

SEMI-ANNUAL HEALTHCARE REVENUE CYCLE MANAGEMENT FORUM

Streamline Front-End Processes to Ensure Rapid & Accurate Reimbursement in an Evolving Landscape Transitioning from Fee-for-Service to Value-Based Care through Leveraging Internal Resources, Technology and Patient Relations

The Q1 Healthcare Revenue Cycle Management Forum provides a unique opportunity for knowledge share and peer-to-peer engagement through a blend of educational presentations, high-level strategy discussion groups led by experienced revenue cycle executives and targeted one-on-one networking introductions with select supplier partners. Featuring over 25 strategy discussion groups from which participants can select based on current educational needs and business challenges, the customized agenda results in high levels of professional development and an opportunity to find solutions to current revenue cycle challenges. Each strategy discussion group is facilitated by a leading executive from the healthcare industry, who provides guidance and structure for the discussion, as well as summarizes key points to be shared following the program.



IDEAS

Bringing together executives representing the highest levels of financial leadership from the healthcare industry, participants are selected and attendance is based on invitation only, ensuring a high level discussion platform where all participants speak the same language.



NETWORKING

Establishing connections with executives in the field is of tremendous importance for executives as well as solution providing corporations, and the Q1 Forum environment provides a high level of personal interaction, maximizing the number of real connections made.



CUSTOM BUILT

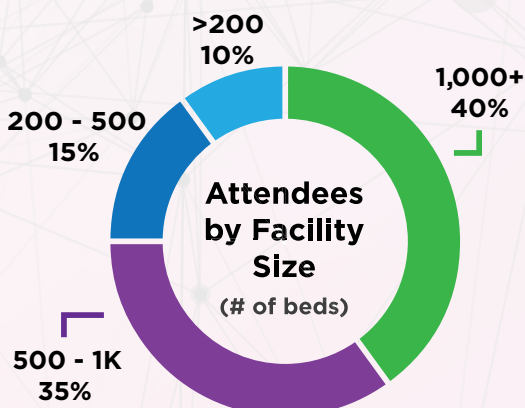
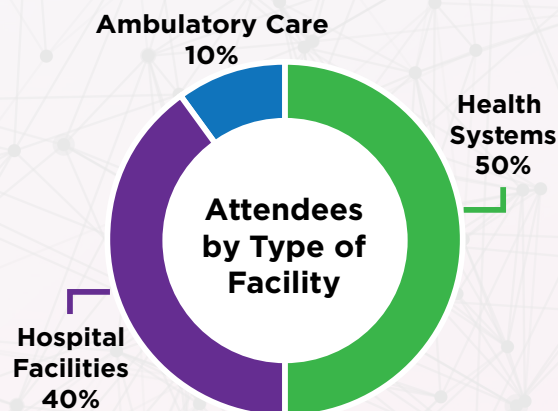
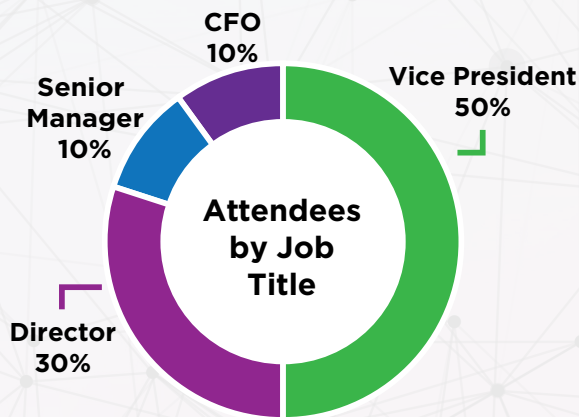
Through a selection process based on individual needs, attendees have an opportunity to select the discussion groups as well as solution providers that are of the most pressing need; ensuring time spent at the Forum is as effective as possible.



ATTENDEE PROFILE:

Vice Presidents and Heads of Revenue Cycle, Revenue Cycle Integrity, Revenue Operations & Denials Prevention from leading hospitals, health systems and integrated delivery networks, with an emphasis on systems and in-patient facilities with 200 or more beds.

Q1 HEALTHCARE REVENUE CYCLE MANAGEMENT FORUM: BY THE NUMBERS



REVENUE CYCLE SUPPLIER CATEGORIES:

FRONT-END SOLUTIONS

- Patient account establishment
- Pre-registration & patient accounts
- Insurance eligibility verification
- Automation in eligibility verification
- Aligning front end for success

ENSURING CODING EXCELLENCE

- Coding training opportunities
- Accuracy in coding practices
- Charging of capture duties
- Automated ICD-10 coding

BACK-END OPERATIONS

- Payment posting
- Statement processing
- Patient collections
- Claims denials
- Accelerating cash flow

DENIALS MANAGEMENT

- Preventative denials management
- Streamlined claims submission
- Tracking claims for denials root cause
- Payer communication strategies
- Reconciliation processes

TECHNOLOGY OPPORTUNITIES

- Revenue cycle solutions
- Integrated Health IT
- Advanced revenue dashboards
- Big data solutions
- Health revenue analytics
- Advanced data mining
- Enterprise content management
- Increased audit controls

REIMBURSEMENT SOLUTIONS

- Payer contracting
- Value-based care transition
- Medicare audit management

PATIENT FACING SOLUTIONS

- Communication solutions
- Assisting uninsured patients
- Patient financial education
- Increasing patient satisfaction

HEALTHCARE REVENUE CYCLE MANAGEMENT FORUM

SEPTEMBER 13-14, 2018
PHILADELPHIA, PA

PROVIDER PARTNER SCHEDULE-AT-A-GLANCE

DAY 1 AGENDA - THURSDAY, SEPTEMBER 13

8:00 Registration & Welcome Coffee

8:30 Opening Keynote Panel Discussion

9:00 Industry Fireside Chat Presentation

9:45 Prescheduled Networking Meetings 1-3

11:15 Strategy Discussion Groups 1-3

12:00 Luncheon & Meeting 4

1:15 Strategy Discussion Groups 4-6

2:00 Strategy Discussion Groups 7-9

2:45 Prescheduled Networking Meeting 5-6

3:45 Strategy Discussion Groups 10-12

4:30 Strategy Discussion Groups 13-15

5:15 Prescheduled Networking Meeting 7-8

5:15 Cocktail Hour for All Guests

6:15 Day 1 Program Conclusion

7:00 Informal Dinner Group Meet Up's

DAY 2 AGENDA - FRIDAY, SEPTEMBER 14

8:00 Registration & Welcome Coffee

8:30 Strategy Discussion Groups 16-18

9:15 Strategy Discussion Groups 19-21

10:00 Prescheduled Networking Meetings 9-11

11:30 Strategy Discussion Groups 22-24

12:15 Luncheon & Meeting 12

1:15 Strategy Discussion Groups 25-26

2:00 Strategy Discussion Groups 27-28

3:00 Closing Remarks & Program Conclusion

PREVIOUS PARTICIPANTS INCLUDE:

Director, Health Information & Revenue Cycle, **ADVOCATE TRINITY HOSPITAL**
VP, Provider Networks, **ALEDADE**
AVP, Patient Financial Services, **ALTAMED HEALTH SERVICES CORPORATION**
Director of Third Party Reimbursement, **ANN & ROBERT H. LURIE CHILDREN'S**
Divisional Director, Business Analytics, **CAREMOUNT MEDICAL, PC**
Senior Director, Business Services, **CAREMOUNT MEDICAL, PC**
SVP Revenue Cycle, **CARILION CLINIC**
Director of Revenue Cycle, **CARILION CLINIC**
Director, Professional Billing, **CARILION CLINIC**
Director, Patient Financial Services, **COOK COUNTY HEALTH & HOSPITAL**
VP Revenue Cycle, **CENTER FOR VEIN RESTORATION**
Reimbursement Officer, **CHILDREN'S NATIONAL HEALTH SYSTEM**
Executive Director, Payor Relations, **CHILDREN'S NATIONAL HEALTH**
Director, Budget & Reimbursement, **COOPER HEALTH SYSTEM**
Associate Director, Revenue Management, **DUKE HEALTH-PRMO**
Director, Revenue & Documentation Integrity, **DUKE UNIVERSITY HEALTH**
Director of Reimbursement, **FRANCISCAN ALLIANCE**
VP Revenue Cycle & Payer Strategy, **GATEWAY LEARNING GROUP**
Vice President, Revenue Cycle & Payer Strategy, **GATEWAY LEARNING GROUP**
SVP Finance & Supply Chain, **GRADY HEALTH**
Manager, Financial Planning & Analysis Decision Support, **GRADY HEALTH**
Vice President, Payer Engagement, **HCA HEALTHCARE, CAPITAL DIVISION**
President and CEO, **HENRY FORD WYANDOTTE HOSPITAL**
VP of Revenue Cycle, **HOSPITAL SISTERS HEALTH SYSTEM**
Director, Revenue Cycle Systems, **HOWARD UNIVERSITY HOSPITAL**

BREAKOUT DISCUSSION TOPICS:

ALIGNING FRONT-END PROCESSES FOR SUCCESS

1. Best practices in streamlining accurate patient accounts
2. Federal and private payer insurance eligibility verification
3. Engaging patients from pre-registration and pre-arrival

BACK-END PROCESSING TO ENSURE REIMBURSEMENT

4. Ensuring the highest levels of coding accuracy from teams
5. Use of technology in coding accuracy and automation
6. Heightening accuracy in charging of capture duties
7. Opportunities in enhancing payment & statement processing
8. Tactics for preventing disruptions in claims reimbursement

UTILIZATION OF TECHNOLOGY & AUTOMATION SOLUTIONS

9. Selection of most appropriate revenue cycle technology solutions
10. Establishing ROI from revenue cycle management software
11. Use of big data analytics and health IT solutions
12. Leveraging advanced dashboards and alerts for revenue goals
13. Alignment of revenue cycle & health information systems

ENGAGEMENT OF PATIENTS TO INCREASE REVENUE STABILITY

14. Opportunities in direct and compassionate collection from patients
15. Improved communication with patients to secure payment
16. Assistance for uninsured patients with coverage options & exchanges
17. Heightening patient satisfaction to meet quality metrics for payment

CODING, REIMBURSEMENT & DENIALS MANAGEMENT

18. Increasing accuracy in healthcare coding to ensure payment
19. Contracting & payer communication to ensure reimbursement
20. Focus on end-to-end documentation & coding to smooth processes
21. Opportunities in staff training to reduce and manage claim denials
22. Tracking claims to remediate & correct the root cause of denials

REVENUE LEADERSHIP & EVOLVING HEALTHCARE MARKETPLACE

23. Building and maintaining a high performing revenue cycle team
24. Career and executive development for revenue cycle executives
25. Aligning revenue team goals with overall organizational finance goals
26. Impact of healthcare reform & payment model changes on revenue

VP, Revenue Cycle, **INOVA HEALTH SYTEM**

Senior Director, Revenue Cycle Coding, **KAISER PERMANENTE**

Regional Director, Patient Financial Services, **KAISER PERMANENTE**

Director of Revenue Cycle, **LA CLINICA DE LA RAZA**

Regional Director of Reimbursement, **LOYOLA UNIVERSITY HEALTH SYSTEM**

Senior VP, Revenue Cycle, **METHODIST HEALTH SYSTEM**

Director Patient Financial Services, **NORTHBAY MEDICAL CENTER**

Senior Director, Revenue Cycle, **NORTHSHORE UNIVERSITY HEALTHSYSTEM**

Director, Revenue Cycle Redesign, **NORTHSHORE UNIVERSITY HEALTHSYSTEM**

Director, Revenue Cycle Training, **NORTHWESTERN MEMORIAL**

Director, Revenue Cycle Strategic Partner, **OCHSNER HEALTH SYSTEM**

Director Revenue Cycle Analytics, **OCHSNER HEALTH SYSTEM**

Director, Patient Financial Services, **PRESENCE HEALTH**

VP Revenue Cycle Healthcare Finance, **RUSH UNIVERSITY MEDICAL CENTER**

SVP Strategy & Planning, **SIGNATURE HEALTH SERVICES**

Administrative Director, Revenue Cycle, **SILVER CROSS HOSPITAL**

Director of Revenue Integrity, **SOUTH SHORE HOSPITAL**

Director, Revenue Integrity, **SOUTHWEST GENERAL HEALTH**

Senior Director, Revenue Cycle & Patient Experience, **ST. LUKE'S HEALTH**

Senior Director, Network Reimbursement, **ST. LUKE'S UNIVERSITY HEALTH**

Director, Contracting, **UW MEDICINE**

Director of Patient Accounting, **VCU HEALTH SYSTEM**

VP, Revenue Cycle Operations, **VCU HEALTH SYSTEM**

VP, Financial Operations, **VERITY HEALTH SYSTEM**

VP, Strategic Analytics & Financial Planning, **YALE NEW HAVEN HEALTH**