Where Passion Meets Purpose

OBSTACLES ARE OPPORTUNITIES

HFMA FALL RURAL CONFERENCE
September 20-22, 2017
Grand Junction, Co
Learning Objectives:
Upon completion of the program, participants will be able to:
- Identify which populations of Coloradans have the most trouble accessing needed care.
- Evaluate the potential impact of MIPS under their current provider compensation model.
- List the aims of Population Health.
- Eliminate benefit spend "waste".
- Identify future and recent legislation and its impacts on hospitals in Colorado.
- Identify best practices of local hospitals within the revenue cycle.
- Discuss ideas to utilize the skills of your Patient Access team to increase efficiencies in your organization.
- Identify upcoming rate changes for 2018 Medicare.
- Identify where to find the new 2018 codes and list key items within the updates.
- List the goals of the HFMA Colorado chapter and identify ways to get involved.
- Analyze the constantly evolving financial risks facing hospitals.
- Identify three ways that a rural focused carrier addresses the unique challenges faced by rural communities in the delivery of services and preservation of rural providers while trying to optimize outcomes and manage costs.
- Identify major initiatives in Colorado Medicaid for 2017-2018.

Program Level: Intermediate

Prerequisites: This program is appropriate for healthcare finance professionals with experience and knowledge comparable to CFO’s, Revenue Cycle Executives, Consultants, Controllers, Finance Executives, and other similar positions.

Advanced Preparation: None

Delivery Method: Group Live Seminar

CPE Credit for Accountants/NASBA: Upon verification of participant attendance, this program will be eligible for up to 15.0 CPE credits in various fields of study. See the Detailed Conference Agenda for actual fields of study. Credits may vary depending on individual state guidelines.

If You Have To Cancel: A refund of the registration fee will be granted if cancellation is received by September 6th, 2017. NO REFUND OR CREDIT will be granted if cancellation is received after September 6th, 2017. Substitutions are permitted. Cancellations must be submitted in writing to admin@hfma-co.org.

Sponsors & Exhibitors: The support of our sponsors make this program possible. Please be sure to visit our Exhibitors to learn about the great services and products that they offer.

Questions: If you have any questions concerning registration, refund, complaint, and/or program cancellation policies, please contact Jessica Griffith at admin@hfma-co.org.

Hotel Information: A block of rooms have been reserved with a preferred rate of $129.00 plus tax. Room cut-off date for reservations is August 30, 2017. All major credit cards are accepted at the hotel. Cancellation of reservations must be made according to hotel policies.

DoubleTree by Hilton Grand Junction
743 Horizon Dr, Grand Junction, CO 81506
Phone: (970) 241-8888
Make your reservation online.
Obstacles Are OPPORTUNITIES

Agenda

**Wednesday**

- **1:00 - 5:00 pm** Registration open
- **12:00 - 1:50 pm** COHFMA Board Meeting
- **1:00 - 2:00 pm** General Session: 2017 CHA Survey Results | Bontrager
- **2:00 - 3:00 pm** General Session: Physician Contracting for MIPS | Bauer
- **3:00 - 4:30 pm** General Session: Population Health Panel
- **5:00 - 8:00 pm** Welcome Reception

**Thursday**

- **7:00 - 8:00 am** Registration Foyer
- **8:00 - 8:15 am** Welcome and Introductory Remarks
- **8:15 - 9:45 am** Keynote: The Riskiest Credit Card in America: What's in Your Health Plan? | Neary
- **9:45 - 10:15 am** Break with Exhibitors
- **10:15 - 11:30 am** Breakouts
  - **Breakout 01:** CHA Legislative Update | Westrom
  - **Breakout 02:** Revenue Cycle Roundtable
  - **Breakout 03:** Patient Access 101 | Quast
- **11:30 am - 1:00 pm** Trade Faire/Lunch
- **1:00 - 2:30 pm** Breakouts
  - **Breakout 04:** Medicare Reimbursement Update and Financial Improvement Tools for Rural Hospitals | King White & Boswell
  - **Breakout 05:** ICD-10 and Other Code Updates | Cole
  - **Breakout 06:** Revenue Cycle's Impact on Regulatory Reimbursement | Krcil
- **2:30 - 3:00 pm** Break with Exhibitors
- **3:00 - 4:30 pm** Breakouts
  - **Breakout 07:** Legal Update for the Rural CFO | Snow
  - **Breakout 08:** Worker's Comp Rule Changes | Lipocky & Stoll
  - **Breakout 09:** Finance 101 | Cashman
- **4:30 - 5:30 pm** Reception with Exhibitors

Dinner on your own.

**Friday**

- **7:00 - 8:00 am** Registration Breakfast with Exhibitors
- **8:00 - 9:30 am** General Session: CFO Panel
- **9:30 - 10:00 am** Break with Exhibitors
- **10:00 - 11:00 am** General Session: What Makes “Rural” Healthcare Different? | Palmer
- **11:00 am - 12:00 pm** General Session: Colorado Medicaid Updates | Rieter

Thank You - See you Next Time
Wednesday, September 20

12:30 PM  
Registration Opens

**Covering Colorado: One State, Two Days, A Team of CHI Experts, the 2017 CHAS Results**

Sound data lead to sound decisions, especially in Colorado's evolving health policy landscape. The Colorado Health Access Survey (CHAS) is the state's premier source of data on Coloradans' health coverage and access to care. This interactive session marks the unveiling of the 2017 CHAS results and discusses future policy implications.

Upon completion of this session, participants will be able to:
- Be among the first to know Colorado's latest uninsured and underinsured rates.
- Discuss how Colorado's coverage landscape has changed since 2015.
- Identify which populations of Coloradans have the most trouble accessing needed care.
- Articulate who in Colorado is affected (or may be affected) by key state and federal policy changes, including the Affordable Care Act.

1.0 NASBA CPE CREDIT: Specialized Knowledge and Application

Jeff Bontrager, MSPH, Director of Research on Coverage and Access, Colorado Health Institute

Jeff Bontrager, Director of Research on Coverage and Access, joined the Colorado Health Institute in 2005. Jeff serves as Principal Investigator on the 2017 Colorado Health Access Survey. He coordinates CHI's research efforts on health insurance, program eligibility modeling and the safety net. In 2013, the Denver Business Journal selected Jeff as one of Denver’s “Forty Under 40” up-and-coming leaders.

**Physician Contracting for MIPS**

The Medicare Merit-based Incentive Payment System (MIPS) is now in effect. Unless you are updating your provider compensation models to match the requirements of MIPS, your organization may be paying more and receiving less. This session will discuss incentive compensation models that align physician compensation with the requirements of MIPS.

Upon completion of this session, participants will be able to:
- Evaluate the potential impact of MIPS under their current provider compensation model.
- Develop new provider compensation models that align provider compensation with the requirements of MIPS.

2:00 PM  
Physician Contracting for MIPS

1.0 NASBA CPE CREDIT: Specialized Knowledge and Application

Brian Bauer, Esq., Hall Render Killian Heath & Lyman

Brian Bauer has extensive experience in developing Accountable Care Organizations, Clinically Integrated Networks and provider compensation models. He has worked with over 40 ACOs and CINs across the country. Brian concentrates his practice in the areas of health care business transactions, clinical integration, reimbursement and governance. Brian has over 25 years of experience in health law.
Population Health Panel

Population health has been defined as the health outcomes of a group of individuals, including the distribution of such outcomes within the group. It is an approach to health that aims to improve the health of an entire human population. This panel of experts will discuss elements of this growing form of healthcare that will include billing & coding in an Accountable Care Organization, Quality expectations, and Value-based Reimbursement Contracting. The panel will be answering your questions on this explosive topic as we begin to redefine healthcare for our patient.

Upon completion of this session, participants will be able to:

■ List the aims of Population Health
■ Identify its impact on billing & coding in ACOs

1.0 NASBA CPE CREDIT: Specialized Knowledge and Application

Marnell Bradfield, Director of Care Coordination and Quality, Community Care Alliance

Marnell Bradfield joined the Community Care Alliance in November 2015 as Director of Care Coordination and Quality. She comes to CCA with over 20 years of experience in healthcare improvement. Marnell began her career as a Registered Respiratory Therapist (RRT) and holds a Bachelor’s Degree in Healthcare Management (BSHCM). She has also earned credentials as a Certified Professional in Healthcare Risk Management (CPHRM) and a Certified Professional in Healthcare Quality (CPHQ). Her most recent experience was with Rocky Mountain Health plans as their Quality Improvement Advisor and member of the Practice Transformation Team. Her career-long experience with healthcare transformation and evidence-based care collaboration and improvement models, includes a thorough knowledge of the Triple Aim, Chronic Care Model and Patient Centered Medical Home. In addition to facilitating these programs she served as Regional Learning Faculty for the Comprehensive Primary Care Initiative (CPCI) and has written and co-written several self-study modules relating to primary care practice transformation and population health management. Her extensive knowledge and skills with all aspects of clinical care, quality improvement practices, data collection/analysis and effective communication make her a perfect fit for her new role with CCA.

Sharon Caulfield, Attorney, Brownstein Hyatt Farber Schreck

Sharon Caulfield has practiced health care law for over 30 years, and has worked with a variety of clients to resolve many managed care disputes. She was a member and President of the Advisory Board at the CU Center for Bioethics and Humanities for over 20 years and has taught health law and ethics at the CU Law School. Her goal is to provide tools for clients to be able to resolve problems, as much as possible, without legal intervention. More information about Sharon is available at scaulfield@bhfs.com

Rhonda Quast, Director of Revenue Cycle, Eide Bailly LLP

Rhonda has more than 21 years of health care industry experience, including 13 years of experience as a Licensed Practical Nurse with clinical and claims review experience. She has eight years of experience in Revenue Cycle leadership, including patient access related to scheduling, registration, and prior authorization. Rhonda has experience in ACO and Electronic Health Record implementations and Revenue Cycle operations related to population health and value based reimbursement models.

Welcome Reception
Thursday, September 21

7:00 - 8:00  Registration and Breakfast with Exhibitors

Keynote: The Riskiest Credit Card in America: What's in Your Health Plan?
The cost of providing health insurance is a liability that continues to rise up the Profit & Loss Statement and controlling this expense has been a fruitless effort most employers. In this keynote, Andy will share how employers around the country are using strategies to create EBITDA from the benefit spend.

Upon completion of this session, participants will be able to:
- Eliminate benefit spend "waste"
- Generate EBITA from the benefit spend
- Create "negative trend" with long-term insurance costs

1.5 NASBA CPE CREDIT: Specialized Knowledge and Application
Andy Neary, Healthcare Strategist, Captivated Health

Andy has over 15 years of experience in helping employers impact the rising cost of health care through innovative strategies. His strategies help employers reduce health insurance while enhancing the benefits. Andy is a former pitcher in the Milwaukee Brewers organization and mixes his experience as a professional athlete with his expertise in healthcare to create a fun and informative learning experience.

8:15-9:45

Break with Exhibitors

Breakout Sessions
In order to provide attendees with a more focused conference experience, we are focusing dedicating a majority of the most of Thursdays sessions in individual breakout sessions. These sessions fall into three tracks. Revenue Cycle, Finance & Healthcare 101. Revenue Cycle will focus on Coding and Billing Updates, a roundtable discussion on RCM issues, and workers comp topics and is recommended for leaders in patient access and billing. Finance will focus on Legislation, Accounting, and Compliance Issues, and is recommended for CFOs, VP of Rev Cycle, and PFS Directors. Finally, Healthcare 101 will focus on foundational elements in RCM, Finance, and Patient Access. This track is a great way for folks that are new or need a refresher to see how these areas can be optimized at your hospital. While sessions are organized in these tracks, feel free to mix and match to customize your conference experience to your personal needs.

Finance

Breakout 1: CHA Legislative Update
Here in Colorado and across the Country we have seen legislation that impacts how hospitals are required report hospital pricing information, as well as, potential legislation that would directly impact hospital finances. This presentation will discuss the impact of potential legislation at both the State and Federal levels, what the creation Colorado Healthcare Affordability and Sustainability Enterprise mean for Colorado, potential hospital pricing transparency initiatives and how an ACA repeal and replace at the Federal level could impact Colorado.

Upon completion of this session, participants will be able to:
- Identify future and recent legislation and it's impacts on hospitals in Colorado
- Colorado impact of the Colorado Healthcare Affordability and Sustainability Enterprise
- List 3 likely changes brought if the ACA is repealed and replaced

1.0 NASBA CPE CREDIT: Specialized Knowledge and Application
Ryan Westrom, Director of Finance, Colorado Hospital Association

Ryan Westrom is the director of finance for the Colorado Hospital Association (CHA) and has over 10 years of health care experience with a focus on hospital finance and reimbursement. Prior to joining CHA, Ryan has worked in finance and reimbursement at a Colorado Hospital, as well as, for a Medicare Fiscal Intermediary here in Colorado. He currently sits on the Colorado HFMA Board of Directors and was recently appointed, by Governor Hickenlooper, to sit on the Colorado Hospital Provider Fee Enterprise Board which oversees the recently created Colorado Healthcare Affordability and Sustainability Enterprise.
Thursday (cont’d)

Revenue Cycle

Breakout 2: Revenue Cycle Roundtable - What’s Keeping You Up at Night
Discussion with Revenue Cycle Specialists - What keeps you up at night? Let’s talk about the current issues affecting all of us, e.g. Medicaid system change, Insurance denials, etc.

Upon completion of this session, participants will be able to:
■ Review revenue cycle issues with specialists
■ Identify best practices of local hospitals with in the revenue cycle.

1.0 NASBA CPE CREDIT: Specialized Knowledge and Application

Gina Eastin, Director of Revenue Cycle Services, Yuma District Hospital & Clinics
Gina Eastin is the Director of Revenue Cycle Services for the Yuma District Hospital & Clinics. She has been with the facility for over 23 years and has worked with all aspects of the revenue cycle from scheduling to billing and collections. She also has oversight of the RHC satellite clinic in Akron, CO and is the ACO champion for the organization. Gina has her associates in Healthcare Administration and passed the HFMA Certified Healthcare Financial Professional designation. She is the 2017/2018 Colorado Chapter President.

Pilar Mank, Director of Client Relations, Western Healthcare Alliance
Pilar is the Director of Client Relations for Western Healthcare Alliance (WHA) and Healthcare Management (HCM). Pilar is the liaison between A-1 Collection Agency and AR Services operations and HCM clients. Pilar is responsible for client retention efforts as well as new business acquisition. In addition, Pilar represents HCM and WHA at healthcare finance industry meetings, conferences, and speaking engagements. Pilar joined the team in 2007 and has over 25 years of Customer Service experience. She has spent the past eight years in healthcare as an Admissions Manager, PFS Director, Consultant and Trainer on Admissions, Customer Service, and Upfront Collections and Charity. Pilar is a current board member of HFMA as well as the Marketing Chair and Annual Conference Chair for the Colorado Chapter. Pilar has a certificate in Business Administration from Mesa State.

Margaret Bosse, Director PFS, Valley View Hospital
Director of PFS at Valley View since 2011. Previously Director at other hospitals and consulting and interim work in the Revenue Cycle field.

Healthcare 101

Breakout 3: Patient Access 101
As the first point of contact, the Patient Access team has the ability to set the stage for the patient’s encounter with your organization. It is important to engage your Patient Access team and utilize their valuable skills throughout your organization whether it be through accurate registrations, point of service collections, or efficient scheduling. During this session, we will discuss how the Patient Access team may be an untapped resource in your organization and ideas on how to engage them to support your organization's goals.

Upon completion of this session, participants will be able to:
■ Understand the role of Patient Access
■ Identify ways in which to bring the patient and the organization together through the first point of contact
■ Discuss ideas to utilize the skills of your Patient Access team to increase efficiencies in your organization

1.0 NASBA CPE CREDIT: Specialized Knowledge

Rhonda Quast, Director of Revenue Cycle, Eide Bailly LLP
Rhonda has more than 21 years of health care industry experience, including 13 years of experience as a Licensed Practical Nurse with clinical and claims review experience. She has eight years of experience in Revenue Cycle leadership, including patient access related to scheduling, registration, and prior authorization. Rhonda has experience in ACO and Electronic Health Record implementations and Revenue Cycle operations related to population health and value based reimbursement models.

11:30 - 1:00 PM
Trade Faire / Lunch with Exhibitors
Finance

**Breakout 4: Medicare Reimbursement Update and Financial Improvement Tools for Rural Hospitals**

Medicare update for Rural Hospitals with an overview of the 2018 Medicare rate and regulatory changes for inpatient/outpatient services and important issues impacting hospitals. Discussion on Financial Improvement Tools with a handout of comparison data to other SCH and CAH hospitals in Colorado and the Western Region.

Upon completion of this session, participants will be able to:

- Understand Medicare upcoming rate changes for 2018
- Provide awareness of how your hospital compares to other Colorado and Western Region hospital.

1.0 NASBA CPE CREDIT: Specialized Knowledge

**Ann King White, CPA, Partner, BKD, LLP**

Ann has been a member of BKD National Health Care Group for more than 34 years. She works with a variety of health care providers and is involved in all aspects of health care services, including third-party reimbursement, audit and accounting, practice management, management systems and other financial management services.

**Valeri Boswell, Senior Managing Consultant, BKD, LLP**

Valeri has more than 17 years of experience in the health care and accounting industries. As a member of BKD National Health Care Group, she assists prospective payment system hospitals, critical access hospitals, chain organizations, long-term care facilities, rehabilitation hospitals, rural health clinics and other providers. She provides a variety of services, including Medicare and Medicaid cost report preparation and third-party reimbursement and other consulting services.

Revenue Cycle

**Breakout 5: ICD-10 and Other Code Updates for 2018**

It’s that time again. This session will review all ICD-10 coding updates and any other pertinent coding information that will affect healthcare reimbursement. There are so many twists and turns in the revenue cycle keeping current on new codes is important. Keeping it all together definitely takes a village.

Upon completion of this session, participants will be able to:

- Identify where to find the new 2018 codes
- List key items to look for within the updates
- Identify resources for clarifying edits.

1.0 NASBA CPE CREDIT: Specialized Knowledge

**Cherrell Cole, RHIT, CCS, CHPS, HIMS Director and Privacy Officer, Grand River Health**

Cherrell Cole has been a Health Information Management Professional for over 17 years. She began as an acute hospital coder, moving to supervisor of coding and operations as well as a privacy officer. She is an RHIT (Registered Health Information Technician), CCS (Certified Coding Specialists), CHPS (Certified in HIPAA Privacy and Security) and is an AHIMA Certified ICD-10-CM/PCS Trainer. She holds a Bachelor Degree from DeVry University in Technology Management Specializing in Health Information Management. She passionate about coding and the future of Health Information Management.
Breakout 6: Revenue Cycle's Impact on Regulatory Reimbursement

The program will explore the driving forces of the Medicare Cost Report and collaboration with the Revenue cycle that directly impact senior financial executives to help them understand how to use this collaborative process to identify opportunities and drive strategic discussions around margins, revenue cycle processes and the financial impact of strategic initiatives of the organization.

Upon completion of this session, participants will be able to:
- Examine high-impact areas in the cost report and understand what drives reimbursement
- Explore the key drivers of Medicare reimbursement directly connected to the revenue cycle function, and how to use this information to drive strategic revenue cycle, financial and operational discussions
- Explain the importance of collaboration between the Revenue Cycle and Regulatory Reimbursement

1.5 NASBA CPE CREDIT: Specialized Knowledge

Chad Krcil, Healthcare Director, RSM US LLP

Chad Krcil is a Director in RSM’s Healthcare Advisory group. He has 25 years of national health care finance experience focused on regulatory reimbursement, revenue recovery, project management and service delivery. He is also an active member of HFMA. Chad is a Certified Healthcare Financial Professional and holds the HFMA designation of Fellow of Healthcare Financial Management. Chad is currently serving as an officer of the HFMA Colorado Chapter as the President-Elect. He also presents Medicare reimbursement strategy courses on a national level for HFMA at courses throughout the year and at HFMA’s ANI.

Breakout 7: Legal Update for the Rural CFO

This session will provide an overview of key legislative, regulatory and compliance developments affecting rural hospitals, including CAHs, RHCs, 340B, provider based and physician arrangements. It will include discussion on how those developments may affect strategy and compliance initiatives and several case studies on rural hospital affiliation models and joint ventures.

Upon completion of this session, participants will be able to:
- List recent legal and regulatory updates affecting rural hospitals
- Identify strategies and evaluate their implications

1.0 NASBA CPE CREDIT: Specialized Knowledge

David H. Snow, Shareholder, Hall Render Killian Health & Lyman, P.C.

David Snow is a shareholder with Hall Render, the nation’s largest law firm focused exclusively on matters specific to health care organizations. He has practiced health law for over 30 years, including in the firm’s Milwaukee, Wisconsin office since 2005. Mr. Snow led the firm’s initiative to open the firm’s Denver office, which opened in January, 2015. He now splits his time between the two offices while serving healthcare clients across the country in the areas of Medicare & Medicaid reimbursement, affiliations and joint ventures, physician transactions, compliance and tax matters.
Revenue Cycle

Breakout 8: Worker’s Comp Rule Changes

We will provide information on the discussion at the August 1, 2017 hearing to discuss proposed changes to Workers’ Compensation Rules of Procedure, Rules 16 and 18, regarding Utilization Standards and Medical Fee Schedule and identify the specific rule changes and their potential impact. We will also provide recommendations for efficient Workers Compensation claims processing for both Colorado and the Department of Labor.

Upon completion of this session, participants will be able to:

- Receive an update regarding the discussions on the proposed rule changes from the August 1, 2017 hearing
- Identify the rule changes on Utilization Standards and Medical Fee Schedules
- Obtain recommendations for efficient WC claims processing in Colorado

1.0 NASBA CPE CREDIT: Specialized Knowledge

Lori Lipocky, CPCU, Chief Operating Officer Aspirion Health Resources, LLC

Lori Lipocky has over 10 years of experience in working with medical providers on reimbursement issues and 16 years of Property and Casualty Insurance experience as a Casualty Claims Manager for Allstate. As COO of Aspirion Health Resources, she is responsible for overseeing the investigating and processing of complex claims such as Motor Vehicle Accident, Premises Liability, Workers Compensation and Veterans Affairs claims for over 65 hospital and physician groups across the United States.

Ms. Lipocky is an active member in the Georgia, Washington and Colorado Chapters of HFMA. She received a BA in Journalism from the University of Georgia and holds a Chartered Property and Casualty Underwriting designation. She is also a certified Civil and Domestic Mediator for the 3rd Judicial Circuit of Georgia.

Liz Stoll, Colorado Lead Workers Compensation Analyst, Aspirion Health Resources, LLC

Liz Stoll is Aspirion Health Resources’ Lead Analyst for Colorado Workers’ Compensation. She has over four years of Workers Compensation claims processing for Alabama, Georgia, Colorado and Washington. She has an additional 3 years of experience in commercial claims processing for physician practices.

Healthcare 101

Breakout 9: Finance 101

This topic is a broad brush stroke of the complexities of the job that rural hospital Chief Financial Officers and the Finance team must master. This includes, to name just a few tasks: General Ledger, Accounting and Financial Statements, Revenue Cycle, Billing and Receivables, Medicare and Medicaid, Commercial Insurance Contracts, Cost Report, Medical Records, External Financing mechanisms, Budgets, Capital equipment, Compliance and finally Physician compensation contracts.

Upon completion of this session, participants will be able to:

- Explain general concepts of healthcare Accounting, including GL, Financial Statements, Payables and Payroll.
- Define Medicare and why it is important
- List steps of Budgeting and Planning

1.5 NASBA CPE CREDIT: Specialized Knowledge

Tim Cashman, CFO, Estes Park Medical Center

Tim Cashman, MBA, FHFMA has been working in the finance world of rural hospitals for 25 years, the last 20 as CFO. He brings a detailed knowledge in an easily understandable format for the listening audience to grasp the complexities of this rapidly changing environment. Currently CFO for Estes Park Medical Center, Tim’s role, as any CFO, is to provide Leadership, Confidence and Stability to this healthcare community.

Networking Reception
Early Riser Session: Get to know your Colorado Chapter

Join us for coffee and breakfast and learn what the Colorado Chapter of HFMA is all about. Our chapter has over 700 members, representing all parts of the healthcare industry. We have a history of active participation by members and sponsors to bring leading educational events and conferences to our members. Our chapter is a leader in the professional development of its membership.

Upon completion of this session, participants will be able to:

- Meet Chapter leaders
- List the goals of the chapter
- Identify ways to get involved

Pilar Mank, HFMA Colorado Chapter Secretary, Director, Client Relations, Western Healthcare Alliance

Pilar is the Director of Client Relations for Western Healthcare Alliance (WHA) and Healthcare Management (HCM). Pilar is the liaison between A-1 Collection Agency and AR Services operations and HCM clients. In addition, Pilar represents HCM and WHA at healthcare finance industry meetings, conferences, and speaking engagements. Pilar is a current board Member of HFMA as well as the Marketing Chair and Annual Conference Chair for the Colorado Chapter. Pilar has a certificate in Business Administration from Mesa State.

CFO Panel

This very popular CFO Panel session will allow participants to hear four CFOs discuss the topics that are presently foremost on their minds. This will include both Colorado State issues, as well as National issues. Possible topics are: the future of Medicaid; the future of the ACA; price transparency for healthcare providers; spiraling insurance premiums; cost containment strategies; the benefits of ACO’s; the EHR dilemma for healthcare providers; the Medicare “co-location” rule; etc.

Upon completion of this session, participants will be able to:

- Analyze the constantly evolving financial risks facing hospitals.
- Apply solutions to the issues and challenges faced by rural health CFOs
- Identify key issues at local institutions and apply best practices if applicable

1.5 NASBA CPE CREDIT: Specialized Knowledge and Application

Panelists: Ed Johlman, CFO, Community Hospital

Ed began his healthcare career as a Medicare Auditor for the Mutual of Omaha FI in 1984. His first hospital job came in reimbursement & Budget Manager for Independence Regional Health Center in the Kansas City area. He next rolle for Lawrence Memorial Hospital from 1991-2000. His first CFO opportunity came with Banner Health County Memorial Hospital in WY in 2001. After 7 years as CFO at Sheridan Memorial Hospital, also in WY, Ed and his wife moved in 2014 to Colorado for a brief stint with Grand River Hospital District before settling in Grand Junction as CFO of Community Hospital. Ed earned an MBA from Kansas University in 1983. He is a Founders Award recipient with HFMA, certified as FHFMA, and is also certified CHC from the Health Care Compliance Association. He is a life-long Yankees fan, faithfully follows Jayhawk basketball, and has been married for 33 years to his college sweetheart. He has three “mostly” grown children: one currently serving in the military, one married and living in WY and one finishing her undergraduate degree at (“Ughhh!”) Kansas State University.
CFO Panel (cont)

Tim Cashman, MBA, FHFMA, CFO, Estes Park Medical Center
Tim Cashman, MBA, FHFMA has been working in the finance world of rural hospitals for 25 years, the last 20 as CFO. He brings a detailed knowledge in an easily understandable format for the listening audience to grasp the complexities of this rapidly changing environment. Currently CFO for Estes Park Medical Center, Tim’s role, as any CFO, is to provide Leadership, Confidence and Stability to this healthcare community.

Ted Sirotta, Senior Vice President, Finance/Chief Financial Officer
Ted has moved to Vail from Vermont where he was the Chief Financial Officer of the Northwestern Medical Center in St. Albans, where he was awarded CFO of the Year by Quorum Health Resources from among 150 of Quorum’s CFO’s nationwide. Prior to that Ted was Corporate Controller of Renown Health Care in Reno, Nevada and Chief Financial Officer and Chief Information Officer at Barlow Hospital in Los Angeles, California. Ted started his career as an Accountant and Manager with Deloitte & Touche in Los Angeles. Ted has a B.S. in Accounting from the University of Southern California, is a Certified Public Accountant and is certified as a Fellow in the Healthcare Financial Management Association.

Moderator: Terry Collins, Interim CEO, Aspen Valley Hospital
Terry Collins has over 40 years’ experience in healthcare financial management. Most recently, he was CFO for Aspen Valley Hospital for 13 years. Prior to that, he worked as CFO of several healthcare organizations, including multi-hospital companies in Tennessee, Texas and Utah. He has degrees from Brigham Young University and the University of Utah, and currently teaches graduate-level courses in healthcare finance at the University of Utah. He is a recipient of the Founders Medal of Honor within HFMA, and has served on several HFMA chapter Boards, and as President of the Utah chapter.

What Makes “Rural” Healthcare Different?
What is “rural” healthcare from the perspective of a carrier? How is it different and how does it drive relationships between providers, the community, consumers and insurance carriers? These are discussions that need to be had if insurance carriers are going to meet the needs of rural communities. Topics touched will include: i) understanding local service capabilities, ii) pathways of care, iii) preservation of rural providers, iv) provider/carrier partnerships, v) continuity of care and hand-offs between rural and urban providers when care leaves the rural community and then returns, etc.

Upon completion of this session, participants will be able to:
- Have an understanding of how a rural focused carrier views and addresses the unique challenges faced by rural communities in the delivery of healthcare services and preservation of rural providers while trying to optimize outcomes and manage costs.

1.0 NASBA CPE CREDIT: Specialized Knowledge
Cynthia Palmer, CEO, Colorado Choice Health Plans
Cynthia Palmer is the CEO of Colorado Choice Health Plans, a community focused health plan that has served Colorado communities for 45 years, providing competitive health coverage, personalized customer service and quality programs to its members. Colorado Choice has grown by over 475% since 2012. In her 25+ years in health care Ms. Palmer has held positions with Physician Organizations and Insurance Carriers with responsibility for Finance, Systems, Contracting and Provider Relations, Operations, Corporate Development and Strategic Planning.
Colorado Medicaid Updates
Get the latest on Health First Colorado (Colorado's Medicaid Program). Learn about recent legislation passed at the state and federal levels, major program updates and get refresher on the basics on who is covered and how programs are financed.

Upon completion of this session, participants will be able to:
- Know the basics of who is covered by Medicaid and How Services are Financed
- Identify major initiatives in Colorado Medicaid for 2017-2018

1.0 NASBA CPE CREDIT: Specialized Knowledge
Rachel Rieter, External Relations Division Director, Colorado Department of Health Care Policy and Financing

Rachel Reiter is the External Relations Division Director at the Department of Health Care Policy & Financing overseeing government relations and communications including media, legislative, county and tribal relations staff. Reiter has been with HCPF for 6 years. Prior to joining HCPF, she worked in health policy in Washington DC and served as a Press Secretary for former U.S. Senator Chuck Hagel.

Closing Remarks
Instructions for Registering

Online (preferred):
Register online by clicking on the icon or by typing the link below into your browser.

**Register Online**

http://hfma-co.org/meetinginfo.php?id=11&ts=1498175066

You will have the option to pay by credit card or check.

If paying by check, mail the payment along with copy of online registration to:
HFMA Colorado
PO BOX 5571
Denver, CO 80217-5571

By Mail:
You may also register by completing the attached registration form and forward along with check payment, payable to HFMA Colorado Chapter, to the address below. Due to the possibility of this conference selling out, if you plan to register by mail please email a copy of your registration to Jessica Griffith at admin@hfma-co.org prior to mailing.

HFMA Colorado
PO BOX 5571
Denver, CO 80217-5571

*Please include registration form with payment.*

Sponsor/Exhibitor Registrations
Attendees using a complimentary registration included in their sponsorship or included with their exhibit table will still need to register complimentary attendees. Contact Jessica Griffith at admin@hfma-co.org for details.

Students and Provider Coupons:
If you are a HFMA Colorado Chapter student member, you are eligible for a complimentary registration. If you are a HFMA Colorado Chapter member and a provider, a limited number of complimentary registrations are available. Please send your registration form to Jessica Griffith at admin@hfma-co.org and indicate that you would like to take advantage of this offer.

Questions?
For any questions related to online registration please contact Jessica Griffith at admin@hfma-co.org
Registration Information

Badge and Mailing Info:

Attendee Name ________________________________
Title __________________________________________
HFMA Member Y ____ N ____ Mbr # ____________________
Organization _____________________________________
Address __________________________________________
City, ST, Zip ______________________________________
Phone______________________________
E-mail ____________________________________________

Course Selections:
Please mark the three breakout sessions you are planning to attend. Course numbers can be found in the detailed agenda.

10:15 - 11:30 AM
Finance 01 Revenue Cycle 02 Healthcare 101 03

1:00 - 2:30 PM
04 05 06

3:00 - 4:30 PM
07 08 09

Networking Opportunities:
Please indicate which networking events you will be attending. These are open to all attendees. RSVP appreciated.

Wednesday Night ________ Thursday Night _________

Special Dietary Needs:
Vegetarian ______ Vegan ______ Gluten Free ______

$50 discount if you register by August 12th!

Registration Fees:

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<thead>
<tr>
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<th>Before 8/12/16</th>
<th>After 8/12/16</th>
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<tbody>
<tr>
<td>Member</td>
<td>$195.00</td>
<td>$245.00</td>
</tr>
<tr>
<td>Certified Member HFMA(CHFP or FHFMA)</td>
<td>$170.50</td>
<td>$220.50</td>
</tr>
<tr>
<td>Non-Member</td>
<td>$245.00</td>
<td>$295.00</td>
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<td><strong>Total:</strong></td>
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If You Have To Cancel:
A refund of the registration fee will be granted if cancellation is received by September 6th, 2017. NO REFUND OR CREDIT will be granted if cancellation is received after September 6th, 2017. Substitutions are permitted. Cancellations must be submitted in writing to admin@hfma-co.org

Hotel Information:
A block of rooms have been reserved with a preferred rate of $129.00 plus tax. Room cut-off date for reservations is August 30, 2017. All major credit cards are accepted at the hotel. Cancellation of reservations must be made according to hotel policies.

DoubleTree by Hilton Grand Junction
743 Horizon Dr, Grand Junction, CO 81506
Phone: (970) 241-8888

Reserve your room online.