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Opinions expressed in articles or features are those of the author and do not necessarily reflect the view of the Washington/Alaska Chapter, the Healthcare Financial Management Association, or the Editor. The Editor reserves the right to edit material and accept or reject contributions whether solicited or not. All correspondence is assumed to be a release for publication unless otherwise indicated.

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



Robert Hinman
 Chapter President

It's Personal

Unlike last year when I was a Course Coordinator for HFMA's Annual National Institute (ANI) in Seattle, where I was run ragged in bright fluorescent color t-shirts, this year I was able to attend ANI in Baltimore with my own attire (some would say not much better). Not only did I feel less conspicuous, but also I was able to take in all of the great educational offerings at my own pace. Not the pace of Course Coordinator speed (non-stop running).

At ANI, HFMA's National Chairman, David Canfield, presented his theme for the year, "It's Personal." Some HFMA members have taken this theme quite literally. Ron Gleason and Virginia Lauver, two of our Spokane meeting speakers,

actually met at an HFMA meeting several years ago and just last year were married. My connection with this year's theme is a lot less dramatic, but nonetheless an important reminder of the value of HFMA.

Last November I was laid off from a start-up company that unfortunately became a start-down company. While this layoff was not totally unexpected, it certainly wasn't good timing with the economy in the doldrums. That's where HFMA came to the rescue. I learned first hand the value of networking. Almost immediately following my layoff I had scheduled meetings and lunches with key HFMA members in our community. Not everybody was waiting with a job offer, but they were there to help me find the right opportunities. Some might argue that they just couldn't stomach

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Contributing Writers

Peggy Figy	Pattie Kloehn
Al Hanson	Tom Muller
Larry Hettick	Jeannette Neibert
Bob Hinman	Gregg Terreson

THANK YOU!!!

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the thought of Washington/Alaska HFMA with an unemployed President, but I think not. I really felt that I had a

It was HFMA friends and contacts that made me aware of several job opportunities before the positions were even posted. That is the power of HFMA networking.

Chapter full of advocates working on my behalf.

It was HFMA friends and contacts that made me aware of several job opportunities before the positions were even posted. That is the power of HFMA networking. The educational opportunities are an extremely important component of each of our HFMA meetings, but I welcome each of you to tap into the power of networking and experience HFMA's theme, "It's Personal" for yourself. Everybody is welcome to attend our Leadership Council & Committee meetings and dinners at each of our conferences. It's a great way to get involved and meet Chapter members. And, of course don't miss out on the networking opportunities at Chapter social events and the hospitality suite.

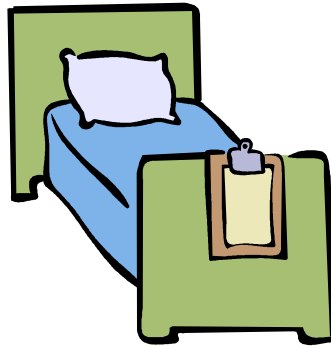
HFMA Membership - \$210

HFMA Quarterly Workshop & Meeting - \$190

HFMA References and Referral to a New Job - **Priceless**

UNCLOG CASH FLOW BY FREEING UP BEDS

by Pattie Kloehn, Zimmerman & Associates



Brand-new strategy can help hospitals improve revenue and boost patient satisfaction

Every hospital financial manager wants to improve revenue performance. Many, however, are overlooking a major jam in the cycle—patient flow.

Problem: Hospitals across the nation report they are filled to capacity and cannot accommodate additional patients.

Impact: Inability to bring in direct admits, transfers, observations and outpatient post-ops means revenue loss. Long waits for bed space mean patient satisfaction scores take a beating.

Cause: Lack of bed capacity? Actually, most hospitals find the problem is tied to inefficient departmental communication. Plus, late-morning discharge policies are largely ignored (patients often don't leave until mid-afternoon, while new admits wait in line). The common reaction from bed control: "We have enough beds—we just can't turn them over effectively."

Solution: Intake Units, Discharge Lounges and Intake/Discharge Centers.

HOW THEY WORK

The basic idea is to take key registration, nursing, bed control and customer service functions, put them all in one place, and give the unit real authority to direct patient traffic.

Imagine an Intake Unit that dispatches consent forms, medical histories, and insurance verification while a nurse performs initial patient assessments, contacts patients' doctors and initiates tests and minor treatments such as pain relief and intravenous fluids. Managing patients more effectively from the time they walk in the door means they often won't require an extensive work-up on the floor, and that makes them more likely to be accepted by a floor.

If space is a problem, a devoted Registered Nurse known as a nurse admissions coordinator can perform these duties on the run, either in the ED or on a floor. Admissions floor work personnel can go to the

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patient to perform a proper registration in the system so nurses can access patient information and chart on accounts immediately.

Likewise, patients who are ready to leave the hospital can enjoy the privacy of a Discharge Lounge while they wait for a ride home, freeing up a bed that might otherwise remain occupied. The Discharge Lounge's staff can call in prescriptions for patients being discharged or schedule follow-up appointments with their physicians. Patients can enjoy hot lunches and check their e-mail in the lounge, or just read magazines. This also gives financial counselors one last opportunity to make sure all paperwork and insurance information is in order before the patient goes home. If needed, a financial discussion can take place in a private location where the patient is in a more relaxed state of mind, after treatment has been received.

THE ESSENTIALS

Location, Location, Location. An Intake/Discharge Center's success or failure can hinge on its location. Proximity to admissions and the emergency department is desirable. Plus, try to give the space a "club-like" feel.

Centers have failed because they were located in dicey hospital real estate. Putting your Intake/Discharge Center in the bowels of the building may make nurses hesitant to release their patients

for discharge. A location next to Admitting—or an appropriate exit area where patients can actually look out the window for their ride—will be an easier sell to your nursing staff.

"Prowling" Is Essential. Waiting for nurses to utilize the center can lead to no use. You can make a world of difference by assigning a clinical specialist (RN) to actively make rounds to identify center candidates.

Give the Unit Authority. The Intake/Discharge Center owns the big picture. Give it the authority to move patients into discharge and prep patients for floor admission. The center needs authority and leadership to change practices in other departments. Staffing the center with volunteers who simply wait for patients to be escorted in will result in minimal usage.

Win Physician Buy-In. Show physicians the big picture and let them see how they contribute to success or failure. Key statistics on discharges and admissions will let doctors understand how missing an 11 a.m. discharge can impact overall hospital flow. Change policy so that a discharge can be performed with only two doctors, an attending physician and a main consultant.

Win Nurse Buy-In. Nurses may resist the lounge idea, feeling you are moving patients out of their comfort zone. Correct this perception by sharing current wait time statistics and patient satisfaction scores that need improvement.

Set the Stage with Education. Educational videos or pre-admission tours can help patients get used to the idea of your center or lounge. When it becomes part of the routine, patients will feel comfortable waiting in the Discharge Lounge for a ride after discharge hours.

"Dress" for Success. A separate Discharge Lounge can feature reclining chairs, private bathrooms and other amenities. An Intake Unit may require private rooms and gurneys. Design your center or lounge to solve your biggest patient flow problems.

LOOSEN UP YOUR BOTTLENECKS

Freeing up beds isn't all that easy. Intake Units, Discharge Lounges and Intake/Discharge Centers, however, can alleviate the common pressure points that slow down patient flow. Effectively handling your patient throughput can mean added value to your bottom line through increased revenue and greater patient satisfaction. ■

Pattie Kloehn is executive vice president at Zimmerman & Associates, a leading healthcare revenue cycle consulting and publishing company. This article is reprinted with permission from Patient Access Monthly, a newsletter providing practical tools and essential information for maximizing patient access functions. To contact Pattie Kloehn or find out more about Patient Access Monthly, please call (800) 525-0133.

Charity Care Tops \$135 Million in 2001

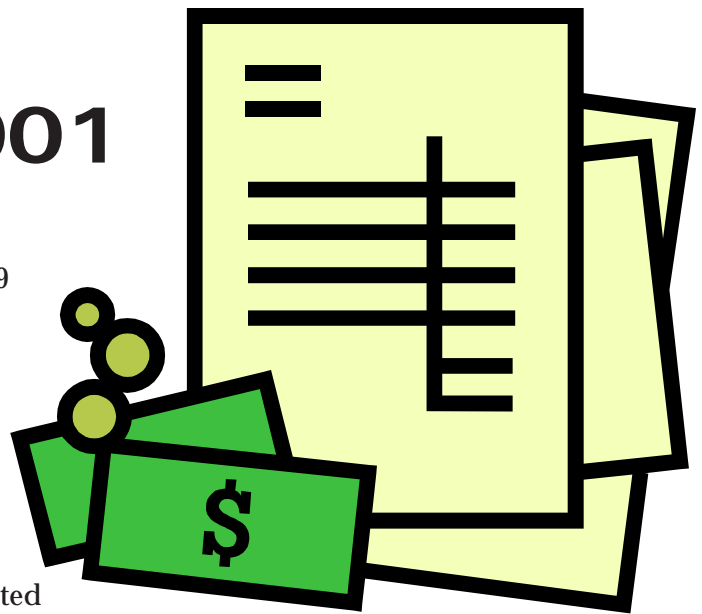
by Larry Hettick, Department of Health

Washington hospitals provided \$135 million in charity care for 2001, which is an increase of 13.5% above 2000 and an 20.0% increase above the 1999 levels. Charity care for 2001 was 1.08% of total hospital revenue and 2.12% of "adjusted revenue" (with Medicare and Medical Assistance Program payments deleted for comparisons focused on each hospital's base of primarily private payments). From 1989 until 1993, charity care steadily increased in total dollars and as a percent of revenue, while from 1994 through 1997, charity care steadily declined in both categories. Total charity care for 1998 increased for the first time in five years. This trend

continues from 1999 through the 2001 level.

Eighteen hospitals each provided more than \$2 million of charity care in FY 2001, which accounted for 73% of the statewide charity care. Regionally, King County clearly provides the largest dollar amount of charity care, with Harborview Medical Center alone providing approximately 27 percent of the statewide total. Rural hospitals report less charity care, in proportion to their total adjusted revenue, than do urban

hospitals. Rural hospitals also have a higher proportion of revenue from Medicare and Medical Assistance (including Medicaid), resulting in a smaller base of private sector payers to which charity care costs could be shifted.



Overview of Hospital Charity Care in Washington 1992-2001

Year	Total Revenue	Adjusted Revenue	Statewide Charity Care	Percent of Total Rev	Percent of Adj Rev
1992	5,386,977,916	2,505,987,814	107,230,469	1.99%	4.28%
1993	5,656,853,442	2,604,329,914	117,269,462	2.07%	4.50%
1994	6,013,233,056	2,836,757,950	111,947,855	1.86%	3.95%
1995	6,393,992,319	3,141,574,942	110,172,746	1.72%	3.51%
1996	6,831,863,277	3,351,784,781	105,767,242	1.55%	3.16%
1997	7,466,307,575	3,874,390,027	102,008,794	1.37%	2.63%
1998	8,283,508,258	4,406,201,947	108,371,473	1.31%	2.46%
1999	9,495,164,654	5,131,945,589	112,577,000	1.19%	2.19%
2000	11,009,631,695	5,736,296,849	119,081,863	1.08%	2.08%
2001	12,559,409,550	6,374,245,419	135,140,421	1.08%	2.12%

Source: Washington Department of Health Hospital Financial Data Year-end Reports FY 1992-2001

The hospital accounting concept of "adjusted revenue" subtracts Medicare and Medical Assistance (including Medicaid) charges from total patient care

revenue to allow meaningful comparisons of hospital levels of charity care. Medicare and Medicaid have specifically excluded participation in covering

charity care from their prospectively-determined payment levels. Since the payments that hospitals receive from Medicare and Medical

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Assistance do not cover charity care, the hospitals adjust their rates to recoup the charity care

from their base of private purchasers and payers. This private paying base differs widely among hospitals as a percentage of their business. Therefore, the use of "adjusted revenue" allows for a

comparison of hospital charity care as a percentage of this meaningful base of privately-sponsored patients.

Charity Care By Region 1998-2001

Hospital Region	Charity Care as a Percentage of Adjusted Revenue			
	1998	1999	2000	2001
King County	2.88%	2.44%	2.29%	2.33%
Puget Sound	1.82%	1.79%	1.80%	1.90%
Southwest Washington	2.36%	2.27%	1.99%	1.75%
Central Washington	2.48%	2.37%	1.95%	2.41%
Eastern Washington	2.20%	1.76%	1.84%	1.78%
Statewide	2.46%	2.19%	2.08%	2.12%

Source: Washington Department of Health Hospital Financial Data Year-end Reports FY 1997-2001

This is a brief excerpt from the report "Washington State 2001 Charity Care in Washington Hospitals" published by the Washington State Department of Health. To view the entire report, visit the Department's website at www.doh.wa.gov/EHSPHL/hospdata/. For a printed copy of the report please contact Larry Hettick by telephone at (360) 236-4210 or by electronic mail at larry.hettick@doh.wa.gov.

**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) 236-4215

Facsimile: (360) 664-8579

Email: tom.muller@doh.wa.gov



Mark Your Calendar

Sept. 17-19, 2003

**Joint Workshop
& Meeting**

with

Oregon Chapter

SEE YOU THERE!

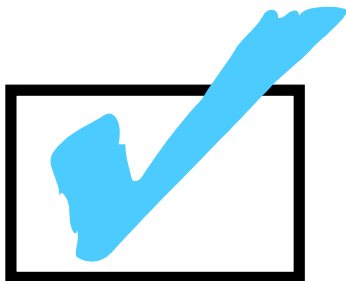
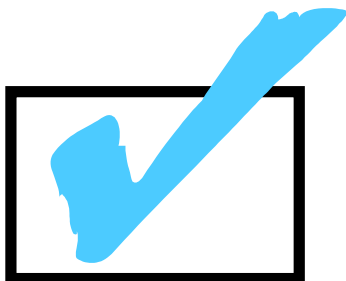
REMINDER: Now is a good time to double check the accuracy of your membership listing, which will appear in the upcoming HFMA 2003-2004 Directory.

Features available on HFMA Web site

Members can look up chapter membership records on HFMA's Web site, www.hfma.org. In addition to the paper directory you receive from your chapter, you can access up-to-date information on-line. The information printed in your Chapter paper directory comes from this database. Please take a few minutes to double check the accuracy of this information. You can locate members of your chapter by last name, company, or city. But that's not all. You also can update your own record on-line. Simply find your name in the directory and select "Click here to edit your information!" Your changes will be processed in a timely manner by HFMA's Member Service Center and will appear following the next upload of the membership data, which currently is scheduled for every Thursday afternoon.

To access the directory, go to www.hfma.org and click on Membership Directory in the members area. You'll first need to log in. Input your seven-digit member ID number as the user name. Your password, by default, is your last name – case-sensitive, unless you have created a new password. You will then be linked automatically to your own chapter's directory. You can access only your own chapter's directory and edit only your own record.

Another innovative feature is a virtual shopping area. By clicking on the shopping cart icon, members and visitors alike can purchase any of HFMA's products on-line. The user-friendly menu allows you to search by subject area to see all that HFMA has to offer on that topic. The information will be updated often, so visit this area regularly to stay abreast of HFMA products and resources.



Tip: Double check these items in your on-line record:

1. The exact spelling of your name and title.
2. Is the organization you work for listed correctly?
3. Is your address correctly listed?
4. Are the area codes and phone numbers correct?
5. Are the phone numbers you want printed in the directory listed (e.g.: phone, fax, cell)?
6. Is the listing of your email address correct?

This is the information that other members will have available to them in the upcoming 2003-2004 HFMA directory.



hfma washington / alaska chapter
healthcare financial management association

Job Opportunities

POSITION AVAILABLE	ORGANIZATION	LOCATION
Chief Financial Officer	United General Hospital	Sedro Woolley, WA
Chief Financial Officer	Mesa View Hospital	Mesquite, NV
Chief Financial Officer	Washoe Medical Center	Reno, NV
Client Financial Services Supervisor	Healthcare service organization	Downtown Seattle, WA
Controller	Aspen Valley Hospital	Aspen, CO
Director of Audit & Training	InSight Health Corp	Lake Forest, CA
Director of Business Services	Mendocino Coast District Hospital	Mendocino, CA
Director of Patient Financial Services	Overlake Hospital Medical Center	Bellevue, WA
Director of Patient Financial Services	Acute care hospital (\$150M Gross Rev)	Eastern WA
Finance Director	Enloe Medical Center	Chico, CA
Financial Analyst	Guidance Staffing	Seattle – Portland Area
Financial Services Director	North Idaho Day Surgery	Post Falls, ID
Financial Services Supervisor	Hall Kinion (Recruiters)	Seattle, WA
Manager, Audit and Consulting Services	Catholic Healthcare Audit Network, LLC	Spokane, WA
Manager, Financial Services Supply Chain Mgmt	Scripps Health	San Diego, CA
Medicare Cost Report Coordinator	Harborview Medical Center	Seattle, WA
Payroll Manager	Children’s Hospital	Seattle, WA
Regional Director Patient Financial Services	St. Joseph Health System – Humboldt Cty	Northern CA
Reimbursement Analyst/Decision Support Team	Affiliated Health Services	Mt. Vernon, WA
Reimbursement Manager	Legacy Health System	Portland, OR
Revenue & Reimbursement Specialist	Columbia Memorial Hospital	Astoria, OR
Revenue Cycle Manager	PeaceHealth	Eugene, OR
Revenue Cycle Manager	Hall Kinion Health and Medical Svcs	Seattle, WA
Revenue Management Coordinator	Harborview Medical Center	Seattle, WA
Revenue Manager – PFS	Seattle Cancer Care Alliance	Seattle, WA
Senior Auditor	GMAC-RFC Health Capital	Portland, OR
Senior Financial Analyst	Guidance Staffing	Seattle – Portland Area
Staffing Coordinator-Medical Division	Guidance Corporation (recruiting)	Federal Way, WA

last updated: 7/14/03

FOR MORE INFORMATION...

...on these listings or to include a listing, please contact

Peggy Figy, (509) 482-2160 or figyp@holy-family.org

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

Mike DeLuca Earns Best Newsletter Article Award

by Tom Muller
Membership Services Chairman

“Nursing/Finance Collaboration: Philosophy & Application” authored by Mike DeLuca, was voted the best newsletter article for 2002-2003. The article summarizes the presentation “Managing Nursing Salary Costs” which was presented by Mary Nisbet and Michael Fox at the 2002 ANI in

an internal audit is, why it is necessary to have an internal audit, the value of having an internal audit and how to start the internal audit function. This article appeared in the February-March 2003 issue of *NW Outlook* and earned \$75 for Grant. Angela Hamilton was also an author of this article, but since she was not a member of Washington-Alaska HFMA, she was not eligible to share in the award.

“The Rural Community Hospital Assistance Act of 2002,” authored by Eric Moro, is the article that won the \$50 reward for third place in the best newsletter contest. This article appeared in the June-July 2002 issue of *NW Outlook*. In this article Eric discussed the ways that the Rural Community Hospital program would have enhanced reimbursement for Critical Access Hospitals.

Council III extends congratulations to the winners and a big “thank you to all members writing articles for the *NW Outlook*. In

addition to the winners, the following members wrote articles appearing in the *NW Outlook* from June 2002 through May 2003: David Cartier, Sean Douglas, Tom Dingus, Peg Figy, Jim Heilsberg, Lee Johnson, Julie Meek, Tom Muller and Jim Rowson.

Another big “thank you” to Rob Geer, Angela Hamilton, Larry

Hettick, Randy Morgan, and Jim Smith for the articles they contributed to *NW Outlook*. However, they were not eligible for the best newsletter contest, since they were not members of Washington-Alaska HFMA.

You are strongly encouraged to submit articles for upcoming editions of the *NW Outlook* chapter newsletter. The 2003-2004 best newsletter contest starts with this edition (June-July 2003). As an

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incentive for writing articles, winners in the best newsletter contest receive \$100 for first place, \$75 for second place, and \$50 for third place, as well as recognition from the readers of *NW Outlook*.

Members of Council III vote to pick the winners immediately prior to the May Board of Directors meeting each year. The Board then acts on the recommendations from Council III. All Washington-Alaska HFMA members are eligible to compete for these awards. However, articles that are a regular feature of *NW Outlook* such as the President’s corner, Job Opportunities, Founders Award winners, etc. are not included in the contest.

Couldn’t you find use for an additional \$100? If so, get started on those articles. You can’t win if you don’t write. So, please submit those articles to Ginger Rhoades, Newsletter Editor, at (509) 685-2406 or rhoaddev@mtcarmelhospital.org ■

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Next, you must set short- and long-term goals. You must set clearly definable and measurable goals to meet your mission. Set a goal related to how many nights you plan to be home for dinner per week; how many times you intend to take your kids to school; how many times are you going to call or see mom, dad, or grandma. Also, include professional goals – you may all ready be doing this as part of your job performance review process.

Finally, you will need to develop action steps to achieve your goals. This will be where you really get

“Do you want your children to remember you as a dad with a good job or as a good dad?”

down to the nitty gritty of planning your days, weeks, months, etc. The key will be to maximize the time you spend working toward your goals and minimize the time you spend on less important things.

A little saying that I heard a few years ago that I find useful when I am spending too much time at work and not enough with my family is “Do you want your children to remember you as a dad with a good job or as a good dad?”

Good luck. The daily choices necessary to successfully balance your life will be difficult. We will make some wrong choices but the obtainable objective is to make more good choices than bad choices. ■

Nursing/Finance Collaboration
Philosophy & Application
*by Duane Michael DeLuca, Finance Manager
Group Health Cooperative, Seattle, Washington*

This article is the first in a two-part series. Part one focuses on “Managing Nursing Salary Costs,” presented by Mary Nisbet and Michael Fox at this year’s ANI, which was by far the most effective workshop I attended. Part two will detail specific applications and results of similar work in my own experience.

The strength of Nisbet and Fox’s presentation was in the thorough exposition of both philosophy and concrete detailed strategies and tools. Given a whole day on the topic, breakout sessions in which we could have problem-solved issues unique to our own organizations would be very useful as well.

Nisbet began with a discussion of industry trends, quickly moving from the most general to those specific to the dynamics frequently encountered between Nursing and Finance. We are in an industry where minimum staffing ratios are becoming part of our states’ legislations and vacancy rates range widely and average on the order of 13%. The issues of foremost importance to Nursing and Finance often drive a practical divergence of the two.

For Nursing, quality of care is the first priority (as it should be). The acuity of the inpatient population is rising, staff regularly covers for vacant positions, and regulatory documentation requirements are increasing (recall Phyllis Cowling’s

quote of the PricewaterhouseCoopers study showing that we complete 36 minutes of paperwork for each hour of care in the acute setting).

At the same time, Finance is focusing on increasing costs, decreasing margins and the resulting decreases in capitalization and solvency of our organizations. On the surface, it can appear that the two are working at cross-purposes, needing to spend more money and spend less money with valid reasons for both.

In Nisbet and Fox’s experience, the most effective approach to achieving a sustainable decrease in the Nursing cost structure begins with each team developing an understanding of each set of issues. This approach in summary has four parts:

- 1) Mutual understanding. Nursing needs to understand their impact on financial performance and Finance needs to understand how Nursing Operations functions – what drives variation and decision-making.
- 2) Meaningful tools and information. Real-time shift-by-shift key indicator reporting is critical. Information needs to be actionable and meaningful to all users.
- 3) Collaborative work. Joint problem solving and implementation, when appropriate, is the standard method for addressing an issue.
- 4) Full accountability on the part of the operations manager. Nursing managers need to have the latitude

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This years winning article by Mike DeLuca.

Seattle and again at the May 2003 chapter workshop in Spokane. This article appeared in the August-September 2002 issue of *NW Outlook* and earned \$100 for Mike.

Second place in the best newsletter article contest went to Grant Baumgartner for his article “Internal Audit – The Benefits Are Clear.” This article explains what

CORPORATE SPONSORS

The Chapter would like to thank the following companies for 2002 - 2003 sponsorships:

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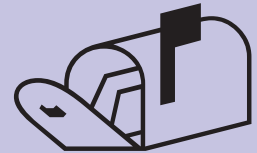
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The enVision Group

WIN \$100.00



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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Mount Carmel Hospital
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Colville WA 99114

Phone:
509-685-2406

E-mail
rhoadev@mtcarmelhospital.org



**Annual National
Institute,
June 22-25,
2003,
Baltimore,
Maryland**

Region 11: Region 11 Chapter Presidents receive Helen M. Yerger Awards for the Region 11 Symposium.

Reception: Julie Meek, Region 11 Exective for 2004, Scott Johnson, Oregon Chapter President, Bob Hinman, Washington/Alaska President and Gregg Terreson, Washington/Alaska President-Elect enjoy the President's Reception at ANI.



Washington/Alaska Chapter: Bob Hinman 2003-2004 President accepts Washington/Alaska Chapter 2002-2003 awards from National Immediate Past president Phyllis Cowling and David Canfield, 2003-2004 National President. Tom Dingus, WA/AK 2002-2003 President was unable to attend to accept the awards from his term as President.

Al Hanson Receives National Award

At the recent ANI meeting in Baltimore, Allan B. Hanson, FHFMA, CPA and a long time member (and mentor of many) of this chapter, was awarded the prestigious 2003 Frederick C. Morgan Award for his contributions to our chapter, our region and HFMA overall. This award is the highest individual award that can be received in HFMA.

It was really an honor to see Al get this award - I could not help but think of all of the chapter members that would have wanted to be there - many who are involved in HFMA to this day as a result of Al's friendship and encouragement.

by Gregg Terreson



Photo by Joyce Gibb

Al and Bev Hanson at awards ceremony.

explain what it was. I regained enough composure to tell her I knew what it was; I was just having trouble believing it was to be bestowed upon me.

We go through life and find ourselves doing what we must at times. Often our travels are without benefit of a road map. We sort of wander down life's byways looking for something we can do to pay the bills and, hopefully, make some difference.

My entry into health care was serendipity at its finest. I had stopped at Deaconess Hospital to get a friend for lunch. As we were leaving his office the phone rang. He hesitated and then picked it up. I sat down and while he was on the phone noticed a job posting for financial analyst. Had Ross not answered that call, I would likely not be here today. But, thankfully, he did.

While my entry to health care finance was coincidence, my

course of action once committed was calculated. I quickly recognized the arena was more than debits and credits. I hitched my wagon to HFMA as my source for information. I joined and became active.

The friendships forged over the years are dear to me. They alone mark my time with HFMA a success.

The knowledge garnered from colleagues and seminars has been of incredible value to me and to my employers. Because HFMA provided the critical resources I saved time finding answers to complex problems. In those early years, every meeting meant money in the hospital's bank.

For the past nineteen years I have had my own practice. I remember reading an article years ago about the importance of finding a niche. It was a great idea, but the author failed to provide instructions on locating or defining a niche. I fell into mine. That I was successful is in large part due to contacts I had made in HFMA.

A college professor, Patrick Reed O'Shaughnessy, made it clear to his students that giving back to the profession was part of being a professional. HFMA has been my primary vehicle to meet his charge. What PRO did not explain was that in participating in a professional organization, you take much more than you can ever repay.

Today HFMA has bestowed upon me an honor beyond my wildest expectations. I look at the contri-

continued on next page...

COMMENTS UPON RECEIVING THE FREDERICK C. MORGAN AWARD

by Al Hanson

This is an amazing honor. I was overwhelmed when Phyllis Cowling told me I was to be this year's recipient. I was stunned and at a loss for words - those who know me may doubt that. As I stammered and stuttered, she began to

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butions so many before me have made and am humbled. I am incredulous that anyone would take the time to nominate me. At times I am tempted to wonder what the final judges were thinking. The Morgan Award is ostensibly to note the contributions I have made to HFMA. I cannot stress enough that the ledger is way out of balance and it is in my favor.

HFMA can do for you what it has done for me. The industry is under tremendous pressure. The future is cloudy at best. But as Carly Simon sang, "These are the good old times." There are pathways through the muddy waters. Most of them can be found at chapter, region and national meetings and symposiums.

My grandmother gave some great advice, "If you don't have time to do it right the first time, where will you find time to fix it?" I recommend that you continue to be active in HFMA. Seek a leadership position in your chapter. This is a volunteer organization and your active presence is crucial to its success. It is easy to let the pressures of the job keep you at your desk. Don't fall into that trap. Using the problem you have to avoid finding the solution you need is not logical. In the long run both you and the organization suffer. To think smart you need to be smart. HFMA is the door to health care smarts.

Many people have made this possible. I will never be able to repay them. I can only hope that by emulating their generous natures, I will be a part of keeping their traditions alive. So as not to offend the living by omission, I

would like to mention four colleagues who have died. Bob Ashback encouraged and supported my membership. Alex Ford was a good friend and confidant. Ray Raines was my HFMA mentor and hero. Shirley Hondel showed us all what true courage is. These four members represent all that is good and right with this organization.

There is one person who really made the most difference. One who supports me and encourages me and grants me the time to participate in HFMA, what she will tell you has always been a pleasure to me. So thank you for everything, dear. My wife, Bev.

(I want to go off record here. Dave, I really owe this to you. If you and the Southern California and San Diego chapters had not worked so hard to make the region symposium a success I don't think I would be here today. So, Dave, you really got it right - HFMA is personal!)

Thank you, thank you, thank you and may God bless you and yours.

Chapter Member High Scorer on Certification Exam

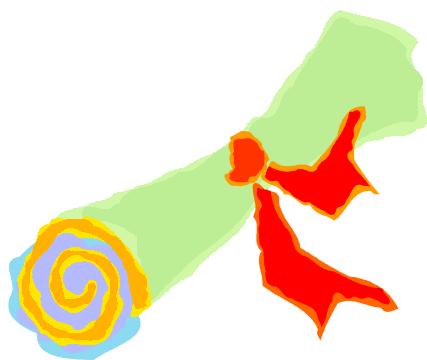
Craig Rixon, Corporate Controller of Peace Health in Bellevue, was recognized at the Certification Lunch on Tuesday June 24th at the ANI in Baltimore as the nation's highest scorer in the past year on the Physician Practice Certification Exam.

Congratulations on an outstanding effort!

About the Frederick C. Morgan Individual Achievement Award

The Frederick C. Morgan Individual Achievement Award, HFMA's most prestigious individual honor, is designed to recognize a single HFMA member for outstanding contributions to the Healthcare Financial Management Association. The award recognizes an individual who has made a significant contribution to the Association as a result of substantial activity over the course of a career.

All active members of HFMA are eligible for the award, except HFMA National officers and directors and members of the award judging committee during their terms of office. In selecting the award winner, the judges consider the significance of the nominee's accomplishments and contributions to HFMA at the chapter, regional, and national levels; and whether the nominee has earned any other awards. Only one award is presented annually.



Chapter Recognition Awards

by Tom Muller, Membership Services Chairman

Members who are willing to volunteer their time and energy are essential to the survival of volunteer organizations, such as HFMA. Washington-Alaska chapter is fortunate to have many members who are willing to make this commitment.

This year the chapter was pleased to recognize four of these members for outstanding contributions to the chapter and its members. The ANI scholarship was presented to **Eric Moro** and the President's Awards were presented to **Elaine Phelps, Mark Flaten** and **Rik Lewis**.

Eric has been a speaker at numerous chapter functions over a long period of time. In addition to the programs he has been able to prepare in advance, he has also filled in when other speakers failed to appear. Eric has consistently been very active in both the LCC and the Matrix for several years. This included four years in which he served as a committee chairman. Over the years, Eric has established a reputation as someone who can be counted on to do what needs to be done.

Elaine has taken on the difficult task of editing the annual membership directory for the past year. This involves finding and compiling information from a

variety of sources, often involving numerous contacts in order to obtain the necessary information. Then the actual production and distribution of the directories must be coordinated with the printer.

**Congratulations
Eric, Elaine, Mark and Rik
and a big "thank you" from
the Chapter for the effort
you have expended to
earn these awards.**

Mark and Rik have taken over the chairmanship of the annual joint meeting with AAHAM. In addition to coordinating the activities of two organizations, it also involves considerable effort in recruiting participants for the vendor fair and insuring that each vendor has

what they need to set up and operate. Mark has been active on the Keynote Speaker and Current Events Committee (Committee C) of the LCC and Rik has been active on the Rural Health Committee (Committee E) of LCC.

All members of the chapter are eligible for these awards except officers and directors. Recipients of the ANI scholarship are only eligible to receive this award once, but remain eligible to receive the President's Award. Nominations for these awards are made by each council and committee of the LCC at the February meeting.

Congratulations Eric, Elaine, Mark and Rik and a big "thank you" from the chapter for the effort you have expended to earn these awards. ■

Snapshots



from the Chapter Quarterly Meeting in Spokane at the Historic Davenport Hotel



Chapter Director Tom Muller working hard at the registration desk.



Proud Father and Daughter, Al Hanson and Chapter Sponsor, Sheryl Kennedy

PRESIDENT'S AWARD

KEYNOTE SPEAKER



Dr. Humor turned out to be REALLY FUN!



Tom Dingus presents Eric Moro of Providence Services with the President's Award for outstanding service.

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SOCIAL HOUR



Tom Dingus had to attend one last Survivor tribunal council at which he was voted out of the Presidency.



Former HFMA National President and a current Chapter Sponsor, Jim Whitman, on the right networking at the social hour with Michael Banks of Sacred Heart Medical Center.



The Survivor Jury that had a final opportunity to say something about each Survivor in an effort to sway the voting. Funny how they all had something to say about Tom and why he should be the next to go!

INSTALLATION



The official passing of the President's Gavel from Tom Dingus to incoming President Bob Hinman (note the smile of relief on Tom's face!)

Installation of the new Chapter Officers. From Left; Outgoing President Tom Dingus, Incoming President Bob Hinman, President-Elect Gregg Terreson, Secretary Eric Teshima and Treasurer Lee Johnson.

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EDUCATION SESSION



Judy Veazie and Lee Johnson conducted a very “constructive” session about Revenue Cycle Management!



Chapter AAHAM Liasion Joyce Gibb ever attentive at the outstanding educational sessions.



Attention Washington Alaska HFMA Members:

The 2004 HFMA Region 11 Healthcare Symposium is approaching and as the lead chapter in coordinating the event, the WA/AK chapter is looking for volunteers for Course Coordinators. The event is being held from January 25-28 at the Rio All Suites Hotel and Casino in Las Vegas.

A course coordinators responsibilities are:

1. Obtain and distribute speaker handouts
2. Introduce Speakers in breakout sessions
3. Monitor sessions' start and end times
4. Thank speakers
5. Distribute Evaluation forms, and collect them when completed

Basically, course coordinators manage the flow of the conference. To appropriately manage a conference of this size, we are seeking 12-15 volunteers. The chapter understands the importance of the educational value of this conference, so we hope to be able to assign volunteers to courses, according to interest. The categories or tracts are: 'Payment / Regulatory'; 'Revenue Cycle'; 'CFO / Strategic'.

If you are interested in learning more about being a Course Coordinator please contact: Corey Shank - cshank@pacificmedicaid.com - (800) 544-9923, or Peggy Figy - figyp@holy-family.org

As a benefit, WA/AK Chapter members who volunteer and are selected to be a Course Coordinator will be automatically eligible for the \$200 Chapter Rebate Program for attending the Symposium.

HFMA's Washington/Alaska Chapter RECEIVES NATIONAL AWARDS

CHICAGO—The Healthcare Financial Management Association's (HFMA's) Awards were presented to the Washington/Alaska Chapter in June 2003 during the 50th Annual Chapter Presidents Dinner and Meeting at HFMA's Annual National Institute in Baltimore, Maryland.

The **Helen M. Yerger Award** recognizes chapters for outstanding performance achieved by excellent efforts in programs, services, and administration. Categories include Education which recognizes a singular educational program. Each of the Chapters in Region 11 received this award for The Region 11 Symposium. The award was one of many honors that HFMA's voluntary leaders accepted on behalf of their chapters.

In addition to the **Yerger Award**, the Washington/Alaska Chapter also received **The Sister Mary Gerald Bronze Award of Excellence for Education**, which recognizes chapters that achieve outstanding performance in educational programming.

The Gold Award of Excellence for Chapter Performance in Certification was received by the

Washington/Alaska Chapter for achieving outstanding performance in certification support and maintenance. The honor is based on an increase in the number of chapter members who passed a certification examination in the chapter year.

The fourth award received by the Washington/Alaska Chapter was **The Gold Award of Excellence for Membership Growth and Retention**. The Awards of Excellence for Membership Growth and Retention recognizes chapters that achieve outstanding performance in membership growth. The honor is based on the percent of net membership growth at the end of the chapter year.

HFMA President and CEO, Richard L. Clarke, says, "The Washington/Alaska Chapter provides a great example for HFMA's 2003-04 Chariman's theme —*HFMA: It's Personal*. So many of their members are actively involved...contributing, sharing, and making a difference. Everyone applauds their family spirit, which shines through their many accomplishments."

About HFMA:

HFMA is the nation's leading membership organization for more than 32,000 healthcare financial management professionals employed by hospitals, integrated delivery systems, managed care organizations, ambulatory and long-term care facilities, physician practices, accounting and consulting firms, and insurance companies. Members' positions include chief executive officer, chief financial officer, controller, patient accounts manager, accountant, and consultant. HFMA offers educational and professional development opportunities, information on key issues, technical data and networking opportunities, with the ultimate goal being to create a more supportive environment in which members do their business. For more information, visit the Association's web site at www.hfma.org.



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CHARS Inpatient Discharge Data Collection for the 21st Century
By Jeannette Neibert, Department of Health, CHARS Manager

Exciting changes have occurred since our last article in the NW Outlook (April 2002). The Washington State Department of Health (DOH), CHARS launched its new web-based inpatient discharge data collection system in May 2003. CHARS – the Comprehensive Hospital Abstract Reporting System – expects to provide numerous benefits for data users including:

- Improved data quality, resulting in statistical continuity for gauging the health and wellness of Washington citizens;
- Expanded reporting capabilities for monitoring public health threats, and conducting analyses of trends in disease and chronic health conditions;
- Enhanced data-capturing tools for measuring effectiveness of healthcare according to established quality indicators

CHARS is HIPAA-compliant, and offers a place to get inpatient discharge data online while protecting confidential information, by limiting access and encrypting data via Secure Web technology.

Take a few minutes and visit our website at <http://www.doh.wa.gov/ehsphi/hospdata/> where you'll discover the DOH mission actively at work "to protect and improve the health of people of Washington State."





Welcome New Members



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

Lori Croft

Director of Business Development
Resource Corp of America
Kirkland, WA

Hunt J. Caley, HJC

Sr Financial Analyst/
DSS Coordinator
Children's Hospital & Reg Med Ctr
Seattle, WA

Barbara Searls

Chief Financial Officer
SEARHC Medical
Juneau, AK

John W. Holtermann

Director of E-Business
Gig Harbor, WA

Jarod B. Crooks

Manager Budget &
Cost Reimbursement
Sacred Heart Medical Center
Spokane, WA

Susan E. Lennon

Financial Analyst, Surgical Services
Overlake Hospital Med Center
Renton, WA

Brenda A. Greer

Decision Support Manager
PeaceHealth
Bellingham, WA

Perviz Gilani

Senior Financial Analyst
Children's Hospital & Reg Med Ctr
Seattle, WA

Christie Wilson-Lerner

Senior Financial Analyst
Providence Everett Medical Center

Jim D. Lamb

Director Patient Financial Services
Alaska Native Medical Center
Anchorage, AK

Janet M. Daley

Grants & Contracts
Accounting Manager
BRI @ Virginia Mason
Seattle, WA

Brad Senstra

Director of Finance
Virginia Mason Medical Center
Seattle, WA

Robert Eiserman

Marketing Consultant
MEDITECH
Westwood, MA

Jennifer Lange-Rebner

Manager Revenue Enhancement
Multicare Health System
Tacoma, WA

Maura J. Moorefield

Student
Bowie, MD

Lisa Jensen

Pre-Sales Manager
Lawson Software
Newcastle, WA

Christy A. Martin

Chief Finance Officer/ COO
Lynx Medical Systems, Inc.
Bellevue, WA

Steve S. Ver Valin

Controller
Good Samaritan Community
Healthcare
Puyallup, WA

Elaine M. Tice

AP & Payroll Manager
MultiCare Health System
Tacoma, WA

Sue Miller

Financial Manager
Good Samaritan Outreach Services
Puyallup,

Stacy Millar

Revenue Specialist
University of Washington
Seattle, WA

Pamela D. Hill

University of Washington
Seattle, WA

Christine L. Brinton

Senior Investment
Management Consultant
Smith Barney
Silverdale, WA

Douglas Berger

Sr. Investment
Management Consultant
Smith Barney
Silverdale, WA

Peter F. Lyster

Director
Kroll Inc.
Seattle, WA

Gail Sarchet

Staff Accountant
Michael R. Bell & Company
Spokane, WA

Paul C. Scott

CPA
Michael R. Bell & Company
Spokane, WA

**Get
Connected!**



UPCOMING CHAPTER MEETINGS

EVENT	DATE	LOCATION
HFMA Workshop & Meeting	September 17-19, 2003	The Benson Hotel Joint Meeting w/Oregon – Portland
HFMA Workshop	December 4, 2003	Embassy Suites – Seatac
HFMA Region 11 Symposium	January, 2004	Rio All Suites & Hotel – Las Vegas
HFMA Workshop, Meeting & Vendor Fair	February, 2004	Sheraton – Tacoma
HFMA Workshop & Meeting	May 18-20, 2004	CDA Resort – Coeur d’Alene
HFMA Workshop & Meeting	September 22-24, 2004	Port Ludlow Resort – Port Ludlow
HFMA Workshop	December 2, 2004	Embassy Suites - Seatac

www.waakhfma.org



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