

# The Lincoln Log

American Association of Healthcare Administrative Management Illinois Newsletter



Providing the Educational and Career Development Needs  
of Healthcare Professionals in the State of Illinois.

[www.IllinoisAAHAM.com](http://www.IllinoisAAHAM.com)

Fall 2012 Edition

1st Place Winner!!

For Excellence in Journalism and Graphic Design,  
Winner of the 2011- 2012 National AAHAM Journal Award!!

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## From the Co-Editor's Keyboards...



Julie VanPelt,  
CHFP, CPC, CPAT,  
CCAT



Joshua Johnson,  
CPAT, CCAT



We are in those lovely fall days where the leaves explode in color, you can run the air conditioning one day and the heat the next . Homecoming, football and Halloween will soon give way to the frenzy and fun of the holiday season. As I was packing the last of my capris away last weekend, I was thinking about how much fun it is to pull out the next season's wardrobe with the pleasant surprises of forgotten outfits packed away last spring.

It dawned on me that sometimes in the frenzy of change, I forget to think of the upside. Instead of clinging to the comfort of my sleeveless shirts and flip flops, I quickly think of the snuggly soft sweaters and super cute boots. What if I could do that at work? What if, instead of rolling my eyes when changes are made by CMS, I thought at least I'm able to let everyone know quickly with Outlook? What if, instead of shaking my head when Excel changes for the umpteenth time and my shortcuts are all over the place, I think at least I don't have to do this on ledger paper any more (and yes, I am THAT old) (and yes, Josh, I will explain ledger paper to you later) What if when the phone is ringing instead of assuming it's someone about to rain on my parade, I thought thank goodness someone needs me enough to call.

Will I always see the sunny side of every dilemma every day? Probably not. But just as the snow will surely coat my lawn and the temps will plummet, change will happen in our work lives too. I hope that once this winter you see the sparkle of the snow and smile. I hope that once this month when change gets thrown at you, you can see the sparkle in that too.

# PRESIDENT'S

## *Message*



*Kenny Koerner, CPAM  
IL Chapter President*

I just returned from deer hunting with my 7<sup>th</sup> grade son, Gehrig. This past weekend in Illinois was the 2 day youth shotgun deer hunting season. This was Gehrig and I's third year in a row taking in this season together. This is a weekend filled with getting up at 4:30am so that we can be in the deer stand by 5:30am. We sit all day waiting for that special buck to come out. This past weekend, we were in the stand from 5:30am to 7:00pm, with just a short break to run in and get some lunch. The weekend is always a magical one for me getting to spend the weekend with my oldest son out in the beauty of nature. The actual deer hunting is a distant second compared to the quality time spent with my 13 year old son, watching the sun rise each morning, hearing the squirrels chirp at each other, and generally just talking to my son about the things that he finds important in his life at this point. It is a very peaceful and reflective moment for me each year. The actual week leading up to the hunt itself is filled with excitement and anticipation, as we are busy and excited getting the hunting gear out and ready, sighting in the shotgun to ensure we can hit a target if need be, and looking at all the pictures on the trail cameras that we have had set up, so we know what deer are out there waiting for us. It's obvious as I write this, that the youth deer season and the time I can spend with my son is one of my favorite times of the entire year.

And I think this is how it is for many of us in regards to Illinois AAHAM. We recently held our Chuck Garvin golf outing in conjunction with our Fall Educational Session in Bloomington. We had a great turnout and fantastic networking opportunities for our membership. I know the week before these AAHAM events, I am genuinely excited anticipating getting to see and network with my old and new AAHAM friends that I've made over the years. The AAHAM educational events are always a reflective time for me away from the office. I am given the time to sit and think about what is going on at my office. These meetings are an opportunity for me to reflect on my current employees, my procedures and my leadership as I network and share with my friends at AAHAM. So whether it is returning to work after a weekend of hunting with my son, or after attending an Illinois AAHAM event, my mind and soul are rejuvenated and prepared to face new challenges with a fresh outlook.

It was great to see so many of you in Bloomington! I look forward to celebrating another fantastic AAHAM year with each of you on December 6 and 7 at The Chateau Hotel in Bloomington at our annual ASI event. Please plan on taking some time out of your busy schedule to reflect and rejuvenate yourself!

I would be remiss if I didn't mention the fantastic work that your Illinois AAHAM board is doing behind the scenes for our chapter. The amount of time and dedication that they show for our members is truly remarkable. I thank each of them for that!

See you soon and take care

Kenny



IL Chapter President Kenny Koerner and his oldest son Gehrig pictured with his prized possession Buck from the Illinois 2 day youth shotgun deer hunting season.

# Scholarship News

*The Scholarship Committee was pleased to announce the recipients of this year's Scholarship Awards!*

*Neely Harris, daughter of AAHAM Member Angie Hurst of Pana, IL and Victoria Drews, daughter of AAHAM member Julie Van Pelt (Board Member), both received \$500.00 scholarships.*

*Congratulations to these upstanding young students as they pursue their studies. We are glad to pay a small part in their continuing education.*

# Is there Life After Patient Accounts??

By Jimmi Evans

All Patient Accounts people do it. We get up before it is light outside, fight the traffic to work, look for that elusive parking space, and most of the time we get home after dark. We do this five days a week and more if there is something like a computer conversion going on. We even take work home with us. Week after week, month after month and year after year we do this until one day we look around us and see that our peers are retiring. Retired. What a different concept. Then we ask them in the most polite way, "What do you DO all day?" Invariably they reply that they are so busy they don't know how they ever had time to work.

That still does not tell us what they actually DO all day. I envisioned that they sit in their house robe, eat bonbons and watch TV. I wondered if all that education, all of those seminars, all of those years of experience at a fast paced job was just for naught. If I retired, what would I do all day? Is there life after Patient Accounts?

I reached the magic retirement age, I worked out an estimated personal budget and I had someone trained to take my place so I took the leap. My daughter said that since I "eat sleep and breathe" Patient Accounts, I would have to look into getting a part time job somewhere or volunteer some place. I rejected both ideas. If I was going to retire, there would be no commitments.

After I retired, the realization of what I no longer had to do slowly began to sink in: no conference calls, no meetings, no reports to do, no budget cuts, no bosses, no auditors, no committees to be on, no board meetings and no hiring and firing of employees. Gone are the nylons, make-up, jewelry and trips to the dry cleaners.

So, what DO we do after our Patient Accounts life has ended? We do anything we want to do whenever we want to do it and we do not do anything we don't want to do. They send me a check every month for this. It is kind of like being a teenager on an allowance only there are no parents.

Everything you read tells you that when you retire you have to keep your mind active and keep your body in shape. No one can enjoy any portion of their life if they are not healthy. So far my husband and I have been very lucky to have our health and I would like to keep it that way as long as I can. I always intended to exercise when I was working but there never seemed to be time. I took a good look at my body. It is said that Patient Accounts people don't die; they just lose their "figures". How true. I gained ten pounds every time we had a computer conversion. Egad! There, on one thigh were the morning doughnuts that someone brought in and left by the office coffee pot. On the other thigh were the shapes of several bagels with cream cheese. I thought all those Healthy Choice lunches would counteract those but they didn't. The idea of getting dressed and going to a gym to work out with skinny young people did not appeal to me so I got a treadmill at home. Did you know that if you walk a mile on a treadmill barefooted, you will get blisters on your feet? My daughter swears by her elliptical machine. She is on it for an hour almost every day. So I got an elliptical machine and have finally worked up to three minutes. It is a total killer. My husband got a weight machine so I tried that for my legs and bat wing arms. I tried to lift so much weight that I hurt my knee and could not go up and down the stairs for a week. Now I wear shoes on the treadmill, I lift less weight on the weight machine and I keep plugging away at the elliptical machine. The main thing is that I am faithful in exercising on a regular basis, my weight is coming down and my blood tests are looking better than they ever have. The doctor told me that having lower blood pressure is not always due to retirement but what you retire from.

Working in Patient Accounts actually prepares you for retirement. When I worked, I liked skip tracing. It seems PA has prepared me to do genealogy. I can spend days, months or years working on a family tree and when I am done, I will have something to pass down to my children. Genealogy has taught me history regardless if I wanted to learn about it or not. It also keeps the old brain active.

Being a Patient Accounts person has also given me a good foundation for other things in retired life. Medicare is confusing to most of the general public but it is old hat to us. We know the coverage, costs, regulations and mainly we know what is not covered. We know that we need a second carrier to go with Medicare. We know about the various insurances out there and the HMO's. We know which ones are good and which ones to stay away from. All of that helps when shopping for coverage in retirement plus we know about getting referrals from our primary care physician.

We are used to documenting our conversations in PA. That really helps when trying to get a repairman: "I spoke to Susie on the afternoon of the 23<sup>rd</sup> and she said...." That always gets a response.

I also learned from handling employee complaints. They would usually complain about something like a co-worker not taking his or her fair share of the calls. I would ask, "Have you talked to her about it, hon?" Now my husband comes home after a game of golf and complains about the other guy not claiming all of his strokes. "Have you talked to him about it, hon?"

# Is there Life After Patient Accounts?? Continued...

## By Jimmi Evans

From working in Patient Accounts, I know that when I need to call an office, I do not call anytime on Monday or on a Friday afternoon. From being a working mother that only had Saturday and Sunday to clean house, run errands, do the laundry and go grocery shopping, I know that in retirement I never shop on weekends. I don't get in their way and they don't get in mine. I used to longingly wait for the weekend. Now I longingly wait for Monday when all of the workers go back to work and get out of my way.

I think it is a law or something that when you retire you have to go to Florida. As soon as our aged and ailing cat died, we went to Florida for the winter. Finding a condo there and arranging the trip is like coordinating meetings at work. Reading a condo contract is like reading a managed care contract; you are used to looking for the pitfalls. The decision of renting a condo or buying one was decided by my experiences in Patient Accounts when determining the return on investment of something we might want to purchase. CFO's always demand to see your ROI. Yes, even the CFO experiences have prepared us for retirement.

However, I think Patient Accounts people must be masochists or something. My husband and I got to Florida and the first day there I took my snow bird white body to the pool. It was beautiful. The pool was kidney shaped, heated and crystal clear. Palm trees surrounded the pool and they were gently swaying in a slight breeze while soft elevator music played on the outside speakers. The 80 degree sun was shining and no one else was there. But I noticed that I could not relax. I thought of the people back at work and what they were doing. Reality finally hit me. I remembered those "choice" difficult patients at the counter and on the phone. I thought about the insurance companies that I always had a hard time with. I thought about the many times my boss told me to cut the budget when there was nothing more to cut except employees. I thought about how many years I put up with these things and then I realized that this.....this relaxing by the pool in the sun is my reward for all of those years of that type of grief. I leaned back in the lounge chair, let the sun warm my face and never felt guilty again.

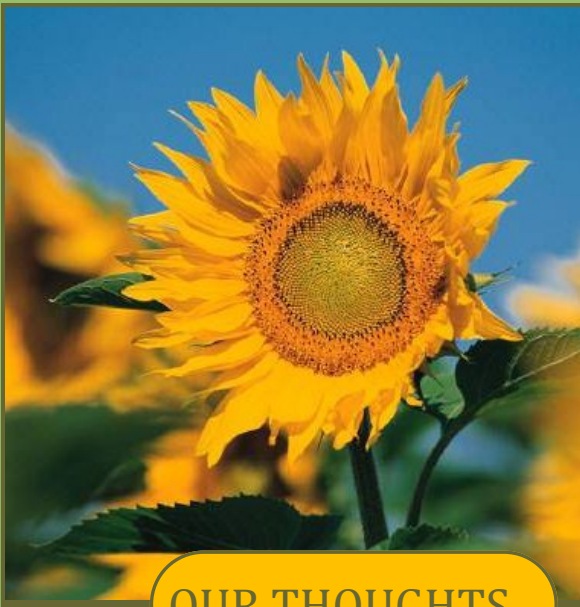
Retirement is great. A computer conversion now is nothing more than calling the Geek Squad. My days outstanding are always 30. That is how many days it takes to get my Medicare check automatically deposited into my checking account. I never have to call them because they are past due. I can get a senior discount at Mc Donald's without even asking for one.

However, the question remains: When you are retired, what do you DO all day? Personally, I get up only a little later than when I worked. I sip my coffee on the patio while I read the paper and do the puzzles. The other day, after I did my work out, my husband and I picked wild black raspberries, brought them home and cleaned them. We showered, had some lunch, ran some errands and after supper I worked on some genealogy for a friend's family tree. There were no bonbons, no TV and the day was gone already. I have read some of the classic books that we were supposed to have read in high school but only pretended like we read them just so we could pass the test. Some of them actually are pretty good. Genealogy has led me to my grandfather's roots in England where I saw the house he grew up in and I stood on the dock where his ship sailed out to sea on his way to the strange new land of America. While we were in England we went down to London and saw the band play happy birthday to Prince Phillip at Buckingham Palace. We have a little vegetable garden and I can some of the fruits of our labor. I write bedtime stories with morals in them for my grandchildren. They love them and I had them made into a book and got a copyright. I now have time for all of this and anything else I want to do. Time: that is something I never had when I worked. I have time to be with my family; time to pursue things I always wanted to try. I have even met my neighbors.

It is a big world out there beyond the days of Patient Accounts. If you like being on a board or a committee, or if you would like to volunteer, there are hundreds of places that would love to have you. There are activities that we have never had time to pursue when we were working: gardening, a multitude of sports, reading, or traveling. You are only limited by your imagination.

If all of this sounds good to you, don't let it lure you into thinking about early retirement. You need to get all of the Patient Accounts experiences you can get so you can be ready. Besides, we retirees like you workers to keep paying into the system.

Is there life after Patient Accounts? Absolutely! And so far it is the best part of life. In fact, I don't know how I ever had time to work.



**OUR THOUGHTS...**

We extend our sympathy to Veronica Modricker and her family on the loss of her Mother, Rose Carlson, October 18 2012.


Veronica is a Past President of IL AAHAM. Our thoughts and prayers are with you during this difficult time.



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Click here to watch the "amateur" IL AAHAM Membership video! [IL AAHAM MEMBERSHIP VIDEO](#)



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# ASK Illinois AAHAM?????

This is our first installment in our new “Ask Illinois AAHAM” section of the Lincoln Log...



**ASK:**

Dear Illinois AAHAM,

I see that the requirement to code using ICD-10 has been delayed until October 1, 2014. Does that delay mean that I can wait to plan for how my patient accounting office will handle ICD-10 until the Fall of 2013?

**ANSWER:**



The short answer is NO! Don't wait to begin to plan for ICD-10!



The National AAHAM Annual National Institute (ANI) Conference had an ICD-10 panel made up of healthcare professionals from small, medium and large sized healthcare facilities. There was also

a representative from a national payer sitting on the panel. There was some great conversation at this panel discussion that led to many revenue cycle takeaways. Some of the great takeaways from this panel at the ANI

were that we should be putting together our ICD-10 committees now, planning to determine if this is a project that we can take on internally, or if we are going to need to partner with a vendor to gain some outside

consultative expertise. We also encourage each of you to begin to contact your large payers to see where they are at with their internal systems and processes in handling ICD-10. Ask them if they are going to be doing

any testing in 2013 that you could be involved in, to find out if your systems and their systems can handle the new codes. Ask your large payers if they will be paying you interim payments if they have claims processing

issues once ICD-10 goes live. Have a discussion with your medical records department to consider running parallel coding whereas they are coding ICD-9 and ICD-10 on the same accounts, to assess additional training needs for your coders, and to assess how much longer it will take your coders to code in ICD-10. Ensure you are having discussions with your clinics and physicians as to the change in documentation requirements that ICD-10 will bring with it. There may be extensive changes to templates, order forms and to software that are used in the physician office practices. As you can see, we have just touched the surface as to how ICD-10 will affect your facility. If you haven't started planning yet, we encourage you to do so.

As always, AAHAM is here for your educational development needs. We will be featuring speakers in 2013 that will assist each of us in preparing for ICD-10.



*Have a question that you think IL AAHAM might be able to answer?? Please go to our website at [www.illinoisaaaham.org](http://www.illinoisaaaham.org), click on the Q&A tab, and ask away!*



# Fall Session and Charles Garvin Golf Outing



John D. Currier, CPAM, CCT  
Presenter, Past President and  
National Second Vice President.



Gina Koebke and Vicki Mueller, Presenters



Jodie Edmonds, Presenter



Cory Harrison, Presenter



First Timers! Welcome!!!



Educational Seminar Attendees!





# Fall Session and Charles Garvin Golf Outing



Charlie's Angels plus CJ...Nice Socks!!



Winning Team, Rick Albertini, Scott Edwards & Greg Himelick



Longest Putt, Greg Himelick



Longest Drive, Darren Cook



Closest to the pin, Heather Turcany



Closest to the pin, Gary Tichenor



Longest Drive, Donna Stortzum

# Charitable Giving



Deb Skillrud from Habitat for Humanity is presented a check from IL AAHAM Board Member,

IL AAHAM chose Habitat for Humanity as the Charity for giving during the October Session. We raised \$218.00 and presented Deb Skillrud with a check during the Educational Sessions! Way to go IL AAHAM Members!!



Now More Than Ever.  
Help Build It!

10/10/2012

Illinois AAHAM  
Nancy Vollmer  
7704 W Thorngate  
Mapleton, IL 61547

Dear Ms. Vollmer,

On behalf of Habitat's Board of Directors, staff and partnering families, thank you for your donation of \$218.00.

Many lives are changed because of the process of building a Habitat house. Volunteers and partnering families develop character and friendships, neighborhoods and community. Your donation directly supports our mission to build simple, decent, and affordable houses for low-income families with a housing need.

Habitat designates 90% of every donated dollar towards the construction of homes in McLean County. We are committed to act both locally and globally and tithes 10% to Habitat International to build homes with families in Haiti and Nicaragua. Since 1985, Habitat for Humanity of McLean County has served 135 families locally and 159 families globally.

Your support will instill HOPE for qualified families this year. To qualify, families must show that they have an existing housing need, be willing to partner with Habitat to build their house, and be able to sustain a mortgage payment once their home is built. Our goal for 2012 is to partner with eight families through a combination of new and revitalized building.

This letter verifies that your donation may qualify as a 2012 charitable contribution and that you received nothing of material value as a result of your gift.

Sincerely,

Deb Skillrud  
Development Director

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# RFP's Suck: A Provider's Guide to What Really Counts!!

## RFP's Suck: A Provider's Guide To What Really Counts

I just attended a conference as one of many vendors soliciting services to healthcare providers. Many decision makers who attended the conference talked about initiating a request for proposal (RFP) to organize and manage their vendor selection process. The event got me thinking about my own experiences with vendor selection processes. I wrote this blog to share my perspective.

A lot of years ago I sat on the creditor side of the fence and did a lot of vendor management (hiring/firing, negotiating, managing, and so forth). As a matter of fact, I currently have operational oversight of a business - so to this day, I still go through many vendor selection processes. Along the way I've had the benefit of input from great mentors and lots of direct vendor management experience. From it all, I can boil vendor selection down to three "things to think about":

- The hazards of an RFP
- The "can they?" test
- The "will they?" test

### The hazards of an RFP

Circa 1999 I worked for the fourth largest bank in the country and had the benefit of heading up an RFP to select a post bank merger collection agency network. From the experience, here's what I learned:

A formal RFP tends to favor vendors with size, money, and time. I've seen vendors with whole departments dedicated to RFP management. Big vendors with the marketing firepower to best answer RFPs might not best serve you given the size and scope of your problem (see the "will they?" test).

If you pass an RFP with lots of questions to a number of prospective vendors, you'd better be prepared for how you're going to measure lots of answers from lots of prospective vendors. In theory: an RFP should use objective grading to produce a short list of vendors to help ease the final selection process. In practice: the list of vendors who are licensed in all 50 states, have between 50 to 100 reps, and have no pending litigation may still leave you with a very long list of vendors to choose from. One other quick point to this point: be wary of essay questions like "what is your strategy for..."...put an RFP selection team around a question like this without very objective criteria and you're going to have your hands full.

Look out for "pile on" from one step removed divisions that you have to involve in an RFP process. Groups like "Legal" and "Compliance" will (most likely) always take ultra conservative, risk adverse positions that a) scare good prospective vendors away and b) reduce negotiating power because your first job in the vendor negotiation process will be to mitigate elements like ridiculously one sided legal requirements and/or unattainable insurance clauses.

Follow Stephen Covey's advice and begin with the end in mind. An RFP is "the thing" to get you where you want to go - it's not "the thing" you do (don't let the process become bigger than the desired outcome). Further to this point, don't be afraid to go against the grain and come up with a 5 to 10 point selection process (identify up front the elements that really matter most and limit your questions to those that are relevant to just those elements).

# RFP's Continued...

## The “can they?” test

“Can they?” is half of what I think is a best test for hiring the right vendor. I break the “can they?” test down into two parts:

Does the vendor I want to hire have the core competencies to comprehensively complete all aspects of the job I need done?

Can the vendor adapt to (current and future) internal and/or external changes?

When I was back at the bank managing collection agency relationships, I needed vendors that could consistently deliver in four primary areas: collection performance, compliance, information technology, and administration. An agency that couldn't deliver in one or more of these areas had to go - regardless of how much they excelled in any one area. Perhaps more importantly, I needed vendors that could quickly and effectively adapt to current and future changes in any one of the areas (policy, procedural, legal, and/or technical changes driven by internal or external events).

I've got one key note related to how to evaluate the “can they?” test. “Can they?” is **less about** who already does what processes and/or who already has what tools. “Can they?” is **more about** how well the vendor's management team can -- consistently and comprehensively -- develop and execute whatever “it” is. I'll say it differently to clarify: it's the quality of the program vs. the content of the program that should matter more in a vendor selection process.

## The “will they?” test

“Will they?” is the other half of what I think is a best test for hiring the right vendor. It says “yes they can perform” but follows with the all important question: “will they perform?”

As a vendor, I participated in the final interview of an RFP selection process. Near the end of the interview one of the interviewers asked about the debt structure of my organization. It was a really smart question because the interviewer understood that who I was motivated to perform for carried a lot more weight than any “can you do this...” type of question (my clients vs. my investors).

“Will they?” checks to see that everyone throughout the ranks of the vendor I hire consistently executes, manages, and troubleshoots all aspects of the job they're hired to do. It also checks to see that the vendor I hire is highly motivated to always perform (for me) at optimal levels.

I've got one key note related to how to evaluate the “will they?” test. Aesthetics in marketing is a hard thing to filter out in the vendor selection process - “global operations”, “200 years of combined experience”, and/or “an army of analysts” won't help you unless the vendor's decision makers apply those resources to your business challenge.

## So what are the takeaways of this blog?

The takeaways are:

Don't go through the motions of an RFP process for the sake of going through an RFP process

Know all the parts of the job you need done and hire the vendor that “can”

Hire a vendor that “can” adapt to any and all changes that might affect your business

Make sure you find a vendor that has the right motivational fit to perform for you - they “will”

# RFP's Continued...



## *IL AAHAM Collection Services RFP Template*

*Click the 2 pdf files below to access the  
Collection Services RFP and Cover  
Letter.*

This will be a useful tool in inviting firms to prepare a written proposal for providing collection services for patient and/or insurance past due balances. This will help you receive standardized, facility specific requests of firms that reflect your philosophy and share your healthcare focus.

[\*Cover Letter Template.pdf\*](#)

[\*Collections RFP.pdf\*](#)

# 2012-2013 IL AAHAM Leadership

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# 2012-2013 IL AAHAM Leadership

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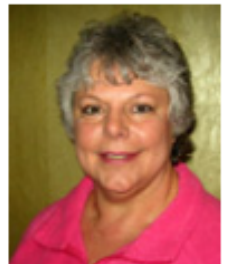
### **Alan Staidl**

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Downers Grove, IL 60515  
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**Donna Stortzum, RN, CPC, CPC - H**  
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OSF Holy Family Medical Center  
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Monmouth, IL 61462  
Tele: 309.734.1401  
Fax: 309.734.1689  
Email: [donna.r.stortzum@osfhealthcare.org](mailto:donna.r.stortzum@osfhealthcare.org)



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# Corporate Partners



## ILLINOIS CHAPTER

### 2012 Corporate Partners

The Illinois AAHAM Chapter would like to thank our Corporate Partners for their continued support and dedication to the Chapter. Their partnership and generous financial support enable us to provide quality educational and networking opportunities throughout the year.

#### PLATINUM LEVEL

##### ARS / Magnet Solutions

[www.ar-solutions.biz](http://www.ar-solutions.biz)    [www.magnetsolutions.biz](http://www.magnetsolutions.biz)  
Richard J. Rogers – [richard.rogers@ar-solutions.biz](mailto:richard.rogers@ar-solutions.biz)

##### eHC Solutions

[www.ehcs.com](http://www.ehcs.com)  
Becky Funk – [becky.funk@ehcs.com](mailto:becky.funk@ehcs.com)

##### Harris & Harris

[www.harriscollect.com](http://www.harriscollect.com)  
Bob Kemp – [bkemp@harriscollect.com](mailto:bkemp@harriscollect.com)

##### Merchants' Credit Guide Company

[www.merchantscreditguide.com](http://www.merchantscreditguide.com)  
Heather Turcany – [hturcany@collectmcg.com](mailto:hturcany@collectmcg.com)

##### Passport Health Communications, Inc. / Nebo Systems, Inc.

[www.passporthealth.com](http://www.passporthealth.com)  
Aaron Mulroy - [aaron.mulroy@passporthealth.com](mailto:aaron.mulroy@passporthealth.com)  
Tim Friel – [tim.friel@passporthealth.com](mailto:tim.friel@passporthealth.com)

##### State Collection Service, Inc.

[www.statecollectionservice.com](http://www.statecollectionservice.com)  
Katie Wood – [katiew@stcol.com](mailto:katiew@stcol.com)

#### GOLD LEVEL

##### Allied Business Accounts, Inc. / Health Care Billing Services, Inc.

[www.abacollect.com](http://www.abacollect.com)  
Bill Carlson, CPAM – [wc@abacollect.com](mailto:wc@abacollect.com)  
Betty Marschang, CPAM – [bmarschang@abacollect.com](mailto:bmarschang@abacollect.com)

# Corporate Partners

## SILVER LEVEL

ATG Credit	Shawn Schlag – <a href="mailto:sales@atgcredit.com">sales@atgcredit.com</a>
Avadyne Health	Ron Snyder – <a href="mailto:rsnyder@avadynehealth.com">rsnyder@avadynehealth.com</a>
Berlin-Wheeler Receivables Management	Shirley Mason – <a href="mailto:smason@bwmo.com">smason@bwmo.com</a>
Helvey & Associates, Inc.	David Phelps – <a href="mailto:dphelps@hlv.com">dphelps@hlv.com</a>
Midwest Credit & Collections, Inc.	Kathie Summers – <a href="mailto:Ksummers@MCCOnline.com">Ksummers@MCCOnline.com</a>
MRS / BOPC	Keith Bull – <a href="mailto:kbull@medrecovery.com">kbull@medrecovery.com</a>
ProCom Services of Illinois, Inc.	John McGlasson – <a href="mailto:mcglasson.john@pro-comservices.com">mcglasson.john@pro-comservices.com</a>
Rockford Mercantile Agency, Inc.	Danielle Miller – <a href="mailto:dani@rmacollections.com">dani@rmacollections.com</a>

## BRONZE LEVEL

Allied Business Services, Inc.	Lori Davis – <a href="mailto:lorid@voysa.com">lorid@voysa.com</a>
Creditors Collection Bureau, Inc.	Sue Glenzinski – <a href="mailto:sglenzinski@creditorscollection.com">sglenzinski@creditorscollection.com</a>
Early Out Services, Inc. / GSB, Inc.	Brad Uhlenhopp – <a href="mailto:buhlenhopp@gsbcollect.com">buhlenhopp@gsbcollect.com</a>
Eagle Recovery Associates	Nancy Vollmer – <a href="mailto:nvollmer@eaglerecovery.net">nvollmer@eaglerecovery.net</a>
Horizon Financial Management	Al Staldl – <a href="mailto:maris65@sbcglobal.net">maris65@sbcglobal.net</a>
Managed Care Partners, Inc.	James Richmond – <a href="mailto:jrichmond@mngdcare.com">jrichmond@mngdcare.com</a>
Medical Business Resources, Inc.	Kelsey Whitrock – <a href="mailto:kelsey.whitrock@answerdata.net">kelsey.whitrock@answerdata.net</a>
Medical Reimbursements of America, LLC	Andrew Rittler – <a href="mailto:arittler@mrarresults.com">arittler@mrarresults.com</a>
Quadax, Inc.	Rick Albertini – <a href="mailto:rickalbertini@quadax.com">rickalbertini@quadax.com</a>
RRCA Accounts Management, Inc.	Kevin Heller – <a href="mailto:rrca@cssexl.com">rrca@cssexl.com</a>
UCB, Inc.	Doug Headman – <a href="mailto:daheadman@ucbinc.com">daheadman@ucbinc.com</a>
XAM / MAX	Veronica Modriker – <a href="mailto:veronica.modriker@xamandmax.com">veronica.modriker@xamandmax.com</a>

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For additional information regarding the Illinois AAHAM Corporate Partners program please contact Chris Bryant, 1<sup>st</sup> Vice President at [chris.bryant@djwhospital.org](mailto:chris.bryant@djwhospital.org)

*The Illinois AAHAM Chapter would like to thank our Corporate Partners for their continued support and dedication to the Chapter. Their partnership and generous financial support enable us to provide quality educational and networking opportunities throughout the year.*



SAVE THE DATE!!!!!!

# *Annual State Institute*

December 5, 6, 7  
The Chateau Hotel & Conference Center  
1601 Jumer Dr.  
Bloomington, IL 61701  
309-662-2020 or 866-690-4006



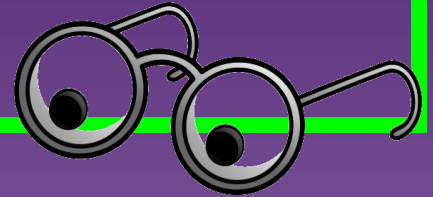
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# *A Sneak Peak at the Next Edition of the Lincoln Log...*



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Name: \_\_\_\_\_ Title: \_\_\_\_\_

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Primary Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Fax: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

Website: \_\_\_\_\_

Home Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ Home Phone: \_\_\_\_\_

Local Chapter (see page 6, left, for name and fees) \_\_\_\_\_

Membership Type: (See back for details & dues)       National Member       Student Member

How did you hear about AAHAM?       Colleague       Publication       Website  
 Other (Please list) \_\_\_\_\_

If referred by AAHAM Member, Give Name: \_\_\_\_\_

Please allow 2 weeks for processing once your application is received at the AAHAM National office.

Dues are not tax-deductible as a charitable contribution, but may be deductible as a business expense.

**For Credit Card Payment:**     AMEX       VISA       MASTERCARD

Account Number: \_\_\_\_\_ Name: *as it appears on card* \_\_\_\_\_

Expiration Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Billing Address, If Different from Above: (please include Street Address, City, State and Zip)

### For Check Payment:

*Please make checks payable to AAHAM  
and send application with your payment to:*

**AAHAM Membership**  
**11240 Waples Mill Road, Suite 200**  
**Fairfax, VA 22030**  
*AAHAM Tax ID# 23-1899873*

### Your Payment Total:

National Dues:

\$Local Dues:

\$Total Enclosed:    \$

*Continued on reverse side...*

**National Membership** - The fee to become a National member is \$175. If you join anytime between July 1st and August 31st, the dues are \$140 for the rest of the current year. If you join between September 1st and December 31st, the fee is \$210 for the rest of the current year and all of the following year.

*Please note, membership is on an individual, not institutional basis, and is non-transferable.*

**Student Membership** - The student membership fee is \$50. If you join between July 1st and August 31st, the pro-rated dues are \$35, and if you join between September 1st and December 31st, dues are \$65 (for 15 months of membership). To qualify for student membership you must currently be taking 6 credit hours per semester. Student members receive all the benefits of membership with the exception of voting, eligibility for professional certification, and cannot be a proxy for a chapter president at any national board meetings.

*Please Check the Appropriate Codes in Each Category Below.*

<p><b>Years in Healthcare:</b></p> <p><input type="radio"/> 0-5</p> <p><input type="radio"/> 6-10</p> <p><input type="radio"/> 11-20</p> <p><input type="radio"/> 21-25</p> <p><input type="radio"/> 25+</p>	<p><input type="radio"/> Outsourcing</p> <p><input type="radio"/> Software/IT</p> <p><input type="radio"/> Provider</p> <p><input type="radio"/> Law Firm</p> <p><input type="radio"/> Other (please list)</p> <p>_____</p> <p>_____</p>	<p><b>Responsibility:</b></p> <p><input type="radio"/> Accounting</p> <p><input type="radio"/> Administration/Operations</p> <p><input type="radio"/> Admitting/Access</p> <p><input type="radio"/> Audit</p> <p><input type="radio"/> Benefits</p> <p><input type="radio"/> Budget</p> <p><input type="radio"/> Business Development, Sales, Marketing</p> <p><input type="radio"/> Compliance</p> <p><input type="radio"/> Information Services/Technology</p> <p><input type="radio"/> Managed Care</p> <p><input type="radio"/> Medical Records</p> <p><input type="radio"/> Medicare/Medicaid</p> <p><input type="radio"/> PFS, Patient Billing &amp; Collections</p> <p><input type="radio"/> Reimbursement</p> <p><input type="radio"/> Third Party Administration</p> <p><input type="radio"/> Other (please list)</p> <p>_____</p> <p>_____</p>
<p><b>Certification:</b></p> <p><input type="radio"/> CPAM/CCAM</p> <p><input type="radio"/> CPAT/CCAT</p> <p><input type="radio"/> CHAM (NAHAM)</p> <p><input type="radio"/> CHFP (HFMA)</p> <p><input type="radio"/> FHFMA (HFMA)</p> <p><input type="radio"/> CHCS (ACA)</p> <p><input type="radio"/> Other (please list)</p> <p>_____</p> <p>_____</p>	<p><b>Position:</b></p> <p><input type="radio"/> President, Administrator, Executive</p> <p><input type="radio"/> Director, CEO</p> <p><input type="radio"/> Partner, Principal, Owner</p> <p><input type="radio"/> CFO/Controller, COO, CIO</p> <p><input type="radio"/> Vice President</p> <p><input type="radio"/> Assistant VP/Assistant Administrator</p> <p><input type="radio"/> Director, Manager, Supervisor</p> <p><input type="radio"/> Technician</p> <p><input type="radio"/> Clinical</p> <p><input type="radio"/> Academic</p> <p><input type="radio"/> Other (please list)</p> <p>_____</p> <p>_____</p>	
<p><b>Employer Type:</b></p> <p><input type="radio"/> Vendor/Corporate Partner</p> <p style="padding-left: 20px;"><input type="radio"/> Billing</p> <p style="padding-left: 20px;"><input type="radio"/> Collection Agency</p> <p style="padding-left: 20px;"><input type="radio"/> Consulting</p>		



## Local Chapters

AAHAM has 37 chapters throughout the US and India. Local chapters offer you more opportunities for education and networking. Please see the listing of local chapters below to help you decide which chapter you should belong to along with your National membership:

<b>Name of Chapter</b>	<b>Geographic Location</b>	<b>Chapter Dues</b>
Aksarben #01	Nebraska	\$0.00
Greater Florida Buccaneer #03	Tampa/Orlando, Florida area	\$40.00
Carolina #04	North & South Carolina	\$30.00
Evergreen #05	Washington State, West of the Mountains	\$30.00
Gopher #06	Minnesota	\$35.00
Hawkeye #07	Iowa	\$0.00
Hawthorn #08	Missouri	\$35.00
Illinois #09	Illinois	\$25.00
Inland Empire #10	Washington State, East of the Mountains	\$25.00
Keystone #11	Central Pennsylvania	\$25.00
Maryland #13	Maryland	\$20.00
Mountain West #14	Utah	\$25.00
National Capital #15	Washington, DC	\$25.00
New Jersey #16	New Jersey	\$35.00
Northern California #17	Northern California	\$35.00
Western Reserve #18	Ohio	\$0.00
Northeast PA #19	North East Pennsylvania	\$30.00
Northwest PA #20	North West Pennsylvania	\$40.00
Rocky Mountain #21	Colorado	\$40.00
Pine Tree #22	Maine	\$15.00
Rushmore #23	North & South Dakota	\$0.00
San Diego #24	San Diego, CA	\$20.00
South Florida #25	Southern Florida	\$20.00
Southern California #26	Southern California	\$0.00
Virginia #27	Virginia	\$25.00
Philadelphia #29	Philadelphia, Pennsylvania	\$35.00
Cactus Wren #30	Arizona	\$25.00
Mid-York #31	New York	\$55.00
Tennessee #32	Tennessee	\$30.00
Georgia #33	Georgia	\$30.00
Connecticut #34	Connecticut	\$35.00
Three Rivers #37	Pittsburgh, Pennsylvania	\$30.00
Texas Blue Bonnet #40	Texas	\$50.00
Indiana #42	Indiana	\$25.00
Wisconsin #44	Wisconsin	\$25.00
Chennai #49	Chennai, India	\$0.00
Louisiana # 51	Louisiana	\$20.00