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*IL AAHAM*

*Lincoln Log*

*Editor*



Joshua Johnson, CRCP-I

IL AAHAM 2nd Vice-President

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*The Illinois AAHAM Board of Directors would like to thank each one of you for your membership, support and participation!!*

*We look forward to another year of Awesome Education and Networking opportunities!*

*Doris, Kenny, Chris, Josh, Nancy, Tera, Julie, Maria, Rena, Dave, Vanessa, and CJ*



# PRESIDENT'S

## *Message*



*Kenny Koerner, CRCE  
IL Chapter President*

Friends-

It's May. It's finally beginning to warm up. The kids are getting ready for another school year to come to an end. Family vacations are just around the corner. And ready or not, these young Chicago Cubs are primed and ready to begin winning this year!! Yes this year...no more wait till next year for this guy!!!! The eternal optimism of a Cubs fan!!!

It's May. At work, as many of you are also living on a day to day basis, I'm faced with ensuring my staff, software and processes are ready to handle the impending move to ICD-10. I'm working through a potential computer conversion and evaluating the various options that lie ahead when thinking about hospital and clinic revenue cycles. I seem to be constantly faced with staffing issues and trying to ensure that we are able to retain the quality staff that we have trained and grown here at our hospital. I'm putting out fires that revenue departments have created by not being diligent enough in ensuring charge capture is occurring consistently when changes are made. I'm talking to frustrated patients who don't understand why their insurance is saying an item is coded incorrectly, yet my staff is ensuring them that it is coded appropriately. The eternal issues of a revenue cycle professional!!!!

It's May. I'm thinking of my friends at Rochelle Hospital and the recent tornado that struck their community and their families. I'm thankful that my friends were all safe when all was said and done. I'm thankful that in the face of adversity so many people stepped up to volunteer of their time and resources to lend a helping hand to a friend in need. I'm thankful that my immediate family and friends have not had to endure such a hardship.

It's May. I've spent the better part of the last 3 months coaching sophomore high school baseball here locally. From early mornings at work, to coaching a game almost every day of the week, to getting home late at night just in time to fall asleep, my life the past 3 months has been a blur. The high school kids have taught me as much as I have taught them, about failing but persevering, about enjoying the moment and not worrying about what lies ahead, and about learning and applying what you learn on a regular basis.

It's May. It's almost June. Our next Illinois AAHAM meeting is June 17<sup>th</sup> in Springfield. I can't wait to see so many of AAHAM friends...We will talk Cubs, work trials and tribulations, share stories from our home towns and will talk about the good and the bad, and we will catch up on what is happening in our personal lives! Since we last met in March, so much has happened professionally and personally. I can't wait to share with each of you, and to hear from each of you how your lives have changed. Hope to see you all in June!!!

Kenny



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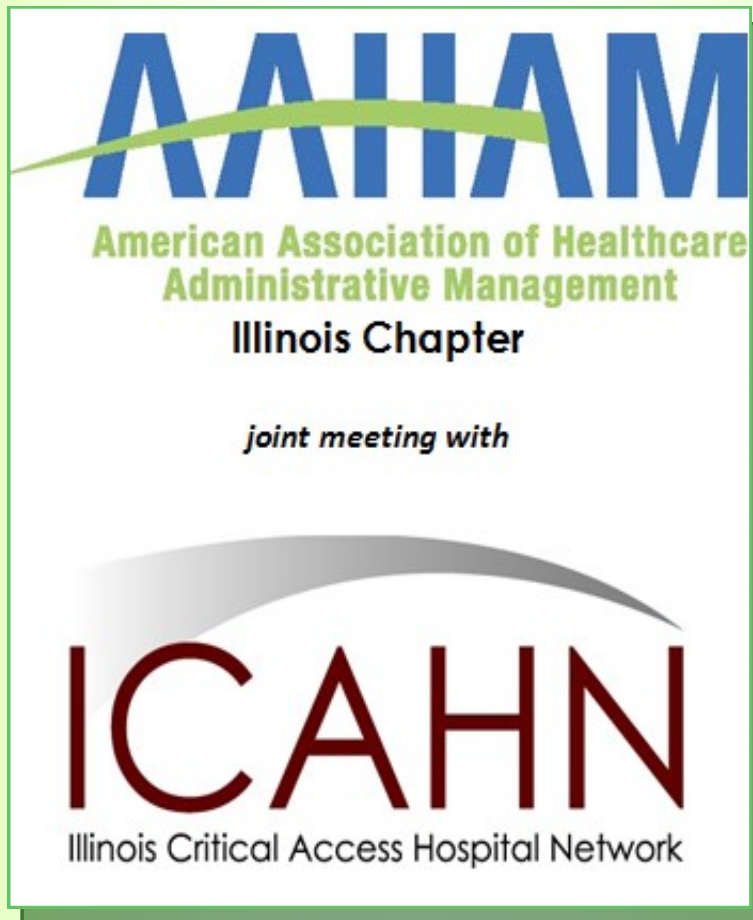
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# SAVE THE DATE!

Wednesday June 17, 2015



Northfield Inn and Suites,  
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# Great Spring Meeting —March 12

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# 11th Annual Legislative Day 2015

March 30-31, 2015  
Hyatt Regency Washington on  
Capitol Hill, Washington, D.C.



## Update from Leg. Day 2015



### **AAHAM Meeting with the Federal Communications Commission**

On March 30, 2015, Lori Sickelbaugh, Richard Lovich, Paul Miller, and Timothy Moore, as Representatives of the American Association of Healthcare Administrative Management ("AAHAM"), and Mark W. Brennan, counsel to AAHAM, met with Mark Stone, Kurt Schroeder, Aaron Garza, and Kristi Lemoine of the Commission's Consumer and Governmental Affairs Bureau to discuss AAHAM's pending Petition for Expedited Declaratory Ruling and Exemption ("Petition").

In the Petition, AAHAM asks the Commission to confirm that the provision of a telephone number by an individual to a healthcare provider constitutes "prior express consent" under the Telephone Consumer Protection Act ("TCPA") and the FCC's TCPA rules for non-telemarketing, healthcare calls to that telephone number by or on behalf of the healthcare provider.

In addition, AAHAM asks the Commission to exempt from the TCPA's "prior express consent" requirement certain non-telemarketing, healthcare calls that are "not charged to the called party."

During the meeting, the representatives encouraged the Commission to grant the Petition.

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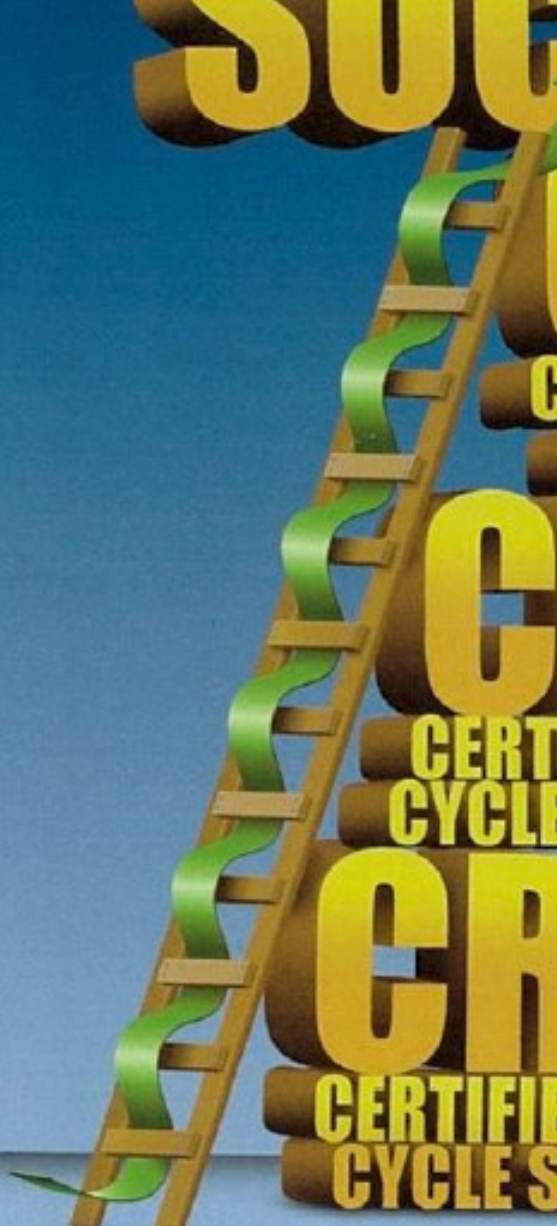


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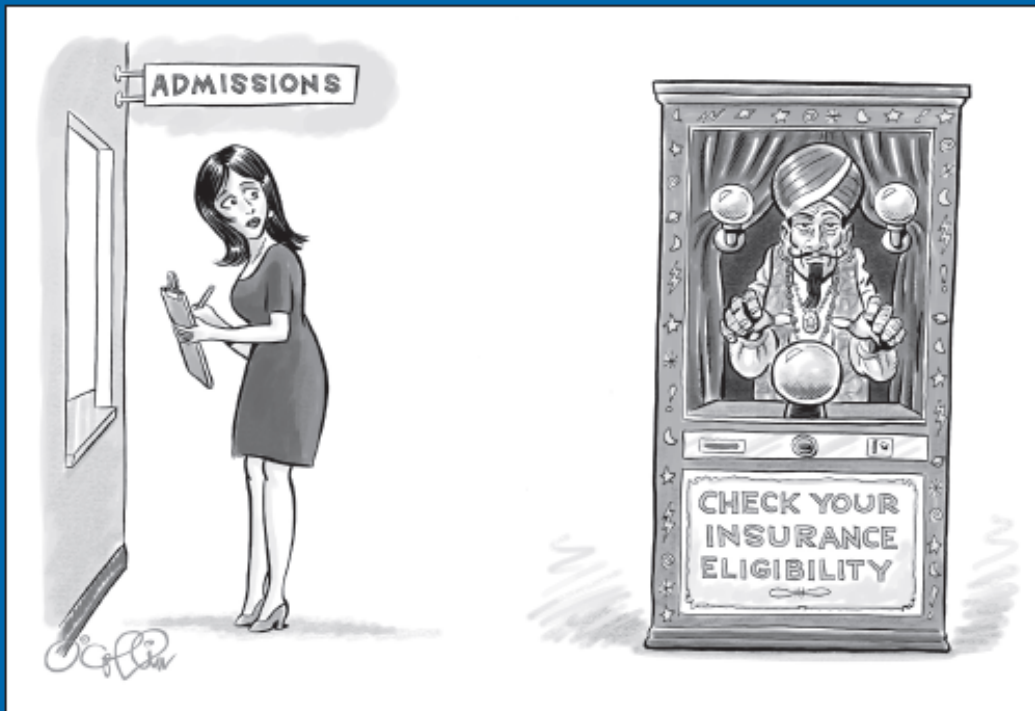


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**Congratulations!**

Linda McLean, CRCs-I—Avadyne Health  
Keia Miller, CRCs-I—Avadyne Health  
Jody Dryden, CRCs-I—HSHS Southern Illinois Division

**Certification Schedule**  
March 2, 2015 - Registration deadline  
for May 2015 Exams  
May 11-22, 2015 - Exam period  
June 1, 2015 - Registration deadline  
for August 2015 Exams  
August 10-21, 2015 - Exam period  
September 1, 2015 - Registration  
deadline for November 2015 Exams  
November 9-20, 2015 - Exam period  
December 1, 2015 --Registration  
deadline for February 2016 Exams



Congratulations!

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Congratulations to Mary Farmer and Renee Duncan on becoming CRIP certified!

Recent CRCE-P Jody Ruff , receives her certificate from Julie VanPelt. CONGRATULATIONS.



Recent CRCE-I Kristin Goff , receives her certificate from Julie VanPelt. CONGRATULATIONS!



Congratulations to Ron Tapnio, Northwest Community Hospital on becoming CRCE-I certified!

# ICD-10 Update!

## ICD-10 Implementation Freeze Proposed by House Bill

By Jacqueline DiChiara on May 04, 2015

The House is pushing to completely cease ICD-10-CM/PCS **implementation** via the introduction of a new bill. The primary objective of the bill, H.R. 2126, is to disallow the Secretary of the Department of Health and Human Services (HHS) from replacing ICD-9 with ICD-10 within HIPAA code set standards implementation, **confirms** the American Health Information Management Association (AHIMA).

Representative Ted Poe (R-TX-2) **has loudly criticized** the federal mandate. Among many openly stated concerns, Poe has blatantly commented upon the ludicrous nature of extensive code volume. There is, indeed, a code for being assaulted for a second time by a turkey and a code for when one clumsily walks into a lamp post, according to Poe's 2013 statement to the House. Too many codes are problematic, as those physicians failing to properly handle codes are in violation of the law, Poe adds.

Poe's introduction of a 2013 bill, **H.R. 1701**, the "Cutting Costly Codes Act of 2013," neatly aligns with current legislative initiatives via the House. As the 2013 bill introduced by Poe, brought to the Committee on Energy and Commerce and the Committee on Ways and Means, **states**, its initiative is to prohibit HHS from replacing ICD-9 with ICD-10 in implementing HIPAA code set standards. Poe's bill also supported the formal ceasing of ICD-10 implementation beginning on October 1, 2014.

Poe's 2013 bill additionally advocates for the HHS Secretary's prohibition of the implementation, administration, or enforcement of specified regulations, "insofar as they would replace International Classification of Diseases (ICD)-9 with ICD-10 as a standard for code sets for appropriate data elements for financial and administrative transactions involving the electronic exchange of health information."

Poe's bill dissipated into a void of nothingness as it was **not picked up** by the referred House committees. The same initiatives have returned for additional debate, conversation, and proposed legislative action.

AHIMA and the Coalition for ICD-10 request ICD-10 supporters voice advocacy initiatives so ICD-10 will not be delayed further.

"Avoiding further delay in ICD-10 implementation is critical in order to limit implementation costs and be able to start leveraging the opportunities anticipated by the availability of better healthcare data," **says** the Coalition for ICD-10, "including the ability to provide the detailed data necessary to accurately measure value for the new value-based physician payment system included in the Medicare Access and CHIP Reauthorization Act of 2015."



## ICD-10 Transition Testing Proposed

On the heels of H.R. 2126, a bill introduced by U.S. Rep. Ted Poe (R-Texas) “to prohibit the Secretary of Health and Human Services (HHS) from replacing ICD-9 with ICD-10 in implementing the HIPAA code set standards,” comes H.R. 2247.

Unlike Poe’s bill, which was introduced two weeks ago, the latest piece of proposed legislation would require an 18-month transition period for the purposes of testing the submittal of ICD-10 claims. Titled the “Increasing Clarity for Doctors by Transitioning Effectively Now Act (ICD-TEN Act),” the bill was introduced last Tuesday by Rep. Diane Black (R-Tenn.).

Black’s bill would “require the Secretary of Health and Human Services to provide for transparent testing to assess the transition under the Medicare fee-for-service claims processing system from the ICD-9 to the ICD-10 standard, and for other purposes.” Moreover, her bill would require the Centers for Medicare & Medicaid Services (CMS) to accept dual coding: claims coded in either ICD-9 or ICD-10. During the “transition testing” period, Black’s bill would prohibit CMS from denying reimbursement claims using “an unspecified or inaccurate sub-code.” Finally, the bill would require HHS to conduct what the bill describes as “comprehensive end-to-end testing,” which would require that the agency make such testing available to all HIPAA-covered entities.

“The release of H.R. 2247 is further indication that Congress is taking its role of providing oversight of the implementation (of) ICD-10 seriously,” said Robert M. Tennant, director of health information technology policy at the Medical Group Management Association (MGMA). “There is growing concern in the physician practice community that their critical trading partners will not be ready in time to meet the Oct. 1, 2015 compliance date.”

Tennant says that while H.R. 2247 does not alleviate all concerns, he believes the bill addresses a number of critical issues. Specifically, he noted the importance of the notions that testing would be required by CMS and that CMS would have to offer end-to-end testing to all providers. Tennant also pointed out that the bill would include a provision to ascertain the readiness level of Medicare by requiring it to certify to Congress that its systems are ready. Finally, Tennant recognized that due to the required use of granular ICD-10 diagnosis codes, no Medicare claim could be denied “due solely to the use of an unspecified or inaccurate sub-code.”

“If the transition is to go smoothly, CMS must take aggressive steps to ensure that physician practices and their trading partners are ready for Oct. 1,” Tennant said in an email to ICD10monitor. “If any ‘link’ in the implementation ‘chain’ is not ready, practice cash flow is at risk, as is their ability to serve their patients.”

On the other hand, the American Health Information Management Association (AHIMA) has come out strongly opposing the bill, saying that mandatory end-to-end testing that would certify that Medicare systems are functioning is unnecessary.

“CMS has already been conducting end-to-end testing for some time,” the association noted in a written statement. “After the first Medicare fee-for-service end-to-end testing in January, CMS reported that only 3 percent of rejected claims were due to invalid submission of an ICD-10 code.”

AHIMA also goes on record in its statement calling for “advanced payments” for physicians experiencing difficulties with their ICD-10 implementation.

“Testing has demonstrated that CMS systems are ready to accept and process ICD-10 claims,” the statement read. “To further mitigate this risk, AHIMA recommends that CMS grant ‘advance payments’ to any physicians that do experience cash flow disruptions as a result of the ICD-10 transition.”

For both Black and Poe to prevail, they’ll need to convince members of the powerful House of Representatives Committee on Energy and Commerce, to which both bills have been referred.

ICD-10 Update!

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# HOT Topics!

## ER Visits Are Up Under ObamaCare

Emergency room visits have increased under ObamaCare despite the law's intention to reduce their use for standard medical care, a new survey finds.

The survey of ER doctors finds that three-quarters say their number of patients has increased since ObamaCare's insurance mandate took effect at the beginning of 2014.

The American College of Emergency Physicians (ACEP), which conducted the survey, pointed to the shortage of primary care doctors and the low payment rates from Medicaid, which accounts for much of ObamaCare's coverage expansion.

"America has severe primary care physician shortages, and many physicians will not accept

Medicaid patients because Medicaid pays so inadequately," Dr. Michael Gerardi, president of ACEP, said in a statement. "Just because people have health insurance does not mean they have access to timely medical care."

## ObamaCare Program Saves Medicare \$400M

A pilot program created under ObamaCare to change Medicare's payment system saved almost \$400 million and will be expanded, the administration announced Monday.

An independent report released by the Department of Health and Human Services on Monday finds that the pilot program saved Medicare more than \$384 million across 2012 and 2013.

The pilot program, called Pioneer Accountable Care Organizations, is

part of an effort to shift Medicare to paying for quality instead of quantity of care.

Under the program, groups of doctors agree to accept lump payments under Medicare instead of individual payments for each service they provide, as in the traditional Medicare payment system.

The idea is to discourage unnecessary tests and procedures and better coordinate care. If the groups of doctors, known as Accountable Care Organizations (ACOs),

end up keeping costs below the target, they get to keep some of the leftover money, providing an incentive to keep costs down.

The Obama administration is touting the pilot program, claiming it's paid off and generated savings.

"The Affordable Care Act gave us powerful new tools to test better ways to improve patient care and keep communities healthier," HHS Secretary Sylvia Mathews Burwell said in a statement.



# HOT Topics!

## Senators Warn Medicare Appeals System Collapsing

The Senate Finance Committee is demanding more attention on the growing backlog of Medicare appeals claims, which federal officials are continuing to blame on a lack of funding.

The Office of Medicare Hearings and Appeals is receiving a record number of appeals, with the processing time for each claim more than quadrupling over the last five years to an average of 550 days.

"We definitely feel the

urgency," Nancy Griswold, the chief law judge at the Office of Medicare Hearings and Appeals, told the committee Tuesday. "We are keenly aware of the impact that these delays are having."

Griswold urged support for President Obama's proposed budget, which would grow the cash-strapped agency's budget by nearly \$300 million. The additional funds would help double the office's capacity to process cases, she said.

The agency's budget was \$82.3 million over the last fiscal year, up from \$69 million the previous year. Its staffing has increased from 492 to 514 over the same period.

The Medicare administrative judge also supported an idea from the panel's top Democrat, Sen. Ron Wyden (D-Ore.), who proposed a refundable filing fee to keep out providers who are "gaming the system."

## Uninsured Rate Falls by Half

The number of people lacking health insurance dropped by half in the 29 states that expanded Medicaid under ObamaCare, far more than states that did not agree to the expansion, according to new data.

While all states saw major increases in coverage under ObamaCare, the biggest differences were seen in states that accepted federal dollars to expand eligibility for Medicaid, according to new figures from the

Urban Institute's Health Reform Monitoring Survey.

The drop in the uninsured rate was about 30 percent in the 31 states that did not expand Medicaid eligibility.

Hot Topic content courtesy of:

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# IL AAHAM

# Treasurers Report

American Association of HealthCare Administrative Management			
IL CHAPTER - GENERAL FUND			
STATEMENT OF INCOME AND EXPENSES (CASH BASIS)			
For the period of:		1/1/2015	to 3/31/2015
TOTAL INCOME			4,327.47
TOTAL EXPENSES			6,863.67
NET INCOME/LOSS			-2,536.20
BANK BALANCE BEGINNING OF PERIOD:		\$47,030.22	
BANK BALANCE END OF PERIOD		\$44,494.02	

## 2015 1st Quarter

## Summary



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## Scholarship Program 2015!

The Illinois Chapter of AAHAM is pleased to announce we are now accepting applications for the annual Scholarship Program for school year 2015-2016. The scholarships are available to all of our members (and their children/grandchildren) who are seeking financial assistance for higher education. The scholarship application and guidelines can be found on the Illinois AAHAM website at-

[www.illinoisaaaham.com/forms.htm](http://www.illinoisaaaham.com/forms.htm)

Please note that the application must be postmarked by May 31, 2015 and mailed to the following address:

Nancy Vollmer, Scholarship Chair - IL AAHAM  
Eagle Recovery Associates, Inc.  
2601 West Forrest Hill Avenue  
Peoria, IL 61604-1812

or

email to: [nvollmer@eaglerecovery.net](mailto:nvollmer@eaglerecovery.net)

Scholarships will be awarded no later than August 30, 2015.

Please direct any questions to one of the following Scholarship committee members:

Nancy Vollmer  
[nvollmer@eaglerecovery.net](mailto:nvollmer@eaglerecovery.net)  
309-272-4501

Tera Roesch  
[tera\\_roesch@gibsonhospital.org](mailto:tera_roesch@gibsonhospital.org)  
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May 13, 2015

# Illinois HFS Bulletin



Courtesy of Nebo Systems, a part of Experian

This is a complimentary bulletin for Medicaid information in Illinois from Nebo Systems, a part of Experian. If you would rather not receive this information, please click the unsubscribe link at the bottom of the page.

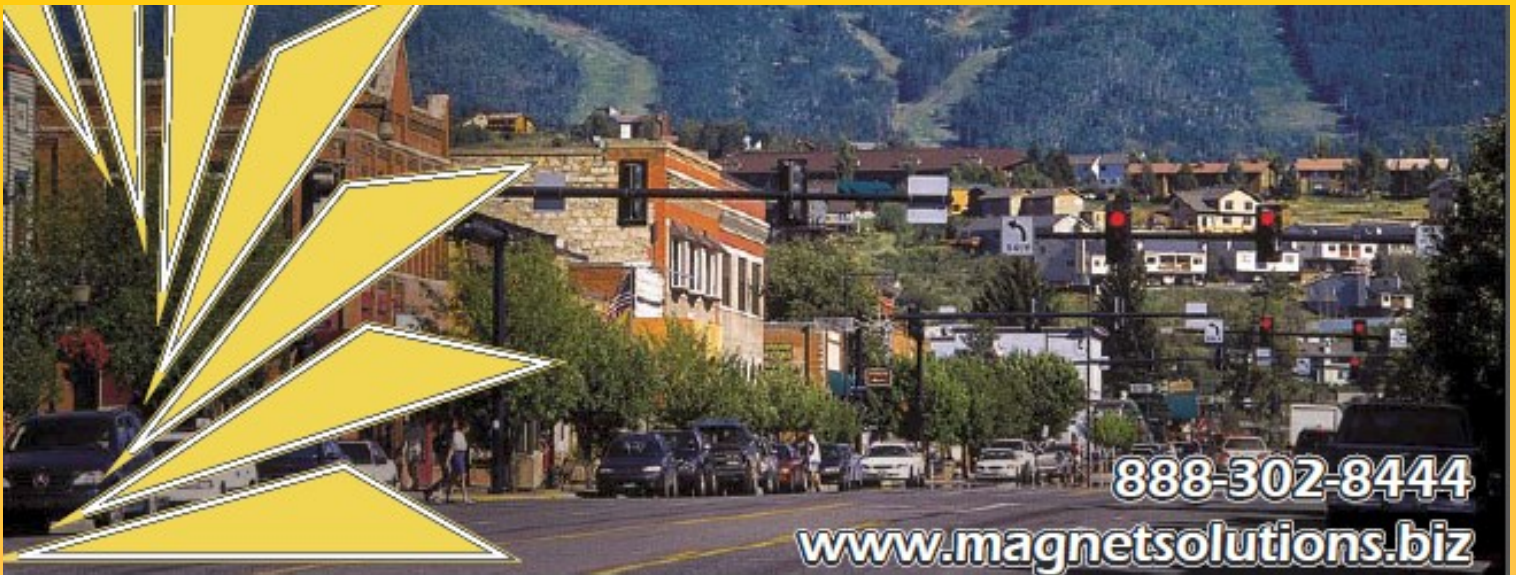
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## Erroneous HFS Rejections

HFS has reported a system issue beginning with claims received on 04/10/15 and after. The HFS system is not editing information received from EQ Health against the claim data appropriately, resulting in rejections for some or all of the following rejection codes: **A88, A19, A48, A54** and **C88**.

HFS anticipates the system will be fixed the week of 05/11/15. Providers can hold claims until the system fix is in place and submit their claims electronically. Providers can also submit the claims hardcopy requesting a manual override. HFS will send out notification once the system fix is in place. Once the system fix is in place, providers will have 180 days from the date of the system fix to resubmit their claims.





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# 2015 Events Calendar

## Preliminary Calendar of Events:

- March 11** IL AAHAM Board Meeting, 6pm, Champaign, IL  
**March 12** IL AAHAM Spring Education Meeting, Hawthorn Suites by Wyndham—  
Champaign, IL
- March 30-31** Legislative Day  
Hyatt Regency Capital Hill  
Washington, DC
- June 16** IL AAHAM Board Meeting  
**June 17** IL AAHAM Summer Education Meeting, Northfield Inn and Suites,  
Springfield, IL
- September 10** IL AAHAM Board Meeting – **Location TBA**  
**September 10** Charles Garvin Memorial Golf Outing – Eagle Ridge Golf Course
- September 11** Fall Education Meeting – Galena, IL
- December 2** Board Meeting –  
Vendor Reception  
East Peoria, IL **Location TBA**
- December 3-4** Annual State Institute –  
East Peoria, IL **Location TBA**



# HBCS A revenue-energizing partner

Why do we consider ourselves a partner? Because a partner is integrated, enabling, enhancing and in it for the long haul. The mentality of working *with* you, rather than *for* you, allows us to be adaptable and expectation-exceeding. Our highly-trained staff and flexible, state-of-the-art technology uncover, recover and accelerate your revenue. In the truest sense, we're a revenue-generating partner that can be as large – or small – as you need us to be.

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We will serve you best no matter how large, or small, your collection needs, because we realize how important an above average recovery ratio can mean to your over-all bottom line. Our services are performed as if the future of our company depends upon the results we achieve - BECAUSE IT DOES!

Our priority is not to be the biggest - it's to be the Best! We will achieve this goal because as a collection agency, WE WORK HARD FOR YOUR MONEY!



#### MEMBERS:

- Illinois Collectors Association
- American Collectors Association
- American Association of Healthcare Administrative Management



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Telephone: (815) 223-0804  
Toll Free: (800) 383-0024  
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Please Contact Douglas Headman, Vice President for additional information:  
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G D K X N M Z C U I F M C X V H O G E W C Z  
V M B F I E F I A D F L D S F S L E W Q E R Y I  
U D S N V Z V D O I N N O V A T I O N L M  
Y C U T M Z V H O S F O I W R I V N J Z V N V  
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The search stops here.



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# 2014-2015 IL AAHAM Leadership

## Officers

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**Kenny Koerner, CRCE-I, MBA**  
Director of Patient Accounts  
CGH Medical Center  
100 E. LeFevre  
Sterling, IL 61081  
Tele: 815.564.4407  
Fax: 815.626.2896  
Email: [kkoern@cghmc.com](mailto:kkoern@cghmc.com)



### Chairman of the Board

**Doris Dickey, CRCE-I**  
Patient Financial Services Manager  
Rochelle Community Hospital  
900 North 2nd Street  
Rochelle, IL 61068  
Tele: 815.561.1620  
Fax: 815.562.3131  
Email: [ddickey@rcha.net](mailto:ddickey@rcha.net)



### First Vice-President

**Chris Bryant**  
Patient Business Services Manager  
Dr. John Warner Hospital  
422 W. White Street  
Clinton, IL 61727  
Tele: 217.935.9571 x3211  
Fax: 217.937.5262  
Email: [chris.bryant@djwhospital.org](mailto:chris.bryant@djwhospital.org)



### Second Vice-President

**Joshua A. Johnson, CRCS-I,P, CRCP-I**  
Director of Patient Financial Services  
Gibson Area Hospital & Health Services  
1120 N. Melvin Street  
Gibson City, IL 60926  
Tele: 217.784.2612  
Fax: 217.784.2645  
Email: [josh\\_johnson@gibsonhospital.org](mailto:josh_johnson@gibsonhospital.org)



### Treasurer

**Nancy Vollmer**  
Vice President of Sales  
Eagle Recovery Associates, Inc.  
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Peoria, IL 61602  
Tele: 309.272.4501  
Fax: 309.272.1400  
Email: [nvollmer@eaglerecovery.net](mailto:nvollmer@eaglerecovery.net)



### Secretary

**Tera Roesch, CRCS-I, CRCS-P**  
Assistant Director PFS  
Gibson Area Hospital & Health Services  
1120 N. Melvin Street  
Gibson City, IL 60936  
Tele: 217.784.2622  
Fax: 217.784.5853  
Email: [Tera\\_Roesch@gibsonhospital.org](mailto:Tera_Roesch@gibsonhospital.org)



# 2014-2015 IL AAHAM Leadership

## Directors

### **Vanessa Haydon, CPAR**

Vice President, Account Management  
Medical Reimbursements of America (MRA)  
6840 Carothers Parkway, Suite 150  
Franklin, TN 37067  
Tele: 615.339.4403  
Fax: 615.472.7401  
Email: [vhaydon@mraresults.com](mailto:vhaydon@mraresults.com)



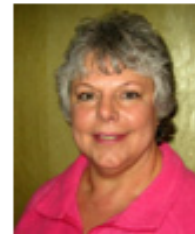
### **Dave Miller**

Director, Client Services  
Passport Health  
Tele: 630.812.2557  
Email: [david.miller@passporthealth.com](mailto:david.miller@passporthealth.com)



### **Maria Orwig**

Director of Business Services  
Graham Hospital  
210 W. Walnut Street  
Canton, IL 61520  
Tele: 309.647.5240 Ext. 2211  
Fax: 309.649.5110  
Email: [morwig@grahamhospital.org](mailto:morwig@grahamhospital.org)



### **C.J. Tonozi - CRCS-I**

OSF Healthcare System  
Eastern Region Compliance Specialist  
2200 East Washington Street  
Bloomington, IL 61701  
Tele: 309.665.4819



### **Julie Van Pelt, CHFP, CPC, CRCS-I,P, CRCE-I**

Vice-President of Operations, MedPay/PMD  
Avadyne Health  
7017 John Deere Parkway  
Moline, IL 61265  
Tele: 309.277.1547  
Fax: 888.260.6020  
Email: [jvanpelt@avadynehealth.com](mailto:jvanpelt@avadynehealth.com)



### **Rena Willey, CRCE-I**

Director of Patient Financial Services  
Memorial Hospital  
P.O. Box 160  
Carthage, IL 62321  
Tele: 217.357.8696  
Fax: 217.357.8697  
Email: [rwilley@mhtlc.org](mailto:rwilley@mhtlc.org)



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# 2015 Corporate Partners



## Illinois Chapter

### 2015 CORPORATE PARTNERS

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

#### PLATINUM LEVEL

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**Relay Health**  
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Terry Hauer – [terry@securebillpay.net](mailto:terry@securebillpay.net)

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# 2015 Corporate Partners

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<p><b>The SSI Group, Inc.</b>  <a href="http://www.ssigroup.com">www.ssigroup.com</a>                  Christy Dawson – <a href="mailto:Christy.dawson@ssigroup.com">Christy.dawson@ssigroup.com</a></p>	

## SILVER LEVEL

Allied Business Accounts / HCBS	Betty Marschang, CRCE – <a href="mailto:bmarschang@abacollect.com">bmarschang@abacollect.com</a>
Cirius Group, Inc.	Mark Ehnen – <a href="mailto:mark.ehnen@ciriusgroup.com">mark.ehnen@ciriusgroup.com</a>
Creditors Collection Bureau, Inc.	Sue Glenzinski – <a href="mailto:sglenzinski@creditorscollection.com">sglenzinski@creditorscollection.com</a>
Midwest Credit & Collections, Inc.	Ron Wilson – <a href="mailto:rwilson@mccionline.com">rwilson@mccionline.com</a>
ProCom Services of Illinois, Inc.	John McGlasson – <a href="mailto:mcglasson.john@pro-comservices.com">mcglasson.john@pro-comservices.com</a>
RevSpring, Inc.	Dan Hartnett – <a href="mailto:dhartnett@revspringinc.com">dhartnett@revspringinc.com</a>
Rockford Mercantile Agency, Inc.	Danielle Miller - <a href="mailto:dani@rmacollections.com">dani@rmacollections.com</a>
State Collection Services, Inc.	Brad Taylor – <a href="mailto:bradt@stcol.com">bradt@stcol.com</a>

## BRONZE LEVEL

AAMS	Luke Gruber – <a href="mailto:lgruber@aamsonline.com">lgruber@aamsonline.com</a>
AFNI, Inc.	Kathleen Sweeney – <a href="mailto:kathleensweeney@afni.com">kathleensweeney@afni.com</a>
Cardon Outreach	David Cartier – <a href="mailto:dcartier@cardonoutreach.com">dcartier@cardonoutreach.com</a>
Collection Professionals, Inc.	Greg Himelick – <a href="mailto:cpils1@ivnet.com">cpils1@ivnet.com</a>
Eagle Recovery Associates, Inc.	Nancy Vollmer – <a href="mailto:nvollmer@eaglerecovery.net">nvollmer@eaglerecovery.net</a>
Healthcare Financial Resources	Steve Chrapla – <a href="mailto:schrapla@hfri.net">schrapla@hfri.net</a>
Managed Care Partners, Inc.	James Richmond – <a href="mailto:jrichmond@mngdcare.com">jrichmond@mngdcare.com</a>
Medical Business Bureau, LLC	Randy Gelb – <a href="mailto:rgelb@mbb.net">rgelb@mbb.net</a>
Medical Reimbursements of America	Vanessa Haydon – <a href="mailto:vhaydon@mrareults.com">vhaydon@mrareults.com</a>
RRCA Accounts Management, Inc.	Kevin Heller – <a href="mailto:rcca@essex1.com">rcca@essex1.com</a>
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## 2015 APPLICATION FOR NATIONAL MEMBERSHIP

NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

EMPLOYER/ORGANIZATION NAME: \_\_\_\_\_

PRIMARY ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ LOCAL CHAPTER: \_\_\_\_\_

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HOME ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

How did you hear about AAHAM?  Colleague  Publication  Website  LinkedIn

If referred by AAHAM member, please give name: \_\_\_\_\_

Membership Type:  National Member  Student Member

**NATIONAL MEMBERSHIP** - The fee to become a National member is \$190. If you join anytime between July 1st and August 31st, the dues are \$150 for the rest of the current year. If you join between September 1st and December 31st, the fee is \$230 for the rest of the current year and all of the following year.

**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 and submit proof with this application.** 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.

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Please note: Membership is on an individual, not institutional, basis and is non-transferable.

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11240 Waples Mill Road, #200  
Fairfax, VA 22030  
Fax: 703-359-7562  
AAHAM Tax ID: 23-1899873

### YOUR PAYMENT TOTAL:

NATIONAL DUES: \_\_\_\_\_

LOCAL DUES: \_\_\_\_\_

TOTAL ENCLOSED: \_\_\_\_\_

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**Local Chapters:** AAHAM has 32 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

Name of Chapter	Geographic Location	Chapter Dues	Please Check the Appropriate Codes in Each Category Below
Aksarben #01	Nebraska	\$0.00	<b>Years in Healthcare:</b> <input type="checkbox"/> 0-5 <input type="checkbox"/> 6-10 <input type="checkbox"/> 11-20 <input type="checkbox"/> 21-25 <input type="checkbox"/> 25+  <b>Certification:</b> <input type="checkbox"/> CHAM (NAHAM) <input type="checkbox"/> CHFP (HFMA) <input type="checkbox"/> PHFMA (HFMA) <input type="checkbox"/> CHCS (ACA) <input type="checkbox"/> Other (please list)  <b>Employer Type:</b> <input type="checkbox"/> Vendor/Corporate Partner <input type="checkbox"/> Billing <input type="checkbox"/> Collection Agency <input type="checkbox"/> Consulting <input type="checkbox"/> Outsourcing <input type="checkbox"/> Software/IT <input type="checkbox"/> Provider <input type="checkbox"/> Law Firm <input type="checkbox"/> Other (please list)  <b>Position:</b> <input type="checkbox"/> CFO <input type="checkbox"/> Vice President <input type="checkbox"/> Partner, Principal, Owner <input type="checkbox"/> Executive Director <input type="checkbox"/> Consultant <input type="checkbox"/> Director <input type="checkbox"/> Manager <input type="checkbox"/> Supervisor/Coordinator <input type="checkbox"/> PFS Representative <input type="checkbox"/> Patient Access Representative <input type="checkbox"/> Other (please list)  <b>Responsibility:</b> <input type="checkbox"/> Accounting <input type="checkbox"/> Administration/Operations <input type="checkbox"/> Admitting/Access <input type="checkbox"/> Audit <input type="checkbox"/> Benefits <input type="checkbox"/> Budget <input type="checkbox"/> Compliance <input type="checkbox"/> Business Development, Sales, Marketing <input type="checkbox"/> Information Services/Technology <input type="checkbox"/> Managed Care <input type="checkbox"/> Medical Records <input type="checkbox"/> Medicare/Medicaid <input type="checkbox"/> PFS, Patient Billing & Collections <input type="checkbox"/> Reimbursement <input type="checkbox"/> Third Party Administration <input type="checkbox"/> Other (please list)
Florida Sunshine #03	Florida	\$40.00	
Carolina #04	North & South Carolina	\$30.00	
Evergreen #05	Washington State, West of the Mountains	\$30.00	
Gopher #06	Minnesota	\$40.00	
Hawkeye #07	Iowa	\$0.00	
Hawthorn #08	Missouri	\$45.00	
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	\$25.00	
Mountain West #14	Utah	\$30.00	
New Jersey #16	New Jersey	\$35.00	
Western Reserve #18	Ohio	\$0.00	
Northeast PA #19	North East Pennsylvania	\$30.00	
Rocky Mountain #21	Colorado	\$20.00	
Pine Tree #22	Maine	\$25.00	
Rushmore #23	North & South Dakota	\$0.00	
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Virginia #27	Virginia	\$30.00	
Philadelphia #29	Philadelphia, Pennsylvania	\$35.00	
Mid-York #31	New York	\$30.00	
Georgia #33	Georgia	\$30.00	
Connecticut #34	Connecticut	\$35.00	
Three Rivers #37	Pittsburgh, Pennsylvania	\$50.00	
Texas Bluebonnet #40	Texas	\$50.00	
Indiana #42	Indiana	\$25.00	
Wisconsin #44	Wisconsin	\$25.00	
Chennai #49	Chennai, India	\$0.00	
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Michigan #55	Michigan	\$0.00	
Twin States #56	Vermont & New Hampshire	\$25.00	

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# Our People



# Our Services

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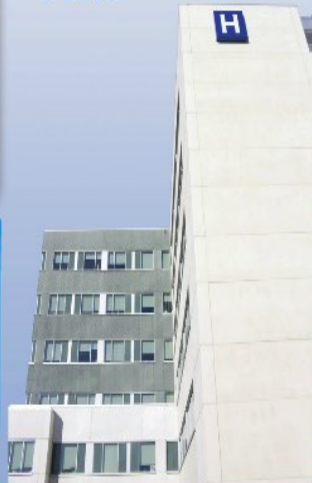
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- Tailor a solution for your facility
- Assist with the management of your revenue cycle
- Ensure the highest probability of cash recovery
- Drive the reduction of bad debt



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- Director of Patient Eligibility at Cape Fear Valley Health Systems



"Outdated collection techniques are eliminated. In-patient and out-patient financial representatives work closely with the patients to resolve account balances and reclaim lost revenue"

- Josie Burch, President of HFMI

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