



## The President's Message

### Greetings Virginia AAHAM Members and Friends!

If you haven't planned it yet, like me, it's time to get started planning your summer vacation! While you're at it, there are few other things you can begin planning as well, read on to find out what else.

We've told you in the past that we were developing a new website and migrating it to a new hosting site. All of that is complete now, and we wish to invite you all to visit the new and improved Virginia AAHAM website. The web address is the same [www.vaaaham.com](http://www.vaaaham.com) and the layout looks quite a bit different, but you can find everything you need if you just click around and familiarize yourself with it. One important change to the new website is our member-only section which will require each individual user to register for the site. Active Virginia AAHAM members will be approved access into this area to download and gain access to member only information. So please, don't wait, visit the site today and register if you're a member for additional information.

Next on the list of things to do is sit-in on the CRCE exam webinar series being held by National AAHAM. One of our member hospitals, Mary Washington Hospital, has purchased the series of webinar's for their staff and has graciously offered to allow up to 10 additional Virginia AAHAM members to sit in on the webinar at their Fredericksburg office. Seating is limited and is on a first come-first reserved basis. To reserve your seat at these sessions, please contact Linda Patry at 540-741-1591 or by email at [linda.patry@mwhc.com](mailto:linda.patry@mwhc.com). For additional information on dates and times of the webinar series, you may visit [www.aaham.org](http://www.aaham.org) and select Events and view the July calendar for dates and times. Many thanks go out to Linda Patry for making this generous offer. This helps save our members money and makes certification more affordable. If other want to do something similar in the future, please let me know and I'll share with the chapter.

Mark our calendars for our next Virginia AAHAM conference which is to be held on September 23<sup>rd</sup> at Fauquier Hospital. Once again they are hosting our Fall Regional Meeting and Conference at their beautiful facility and we have a wonderful agenda planned for this meeting. We strongly encourage you attend this meeting, and all our meetings, as they are filled with great information and are a wonderful venue for meeting others and networking. Keep your eye out for registration details to be sent out soon and we hope to see you all at this meeting, or another meeting sometime in the near future.

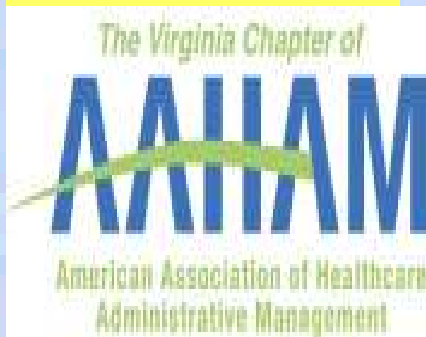
That's all the homework I have for you today folks. Have a wonderful summer and vacation if you take one, and I'll look forward to seeing you soon!

*David*

David Nicholas, CRCE-I  
President, Virginia Chapter of AAHAM

### Inside this issue:

<b>On the Rise, How Three Hospitals Improved their Fiscal Outlooks</b>	<b>2-5</b>
<b>4 Myths about the Healthcare EFT Standard, Debunked</b>	<b>6-7</b>
<b>They Aren't the Reason You are Miserable</b>	<b>9-11</b>
<b>This is Private, Right?</b>	<b>12</b>
<b>Scholarship Winner</b>	<b>14</b>
<b>Meet one of your Board Members</b>	<b>16</b>
<b>Certification</b>	<b>17-19</b>
<b>Meet the Executive Board</b>	<b>22-23</b>
<b>On the Lighter Side</b>	<b>24-25</b>
<b>National News</b>	<b>26</b>
<b>Corporate Sponsors</b>	<b>27-28</b>
<b>VA AAHAM News</b>	<b>29</b>



**The Virginia AAHAM Insider  
1st Place Winner for Excellence in Journalism  
2014-2015 National Journal Award!**

## **On the Rise: How Three Hospitals Improved Their Fiscal Outlooks**

*Continued on next page*

■ □ □, □ □ ■ □ □ □ □ □

The last several years have been challenging for hospitals, as uncertainty regarding the Affordable Care Act and in operating profitability became the norm. In 2015, however, the three major credit rating agencies (CRAs) presented refreshingly optimistic **reports**, particularly for the larger providers, citing strong revenue growth, continued cost containment, greater clarity with respect to the ACA and industry trends (e.g., consolidation and technology) as reasons for the positive momentum.

In this more encouraging environment, there are a variety of financing structures a hospital can pursue to improve its fiscal outlook and better serve its patients. Below, we present three examples of hospitals that took advantage of the positive momentum and completed transactions that benefited both the hospitals and their communities. In the first, a health care district refunded three expensive bond issues with a general obligation (GO) bond that will save the district's taxpayers approximately \$2.8 million. In the second, a health care system used a direct bank placement to fund a new construction project that resulted in an expanded campus and enhanced specialty services. Finally, we detail how a hospital used one tax-exempt bond transaction to fund an expansion, renovation and a refinance all at once, resulting in a thorough and comprehensive fiscal upgrade.

### **Saving Taxpayers' Money**

Formed in 1962, Sierra Kings Health Care District is a subdivision of the State of California encompassing over 230,000 acres in southeastern Fresno County. The District previously owned and operated a 49-bed acute care hospital known as Sierra Kings Hospital. In 2009, the District filed for bankruptcy and subsequently transferred the operations of the hospital to Reedley Community Hospital, an affiliate of **Adventist Health System/West**. The District maintained its ownership of the hospital.

To help guide them through the bankruptcy process and improve the hospital's overall financial situation, the District hired **HFS Consultants**. Of chief concern, HFS sought to refund three prior bond issues that each carried a high cost of capital. The bond issues were not payable from, nor secured by, the revenues or assets of the hospital, meaning that the District's taxpayers were paying the high debt service costs.

## **On the Rise: How Three Hospitals Improved Their Fiscal Outlooks**

*Continued on next page*

HFS worked with the District's investment bank to refund the three bond issues using a \$27 million general obligation (GO) bond with a 25-year term. The investment bank used a current refunder structure to refund the first two series of bonds from 2002 and 2007. For the third series of bonds from 2009, it structured an advanced refunder and established an escrow-based pay structure. In addition, HFS and the investment bank navigated issues regarding the remedial disclosure on the prior bonds and worked with bond counsel to maximize debt service savings for the District.

"This refunding resulted in a significant benefit to district taxpayers by reducing the amount of interest that would otherwise be paid under the refunding bonds," said Sandy Haskins, managing director of HFS Consultants. "The savings, adjusted for the time value of money, approximates \$2.8 million or about 11% of the bond principal. This is a very high rate compared to industry standards."

### Expanding Services

**Kennedy Health** is an integrated health care delivery system that provides a full continuum of care, ranging from acute-care hospitals to a broad spectrum of outpatient and wellness programs. It owns and operates a 607-bed multi-campus system which includes three acute care hospitals in New Jersey: Cherry Hill, Stratford and Washington Township. Kennedy Health sought funding for a new construction project that would expand and improve its campus in Cherry Hill. The goal was to provide more room for state-of-the-art specialty services and allow for more open green space and improved parking options, resulting in a family-centric facility that would enhance health care access in its community.

Kennedy's investment banker conducted a competitive bidding process with over 12 prominent funding sources. The firm ultimately put together a two-bank syndicate to finance \$71 million, a strategic decision that enabled Kennedy Health to maintain multiple bank relationships.

The debt is secured by Kennedy Health's obligated group under a master trust indenture put in place when its investment banker underwrote its last bond issue in 2012. The financing carries a 10-year term, variable rate, and no prepayment penalties, allowing Kennedy Health to retain financial flexibility as it pursues an aggressive repayment plan. Furthermore, the competitive bid process resulted in a reduction of 40 basis points in the cost of capital compared to the initial bids received.

**On the Rise: How Three Hospitals Improved Their Fiscal Outlooks**

*Continued on next page*

The \$71 million transaction will allow Kennedy Health to build a new medical office building, a parking garage and a lobby addition to its campus in Cherry Hill. Once complete, the Cherry Hill campus will provide enhanced specialty services, including radiology, orthopedics and cardiology. Further, the financing allows Kennedy Health to retain cash on its balance sheet which will be used to support the future development of all three of its campuses.

“The new construction project at our Cherry Hill campus is an important part of Kennedy’s continued efforts to improve our integrated health care delivery system and expand services to Cherry Hill residents and the surrounding community,” said Gary Terrinoni, executive vice president of administration and chief financial officer of Kennedy Health System.

**One Financing, Three Objectives Achieved**

**Graham Hospital** is a nonprofit hospital that provides inpatient, outpatient, home care and long-term care services in Canton, Illinois. It currently operates 25 private medicine/surgery beds, 13 progressive care unit (PCU) beds, five intensive care unit (ICU) beds, six obstetric care (OB) beds, 20 skilled nursing and 18 long-term care beds. Graham Hospital sought funding for multiple capital expenditures, including the renovation of its skilled nursing facility totaling \$2.1 million, expansion to its physician clinic totaling \$8.5 million, and a small addition and total remodeling of its five inpatient/outpatient surgery suites of \$11.4 million. The hospital’s outstanding debt of \$26 million was in the form of tax-exempt, variable-rate demand bonds (VRDBs) enhanced by a direct pay letter-of-credit

re-  
The  
was



from a  
gional  
bank.  
debt

*Graham Hospital used \$48 million of privately placed, tax-exempt bonds to refinance its debt and fund multiple capital expenditures.*

hedged by two floating-to-fixed rate swaps with two separate swap counterparties.

## **On the Rise: How Three Hospitals Improved Their Fiscal Outlooks**

Graham's investment banker conducted a competitive process that resulted in financing proposals from eight funding sources, ranging from local, regional and national banks to non-bank funds. Hospital leadership elected to proceed with the funding option that offered a blend of the lowest cost of capital and favorable terms.

The \$48 million funding structure converted Graham Hospital's letter-of-credit backed bond structure to a private placement structure, thereby eliminating letter-of-credit renewal risk and extending the term of the financing by nearly a decade. The structure also permitted the hospital to retain its existing interest rate swaps, thereby preserving the hospital's interest rate hedge and preventing the hospital from realizing a swap termination mark-to-market payment. Finally, the structure provides funds for capital expenditures using a cost effective draw structure, minimizing interest expense to the hospital as it further upgrades its hospital facilities.

"This transaction allows Graham Hospital to continue to grow and add providers and new services," said Robert Senneff, president and CEO of Graham Hospital. "The oncology suite will be relocated from Graham Hospital to our state-of-the-art medical office building, which will allow all of our patients who are undergoing chemotherapy treatment the advent of natural light throughout the suite. We will also complete a major remodeling of our entire 20-bed skilled unit, an addition to our inpatient/outpatient surgery floor, and a total infrastructure remodel/modernization. These projects would not have been possible without the ability to access funds at very attractive rates and terms."

As demonstrated above, low-cost capital is available for strong hospitals looking to improve their fiscal outlook and better serve their populations. The key to success is in identifying the right funding structure for a hospitals' specific objectives.

*By: Jason Dopoulos, Ken Gould, and Steve Kennedy: Lancaster Pollard*

**4 Myths About the Healthcare EFT Standard, Debunked***Continued on next page*

While it's been in effect since January 2014, the Healthcare EFT Standard via ACH is still a source of confusion for many medical providers.

The standard allows providers to request that claims payments be made using EFTs instead of paper checks—that is, electronically transferred from the insurer to the provider's bank account via ACH, similar to direct deposit. Health plans are required, by law, to comply.

Converting to EFTs via ACH can result in substantial cost and time savings for healthcare practices. Yet, because the standard is still relatively new, many providers have received misinformation about EFTs via ACH that could be deterring them from making the switch.

Here are four common myths about the Healthcare EFT Standard and the reasons they're false:

**Myth: Enrollment is difficult.**

In fact, new operating rules have standardized sign-up data requirements for providers, so the process is the same, no matter the health plan.

Additionally, the [CAQH Enroll Hub](#) allows providers to fill out one form and enroll with multiple insurance carriers all at once. Clearinghouses can also assist providers with the enrollment process.

**Myth: Receiving healthcare EFTs via ACH is costly and requires special equipment.**

Actually, the only item required to receive EFT via ACH payments is a bank account, and signing up costs nothing.

What's more, EFTs via ACH are more cost effective than many other forms of payment, including checks and virtual cards. Providers see an average savings of \$3.04 for every claims check converted to an ACH payment.

When EFTs are used in combination with ERAs—which allows for automated reconciliation of EFT and ERA and automated posting—cost and time savings increase even more. Providers can save \$7.21 per payment when they switch from checks and explanations of benefits to EFT and ERA.

**4 Myths About the Healthcare EFT Standard, Debunked***Continued on next page*

Some practices may need to upgrade their practice management or accounting software to accommodate automated posting, but it's not necessary if a provider simply wants to receive EFTs.

**Myth: Healthcare EFTs via ACH are less secure than other methods of payment.**

In reality, healthcare EFTs via ACH are among the safest forms of payment available.

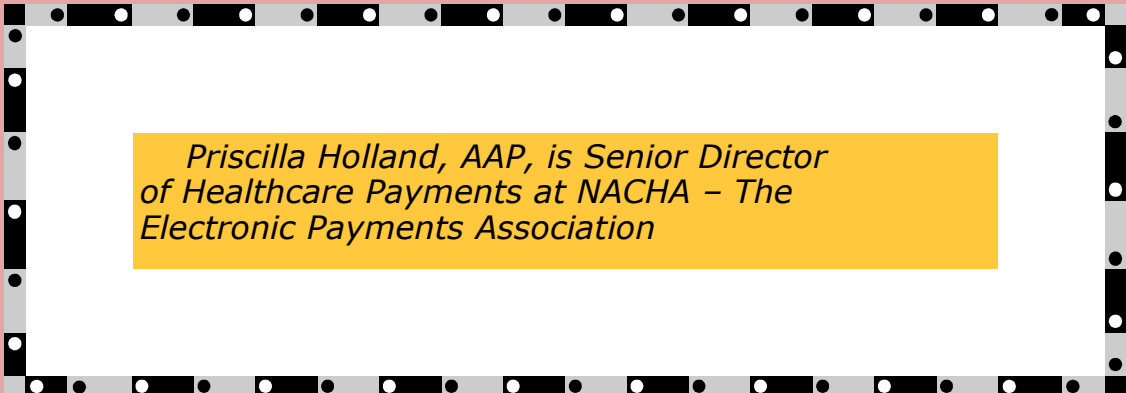
Funds are transferred directly from bank account to bank account via the ACH Network, which has been in use since the 1970s. Because EFTs are entirely electronic, using them eliminates the risk of a check being lost or stolen.

**Myth: Not all health plans offer the Healthcare EFT Standard.**

Health plans have been required by law, since January 2014, to offer the Healthcare EFT Standard via ACH to any provider who requests it. If a health plan refuses to offer the Healthcare EFT Standard via ACH, providers should speak with the company's compliance officer and, if necessary, file a HIPAA violation.

Additionally, some health plans are offering virtual cards for claims payments instead of EFTs and believe that this complies with the standard. It does not. The healthcare EFT standard is the NACHA CCD+ and must flow through the ACH Network. Providers have the option to say no to virtual cards, and all health plans must offer the healthcare EFT standard via ACH if it is requested.

It's easy to be misled by incorrect information, especially when it revolves around a new standard. To get the facts on the Healthcare EFT Standard, providers should always turn to reliable sources to research any outside information they receive. There are plenty of sources available online, including [NACHA's Healthcare Payment website](#), [NACHA's ACH Primer for Healthcare](#), and the American Medical Association's [EFT Toolkit](#) and [ERA Toolkit](#).



*Priscilla Holland, AAP, is Senior Director  
of Healthcare Payments at NACHA – The  
Electronic Payments Association*



# Information for healthier bottom lines

With the use of each TransUnion Revenue Cycle Management solution, the ability to maximize reimbursement increases

View our on-demand webinar replays here:  
[bitly.com/tuvideoreplays](https://bitly.com/tuvideoreplays)

If you would like to know more about our healthcare solutions, please call us at [888-791-3088](tel:888-791-3088) or visit us at [transunionhealthcare.com](https://transunionhealthcare.com)

TransUnion 



**They Aren't the Reason You are Miserable***Continued on next page*

Being a motivational speaker feels a lot like being a therapist, only without the degree, knowledge, or credibility. But still I meet people in their places of brokenness. I hear their issues and concerns. And I try to motivate them to see their problems/issues from a different perspective. And one of the consistent things I find in people, is the belief that their problem is someone else.

*My boss is jerk.*

*They didn't value my opinion.*

*He didn't call.*

*She's always running her mouth about something.*

*He drives me crazy.*

*She thinks I don't have anything else to do but wait on her.*

*They didn't pay me what I'm worth.*

*He's an ungrateful teenager and I'm sick of it.*

*She thinks she's better than everybody else.*

*They didn't give me my money's worth.*

*She just has it out for me.*

*Nobody will cut me any slack.*

Sound familiar?

**They Aren't the Reason You are Miserable***Continued on next page*

We all find ourselves victim to this sort of thinking. We don't live in a bubble. Our lives are filled with people, and many of them are difficult to deal with. And while we are often valid in our assessment of these people, it doesn't change the truth – that we can't fix them, change them, or find perfect people who act exactly as we want.

And they aren't the problem.

We are.

Yes, I said it. And you're probably mad. But it's true.

They aren't the reason you are miserable.

YOU are.

Life is filled with things circling us that are beyond our control – things happening to us – around us. Things that involve us directly, indirectly, or not really at all. So much of what is circling around us can't be controlled. Sure, some of it can be, and we should definitely work to control what we can in our lives. But the only thing you can control in EVERY situation, is how YOU will react to it.

YOU control your reaction

YOU control your feelings. Well, maybe at first you can't control your initial reaction. But after you calm down, you can.

YOU decide what story you are going to write with this data you have been given, even if you are standing in the middle of the colossal mess. YOU still control whether you will allow it to make you miserable.

Unless you have a chemical imbalance, or issues bigger than you (in which case, this does not really apply to you, except that it is YOUR responsibility to get help for it and not use it as an excuse) you can control your reactions, your emotions, and your happiness. Yes, it's a choice.

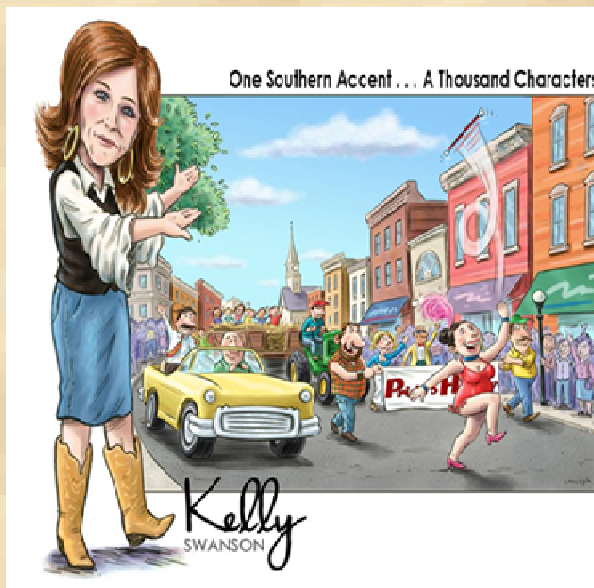
## They Aren't the Reason You are Miserable

YOU are the one who turns one bad moment into a bad hour, and then a bad day, and a bad week, and a bad life. You are the one who instead of letting it go, carries it around with you like a comfort blanket – finding more people to share your issue with – making it the focus of all your time, energy, and conversations.

So, unless you want to stay miserable (which apparently some people do – and actually thrive on it) that's your choice. Just acknowledge that it's your fault, not theirs. They aren't the reason you are miserable. You are.

You can choose!

*If we let others make us miserable, we always will be.*



## **This is Private, Right??????**

You know that email you've been saving? The one from your dad ... or co-worker ... or best friend ... or daughter? The one they thought only you would see? The one YOU thought only you would see? Well, as the law stands now, law enforcement officials could have legal access to that email without so much as a warrant.

Maybe that surprises you, or maybe it doesn't. But the fact is that as technology has expanded, the law hasn't. The Electronic Communications Privacy Act (ECPA), the primary law governing email privacy, was passed in 1986—before most of us even knew that email existed. Since then, only minimal reforms have been made to the ECPA, and vulnerabilities in the law have raised significant digital privacy concerns for the public.

It's not hard to see that the world is evolving around us. We have access to technology that didn't exist 10 or 5 or even 2 years ago, and that's a great thing. Technology gives us the opportunity to better ourselves and the world around us. It helps us to connect with people all around the globe in ways we never could have imagined were possible. But tech developments shouldn't come at the cost of individual privacy and security. The way we protect information should be reflective of the way that we store and share information.

Last week, the House voted 419 to 0, with my support, in favor of the Email Privacy Act (H.R. 699), a bill that would revise the ECPA to require law enforcement agencies to obtain search warrants before gaining access to personal messages and files stored by companies like Google, Yahoo, and Dropbox. Right now, agencies can gain access to emails and other digital files more than 90 days old by issuing subpoenas to technology companies—a very low standard for gaining access to information. This legislation would require law enforcement officers to secure a judge-issued warrant before gaining access to digital information stored in the cloud.

The Email Privacy Act represents the first major update to our digital privacy laws in three decades, and it's past time for us to make a change. The choice between privacy and technology is a false one. The Fourth Amendment, the Constitutional provision that guarantees privacy and designates it as a fundamental liberty, is strong enough to safeguard our rights in every situation. We have to make sure that our laws conform to that standard, and I believe that the Email Privacy Act takes positive steps in that direction.

Rob Wittman



A combination of highly trained staff, streamlined workflows, and advanced technology allow us to deliver optimal results to our clients.

Recognized Leaders in:

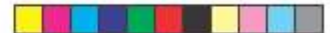
- Injury Claims Processing
- Complex Claim Resolution
- System Conversion Relief
- Early Out & Bad Debt Collections

To learn more about what CCS can do for your organization, visit our website at [www.ccsusa.com](http://www.ccsusa.com).

Michael Good

VP National Business Development  
617.965.2000 ext. 2478  
[mgood@ccsusa.com](mailto:mgood@ccsusa.com)

CCS Corporate Headquarters  
725 Canton Street, Norwood, MA 02062  
[www.ccsusa.com](http://www.ccsusa.com) • 800.227.4356



## KIWI-TEK IMPROVES YOUR CODING HEALTH

KIWI-TEK's blended coding combines world-class offshore coders with the finest domestic coding supervisors to provide responsive, reliable, high-quality outsourced medical coding.

*At 40% less cost than an in-house coding department or purely domestic outsource coding company.*

- ▶ Highly educated, superbly trained offshore coders
- ▶ Communicate only with domestic managers
- ▶ 24/7 as-needed resources
- ▶ Fast chart turnaround
- ▶ 95%+ accuracy
- ▶ Maximum compliance
- ▶ Optimal reimbursement
- ▶ No startup costs

KIWI-TEK's blended coding will meet or exceed your present coding performance at 40% lower cost.

Visit [kiwi-tek.com](http://kiwi-tek.com) or call 866-709-5494 today.

**KIWI-TEK™**  
*The Outsourced Coding Authority*

**2016 Scholarship Winner!**

*Congratulations to Stephanie Elliott, for being the winner of the 2016 Woodrow Samuel Annual Scholarship!*





## Credit Control Corporation

Financial Receivables Specialists

**Cutting Edge  
Technology**

**Results**

**Customer  
Service**

For more information, please contact  
Terry Fuller or Rika Gripp at 1.800.723.5463

### **SERVICES**

- Bad debt collections with credit reporting options
- Medicare bad debt collections with activity documentation
- Pre-collection programs supporting patient retention
- Budget account management
- 3rd party claims filing capabilities
- Full spectrum reporting
- Secure electronic data exchange
- Multiple skip tracing resources
- Convenient IVR/Web-based payment options available 24/7
- Premier customer and client service

### **HISTORY**

- Extensive collection & accounts receivable management services since 1953
- Experienced collection and support staff
- Flexible programs designed to meet specific client goals
- Long-term client "partnering" relationships
- Engaged management teams



# Meet one of your Board Members. . . . .

## Linda Patry

VA AAHAM  
 First Vice President  
 Director Patient Financial Services  
 Mary Washington Hospital  
 Fredericksburg, VA



- I grew up in . . . . . **Lewiston, Maine and lived there until my move to Virginia in December of 2011.**
- My hobbies include. . . . . **I enjoy Zumba, art, concerts, travel and gardening and love spending my free time exploring my new home state of Virginia.**
- My favorite sports teams are . . . . . **The Dallas Cowboys, Redsox, Bruins. My favorite sport is ice hockey.**
- What's an interesting fact about yourself . . . . **I am an only child who never learned how to ride a bike. That is something I plan to do very soon!**
- Give 2 truths and 1 lie. . . . . **I am left handed  
 I love to swim  
 I am a new Grandma to Theodore George Patry**



## Certification... why bother?

You may wonder why you should bother with obtaining your certification. After all, it's a lot of work—Let us enlighten you! Certification is an investment in your personal growth and your professional future.

### Benefits of obtaining AAHAM certification:

- Professional development
- Individual enrichment
- Employer awareness
- Recognition by industry and build a network of connections in the elite group that shares your designation
- Personal challenge and satisfaction
- National recognition
- Recognition and access to the positions and promotions you seek and deserve

—AND—

An AAHAM certification demonstrates your:

**Commitment**—to your field and your ongoing professional development.

**Expertise**—you possess the knowledge to meet the industry's highest standards and the capacity to pass a rigorous certification examination.

**Professionalism**—your pursuit of excellence supports the quality of service in your career and in the healthcare industry.

CRCE-I & CRCE-P exams are considered to be the best indication of knowledge in our field. Set a goal or make a promise to yourself to pass the exam. It will be gratifying to prove to yourself that you can pass this difficult exam, and that your years of experience and hard work will be evident to all by the CRCE-I/CRCE-P name.

If you are interested in testing your knowledge and gaining the recognition that comes with certification, contact Leanna Marshall for additional information.

**Leanna Marshall, CRCE-I**

PFS Consultant

UVA Health System (Retired)

Phone: (434)293-8891

Fax: (804)977-8748

814 Montrose Avenue

Charlottesville, VA 22902

Study guides are loaned out to members. You do not have to purchase your own study guide.

Virginia AAHAM offers a certification payment reward for passing the professional exam. AAHAM will reimburse the member for the cost of the exam.

## Newly Certified...

First Name	Last Name	Certification	Facility
Julia	Davignon	CRCS-I	
Holly	Dobson	CRCS-I	Mary Washington Healthcare
Michael	Garde	CRCS-P	Mary Washington Healthcare
Robin	Hatcher	CRCS-I	Mary Washington Healthcare
Stephanie	Hilgris	CRCS-I	Mary Washington Healthcare
Sharon	Hobbs	CRCS-I	Mary Washington Healthcare
Amanda	Kirby	CRCS-I	UVA Health Science Center
Bertha	Marin	CRCS-I	Inova Health System
Lori	McKenzie	CRCS-I	Centra
Agathe	Nsingi	CRCS-I	Inova Health System
Angela	Perin	CRCS-I	Mary Washington Healthcare
Lisa	Schadtler	CRCS-I	Mary Washington Healthcare
Emoni	White	CRCS-I	Sentra Healthcare

**Congratulations!**  
**We are proud of you!!**



## Certification

### 2016 Certification Schedule

**July 11-22, 2016**

July 2016 Exam Period

**August 15, 2016**

Registration deadline for November 2016 Exam Period

**November 7-18, 2016**

November 2016 Exam Period





**2016 Membership Application**

Please enter your data below, and then send this form, along with the \$30.00 annual dues to the address below to join or renew your membership with the Virginia Chapter of AAHAM.

*Take advantage of these important benefits ...*

- Problem solving and solution sharing with your associates
- Membership directory
- Reduced fees for chapter education events
- Access and preparation assistance for certification tests that demonstrate your professional skills
- Educational seminars & workshops
- Chapter newsletter
- Interaction & networking with peers

Please enter your information below.

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Certification: \_\_\_\_\_ Employer Name: \_\_\_\_\_

Job Title: \_\_\_\_\_ Mailing Address: \_\_\_\_\_

Day Phone #: \_\_\_\_\_ City: \_\_\_\_\_

Fax #: \_\_\_\_\_ State & Zip Code: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**MEMBERSHIP RECOMMENDED BY:** \_\_\_\_\_

For additional information contact Linda Patry @ 540-741-1591 or via email at: [Linda.Patry@mwhc.com](mailto:Linda.Patry@mwhc.com)

Please mail the completed form with our dues payment of \$30.00 to the following address:

Treasurer, Virginia AAHAM  
 Linda Conner  
 2204 Wilborn Ave.  
 South Boston, VA 24592

-OR-

Take advantage of our online membership application and payment options. Visit our website at [http://www.vaaaham.com/Membership\\_Application.html](http://www.vaaaham.com/Membership_Application.html)

Virginia AAHAM Tax ID: 54-1351774

# Penn Credit

## HEALTHCARE PROGRAMS

Penn Credit provides debt collection services for:

- Hospitals
- Specialty Groups
- Physician Groups
- EMS Organizations
- Long Term Care
- Home Health Agencies

*Our Extended Business Office (EBO) programs include:*

- Self-Pay Recovery
- Worker's Compensation Follow-Up
- Auto Insurance Follow-Up
- Commercial Insurance Follow-Up
- Managed Care Follow-Up
- Settlement of Account Balances
- Pre-Collection & A/R Clean-Up
- Charity Care Qualifications
- System Conversion Support

**Dale Brumbach**

*VP of Client Relations*

**800-720-7293**

[dale.brumbach@penncredit.com](mailto:dale.brumbach@penncredit.com)

# The Virginia Chapter of AAHAM Executive Board 2014-2015



## Chairman of the Board

(Chapter of Excellence Committee)

**Linda McLaughlin, CRCE-I**

Director, Director Finance and Governmental Services

VCU Health System

PO Box 980227, Richmond, VA 23298-027

Office—(804)828-6315 Email— [linda.b.mclaughlin@gmail.com](mailto:linda.b.mclaughlin@gmail.com)



## President

(Committee Chairperson: Nominating Committee; Accounts Receivable/Third Party Payer Committee)

**David Nicholas, CRCE-I**

President, Mercury Accounts Receivables Services

Office - (703) 825-8762

Email— [David@Mercury.ARS.com](mailto:David@Mercury.ARS.com)



## First Vice President

(Committee Chairperson: Membership & Chapter Development:Chapter Awareness)

**Linda Patry, CRCE-I**

Director, Patient Financial Services

Mary Washington Hospital

2300 Fall Hill Ave. Suite 311 Fredericksburg, VA. 22401

Office—(540)741-1591 Email— [Linda.Patry@mwhc.com](mailto:Linda.Patry@mwhc.com)

Email— [cfisher@augustahealth.com](mailto:cfisher@augustahealth.com)



## Second Vice President

(Committee Chairperson: Education Committee; Government Relations Committee)

**Dushantha Chelliah**

2212 Greenbrier Dr.

Charlottesville, VA, 22901

Office - (434)924-9266

Email- [DC5P@hscmail.mcc.virginia.edu](mailto:DC5P@hscmail.mcc.virginia.edu)



## Secretary

(Committee Chairperson: Publications Committee; Scholarship Committee)

**Amy Beech, CRCE-I**

Patient Accounting Supervisor

Augusta Health

PO Box 1000, Fishersville, VA 22939

Office—(540)245-7216 Email— [abeech@augustahealth.com](mailto:abeech@augustahealth.com)

# The Virginia Chapter of AAHAM Executive Board 2014-2015



## Treasurer

(Committee Chairperson: Vendor Awards Committee)

**Linda Connor, CRCE-I**

Manager of Patient Financial Services

Sentara Halifax Regional Hospital

Office: (434) 517-3433

Email: [linda.conner@halifaxregional.com](mailto:linda.conner@halifaxregional.com)



## Appointed Board Member

(Committee Chairperson: Finance Committee; Constitution & By-Laws Committee; Historical Committee)

**Brenda Chambers, CRCE-I,P**

Revenue Integrity

HCA - RSSC Capital Division

7300 Beaufort Springs Drive; Boulders VIII - 2<sup>nd</sup> Floor;

Richmond, VA 23225 Office—(804)267-5790 Email—[Brenda.Chambers@hcahealthcare.com](mailto:Brenda.Chambers@hcahealthcare.com)

Email—[Brenda.Chambers@hcahealthcare.com](mailto:Brenda.Chambers@hcahealthcare.com)



## Appointed Board Member

(Committee Chairperson: Certification Committee)

**Leanna Marshall, CRCE-I**

UVA Health System (Retired)

814 Montrose Avenue, Charlottesville, VA 22902

Phone—(434)293-8891 Fax—(434)977-8748

Email—[ayden1@embarqmail.com](mailto:ayden1@embarqmail.com)



## Honorary Board Member

**Michael Worley, CRCE-I**

Revenue Cycle Consultant

1807 Mount Vernon Street, Waynesboro, VA 22980

Office—(540)470-0020 Email—[mworley@ntelos.net](mailto:mworley@ntelos.net)



## Appointed Board Member

(Committee Chairperson: Communications Chair)

**Katie Creef, CRCE-I**

Director of Patient Accounting

Augusta Health

P.O. Box 1000 Fishersville, VA. 22939

Office- (540)332-5159 Email-[kcreef@augustahealth.com](mailto:kcreef@augustahealth.com)

Office- (540) 332-5159 Email- [kcreef@augustahealth.com](mailto:kcreef@augustahealth.com)

## On the Lighter Side...by Sara Quick



### Watermelon & Feta Salad

2 cups cubed watermelon  
 1 cup thickly sliced cucumbers  
 ¼ cup crumbled feta cheese  
 Juice of ½ a lemon  
 1 tbsp olive oil  
 Pinch of sea salt  
 Fresh cracked pepper  
 1 tsp dried mint

### Watermelon Punch

2 1/2 cups watermelon chunks  
 2 tablespoons lime juice  
 1/3 cup lemon juice  
 1/4 cup superfine sugar  
 2 1/2 cups seltzer, chilled  
 Ice

1. In a blender, pulse the watermelon until smooth. Push it through a fine-mesh sieve. You should have at least 1 1/4 cups of juice.

2. In a pitcher, combine 1 1/4 cups of the watermelon juice, the lime and lemon juices and the sugar. Whisk until the sugar has dissolved. Refrigerate until chilled. Add the chilled seltzer and stir gently. Serve over ice.





Beat the heat and cool off in some of Virginia's top vacation spots this summer!!!



Welcome to Virginia Beach!

The perfect destination for a family beach vacation, Virginia Beach features a three-mile long oceanfront boardwalk, exciting attractions, great golf, and much more.



**National News— [www.aaham.org](http://www.aaham.org)**

AAHAM announced a new mid-level certification at the 2014 Annual National Institute (ANI) in San Diego, CA, the Certified Revenue Integrity Professional (CRIP). This certification is intended for individuals in the revenue cycle to help ensure that facilities effectively manage their facilities charge master, and bill and document appropriately for all services rendered to a patient. This certification requires an in-depth, working knowledge of various revenue cycle areas and proper skill sets needed to increase revenue and reimbursement for facilities. It also ensures that proper charging takes place to maintain compliance within the insurance payer programs. With the addition of this new certification, AAHAM now offers a complete career ladder, beginning with the CRCS and culminating with the CRCE.

Visit the website for more information <http://www.aaham.org>

And calendar of upcoming

**Calendar of Events:**

**2016 Annual National Institute  
Caesar's Palace, Las Vegas, Nevada**

**October 5-7, 2016**



Stay up-to-date on Administrative Simplification and other healthcare Legislative issues of interest by visiting the National AAHAM web site:

<https://www.capwiz.com/aaham/home/>



The logo consists of a black oval with the words "CORPORATE" and "SPONSORSHIPS" stacked vertically in white, bold, serif font. Both words are underlined with a thin white line.

**CORPORATE  
SPONSORSHIPS**

**Platinum Sponsors:**

Credit Control Corporation  
University of Virginia  
NHI Billing

**Gold Sponsors:**

Penn Credit  
Trans Union

**Silver Sponsors:**

RMC Corporation  
Kiwi Tek  
Cleverley & Associates  
CCS Companies

**Bronze Sponsors:**

The Focused Group

# Sponsorship

[Dale.brumbach@penncredit.com](mailto:Dale.brumbach@penncredit.com)

## Platinum Sponsorship - \$1,500

- Exhibit space available at **both** the May & December Conference
- Full-page ad in **ALL** newsletters
- Full-page ad distributed at **ALL** meetings
- Free Registration at **BOTH** the May & December educational conference for four (4) sponsor employees
- Plus much more...

## Gold Sponsorship - \$1,200

- Exhibit space available at **both** the May & December Conference
- Full-page ad in **ALL** newsletters
- Full-page ad distributed at **ALL** meetings
- Plus much more...

## Silver Sponsorship - \$1,000

- Exhibit space available at **EITHER** the May **OR** December Conference
- Half-page ad in **ALL** newsletters
- Half-page ad distributed at **BOTH** meetings
- Plus much more...

The Virginia Chapter of the American Association of Healthcare Management (VA AAHAM) exists to provide or facilitate professional education, promote professional excellence, provide opportunities for sharing management strategies and tactics through professional networking. You and your organization are important to this mission. Virginia AAHAM benefits by drawing on the experience and education that you and your organization can bring to the activities and efforts of our association. Virginia AAHAM's mission also benefits from the financial support that many organizations provide. I hope that you will consider supporting Virginia AAHAM this year.

—Dale Brumbach, Vendor Sponsorship / Corporate Partners Chair

**Mark your calendars!**



**Upcoming VA AAHAM events:**

**September 23, 2016– Fall Regional Conference  
Warrenton, VA.**

**Annual Meeting & Conference  
Williamsburg, VA  
December 7–9, 2016**



**Go to our web site for more information and registration:**

**[www.vaaaham.com](http://www.vaaaham.com)**



## Contest for Newsletter Articles!



### Writers Wanted!

The Virginia Chapter of AAHAM will award **\$100** to the author of the best article submitted to the Publications Committee during 2016. Submit articles to Amy Beech [abeech@augustahealth.com](mailto:abeech@augustahealth.com). Newsletters are published quarterly. Don't miss your chance to be read, recognized, and rewarded for your writing talent.

This publication is brought to you through the collective efforts of the **Publications Committee**

**Amy Beech, CRCE-I**

[abeech@augustahealth.com](mailto:abeech@augustahealth.com)

**Sara Quick, CRCS-I,P**

[squick@augustahealth.com](mailto:squick@augustahealth.com)

## What is AAHAM?

AAHAM is a premier professional organization for healthcare administrative management. Our goal is to provide quality member services and leadership in the areas of education, communication, representation, professional standards and certification. Virginia AAHAM was founded in 1982 as the American Guild of Patient Account Management. Initially formed to serve the interests of hospital patient account managers, AAHAM has evolved into a national membership association that represents a based constituency of healthcare professionals.