2017 HomeTown Health Managed Care Consortium

BOOT CAMP

PLAN OF ATTACK

MACON, GEORGIA
FEBRUARY 2 - 3, 2017
Learning Outcome: At the end of this session, attendees should be able to:

* Define the purpose and intended outcomes of Boot Camp

**Kristy Thomson** joined the HomeTown Health team in 2006 and served for 9 years as the Director of Education where she has directed the education services offered to HomeTown’s hospital members and their affiliated clinics and physician practices. In this role, Kristy was responsible for course curriculum, content, technical set up and instructors, as well as directing live and online education services offered to HomeTown’s network of 60+ rural hospitals and their affiliated clinics and physician practices along with 60 supporting business partners. She was also responsible for compliance with the IACET/ANSI continuing education and training standards along with other accreditation standards and assisted in preparation, review and administration of state and federal grants. In 2015, Kristy moved into the Chief Operating Officer position for HomeTown Health where she is responsible for both the HomeTown Health operations and the education programs of HomeTown Health University. After graduating from Stephens County High School in Toccoa, Georgia, Kristy earned her degrees including a B.S. from Clemson University and an M.S. from the University of Georgia, both in math and sciences. Prior to joining HomeTown, she worked as Special Projects Manager for the Town of Jupiter in Jupiter, Florida. She currently lives in Clarkesville, Georgia with her husband, John Lee, and her two sons, Jack and Luke. Among other community and industry related arenas, she currently serves as IACET Awards Committee Member and Georgia Medicaid RAC Provider Relations Committee Member.

**Sandy Sage**, RN, previously worked for a rural hospital as a Revenue Cycle Manager. She has been a Registered Nurse since 1990. Her clinical experience includes 6 years of experience as a Nurse Manager in the Emergency Department and for a Medical/Surgical unit at Taylor Regional Hospital. Working as a Case Manager at Flint River Community Hospital, when Medicare first implemented OPPS, allowed her to work closely with the Business Office staff to negotiate the new rules for outpatient reimbursement. Analyzing charging and reimbursement led to her role as the clinical liaison between the medical and accounting sides of the hospital. Sandy also worked at Fairview Park Hospital as a Revenue Analyst from 2001 to 2010. Educating hospital employees and helping them to better understand the revenue cycle is her passion in her professional life. She became an official member of the HomeTown Health team in November of 2016.

**Learning Outcomes:** At the end of this session, attendees should be able to:

* Describe the recent updates in Georgia hospitals under the scope of the State Office of Rural Health (SORH)
* Recognize new projects the SORH will be providing for hospital participation in the upcoming year, such as the SHIP and FLEX programs

**Ms. Carhuff** is the Director, Hospital Services for the Georgia State Office of Rural Health. She has worked in the health care industry for the past twenty (20) years serving in quality improvement and patient safety leadership roles across the healthcare continuum. She is a native southerner from Mississippi with a passion to serve rural communities. Ms. Carhuff received her Bachelor of Science in Nursing from the University of Mississippi Medical Center and her Master of Science Degree in Nursing focused on case management for rural populations from the University of Alabama. She is a member of the national Rural Quality Advisory Council. The Georgia State Office of Rural Health (SORH) works to improve access to health care in rural underserved areas and to reduce health status disparities. Program objectives include: to empower communities to strengthen and maintain the best possible health care using existing resources, provide up-to-date health systems information and technical assistance, and build strong partnerships to meet local and regional needs. The SORH strives to be the single point of contact for all regional issues related to rural health care and has developed a full complement of programs to assist policymakers, health care providers and, most importantly, rural residents to address changing rural environments.

**Learning Outcome:** At the end of this session, attendees should be able to:

* Recognize the importance of upfront collections
* Describe how to create a successful upfront collection campaign
* Identify emerging strategies to improve hospital upfront collection efforts
Learning Outcomes: At the end of this session, attendees should be able to:

* Identify recent updates from Peach State, WellCare and CareSource
* Recognize successful methods for communicating with the payers
* Identify contacts who can provide ongoing support when questions arise

Jeffrey West is the Provider Network (Central) Manager for Peach State Health Plan. Jeff returned to Centene in 2016 with Peach State Health Plan as Manager of the Provider Network for the Central Region. He was previously with Centene in Ohio at Buckeye Community Health Plan from 2006 to 2012. Prior to his current position in Georgia, he worked at BlueCross BlueShield of Tennessee as Provider Network Manager and as an Operations Compliance Analyst for the Nashville region. He is a dedicated health and human services professional with many years of experience in healthcare. He has a Bachelor of Science Degree in Health Administration as well as an Associates of Applied Science in Medical Laboratory Technology.

Thomas Stair is the Senior Hospital Services Specialist for Georgia’s WellCare Health Plans, Inc., Southwest Region. Thomas has been with WellCare for 10 years and holds a Bachelor Degree from Valdosta State University. WellCare has developed a full complement of expertise in three major areas of government-sponsored health care: Medicaid, Medicare Advantage and Medicare Prescription Drug Plans. Leveraging our expertise is a key part of the value we bring to our members. We are committed to continually improving the quality of care and service we provide to our members, helping them access the right care at the right time in the appropriate setting.

With nearly 30 years of diversified sales, marketing, and operations management experience in the managed care industry, Darren C. Morgan brings valuable insight and expertise in operations, network development, and provider relations. He is experienced in building foundations for strategic corporate imaging and marketing. Darren has been instrumental in coordinating new and potential market network development and strategic activities throughout the country. Darren’s mastery has afforded him the opportunity to be responsible for community education and network development for CareSource Georgia. Darren has been married for over 30 years and is the proud father of three daughters.

Becky Tarr, RN, MBA, CPA, Executive Vice President & COO, MedPerformance

Learning Outcomes: At the end of this session, attendees should be able to:

* Describe how understanding a hospital's managed care contracts can help to avoid denials in payment
* Identify ways to manage hospital denials throughout the revenue cycle

Rebecca Corzine Tarr, RN, MBA, CPA has over 30 years of experience in health care, which includes 25 years in Revenue Cycle/Case Management at four different acute care hospital systems. Becky is currently the Owner, Executive Vice President and Chief Operating Officer of MedPerformance, a Revenue Cycle Consulting Company that specializes in denials and appeals through software and consulting services as well as Case Management education. Prior to forming MedPerformance, she was the Vice President, Revenue Cycle, at a multi-hospital system in Florida for over six years. At this system, she had administrative responsibilities for Managed Care, Centralized Scheduling, Pre-Registration, Patient Registration, Health Information Systems, Clinical Documentation Program, Case Management, Appeals and Denials, CDM, Revenue Integrity, and Patient Financial Services. She has both for profit and not for profit health care experience and during this same time period, she was an adjunct faculty member at the University of South Florida, College of Business, where she taught in the Finance Department for over 20 years. Mrs. Tarr received her Bachelor’s degree in Nursing from Loyola University in Chicago, a Bachelor of Science degree in Accounting and a Masters in Business Administration from the University of South Florida with a concentration in Finance. She also has postgraduate hours in accounting and finance. Mrs. Tarr holds both a Florida CPA and RN license, is married and lives in Valrico, Florida. She has three grown children and five wonderful grandchildren.

Kathy Ryland, Health Management Associates

Learning Outcomes: At the end of this session, attendees should be able to:

* Identify ways to resolve contract issues with Managed Medicaid
* Describe ways to resolve reimbursement and denial issues with Managed Medicaid

Kathy Ryland is a Managing Principal with Health Management Associates (HMA), a national healthcare consulting firm. She has more than 28 years of experience in managed health care. Her expertise is in large-scale health plan operations, strategic planning, contract negotiations, project planning and implementation and communication with critical stakeholders. Prior to HMA, Kathy served as COO of WellCare of Georgia, where she was responsible for the overall operations of the Georgia plan including strategic direction, administration for existing programs and development of new programs. She spent eight years with Georgia Department of Community Health as Chief of Managed Care and Quality, where she was responsible for the design and implementation of Georgia’s Medicaid managed care plan, Georgia Families. She is the founding president of the Georgia Society for Managed Care.
3:00 - 3:15 p.m.  Latrine Break

3:15 - 3:45 p.m.  “Combat Strategies” for Utilizing the DDE System  Dale Gibson, Medicare Expert

Learning Outcomes: At the end of this session, attendees should be able to:

* Describe how to access the DDE for your hospital
* Identify key patient data that can be found in the DDE
* Recognize denial reason codes in the DDE and how to respond

Dale Gibson started his own Medicare consulting business in 1997, and is now well-known among HomeTown Health’s network as the “Medicare Expert”. Dale began his healthcare career in 1980 as a Business Office Manager for a large hospital in Fort Walton Beach, FL that was part of Humana. He briefly worked for HHL in Miami Florida in 1989, before returning to Humana as a Corporate Consultant for Business Offices. In 1993, he became a Medicare Consultant through a merger with HCA. Dale completed his B.S. from Troy State University. He resides in Pensacola, Florida.

3:45 - 4:30 p.m.  Managed Care Basic Training - “Method to the Madness”  Sandy Sage, RN, Revenue Analyst - HomeTown Health, LLC

Learning Outcomes: At the end of this session, attendees should be able to:

* Describe how Managed Care Companies manage the care of patients
* Recognize the roles of Case Managers and PCPs
* Identify how preventative strategies are used for population health

4:30 - 4:45 p.m.  Q&A and Dismissal

Kristy Thomson, COO - HomeTown Health, LLC and Sandy Sage, RN, Revenue Analyst - HomeTown Health, LLC

Dinner on your own or with Business Partners before bunk time

DIE RONE TAKE-AWAYS & TO-DO’S
7:00 - 8:00 a.m.  Breakfast Served

8:00 - 8:15 a.m.  Morning Muster & Calisthenics

Learning Outcome: At the end of this session, attendees should be able to:

* Define the purpose and intended outcomes of Boot Camp Day Two

Kristy Thomson, COO, HomeTown Health, LLC and Sandy Sage, RN, Revenue Analyst - HomeTown Health, LLC

8:15 - 9:00 a.m.  Contract Negotiations and Treaty Agreements

Learning Outcome: At the end of this session, attendees should be able to:

* Identify the key contract terms in a managed care contract
* Describe the important parts of a contract: terms, products and rates
* Define the role the revenue cycle staff plays in negotiations

Elizabeth A. Spoto, MHA, Chief Executive Officer - Spoto & Associates, LLC

Elizabeth Spoto has provided healthcare consulting services to healthcare systems, payors, hospitals, physicians, not for profit medical organizations and associations for 20 years. She has a broad range of expertise including managed care analysis and contract negotiations, medical staff development, strategic development and implementation of physician/hospital integration structures, ventures and partnerships. She also has advised both large and small health care and health care related organizations on methods to improve operations including organizational re-structuring and financial/revenue cycle process improvement. Finally, she has advised payor organizations in the areas of network strategy, operations and financial performance improvement. Most recently she has focused on managed care strategies and contracting for a rural based physician hospital organization, and represents over 10 rural hospitals and their associated physician organizations in four southeastern states.

9:00 - 9:30 a.m.  Case Studies: The Importance of “Landmine Detection” in Your Contracts

Learning Outcome: At the end of this session, attendees should be able to:

* Identify the importance of watching your contracts carefully through interactive case study discussion with experts
* Describe how contract language can affect your reimbursement
* Describe the importance of auditing for contract compliance
* Explain a strategy for developing contract oversight

Kirby Yawn, COO - Allgood Professional Services, LLC

Kirby Yawn received a Bachelor of Business Administration from the Terry College of Business with a focus in Management. Kirby was hired by the Sea Island Company upon graduation. Kirby served many roles in management of this large resort, including managing 140+ staff members of the Beach Club, dining rooms, and room service. Utilizing his extensive management skills and professional service, Kirby accepted a position with the Sea Island Real Estate division, selling over 21 million dollars of real estate in just his second year. While working with Sea Island, Kirby was a graduate of Leaders 21, a leadership and management course taught by the Sea Island Company. In 2006, Kirby was elected to participate in Leadership Glynn County, then elected to serve on the St. Simons/Sea Island Advisory Board to the Glynn County Chamber of Commerce. A highlight of Kirby’s career at Sea Island was the opportunity to assist in hosting the world at the 2004 G8 Summit. In 2008, Kirby and his wife Sara bought a franchise business in the document destruction industry. In just 6 months they were able to grow and sell their business to a Private Equity Firm in Knoxville, Tennessee. After selling their business, Kirby and Sara moved to Augusta to work with Mr. Allgood in building and developing Allgood Professional Services. Kirby is responsible for the growth and development of Allgood Professional Services and assists in the day to day operations of the business. Recently, Kirby completed the IronMan 70.3 in Orlando, Florida. Kirby and Sara are members of Augusta Country Club and the Augusta Historical Society. Kirby and Sara enjoy the outdoors, gardening, and spending time with their daughter, Lily Grace, and son, Thomas.

9:30 - 9:45 a.m.  Latrine Break
9:45 - 10:30 a.m.  **Payer Matrix: “Rules of Engagement” Roundtable**  
*Sandy Sage, RN, Revenue Analyst - HomeTown Health, LLC*

**Learning Outcome:** At the end of this session, attendees should be able to:
* Describe how to create a payer matrix using your contracts
* Identify important key elements in a payer matrix
* Define the importance of tracking data for payer performance

10:30 - 11:45 a.m.  **“Defense Strategies” in Managed Care**  
*Michele Madison, Partner - Morris, Manning & Martin, LLP*

**Learning Outcome:** At the end of this session, attendees should be able to:
* List steps needed to prepare for managed care contracting in light of MACRA.
* Identify upcoming legal changes to ensure compliance in your hospital.

*Michele Madison* is a partner at Morris, Manning & Martin, LLP and serves in the firm’s Healthcare Practice, where she provides general legal advice to health systems in various regulatory and business matters. She also works with information technology companies and advises clients on compliance with regulations and industry standards. Michele has specific experience in negotiating contractual agreements between healthcare providers and service providers, interpreting and advising health systems on regulations applicable to the healthcare industry, and providing regulatory advice with a focus on Stark, Anti-Kickback and HIPAA. She also has key experience and expertise in Compliance programs providing advice for compliance with state and federal regulations and regularly draws and negotiates agreements with hospitals, physicians, managed care organizations and ancillary service providers, as well as contractual agreements for vendors with an emphasis on information technology, purchasing and lease agreements. Michele also works with electronic medical record vendors and personal health record providers. She is a graduate of Georgia State University and The University of Georgia School of Law.

11:45 - 12:00 p.m.  **Expert Q&A and Closing Comments**

12:00 - 12:45 p.m.  **“Chow Time” and Dismissal**

---

**Continuing Education:** As an IACET Authorized Provider, HomeTown Health, LLC offers CEUs for its programs that qualify under the ANSI/IACET Standard. HomeTown Health, LLC is authorized by IACET to offer 1.0 CEU/10 credit hours for Managed Care Boot Camp. A full list of approved IACET organizations can be found at [www.hthu.net](http://www.hthu.net).

In order to obtain credits, you are required to: 1. Attend all presentations. 2. Submit the CEU Request Form at the end of the meeting. Be sure to provide a valid email address. 3. Complete the online program assessment. After confirming you have met all minimum requirements Evelyn Leadbetter will email you a link to the program assessments required to receive your CEU Credit Certificate and Transcript.

**Questions?** Contact Evelyn Leadbetter at evelyn.leadbetter@hometownhealthonline.com.