Preparation and Allocation Statistics
- Bridging the Information Gap Between Payers and Providers
 - Payer Forum
- Consumer Driven Charge Masters – Be the Patient
- Attaining Compliant Processes in Billing and Coding
- Common Sense Approaches to Privacy in the Revenue Cycle
- Are there Compliance Liabilities in Your Behavioral Health Department?
- Implementing and Managing a Virtual Coding Department
- Organizational Success: Aligning Employee Goals with Corporate Objectives

If you have any questions, please contact Cathy LeMay at clemay@scf.cc. ■



Mark Your Calendar

November 29, 2007
HFMA 1-Day
Workshop

Washington Mutual
Leadership Center at
Cedarbrook
SeaTac, Washinton

SEE YOU THERE!

Would you like to check your progress toward a Founders Merit Award.

Individual scoring records for the Founders Merit Award program are maintained for chapter members by LCC Council III.

To receive a copy of your record, please contact

Tom Muller

Telephone: (360) 459-8994

Email: tjwashington@reachone.com

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hfma washington / alaska chapter
healthcare financial management association

Job Opportunities

TITLE	ORGANIZATION	LOCATION	CONTACT
Accountant	Swedish Physician Division	Seattle, WA	valerie.paul@swedish.org
Accountant III	Salem Hospital	Salem, OR	amy.l.schmidt@salemhospital.org
Accountant, Staff	Michael R Bell & Company	Spokane, WA	bellcpa@bellcpa.org
Business Manager - Specialty Clinics	Alaska Native Tribal Health Consortium	Achorage, AK	yaknecht@anthc.org
Chief Financial Officer	Large Hospital	Arizona	bwhren@hwhealthfinders.com
Chief Financial Officer	Renown Health	Reno, NV	chris.corwin@kornferry.com
Compliance Auditor	Coopersmith Health Law Group	Seattle, WA	susan@coopersmithlaw.com
Controller	A Health Plan Company	Bend, OR	crichards@hewittpartners.com
Decision Support Analyst	Catholic Health Initiatives	Tacoma, WA	StaceyLucas@catholichealth.net
Decision Support Analyst	Providence Everett Medical Ctr	Everett, WA	heidi.miller@providence.org
Decision Support Analyst	Southwest Washington Medical Center	Vancouver, WA	ddomila@swmedicalcenter.com
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Dir. of Reimb. & Revenue Cycle Management	Central Washington Hospital	Wenatchee, WA	jpowers@cwhs.com
Executive Director - Health Information Prog.	Washington State Hospital Association	Seattle, WA	connier@wsaha.org
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Financial Systems Analyst	Overlake Hospital Medical Center	Bellevue, WA	Jennifer.Garrey@overlakehospital.org
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Staff Account	Highline Medical Center	Seattle, WA	gterreson@highlinemedical.org
Tax Accountant - Healthcare	Newman Dierst Hales, PLLC	Seattle, WA	nnewman@ndhaccountants.com
VP - Revenue Cycle	MultiCare Health System (MHS)	Tacoma, WA	meejk@kadlecmed.org

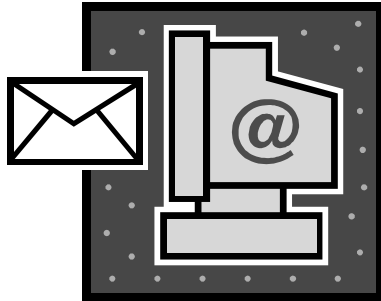
For more information on these listings or to include a listing, please contact
Kimie Delos Reyes at (888) 542-7290 / (360) 906-9258, ext 2711 or
mailto:kdelosreyes@professionalcredit.com

See also National HFMA's website (www.hfma.org) for additional job listings.

[Last Update: October 17, 2007]

HOW DO I CHANGE MY HFMA INFORMATION?

All of our chapter directory information including e-mail and addresses



for the newsletter are received from the National HFMA database.

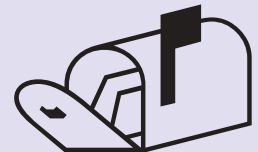
The easiest way to make changes is via the internet. Simply follow these steps to change any of your personal information.

- 1. Log on to <http://www.hfma.org>**
- 2. Go to the membership section**
- 3. Log in using the username and password prompts**
- 4. Follow instructions to access your Profile**
- 5. Edit information.**



You could win \$100 by writing an article for N.W. Outlook! Share your knowledge & experiences with other HFMA Members. You can help make a difference!

Please send information & articles for upcoming newsletters to:



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fandreasson@outreachservices.com



New Members

The Washington/Alaska Chapter is pleased to announce the following new members:

Chris Ames
Providence Health & Services

Cindy Anderson
Island Hospital

Sarah Armstrong
Ecg Management Consultants

Merrilee Awabdy
Providence Health & Services

Gary Bartlett
Whitman Hospital & Medical Center

Nicole Berard
Harrison Medical Center

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Becky Bush
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Jillian Condon
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Sharon Godfrey
Central Washington Hospital

James Goldsmith
Bank of America

Matthew Groenig
St. Joseph Hospital

Barbara Hall
South Central Foundation

Kathleen Hall
University Of Washington Medical Center

Harshad Hapse

Dana Hermann
Harborview Medical Center

Christopher Hewett
Community Health Association
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Merchants Credit Association

Sharla Hintermeister
Southcentral Foundation-Behavioral Health

Linda Hunt
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Melanie Johnson
Red Cedar Partners Llc

Julie Kaps
Peace Health St. John Medical Center

Mark Kettner
Providence Health Care

Cassandra Kincaid
First Choice Health

Bonnie Koger
Ocean Beach Hospital

Anthony Kong
Ascentium

Mary Beth Korst
Harrison Medical Center

Kara Kunkel
Group Health Cooperative

Lisa Lamb
Southcentral Foundation

Marc Lawrence
Varolii Corporation

Leanne Lewis
Virginia Mason Medical Center

Sheryl Makelim
The Salvation Army

Tim McNamara
University of Washington Medical Center

Michelle Meza
Southcentral Foundation

Jennifer Mitchell
Fairbanks Memorial Hospital

Judith Moose
Providence Health System Alaska

Tammie Nelson
Providence Health & Services

Hanh Nguyen
University Of Washington Medical Center

Rick Nystrom
Merchants Credit Association

Jeremy O'neil
Fairbanks Memorial Hospital

Premporn Phimphilai

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UPCOMING CHAPTER MEETINGS

DATE	EVENT	LOCATION
October 30-31, 2007	4th Annual Anchorage HFMA Meeting	Sheraton, Anchorage, AK
November 29, 2007	HFMA Workshop	Cedarbrook, SeaTac, WA
February 27-29, 2008	HFMA-AAHAM Vendor Fair	Sheraton, Tacoma, WA
March 2008	Second Annual Fairbanks HFMA Meeting	Fairbanks, AK
May 21-23, 2008	Spring Conference	Campbell's Resort, Chelan, WA
September 24-26, 2008	Fall Conference	Suncadia Resort, Cle Elum, WA

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NW Outlook

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