

President's Message

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Thank you to the 2003-04 Board of Directors, Committee Chairs, and Volunteers for a stellar year. It has certainly been a blast. "HFMA: It's personal" was this year's theme selected by HFMA's voluntary Chairman of the Board of Directors, Dave Canfield. Based on the results of Oklahoma's year-end statistics, I believe some leaders and volunteers in our chapter took that to heart.

I finish my year as President on May 31 and what a way to go out. On April 1 & 2, 2004, we recorded one of the highest attended programs in our 49 years of existence (see statistics below). We also hosted a luncheon to recognize folks who have been members for 20 years or more. We identified and invited 33 members. We were honored to have 15 of these members attend.

It was also fitting to recognize two individuals who have contributed significantly over the years of their time and knowledge to the Oklahoma Chapter. The Founders Medal of Honor, the highest and fourth level of the Founders Award program, was added in 1986 and is conferred by nomination of the Chapter Board of Directors. Darla McCallister and Tom Giaudrone were presented with this prestigious award. Mrs. Sherry Giaudrone graciously and eloquently accepted the award on behalf of her late husband, Tom. They join the elite group of only five other individuals in the Oklahoma Chapter who have been presented with this award: Steve Dorsett, Rory Ward, Rick Snyder, Robert "Bob" Junger, and John Meharg. Three of the five were present for the recognition of Darla and Tom.

New this year is the President's Volunteer of the Year award. We (the Chapter) have been blessed with a large increase in volunteerism for the Chapter this year. The Board decided to recognize an individual for their faithful involvement and selfless contributions to the Oklahoma Chapter. The inaugural award was presented to Tamie Osburn, Director Business Services, INTEGRIS Baptist Regional Health Center, Miami, OK. (continued on page 2)

Order Influenza Vaccine Now

In order to ensure the availability of influenza vaccine for administration early in the Fall of 2004, physicians and providers should begin to order supplies of influenza vaccine immediately. Last year, large numbers of cases of influenza began to appear in October, and activity was widespread. Anticipation of increased demand for vaccine in the Fall of 2004 makes it imperative that physicians and providers who care for Medicare beneficiaries and others at high risk for complications from influenza begin to prepare for the 2004-2005 influenza season immediately.

While the recently enacted Medicare Prescription Drug, Improvement and Modernization Act of 2003 changed the Medicare payments for many covered drugs and biologicals, the basis for Medicare payment of influenza vaccine will continue to be 95% of the average wholesale price.

President's Message (continued)

Overall the Chapter is experiencing continued forward and upward momentum. Last year at the Annual National Institute (ANI), Ann Paul, Past President, brought home five awards, including the areas of certification and educational improvement. She would be the first to admit that many volunteers were instrumental in these results. We hope to measure up at this year's ANI in Nashville.

Certification, Education, and Membership were three areas of focus for your leadership team this year. As a result, the following statistics are some that are measured by National HFMA and are a positive reflection of the hard work, commitment, and teamwork of your current Oklahoma chapter leaders:

- ❖ Certification – A total of 11 exams have been passed this year (through March 31). This represents an increase of 120 percent over last year. A total of four members have passed both the core and specialty exams and are eligible to be Certified Healthcare Financial Professionals. This is an increase of 33 percent over last year and increases our number of chapter members certified to seven percent. All of these exams were proctored by Becky Speight, OHFMA Vice President. Thank you Becky for your commitment and flexibility.
- ❖ Education – The April 1 & 2 Education Program logged 132 attendees, plus 9 lunch-only guests for the special recognition, and 1,584 total registered hours. Our April

2003 meeting logged 124 attendees and a total 1,472 registered hours. Rick Kelly, OHFMA President-Elect, chaired our Program Committee this year and deserves congratulations for a job well done.

Next year will be our 50th anniversary celebration so watch for great programming in 2004-05.

- ❖ Membership – Probably one of the greatest feats this year is the result of our Membership Committee's efforts, phenomenally led by Co-Chairs Meegan Carter and Joby Brown. As of April 12, 2004 we have a total count of 363 members. This equates to a positive growth for 2004 of 4.31 percent. In a time when National HFMA is experiencing an overall decrease in membership of approximately two percent, this is remarkable and something to be very proud of.

Thank you for the opportunity to serve you as President in 2003-04. I have enjoyed the relationships built and learning much from so many.

Kindest regards,



Annual Meeting Highlights

The Oklahoma Chapter's annual meeting was held April 1 & 2 in Oklahoma City. There were several dynamics speakers, and the highlight of the meeting was the recognition luncheon and awards.

After the installation of officers, the program began on Thursday with Steve Hunter, President & CEO of SSM Health Care of Oklahoma, sharing his thoughts and insights on the state of healthcare in Oklahoma. Both Patti Davis and Pat Andersen from the Oklahoma Hospital Association spoke to our attendees while Renee Edwards with Saint Francis Health System spoke about managing and benchmarking the revenue cycle.

The business portion of the meeting was adjourned during lunch to allow for the presentation of several awards. The Founders Medal of Honor is the highest level of recognition within HFMA and is only conferred upon nomination of the Chapter's Board of Directors. To be eligible, an individual must have been actively involved in HFMA for at least three years after earning the Muncie Gold Award, have provided significant service in the chapter, regional and/or national level in at least two of those years, and remained a member in good standing.

In the past 49 years, only four members of the Oklahoma chapter have been honored with this award – Bob Junger, John Meharg, Steve Dorsett and Rory Ward. This year the chapter honored two well-deserving individuals – Darla McCallister and the late Tom Giaudrone. Darla was at the luncheon to receive her award and the Chapter was pleased to have Joel Tate, CEO of McAlester Regional Health Center, present the award to Mrs. Sherry Giaudrone. Mrs. Giaudrone made several remarks about Tom's love for many of the people involved with Oklahoma HFMA and how the meetings were very important to him.

Lloyd Haggard presents
award to Darla
McCallister



Mrs. Sherry Giaudrone
accepts Founders Medal of
Honor from Joel Tate

Annual Meeting Highlights *(continued)*

The luncheon also recognized those members with more than 20 years of service to the organization. Those members recognized were Jim Powers, Peggy Risinger, Gene McPherson, Jerry Gardner, Bob Junger, Basil Wyatt, Gene Kozikoski, Richard Bates, Douglas Forman, Donald Lorack, James Hyde, John Meharg, Art Mires, Richard Snyder, Vicky Fine, Bob Williams, Karen Keesee, Pat Andersen, Errol Mitchell, Rory Ward, Della Allison, Steve Dorsett, Don Tice, Nancy Summers, Lex Anderson, Daniel Powell, Cary McClure, Wayne Walthall, Kenna Coker, John Hackbarth, Ray Whitmore, Russell Eldridge, Pam Madole, Terri McNeal and Nikie Vassilopoulos.

The final recognition was a new award this year – the President’ Volunteer of the Year. This year’s award was presented to Tamie Osburn, Director Business Services, INTEGRIS Baptist Regional Health Center in Miami.

The luncheon ended on a light note, with Lyn Hester of INTEGRIS Baptist Medical Center providing a short address entitled, “Take Two Chuckles and Call Me in the Morning!”

The afternoon sessions included updates on the Medicare Modernization Act of 2003 and a presentation by our volunteer of the year, Tamie Osburn with Suzanne Lestina of Gustafson + Associates, Inc. on “Maximizing Human Capital...The Key to Revenue Cycle Excellence”. We also held our second CEO/CFO Forum to allow our executive members to have time for roundtable discussions on topics of interest to them. Karen Rieger with Crowe & Dunlevy facilitated a discussion on Determining Fair Market Value of Medical Directorships & On-Call Pay for Physicians.



Steve Hand, Regional Executive, enjoys luncheon speaker with Brian Marks

After a fun-filled evening at Rane in Bricktown, Friday’s session was devoted to Tim Wright of Wright Results on “Take Charge! Accept the Challenges of Healthcare Leadership”. One of the attendees, Toni Young, had this to say about Tim’s program. “Tim’s presentation was very interactive and thought provoking. His use of small groups kept the participants involved. The skill differences between a leader and manager were well defined with the use of input from the audience. The eight methods of obtaining commitment from a team I found to be informative and helpful. Overall, this was a great presentation. The speaker was excellent.”

Thanks to all the many volunteers who helped make the meeting a huge success!

Lloyd congratulates Errol Mitchell



Lloyd thanks Peggy Risinger for attending

Steve Dorsett accepts gift from Chapter President Lloyd Haggard



Lloyd presents gift to Bob Junger

Lloyd surprises Tamie Osburn with “Volunteer of the Year”





Leading with Vision: The Importance of Your Vision Statement

True leaders have vision. I do not mean the leaders' optical ability to see the noses in front of their faces. I mean the foresight and the drive to see what the organization can achieve for the good of its customers, its employers, and its stockholders.

Without a defined vision, a hospital would not require leaders at its head. Such a hospital could survive well with capable managers overseeing daily operations. With vision for the future, however, a leader sets the course, inspires members of the team, acquires and allocates resources, and maintains direction toward vision fulfillment.

A leader's vision allows the organization to share four distinct strengths.

***Destination.** A good vision statement clarifies desired results. If you do not know where you are going, you cannot arrive there. A vision statement denotes the desired final results—final, from the current perspective. In effect, it puts the end in sight.*

***Direction.** In laying down the destination, a vision statement encourages clarity of direction, of how to get there. Well stated, the vision enables—encourages—everyone involved to select methods to reach the destination. That, then, supports the entire team's determining and following common direction more readily.*

A vision statement asserts where an organization, association, department, team or individual will be in the future. The future is usually three to five years out. Still, the vision statement should be worded in present tense. Statements of "will be" or "will have" or "will do" place the vision always ahead (and just out of reach), as the proverbial carrot in front of the donkey. To be believed as possible by all involved, your vision should be stated in the present tense.

A successfully strong vision statement blends the general and the dynamic. It ought to be broad enough to entice interest, spark attention, and motivate actions. As well, that vision statement must be dynamic enough to be believable, meaningful, and specifically valuable for all who pursue it.

For a vision statement to have full potency, it must remain in the heads (memory) and hearts (inspiration) of the team members. That means express it concisely. Use active verbs. Select words that deliver punch or pizzazz and make the vision come alive.

***Unity.** All of the players involved—whether members of a unit, participants in a department, or employees of an entire organization—look, work, and move in a single direction thanks to a well-founded vision statement. That unity expresses complementary, focused decisions and actions.*

***Motivation.** Destination, direction, and unity promote motivation among individuals to seek and to achieve the vision. By clearly indicating where a person, team, or entire company wants to be, how it will get there, and the ways it will work (as a whole) to journey successfully, the vision statement motivates the "let's get it done!" mindset.*

Who Needs A Vision Statement?

Every company expects to have a vision statement.

Boards of Directors approve them. CEOs and Presidents support them.

But consider the value of a true Vision Statement for:

1. Your department: supporting the hospital's vision statement with a more specific application.
2. Your unit: supporting the department's overall strategy with a vision focused on your unit's functions.
3. Your team/task force: clarifying and expediting the concrete assignment for which the team was created.
4. Your Self: defining and directing your personal/professional values and aspirations.

Leading with Vision (continued)

To shape and formalize your vision statement, I recommend that you follow six integrated steps. Each step contributes unique value to the statement. Each step is simple—even enjoyable!—to complete.

- Step 1.* Encourage input. No matter how large your team or organization, invite every member who will be expected to strive for the vision to provide thoughts, opinions, data, and responses to the development of the vision statement.
- Step 2.* Ask questions. As thoughts, opinions, data, and responses come in, seek clarification and explanation and elaboration. As you encourage individuals to share more, they will add more value to what they say.
- Step 3.* Draft. Simplify. Redraft. Revise. Redraft. Vision statements start off too wordy. Cut back to essential, power-packed words. Imagine that you are sharpening a knife or polishing silver or sanding fine woodwork.
- Step 4.* Share it. Speak it. Show it. Sign it. Shout it. Sing it. The best test for your vision statement is to show it to the public. You will recognize your statement's strengths and weaknesses by how it feels to express it and by how others receive it. Use every format for expressing it; give your public a chance to receive it from every format.
- Step 5.* Invite feedback. Obviously.
- Step 6.* Print it. Distribute it. Believe it. Practice it. For your vision statement to make its desired impact, it cannot just be on your wall or in your annual report. It must serve as launch pad, sounding board, and filter for decisions and actions throughout your organization.

A Bonus Step. Change your vision statement if it does not work. Changes in the marketplace, your structure, the economy, your services, the regulatory environment, or your leadership/management teams may throw your vision right out the window. When that happens, throw your vision statement out also. Start over.

**Tim Wright, President
Wright Results
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Tim Wright, President
Wright Results

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Learn more about Tim’s Take Charge! Lead as You’ve Never Led Before program that develops and improves leadership skills for shift supervisors to CEOs...and others as well! Visit www.WrightResults.com
Contact Tim Wright at 512-733-6453 or tim@WrightResults.com

Appearing Now on the World Wide Web – OHFMA.ORG

Please take a moment to browse our new Oklahoma Chapter site at www.ohfma.org for information concerning the chapter, resource links and corporate sponsors. As this is a new site, the web site committee is anxious to receive feedback from the chapter. If you have suggestions or comments, please go to “Contact Us” from the main menu and send us a note.

Edwin Casteel
Web Site Committee Chair

MEDICARE ADDS TO LIST OF OUTPATIENT SERVICES ELIGIBLE FOR ADDITIONAL PAYMENTS

To ensure that Medicare beneficiaries have prompt access to improvements in outpatient care, the Centers for Medicare & Medicaid Services has authorized hospitals to receive special payments under the Outpatient Prospective Payment System (OPPS) for three additional drugs. In addition, CMS has identified four additional services for payment as new technologies in the outpatient setting. Both types of payments are temporary until there is sufficient cost data from outpatient services to develop an appropriate price within the OPPS.

"The decisions we are announcing today are intended to ensure that Medicare beneficiaries are able to get state-of-the-art health care, by making it financially feasible for hospitals to incorporate medical advances as soon as possible," said CMS Administrator Mark B. McClellan, Ph.D., M.D.

The drugs for which the special add-on payments (called pass-through payments) include: daptomycin, an

injectible antibiotic for serious staph infections, for which hospitals will receive payment of \$0.31 per 1 mg; risperidone, an injectible antipsychotic, \$131.86 per 12.5 mg; and rasburicase, an injectible treatment for high uric acid levels that may result from certain cancer treatments, \$105.54 per 0.5 mg. These pass-through payments became effective April 1, 2004.

The new technologies include:

- ❖ The insertion of a special device for measuring and monitoring acid levels associated with gastroesophageal reflux disease (GERD), which will be paid at \$450;
- ❖ A procedure using a laser device that vaporizes the prostate and controls bleeding before and after the procedure, which will be paid at \$3,750;
- ❖ The concurrent or immediate placement of a balloon catheter in the breast for interstitial radiation therapy following

a partial mastectomy, which will be paid at \$2,750; and

- ❖ The delayed placement of a balloon catheter into the breast for interstitial radiation therapy following a partial mastectomy; which will be paid at \$3,250.

The new payment rates were included in a quarterly update to the outpatient payment system. Under this system, hospitals are paid for outpatient services based on groupings, called ambulatory payment classifications, or APCs, that are clinically similar and require similar resources. The system was required by the Balanced Budget Act of 1997 and was implemented in August of 2000. Since then, Congress has made a series of significant changes to the system that are intended to remove any financial barrier to hospitals using new drugs and technologies in treating Medicare beneficiaries.

The update also clarifies billing and payment issues affecting intensity modulated radiation therapy and brachytherapy devices used in cancer treatment.

**HFMA
Oklahoma
Chapter
Corporate
Sponsors
2004**

(Paid through April 15, 2004)

Platinum Level

BKD, LLP....Lloyd Haggard....(918) 584-2900
HCFS, Inc.....Don McCown....(800) 394-4237
Madole Wagner, PLLC....Rick Wagner....(918) 299-8833
Siemens Medical Solutions, USA....Christine DeGree,....(214) 414-2315

Gold Level

MASH....Cheryl Kaufmann....(800) 880-6274
Works & Lentz, Inc.....Deborah Miller....(405) 942-2211

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Administrative Consultation Services, Inc.....Jeff Clark....(405) 878-0118
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Cap Gemini Ernst & Young U.S. LLC....Ronald P. Kelley, Jr....(972) 556-7360
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QUE Financial....George Finefrock....(800) 285-7791
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Credit Bureau Services Association....Teresa Axton....(405) 707-3442
FMA Alliance, Ltd.....Heath Secrist....(800) 955-5598
GreenFlag Profit Recovery from Transworld Systems....Joby Brown....
(405) 943-5272

We value and appreciate our participating corporate sponsors. If you or your organization is interested in becoming a corporate sponsor for OHFMA, please contact Louise Littlejohn, Corporate Sponsors committee, at (405) 682-8088 ext. 121.

Member Get a Member Campaign Ends!

What a successful campaign! We had 23 new members join during the campaign, sponsored by seven different members. The contest ended March 31, 2004, and the drawing was held on April 15th. The winner of a free registration to this year's Annual National Institute in Nashville, Tennessee, is Irina Aizenman. Irina is the Director of Internal Audit at INTEGRIS *Health* in Oklahoma City and has been very supportive of the Oklahoma chapter, attending the last couple of meetings and bringing several of her staff as well.

Congratulations Irina!

More words from our sponsors...

In the last newsletter, we introduced several of our corporate sponsors and how they define their businesses. This issue we have information to share on six other sponsors of the chapter.

Transworld Systems, Inc., offers a Delinquent Insurance Resolution System, has more than 33 years of experience and provides services through more than 140 offices nationwide. Transworld Systems, Inc., provides better tools for resolving unpaid insurance claims and delinquent self-pay accounts.

HCFS, Inc. started out as a third-party eligibility company in 1986. Their primary business was to assist medical provider clients by attempting to qualify low income and uninsured patients (also known as self-pay patients), for third party payor programs such as commercial insurance, or federal, state, and county entitlement providers. Although third-party eligibility is still HCFS' primary business, they offer a wide range of services that are designed to improve an organization's financial position.

Siemens Medical Solutions is one of the world's largest suppliers to the healthcare industry. The company brings together medical technologies, healthcare information systems, management consulting and support services, to help

customers achieve tangible, sustainable, clinical and financial outcomes.

Beginning in 1985, Administrative Consultant Service, Inc., (ACS) was established for the purpose of assisting hospitals by uniting the efforts of physicians, nurses, coders, case managers and the utilization review staff to better achieve accurate documentation and optimal reimbursement.

Midland Professional Services is a private corporation organized to assist hospitals in securing reimbursement for uninsured patients through public benefits eligibility screening and processing. MPS is also a leader in outsourced business office services to hospitals, including financial counseling, third-party billing including commercial, Medicaid, and workers' comp, accident/liability billing and lien filing.

Works & Lentz is both a collection law firm and a general practice law firm offering a unique approach to collection needs. They can be found on the web at www.workslentz.com.

These six and all our other corporate sponsors are very important to the health and vitality of our chapter. Next time you have a chance, tell them how much you appreciate their participation!

**W
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New Members

Since February 2004 Newsletter

Ben Helm – *Memorial Hospital of Texas County*

Erin Hill – *BKD, LLP*

Daniel Peterson – *Madole Wagner, PLLC*

Wanda Jones – *INTEGRIS Health*

Wendy Clark – *McAlester Regional Health Center*

Melisa Logan – *Mercy Health Center*

Thomas Story – *Saint Francis Hospital*

Teresa Stalnak – *INTEGRIS Blackwell Regional Hospital*

Madonna Burton – *Orthopedic Hospital of Oklahoma*

Patsy Sedore – *Saint Francis Health System*

Robin Griffiths – *Pawnee Municipal Hospital*

Tina Steele – *Pawnee Municipal Hospital*

New Board and Officers Installed at April meeting

We were fortunate to have Steve Hand, Region 9's Regional Executive, on hand Thursday, April 1, 2004, to perform the installation of officers for the 2004-2005 Chapter year.

The Officers and Board Members (from right to left in the photo below) are as follows:

President	<i>Rick Kelly</i>	Saint Francis Home Medical Equipment
President-Elect	<i>Becky Speight</i>	BKD, LLP
Vice President	<i>Karen Hendren</i>	Stillwater Medical Center
Secretary	<i>Vicki Lacy</i>	EMSA
Treasurer	<i>Bryan Bodnar</i>	BKD, LLP
Director	<i>Connie Proctor</i>	INTEGRIS Grove General Hospital
Director	<i>Angela MorningStar</i>	Saint Francis Health System
Director	<i>Linda Short</i>	St. Anthony Hospital
Director	<i>Staci Sudberry</i>	INTEGRIS Baptist Medical Center
Director	<i>Tamie Osburn</i>	INTEGRIS Baptist Regional Health Center
Director	<i>Rex Van Meter</i>	INTEGRIS Blackwell Regional Hospital



The Board will be meeting in May to work on strategic planning for the upcoming year. If you have any ideas you would like to share, please feel free to contact Rick Kelly at rekelly@saintfrancis.com or Becky Speight at rspeight@bkd.com.

**OHFMA Leadership
2003-2004**

OFFICERS

President
Lloyd Haggard
(918) 584-2900

President Elect
Rick Kelly
(918) 494-9297

Vice President &
Newsletter Editor
Becky Speight
(918) 584-2900

Secretary
Vicki Lacy
(405) 297-7159

Treasurer
Thom Biby
(918) 758-3102

DIRECTORS

Bryan Bodnar
(918) 584-2900

Kevin Cox
(918) 787-3405

Karen Hendren
(405) 742-5729

Anita Lollar
(580) 421-1413

Connie Proctor
(918) 787-3630

Linda Short
(405) 307-4442

HFMA & THE INFORMATION AGE

Are you currently receiving "HFMA Wants You to Know," a weekly email for HFMA members? If not, and you would like to receive a free subscription, send an email to memberservices@hfma.org.

The Oklahoma Chapter has implemented email distribution of the chapter newsletter and other updates. We will continue to mail newsletters to those members for which we have no email address. If you do not receive the email version and would like us to have your email address on file, please email Becky Speight at rspeight@bkd.com.

If you need to change your member demographic information, including your email address, contact memberservices@hfma.org.

WE WANT YOUR FEEDBACK!

Do you have ideas on topics for upcoming educational programs? Are there ways we can serve you better either through networking opportunities or educational initiatives? Other comments or suggestions?

Call or e-mail:

Rick Kelly ● (918) 494-9297
rekelly@saintfrancis.com

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OHFMA Committee Chairpersons

Membership	Meegan Carter	(405) 440-8875
Programs	Rick Kelly	(918) 494-9297
Certification	Art Mires	(580) 762-6219
Davis Management	Vicki Lacy	(405) 297-7159
Management Practices	Ken Simpson	(918) 579-1059
Corporate Sponsors	Louise Littlejohn	(405) 682-8088, ext. 121
Scholarship	Regan Calhoun	(918) 494-7359
Managed Care	Ann Paul	(918) 624-4619
Medical Group Practice	Andrea Rizer	(918) 497-3333
Job Placement	Ed Casteel	(918) 481-4626
Golf Tournament	Rick Kelly	(918) 494-9297



EDITORIAL POLICY

The statements and opinions appearing in articles are those of the author and do not necessarily reflect the view of the Oklahoma 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 correspondences are assumed to be released for publication unless otherwise indicated.

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