

MISSISSIPPI

Headlines

HFMA President's Message - Re-Inventing Our Chapter



Dinetia M. Newman

As the Chapter year 2004-2005 draws to a close, our Chapter, our member organizations and individuals and, in fact, our world, has changed in large part from the world we knew in May 2004. Oil and gasoline prices are climbing, interest rates are increasing quarterly, CMS has implemented another prospective payment system and expanded Medicare prescription drug coverage is eminent. These “world-wide” changes impact the Mississippi Chapter HFMA, the educational programs it offers and member participation.

For example, many health care employers have restricted employees' travel due to increased gasoline prices and other budgetary restrictions. The consequence of these restrictions frequently means that members living in the south cannot travel north for a meeting and vice versa. Another example is the frequently changing regulatory requirements for health care providers. Since January of 2005, CMS has issued multiple new regulations, some of which put in place new payment requirements and implement privacy and security enforcement and procedures. How should the Chapter respond to these changes?

I believe the Chapter must re-invent itself. What I mean by “re-invent itself” is that the Chapter must find new ways to serve its members, new ways to present educational opportunities, new ways to familiarize members with the changing face of the regulatory environment and new ways to gather in community. One of the Mississippi Chapter's long-tested educational opportunities is the Council meeting. For years, our Chapter has offered training through the North, Central and South Councils. As my service as an officer ends, I pledge to assist the new officers and board with continuing these opportunities through HFMA solely

or in concert with the Mississippi Hospital Association, TriSpan and others.

Another tool that HFMA members can use is online and teleconference training. National HFMA offers a myriad of programs accessible either online or in teleconference format. In fact, this spring, HFMA offered to Mississippi Chapter members a free opportunity for training received by May 1. I hope that you were able to take advantage of this free educational opportunity.

Certainly, there exist many more ways for the Chapter to encourage and foster education, character building and leadership experiences. The incoming officers and board are gifted and dedicated persons who will brainstorm and identify appropriate vehicles to meet our changing provider and personal needs.

As this is my final president's message, I would be remiss were I not to express my utmost thanks to the 2004-2005 officers, board members, committee chairs, Karen Stuart and numerous others who have made the 2004-2005 Chapter year such a success. I encourage all of you to support the incoming officers, board members and committee chairs and to utilize the opportunities that the Mississippi Chapter HFMA offers to us all. Thank you again and best wishes for a magnificent 2005-2006 year!

Please visit our Chapter's Web site often, as information changes frequently

www.mshfma.org

HFMA 2005 National Meeting (Annual National Institute)

This year, HFMA's 2005 Annual National Institute (ANI) is being held June 26-30 in Las Vegas. If you register by May 19, you'll save \$76 on your registration fee.

Move your organization forward by attending four days of focused, practical education sessions. You'll walk away with ideas and tools you can use to achieve outstanding financial and operational results.

Network with experts and your peers. It's not often that leading healthcare financial professionals and your colleagues from across the country stop by to visit. Don't miss this opportunity to tap into their collective expertise!

Enhance your career options with Breakout Sessions and Preconference Programs specifically designed to help you succeed, including the *CFO Boot Camp* where you'll get the chance to network and meet with new and soon-to-be chief financial officers and *Your Golden Rolodex – How to Network for*

Results that will help you develop your network before you need it. Additionally, National Coaching Courses to prepare for HFMA's certification tests will also be offered.

Explore the latest financial management technology, systems, products and services as you meet and mingle with 240 exhibitors during the ANI 2005 Idea Exchange Exhibit.

Make ANI and Las Vegas a vacation getaway. This year's ANI location of Las Vegas offers hundreds of show, restaurant and shopping venue options where attendees can unwind.



For complete information on ANI and to register, visit

www.hfma.org/ani or contact HFMA's Member Services Center at (800) 252-4362, extension 2.

ANI offers a great opportunity to develop solutions, share ideas, and gain insight through education and networking. I look forward to seeing you there.

UPCOMING HFMA MEETINGS

**MS Chapter HFMA
Annual Institute
May 18-20, 2005
Biloxi Grand Bayview
Biloxi, MS**

**Annual National
Institute (ANI)
June 26-30, 2005
Las Vegas, NV**

**MS Chapter HFMA
August 18-19, 2005
Golden Moon
Philadelphia, MS**

**HFMA Region 9
Meeting
December 1-2, 2005
New Orleans, LA**



March Meeting Spotlights



Welcome New MS HFMA Members

<u>NAME</u>	<u>COMPANY</u>	<u>TITLE</u>	<u>ADDRESS</u>
Eric Braun			P.O. Box 22964, Jackson, MS 39225-2964
Logan Brenner	Forrest General Hospital	Administrative Intern	12 Park Place, Hattiesburg, MS 39402-1429
Byron Brown	Phelps Dunbar LLP	Associate	201 S. Spring St., Tupelo, MS 38804-4811
William Dickey	Franklin County Memorial Hospital	Chief Financial Officer	P.O. Box 636, Meadville, MS 39653-0636
Courtney Emens	Alliance Collection Service	Client Services	P.O. Box 49, Tupelo, MS 38801
Melody Green	Winston Medical Center		P.O. Box 967, Louisville, MS 39339-0967
Leah Harris	KPMG		188 E Capitol St., Jackson, MS 39201-2100
Amy Janovsky	KPMG	Audit Associate	188 E Capitol St., Jackson, MS 39201-2100
Matthew Liggett	Efficiency Billing Service	Director Of Operations	P.O. Box 432, Walnut Grove, MS 39189-0432
Penny Lowery	Methodist Rehabilitation Center	Billing Compliance Coordinator	1350 E Woodrow Wilson Ave., Jackson, MS 39216-5112
Kathy Mistal	St. Dominic Hospital	Asst. Controller	439 Hemlock Dr., Flowood, MS 39232-7610
Cathy Mitchener	Trans Union	Sr. Account Representative	103 Tea Rose Ln., Starkville, MS 39759-4364
Susan Schultz	Siemens Medical Solutions	Regional Finance Manager	403 Jefferson St., Okolona, MS 38860-1325
Mark Smith	Humana Military Healthcare Services	Mkt Network Development Mgr	2130 Pass Rd., Biloxi, MS 39531-4002
Robin Strickland	Forrest General Hospital	Director Of Registration	6051 U.S. Highway 49, Hattiesburg, MS 39401-7200
Karen Stuart	MS Chapter HFMA	Administrative Director	P.O. Box 397, Bassfield, MS 39421
Pam Wallace	Magee General Hospital	Adm. Secretary	300 3rd Ave. SE, Magee, MS 39111-3665
Scott Whittemore	Health Management Associates	Controller	1970 Hospital Dr., Clarksdale, MS 38614-7202

CORPORATE SPONSORS Mississippi Chapter HFMA

PLATINUM SPONSOR

(\$3,000 Contribution)

- Franklin Collection Service
- KPMG
- The Horne Group
- PricewaterhouseCoopers, LLP

GOLD SPONSOR

(\$2,000 Contribution)

- Alliance Collection Service
- Phelps Dunbar LLP
- The Mash Program
- Smith, Rouchon & Associates, Inc.
- Healthcare Financial Services, LLC

SILVER SPONSOR

(\$1,500 Contribution)

- Med Data Management
- Mississippi Health Connection
- The SSI Group
- Receivables Management Bureau, Inc.
- HCR Healthcare Resources
- Custom Software Systems, Inc.

BRONZE SPONSOR

(\$1,000 Contribution)

- Smith, Turner & Reeves
- Advance Practice, Inc.
- Network Collection Services
- Passport Health Communications, Inc.
- Professional Credit Management, Inc.
- MedAssist, Inc.

The Founders Merit Award Series

The Healthcare Financial Management Association (HFMA) recognizes that its strength lies in volunteers, who contribute their time, ideas, and energy to serve the healthcare industry, their profession, and one another. Active participation in HFMA at the national, regional and/or chapter levels provides members with numerous opportunities for professional development, information, networking, and advocacy. Established in 1960, the Founders Merit Award Series acknowledges the contributions made by HFMA members. These awards are part of a merit-rating plan in which specific activities are assigned a range of point values.

The **William G. Follmer Bronze Award** is awarded after an individual has earned 100 member points. This award is named after William G. Follmer, who is credited with the creation of the American Association of Hospital Accountants (AAHA) (now HFMA).

The **Robert H. Reeves Silver Award** is awarded to an individual who has earned 200 total member points. Reeves, an organizing member of the AAHA, was elected president of AAHA in 1956 and was instrumental in creating the structure of AAHA.

The **Frederick T. Muncie Gold Award** is presented to a member who has earned a total of 300 member points. This award honors Frederick T. Muncie, an organizing member of the AAHA, and the first president of the association (1947-1949). Muncie also assisted in the organization of the first AAHA chapter (First Illinois).

The **Founders Medal of Honor** was added in 1986 and is conferred by nomination of the Chapter Board of Directors.

This prestigious award recognizes an individual who has been actively involved in HFMA for at least three years after earning the Muncie Gold Award, has provided significant service at the chapter, regional and/or national level in at least two of those years, and remains a member in good standing. A chapter may nominate members for this award at any time during the year.

Congratulations to these Mississippi Chapter of HFMA members who received Founders Awards at the March meeting in Jackson!

Follmer Bronze Merit Awards:

1. Suzette B. Duhe', CHFP, CPA
2. W. Shane Hariel, CPA
3. Julia R. Leggett, CPA
4. J. Michael Lightsey, CPA
5. Sandy E. Riley, CME

Reeves Silver Merit Awards:

1. David L. Butler, CPA
2. G. Clinton Eaves, FHFMA, CPA
3. Charles L. Harrison
4. Lynn M. Holland, FHFMA, CPA
5. Robert W. Lewis, CHFP, CPA

Muncie Gold Merit Awards:

1. Peter G. Koury, FHFMA, CPA
2. Margie B. McGhee

Leadership Training Conference - New Orleans, LA



Mitch Beard

HFMA Members,

This year's HFMA Leadership Training Conference (LTC) was held in New Orleans, LA. Mississippi Attendees were Mitch Beard (President), Athena Adams (President Elect), Cheryl Cotton (Treasurer), David Butler

(Secretary), Lexie Fuller (Membership Chair), Mike Ernst (Education Chair) and Kim Cappleman (Newsletter Chair).

The conference was a great success and will help all of our chapter leaders in their jobs. We look forward to serving you as chapter leaders.

Sincerely,

Your 2005-2006 President,
Mitch Beard

P.S. We are looking for new volunteers for the upcoming year to help with various committees. If you are interested, please see us at the annual meeting. Thank You.

Recent Development in HIPAA Administrative Simplification

By: Byron Brown, Kim Cappleman and Della Sellers, Phelps Dunbar LLP

Health care providers, health plans and health care clearinghouses continue to struggle to meet the demands of the administrative simplification provisions of the Health Insurance Portability and Accountability Act (HIPAA). The Department of Health and Human Services (HHS), individually and through the Office for Civil Rights (OCR) and the Centers for Medicare and Medicaid Services (CMS), continues to provide guidance and clarification through the regulatory process and by posting frequently asked questions (FAQs) on the agencies' websites. Recently, HHS published a proposed rule regarding enforcement of the administrative simplification provisions and CMS posted five new FAQs interpreting the security rule. This article provides an overview of HHS's guidance in these areas.

I. PROPOSED ENFORCEMENT RULE

On April 18, 2005, HHS published a proposed rule concerning enforcement of the administrative simplification provisions of HIPAA - the rules concerning standards for transactions and code sets, privacy of protected health information (the Privacy Rule), security of electronic protected health information (the Security Rule), employer identifier standards and unique identifiers for health care providers (collectively, the Administrative Simplification Rules). HHS will accept comments concerning the proposed rule received no later than June 17, 2005 and will respond to such comments in a final rule.

HHS issued an "interim final rule" promulgating procedural requirements for imposition of civil monetary penalties for violations of the Privacy Rule on April 17, 2003. The interim final rule applied only to the Privacy Rule and had a regulatory sunset date of September 16, 2004, later extended to September 16, 2005. The proposed rule issued April 18, 2005 amends the existing rules relating to investigation of noncompliance to make them applicable to all of the Administrative Simplification Rules. The proposed rule also clarifies and expands the scope of the existing rule's provisions concerning the investigation process, bases for liability, determination of penalties, grounds for waiver, conduct of hearings and the appeal process.

A. Compliance and Investigations.

The preamble states that HHS is "committed to promoting and encouraging voluntary compliance with the HIPAA rules through education, cooperation and technical assistance." Acknowledging that currently the department's

compliance and enforcement activities are primarily complaint-based, the preamble recognizes HHS's authority to review whether a covered entity is in compliance with the Administrative Simplification Rules.

The proposed rule clarifies the manner in which investigations will be conducted, the manner in which the testimony given and the evidence obtained during investigations will be used, and the Secretary's and the witnesses' rights during the inquiry process. The rule also addresses the requirements applicable to asserting objections and the enforcement of a subpoena. The rule explains, for example, that when a witness's right to retain a copy of the testimony transcript is limited for good cause, the witness will be allowed to inspect the transcript and propose any corrections. The Secretary may attach corrections to the transcript of a testimonial interview if the record is incorrect. HHS may use testimony and other evidence obtained in an investigational inquiry in any of its activities and may offer or use this information as evidence in any administrative or judicial proceeding.

B. Refraining From Intimidation or Retaliation.

Similar to the Privacy Rule, the proposed rule prohibits intimidation or retaliation against individuals who complain to HHS or assist in the enforcement process. "Intimidation" and "retaliation" include threatening, intimidating, coercing, discriminating against or taking any other retaliatory action against these individuals. The proposed rule retains the Privacy Rule's provisions that prohibit a covered entity from intimidating, threatening, coercing, discriminating against or taking other retaliatory action against an individual for exercising his rights, filing a complaint with a covered entity or participating in any process set forth by the Privacy Rule.

C. Basis for a Civil Money Penalty.

According to the proposed rule, HHS may impose a civil money penalty if the Secretary of HHS finds in a notice of proposed determination that a covered entity has violated an Administrative Simplification Rule and has no affirmative defense. Although HIPAA's statutory language does give HHS discretion not to impose a civil money penalty if it finds a violation, the preamble states that the statute does not limit HHS's discretion to encourage a covered entity to come into compliance voluntarily, to close a case without issuing a notice of proposed determination if voluntary compliance is obtained or to set the amount of the penalty below the statutory caps, nor does it limit HHS's discretion to settle any matter either before or after a civil money penalty is proposed.

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D. Violations by More than One Covered Entity.

With the exception of covered entities that are members of an affiliated covered entity, if HHS determines that more than one covered entity is responsible for violating an Administrative Simplification Rule, HHS will impose a civil money penalty on each covered entity involved in the violation. This rule does not limit HHS's discretion to investigate only one covered entity, to encourage one or more covered entities to come into compliance, to close a case against one or more covered entities without issuing a notice of proposed determination if voluntary compliance is obtained or to set the amount of the penalty differently for each covered entity involved. This rule would apply to covered entities that participate in an organized health care arrangement but are not part of an affiliated covered entity.

With regard to affiliated covered entities, HHS will treat all entities participating in an affiliated covered entity as one covered entity. Therefore, each member of an affiliated covered entity will be jointly and severally liable for a civil money penalty for a violation by the affiliated covered entity. No covered entity in an affiliated covered entity may avoid a civil money penalty by arguing that it was not the party responsible for the violation. HHS states that the maximum penalty imposed upon all members of the affiliated covered entity for identical violations in a calendar year would be the maximum allowed for one covered entity - \$25,000.

E. Workforce v. Business Associates.

A covered entity may be held liable for a civil money penalty based upon the actions of any agent, including an employee or workforce member, acting within the scope of his or her agency or employment. This rule applies to any workforce member, whether an employee, contractor, volunteer, trainee or other agent acting within the scope of his or her employment or agency. HHS requests comment on whether there are categories of workforce members whom it would be inappropriate to treat as agents.

A covered entity will not be liable for violations by business associates as long as the covered entity complies with the HIPAA rules governing business associates, including entering into valid business associate agreements. If a covered entity fails to comply with the HIPAA rules governing business associates, the covered entity may be subject to civil money penalties.

F. Calculation of Penalties.

Amount of a Civil Money Penalty. The HIPAA statute establishes a maximum penalty of not more than \$100 per violation or \$25,000 for all identical violations during a calendar year. HHS defines an "identical violation" as "a

violation of the same requirement or prohibition in one of the HIPAA rules or in the statute." It is based on the provision of the regulation or statute that has been violated as opposed to whether the violations relate to the same individual's protected health information, the same transaction or are with the same trading partner. The proposed rule offers an example of a health plan that includes in its trading partner agreements a requirement for submission of a data element prohibited by the transactions rule. If the health plan requires 7500 different trading partners to sign the agreement in a calendar year, and penalties are assessed at \$100 per violation, the total penalty would amount to \$750,000, but this amount would be reduced to \$25,000 because all of the violations relate to the same standard.

Violations of Repeated or Overlapping Provisions of an Administrative Simplification Rule. In some instances, by violating a specific provision of an Administrative Simplification Rule, a covered entity may also violate a more general provision. For example, if a covered entity violates the Security Rule's specific requirement to implement policies and procedures concerning facility access controls, the covered entity also violates the Security Rule's more general requirement to implement policies and procedures. The proposed rule clarifies that violation of a more specific requirement or prohibition (i.e., implementing policies and procedures concerning facility access controls) is not also counted, for purposes of determining civil money penalties, as an automatic violation of the more general requirement (i.e., implementing policies and procedures). HHS may impose a civil money penalty for violating either the general requirement or the more specific requirement, but not both.

Number of Violations. The proposed rule allows HHS to determine the number of violations of an identical requirement or prohibition by a covered entity by applying any or all of the following variables: (1) the number of times the covered entity failed to engage in required conduct or engaged in a prohibited act; (2) the number of persons involved in or affected by the violations; or (3) the duration of the violation, counted in days.

Factors Considered in Determining the Amount of a Civil Money Penalty. In determining the amount of a civil money penalty, HHS will take the following factors into account:

- The nature of the violation, considered in light of the purposes of the Administrative Simplification rule violated;
- The circumstances under which the violation occurred

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and the consequences, including the time period during which the violation occurred, whether the violation caused physical harm, whether the violation hindered or facilitated an individual's ability to obtain health care, and whether the violation resulted in financial harm;

- The degree of culpability of the covered entity, including whether the violation was intentional and whether the violation was beyond the direct control of the covered entity;
- Any history of prior offenses of the covered entity, including whether the current violation is the same as or similar to prior violations, whether and to what extent the covered entity has attempted to correct previous violations, how the covered entity responded to technical assistance from HHS provided in the context of a compliance effort and how the covered entity has responded to prior complaints;
- The financial condition of the covered entity, including whether the covered entity had financial difficulties that affected its ability to comply, whether the imposition of civil money penalties would jeopardize the ability to continue to provide or pay for health care and the size of the covered entity; and
- Such other matters as justice may require.

HHS notes that the above factors may be used as either aggravating factors, resulting in an increased civil money penalty, or mitigating factors resulting in a decreased civil money penalty.

G. Affirmative Defenses.

There are three affirmative defenses a covered entity may raise that, if proven, will prevent HHS from imposing a civil money penalty upon the covered entity. The first "affirmative defense," which is unlikely to be raised by a covered entity, is that the violation constitutes an offense punishable by a criminal penalty. More realistically, a covered entity may escape civil money penalties if it can establish that the covered entity did not know, and by exercising reasonable diligence would not have known that the covered entity violated an Administrative Simplification Rule. Alternatively, a covered entity may present the affirmative defense that the failure to comply was due to reasonable cause and not to willful neglect and was corrected within 30 days from the date the covered entity knew or should have known that the violation existed.

H. Procedures for Hearings.

HHS intends to apply the same types of procedures to the imposition of civil money penalties under HIPAA that it applies in other circumstances, such as Anti-Kickback statute or EMTALA violations. The HHS Department Enforcement decisions will be made by an Administrative Law Judge with

review by the Departmental Appeals Board.

II. SECURITY RULE.

The compliance deadline for the Security Rule was April 20, 2005 and on May 4, CMS issued five (5) new FAQs interpreting the Security Rule.

A. Security Incidents.

Under the Security Rule, a covered entity is required to implement policies and procedures to address "security incidents," defined as the attempted or successful or unauthorized access, use, disclosure, modification or destruction of information or interference with system operations in an information system. The Security Rule requires a covered entity to identify and respond to suspected or known security incidents, to mitigate harmful effects of security incidents to the extent practical and to document security incidents and their outcomes.

In the FAQ, CMS states that no single method has been identified for addressing security incidents that will apply to all covered entities. The covered entity should be able to rely upon information gathered in complying with other security standards and with the Privacy Rule to determine what constitutes a security incident in the context of its business operations. The FAQ provides a number of questions the covered entity should consider in addressing its security incident procedures.

B. Business Associates and Plan Sponsors.

In response to two questions as to whether a business associate or health plan sponsor must report security incidents to the covered entity, CMS responded that a business associate or health plan sponsor should be contractually obligated, through its business associate agreement or plan documents, to report security incidents of which it becomes aware to the covered entity. CMS states that the contracts between the covered entity and the business associate or plan sponsor should serve as a vehicle to establish the covered entity's specific reporting requirements and should be developed to meet the entity's specific needs. The covered entity and the business associate or plan sponsor should consider the following questions:

- What specific actions would be considered security incidents?
- How would security incidents be documented and reported?
- What information should be contained in the documentation?
- How often and to whom should incidents be reported?
- What are the appropriate responses to security

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incidents?

- Is it reasonable and appropriate to require the business associate or plan sponsor to identify patterns of attempted security incidents?

C. Risk Analysis.

The Security Rule further requires that covered entities perform a risk analysis to identify potential security risks to electronic protected health information. In its FAQ on this subject, CMS lists a number of "threats" that should be considered in performing the risk analysis. These threats include:

- Natural threats, including floods, hurricanes, tornadoes and other similar incidents;
- Human threats, including unintentional acts and deliberate actions; and
- Environmental threats such as long-term power failures, pollution, chemicals and liquid leakage.

D. User IDs.

In response to a question as to whether the Security Rule permits covered entities to assign the same logon ID or user ID to multiple entities, CMS responds that this practice is inappropriate. The Security Rule requires covered entities to assign a unique name and/or number to each employee or workforce member who uses a system that maintains electronic protected health information so that system access and activity may be identified and tracked by user.

III. CONCLUSION.

Like many areas of health care, HIPAA administrative simplification law is ever evolving. Health care entities must stay abreast of these changes to provide quality care to their patients and to avoid enforcement action for non-compliance. CMS and OCR each maintain websites with guidance concerning the Administrative Simplification Rules. You may access this information at www.cms.hhs.gov/hipaa/hipaa2/default.asp and www.hhs.gov/ocr/hipaa.

Adios Amigos & Happy Trails from Your Editor!



Sandy Riley

I can't believe it's been almost three years since I accepted the responsibility of editor for the MS Chapter of HFMA's newsletter. Thank you, fellow HFMA members, for allowing me to serve you. This issue of *Mississippi Headlines* will be the final newsletter for me as editor; however, I will continue to be involved with our chapter as a board member.

I'd like to say to all members that this opportunity has given back to me far more than I have given to it. I am most thankful for the many friendships that I have developed as a result of being your newsletter editor. I have had the opportunity to attend the 2004 Leadership Training Conference in San Francisco. I appreciate the opportunity to gain exposure in the areas of healthcare "hot topics", HFMA member benefits, HFMA's organizational structure and all the resources that can be found on our top-notch national HFMA website (www.hfma.org). I could continue to go on and on, but I think you get the picture!

I also want to thank Receivables Management Bureau (RMB) and Neil Koonce, RMB President, for supporting my involvement with HFMA. I would also like to recognize Mann Deynoodt and Suzanne Duzac of Phelps Dunbar for the excellent service they provide in the layout and design of our newsletter.

As I pass on this responsibility to Kim Cappleman, I want to take this opportunity to express to all of you how important it is to "get involved" with HFMA. Mississippi has a wonderful chapter with a rich history. Be a part of it – there's nothing that compares to the educational meetings, the networking and being a part of the "big healthcare picture." The relationships and friendships that you develop with fellow HFMA members will last far longer than your career.

As I reflect on my tenure as newsletter editor, I think of all that has been accomplished. Most of our newsletters are now being sent via e-mail and can also be viewed at the Mississippi Chapter website (www.mshfma.org). I trust that you view the newsletter as your communications source for chapter information. I feel confident that Kim Cappleman will be able to take the newsletter to new levels. Contact Kim at capplemk@phelps.com if you would like to participate on the newsletter committee!

In ending, I'd like to share a story by an unknown author. I hope it sparks your interest and motivates you to join an HFMA committee and become more involved with our chapter!

"This is a story about four people named Everybody, Somebody, Anybody, and Nobody. There was an important

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2005 MS Chapter of HFMA Annual Institute: Schedule of Events

Tuesday, May 17, 2005

3:00 Board Meeting: Planning for 2005-2006 (All interested members are welcome) Bay 1

Wednesday, May 18, 2005

8:30 - 12:30 Fishing Trip - Board at Pier beside Corky's Restaurant
 8:00 Golf Tournament - Shell Landing Golf Club
 2:00 - 4:00 Vendor Exhibit Set Up - Ballroom B & C
 5:00 - 7:00 Opening Conference Reception with Vendors - Ballroom B & C

Thursday, May 19, 2005

7:30 - 8:00 Registration & Continental Breakfast with Vendors
 8:00 - 8:10 Welcome and Opening Remarks - Dineta Newman, President, MS Chapter HFMA
 8:10 - 9:45 Building Team Connections While in the Tornado of Business - Michael Hoffman
 9:45 - 10:00 Break with vendors
 10:00 - 11:30 Building Team Connections While in the Tornado of Business - Michael Hoffman
 11:30 - 1:00 Lunch, Recognitions and Installation of Officers - Ballroom D
 Steve Rose, HFMA Region 9 Regional Executive

Incoming Officers and Board of Directors

Mitch Beard	President
Athena Adams	President Elect
Cheryl Cotton	Treasurer
David Butler	Secretary
Hallie Duckworth	Director
Jerry Knighton	Director
Suzette Duhe'	Director
Brandon Slocum	Director
Sandy Riley	Director

1:00 - 2:15 Business Intelligence - Danny Hart, Horne LLP
 2:15 - 2:45 Break with Vendors

2:45 - 5:00

BREAKOUT SESSIONS

Session 1

Emergency Preparedness - What is Emergency Preparedness, What is Mississippi Doing and What Will It Cost? - Jeffrey Hallman, RN, MSN, Training Coordinator- Emergency/Terrorism Preparedness, MS Hospital Association & Joyce Pearson, RN,C,MSN, Program Manager-Emergency/Terrorism Preparedness, MS Hospital Association, Margit Wingfield & Brenda Whitwell, Biloxi Regional Medical Center, David Herrin, Forrest General Hospital

Session 2

CFO Forum - A Session for CEOs, CFOs & Controllers
 2:45 - 3:45 - Increasing Hospital Financial Margins - William L. Hannah, KPMG
 3:45 - 5:00 - CFO Update on Critical Issues, Reatha Clark, Partner, Price Waterhouse Coopers, Atlanta, GA

6:00 - 7:15

Reception Honoring Past Presidents - Pool Terrace
 7:30 - 9:00 Schooner Excursion

Friday, May 20, 2005

7:30 - 8:30 Continental Breakfast with Vendors - All Attendees
 7:30 - 8:30 CFO Breakfast - CFO's only please, advanced reservation required
 8:30 - 9:30 Update on Medicare Part D and Medicare Advantage Drug Programs - Dale Kendrick, Associate Regional Administrator, Division of Medicare Financial Management, Centers for Medicare and Medicaid Services, Atlanta Regional Office, Atlanta GA
 9:30 - 10:00 Break with Vendors
 10:00 - 10:15 Report on Activities of MS Chapter HFMA Medicaid Task Force - Marjorie McGhee
 10:15 - 11:30 Medicare Part A Update - Gary Gerber
 11:30 Adjourn

About the Sessions

Building Team Connections While in the Tornado of Business

Have you ever wondered why some groups work better together than others? An even better question is why does your team work so well together and how do you keep the momentum going? Are you a victim of your success or just lucky? In the tornado of business that we face everyday, we may have a tendency to take for granted the good working relationships that enable us to accomplish all that is asked of us.

In this session, Michael Hoffman will show you: 1)How to use self-esteem to give feedback, 2)How to control negative humor, 3) How to recognize / understand the paralanguage that is screaming louder than your words, and 4) How to ignite the impact of your team members within your realm of influence.

Business Intelligence

This program will stress the importance of business intelligence in the planning and evaluation of operational and financial performance. This session will specifically analyze selected key data metrics and data decision tools that apply to home health agencies. Industry benchmarks will be identified and evaluated for applicability to the typical home

health agency. The availability, development and assessment of industry benchmarks for hospitals will also be addressed.

Emergency Preparedness - What is Emergency Preparedness, What is Mississippi Doing and What Will It Cost?

Mississippi health care providers encounter unexpected crises periodically, including disasters that impact hospital operations in a minor or a major way. Emergency preparedness, one of the required seven disciplines of "Management of the Environment of Care" for Joint Commission on Accreditation of Healthcare Organizations Accredited Hospitals, is becoming a way of life for Mississippi organizations. Planning for the emergency and working through the crises themselves have significant financial impact on health care providers.

This presentation will discuss the Mississippi Hospital Association's strategic planning and training on emergency preparedness. The panel of hospital personnel on the front line for emergency preparedness will discuss the four phases of emergency preparedness including preparation, mitigation, response and recovery and their implications on a health care provider's bottom line.

Increasing Hospital Financial Margins

In the past, the revenue cycle and supply chain have existed independent of one another with little thought given as to how they relate. As innovation in medical treatments and devices drives costs upward, there is continued downward pressure on actual reimbursement for healthcare services. The vanishing margin between reimbursement and cost is causing increased pressure on the ability of hospitals to deliver quality healthcare services to their communities. To protect their ability to fully realize their mission, hospitals should engage in a profitability improvement initiative, linking the revenue cycle and supply chain to better understand and control hospital profit. Our speakers will define the need for profitability improvement and outline a comprehensive approach to profitability planning.

CFO Update on Critical Issues

Chief Financial Officers must absorb an enormous amount of information and data, including both hospital data and information about changing rules and regulations. Ms. Clark will update Mississippi HFMA CFOs on the latest information critical to assist their job performance.

Update on Medicare Part D and Medicare Advantage Drug Programs

The new Medicare Drug Benefit and the Medicare Advantage Program, enacted as part of Titles I and II of the Medicare Modernization Act of 2003 (MMA), expand the options available to Medicare beneficiaries to enroll in private health plans. Title I of the MMA establishes the Medicare Drug Benefit Program, a new voluntary outpatient prescription drug benefit under Part D of Title XVIII of the Social Security Act, which along with an employer subsidy for qualified retiree health plans begins on January 1, 2006. Coverage for the prescription drug benefit will be provided by private prescription drug plans that offer drug-only coverage, Medicare Advantage plans that offer both prescription drug and health care coverage or managed care plans with cost-reimbursement contracts. Title II of the MMA modified and renamed the Medicare+Choice program established under Part C of Title XVIII of the Social Security Act as the Medicare Advantage Program, which establishes a new regional contracting option for health plans that will be organized as preferred provider organizations. Mr. Kendrick will

discuss the implementation of the new Medicare Drug Benefit and the Medicare Advantage Program.

Report on Activities of MS Chapter HFMA Medicaid Task Force

Medicare Part A Update

Mr. Gerber will present an update on recently issued regulations and CMS instructions impacting Medicare reimbursement and cost reporting.

Vendors of the 2005 Annual Institute (As of May 5, 2005)

Advanced Practice, Inc.
Advanced Recovery Systems
Advantage Collection Services of Mississippi, Inc.
CBSi Collection Services
Disability Determination Services
Efficiency Billing Service
Ernst & Young, LLP
Franklin Collection Service, Inc.
Health Cost Solutions
Healthcare Financial Services, Inc.
ID Group
Imagemax
Kroll Background America, Inc.
McNeary, Inc.
MedAssist, Inc.
MedQuist
Passport Health Communications, Inc.
Preferred Hospital Plans
Quadramed Corp
Receivables Management Bureau
Shared Services Healthcare
Transunion
WebMD Business Services

General Meeting Information

Conference Facility:

The Bayview Resort & Spa is located on the north side of Highway 90 and is linked to the Biloxi Grand Theatre and the Casino via a scenic, climate-controlled suspended walkway. The Hotel Resort and Spa offers spacious rooms with incredible views, one of the largest world-class spas in the South, fantastic entertainment, a tropical swimming pool with Gazebo Bar and Jacuzzi and a quiet swimming pool overlooking the coast, unique specialty shops, golf and seasonal packages and plenty of dining choices. For more information on Bayview Resort and Spa, you can visit its website at www.grandbiloxi.com.

Accommodations:

In order to receive the special conference rate, please call 1-800-354-2450 for room reservations and be sure to mention Mississippi Healthcare Financial Management Association.

A block of standard rooms has been set-aside at a special rate of \$99.00, which applies to requests received prior to Monday, May 2nd. Requests

received after this date will be honored based on availability and regular room rates will apply.

Conference registration:

The registration fee of \$150 covers all meetings, handouts, breaks, breakfasts, lunch and receptions. A \$10 late registration fee should be added to all registrations postmarked after May 10, 2005. Guest tickets for lunch and reception are available for \$25 each. Attire for the conference is casual. You may register online at www.hfma.org or contact Karen Stuart at (601) 943-8460.

Vendor Exhibits:

Vendor exhibit opportunities are available for \$500. Exhibits will be open during the Wednesday night reception, and during breakfast and breaks on Thursday and Friday morning. The fee includes one Annual Institute registration. For additional information, contact Karen Stuart 601.943.8024.

Full year sponsorships of the Mississippi Chapter are available at a several giving levels. Benefits vary based on the contribution as detailed in the sponsorship policy. For more information on becoming a sponsor, contact Karen Stuart 601.943.8024.

Networking/Social Opportunities:

The **fishing trip** is scheduled to depart at approximately 8:00 am on Wednesday morning. The cost of the trip is \$20.00 per person. There is limited space available on the boat and will be reserved on first come, first serve basis. Horne, LLP, Cal Med Consulting, and Phelps Dunbar are our fishing trip sponsors. The boat will be docked at the pier across the street from our hotel, behind Corky's restaurant. Registrants will receive a confirmation notice with the time and place of departure. Please indicate if you will be participating in the fishing trip on your registration form.

The **golf tournament** will be held at Shell Landing Golf Club with registration beginning at 8:00 am and Shot Gun at 9:00 am. Greens fee, including cart, is \$69 per person. Prizes will be awarded for Top Finishers, Longest Drive and Closest to Pin. Franklin Collection Service is the tournament sponsor. Please indicate if you will be participating in the

golf tournament your registration form.

We will take a **schooner excursion** again this year!! The schooners have limited space and attendees will be allowed to sign-up for this trip at the registration desk on Thursday. Don't miss this exciting adventure and a chance to view the sights and sounds of the Coast from an authentic replica of a Biloxi oyster schooner. We will take the "Glenn L. Swetman" and the "Mike Sekul" for a night-time cruise so be sure to sign up and enjoy the ride! The schooners will be docked at the pier across the street from our hotel, behind Corky's restaurant. For more information on the schooners, visit <http://www.maritimemuseum.org/schooners.htm>.

Board and Planning Meeting:

There will be a Board and planning meeting beginning at 3:00 pm on Tuesday. Anyone interested in serving the chapter in any role is encouraged to attend. For more information, call Mitch Beard at 662-871-8090.

Refund Policy:

Cancellations received after May 10th will be subject to a \$30.00 cancellation fee. Substitutions from within the same group are acceptable.

Biloxi Activities and Sights

The Grand Casino Biloxi Bayview Hotel and Spa adjoins the casino and theatre by a climate controlled skywalk. The Bayview Hotel and Spa opened in February 1998 as a resort/convention hotel to compliment the Grand Casino, Grand Theatre, and the Grand Casino Biloxi Hotel.

The Grand Casino Biloxi Bayview Hotel and Spa features 500 deluxe rooms, each with in-room coffee, iron and ironing board, hairdryer, and room service. It features the Bellissimo Spa and Salon, a gift shop, convention and meeting room level, Lobby Bar and Restaurant, large outdoor heated pool, jacuzzi and poolside snack bar. Covered valet and self parking are complimentary.

Ship Island

Ship Island is a popular tourist attraction enjoyed by thousands every year. Take the Ship Island ferry from the Gulfport harbor and arrive at the beach named one of the top 10 in the United States by USA Today. While you're there, take a tour of historic Ft. Massachusetts. For more information, call 228-864-1014, or visit <http://www.mshipisland.com>

Beauvoir

Tour the last home of Confederate President Jefferson Davis. Includes Beauvoir House, Presidential Library, Confederate Museum, historic cemetery and the Tomb of the Unknown Confederate soldier. For more information, call 228-388-9074 or visit <http://www.beauvoir.org>

Ohr-O'Keefe Museum of Art

An extensive collection that includes pieces by George Ohr, the "Mad Potter of Biloxi." Museum is also host to national and regional traveling exhibits along with works of local artists. For more information, call 228-374-5547, or visit <http://www.georgeohr.org/>.

Biloxi Mardi Gras Museum

Housed in the historic Magnolia Hotel, the Mardi Gras Museum tells the colorful story of Mardi Gras along the Coast. For more information, call 228-435-6245.

Marine Life Oceanarium has been educating and entertaining families for over forty-eight years. Interactive exhibits such as the touch pool, sea lions, reef tanks, exotic birds and dolphins are available year round and waiting to entertain you. For more information, call (228) 863-0651, or visit <http://www.dolphinsrus.com/>

Riley...continued from page 8

job to be done and Everybody was sure that Somebody would do it. Anybody could have done it, but Nobody did it. Somebody got angry about that, because it was Everybody's job. Everybody thought Anybody could do it, but Nobody realized that Everybody wouldn't do it. It ended up that Everybody blamed Somebody when Nobody did what Anybody could have."

I look forward to continuing to serve our Chapter and to seeing all of you in Biloxi.

Respectfully,

Sandy Riley, CME

2004-2005 MISSISSIPPI CHAPTER HFMA ADMINISTRATION

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