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Changes under the Medicare Access and CHIP Reauthorization Act (MACRA) won’t be implemented until 2019, but preparation should start now. In the spring of 2015, Congress passed the Medicare Access and CHIP Reauthorization Act (MACRA), which repealed the sustainable growth rate (SGR) formula and averted the planned 21 percent across-the-board cut in Medicare’s physician payment. The legislation was greeted with much fanfare and celebration, but now people are waking up to the realization that MACRA also introduces significant changes in the way Medicare pays for physician services. The details of those changes have not yet been determined, but they are sure to create a new set of challenges.

Virtual Doctor Visits Offer New Approach to Traditional Health Care

As hospital leadership knows, there is no hard and fast formula for providing the best possible health care to every patient in every situation. However, with the recent onset of telemedicine, rural providers now have a dynamic new tool at their disposal that has the potential to revolutionize access to care while improving hospital efficiency and profitability.

Questions or comments? Email Becca Burrus at rburrus@blueandco.com
Don’t forget to follow us on Twitter @KYHFMA and LinkedIn - Kentucky Chapter HFMA
Greetings and welcome to 2016! As I wind down the whirlwind of a year that was 2015, I scheduled vacation over the holidays to spend time with my family. My children are 10 and 7, and there is nothing more exciting to me than seeing the magic of the holidays through their eyes. And, while I truly love moonlighting as a taxi service in the evenings between basketball, karate and dance, the holidays were so nice because most of those activities were cancelled. Instead, we spent quality time together as a family playing games, watching movies, and really doing whatever it was that we wanted to do. Though it was hard, we even went “off the grid”, disconnecting from our phones, iPods, computers, etc. to be focused on each other. Because of that, I feel refreshed and ready to tackle 2016!

Our KY HFMA leadership team always welcomes the New Year as our chapter survey results are provided by National. I am pleased to report that the overall high satisfaction score for the Kentucky Chapter was 79%, up 3% from prior year. This percentage is determined by the number of respondents indicating either “extremely satisfied” or “very satisfied” on the survey. The survey indicated sizeable improvements in topics addressed at chapter programs, our chapter’s coverage of state and regional issues, networking opportunities and the website. The survey also provided suggestions for further improvement. We greatly value the feedback from our membership and will be utilizing the results of this year’s survey as we plan for the future of our chapter. Planning is already underway for next year, so if you’ve ever thought about getting more involved in the Chapter there’s no better time than now to get connected.

We have two events remaining for this Chapter year – the Winter Institute this week in Lexington, and the Spring Institute in Louisville on March 17th-18th. The Educational Programming Committees have been hard at work on the planning for these events and have an excellent line-up of topics and speakers. You’ve heard me mention both in previous newsletters and at previous events that our Chapter is turning 50 this year. The Anniversary Celebration Committee is hard at work on an event to take us “Back to Where It All Began” at the social event on Thursday, March 17th. We are very excited about how the event is shaping up and will be sharing details with you in the coming months so stay tuned!

Thanks and I look forward to seeing you at the Winter Institute!
Kourtney Nett
In Defense of Coffee

Coffee has an unfortunate reputation for causing many health problems—from stunting your growth to claims that it causes heart disease and cancer. But, recent research indicates that coffee may not be so bad after all. For most people, the health benefits actually outweigh the risks.

Why the change of heart? Earlier studies didn’t always take into account that high-risk behaviors, such as smoking and physical inactivity, tend to be more common among heavy coffee drinkers. If you take those unhealthy habits out of the equation, there is actually a healthy relationship between coffee consumption and decreased overall mortality.

Furthermore, that cup of coffee could actually protect against Parkinson’s disease, type 2 diabetes and liver disease—including liver cancer. It also appears to improve cognitive function and decrease the risk of depression.

There are exceptions, though. Drinking too much unfiltered coffee may cause elevated cholesterol levels. Plus, some people have difficulty metabolizing coffee and could be at higher risk for heart disease as a result.

Although coffee may have fewer risks than benefits, keep in mind that other beverages, such as milk and some fruit juices, contain nutrients that coffee does not. Also, adding cream and sugar to your coffee adds more fat and calories.

Sugar Substitutes

Because there are so many sugar substitutes on the market, it can be difficult to decide on the best one for your lifestyle. This decision is especially important for the millions of people who live with diabetes. The following is a list of some of the most common artificial sweeteners and how they affect your blood sugar levels:

1. **Agave Nectar** — Agave nectar is a concentrated sugar syrup that is a vegan alternative to honey. Although it has twice as many calories as table sugar, it has a lower glycemic index, meaning that it is safer in moderation for people living with diabetes. And, being 1.5 times sweeter than table sugar, people tend to use less of it. Still, the American Diabetes Association lists agave nectar as “a sweetener to limit.”

2. **Aspartame** — Aspartame is produced by linking aspartic acid and phenylalanine, two amino acids. It’s known by its brand names, Equal and NutraSweet. It can be found in soft drinks, dairy, candy, fruit spreads and various other foods. It is also available in packets that can be added to coffee and tea. Aspartame is 200 times sweeter than sugar and is acceptable for people with diabetes since it has no effect on blood glucose levels.

3. **Stevia** — Derived from the South American stevia plant, its brand names include PureVia, Truvia and SweetLeaf Sweetener. It can be found in drinks, desserts, gum, baked goods, candy, yogurt and in packets for use in beverages. Stevia is up to 300 times sweeter than sugar and does not affect blood sugar levels, so it is safe for people who have diabetes.

4. **Sucralose (Splenda)** — Sucralose, or Splenda, is a no-calorie sugar substitute found in many processed foods and used as a general purpose sweetener (found in small yellow packets wherever coffee and tea are served). Splenda is 600 times sweeter than refined sugar and not very safe for individuals with diabetes, due to its carbohydrate content. According to research, Splenda contains about 1 gram of carbs per teaspoon, which means it could affect blood sugar if it’s not consumed in moderation. People who have diabetes should limit their intake of Splenda.
David Kottak

President during chapter year: 2005

Current employer and title: BKD, LLP – Partner and Regional Healthcare Industry Leader

Family: Caroline-spouse, Corey-son, Megan and Morley -daughters

Most difficult part about being president of the Ky Chapter of HFMA:

Time management was a challenge during the progression through the Leadership Chairs and during my year as President. Trying to balance attending local, regional and national events made calendar management difficult at times.

Most rewarding part about being president of the chapter:

Being able to work with and learn from past presidents during my time as News Letter Editor, VP of Member Services, Program Chair, Vice President and President was a great personal experience. Great people each bringing a different prospective to the table.

Favorite memory from presidential year:

Transitioning the office to the President Elect, Michelle Lawless. There was a sense of satisfaction knowing I accomplished the goals set out during my year as President and that the chapter was in great hands.

Looking back is there anything you would do differently:

I would like to have been more engaged with HFMA after my term as President. The natural tendency is to ”take time off” from HFMA after going through the leadership rotation. I’d encourage future leader to take a longer term view.

Any advice you would have for current/future presidents?

Utilize your time as President as an opportunity to reach out to current and past leaders. It truly is a chance to learn and gain prospective from others.

What has changed since your presidential year?

Other than another round of ”healthcare reform”.............. Having worked in healthcare finance for close to 30 years one thing is constant, change. Either embrace it or find something else to do!
Current chapter role and responsibilities: Treasurer

Employer/job title: BKD, Director

Family consists of: my husband Jim and daughter Kendall (7) and son Connor (3)

When you were young what did you want to be when you grew up: at first a dentist then in HS hated science and liked my business elective so decided on accounting

Favorite college team: IU – Indiana University

What music is on your phone: Adele, Christina Perri, Luke Bryan, Carrie Underwood

Favorite song: Bennie and the Jets

Favorite movie: Pitch Perfect but all time Dirty Dancing

TV shows: Grey’s Anatomy, Nashville

Hobbies: reading and Sudoku and jigsaw puzzles

Most prized possession: Ipad

Something that most people don’t know about you: I have a broken nose, when I first started playing softball a friend’s brother through a fast pitch at me and I missed

Pet peeve: slow drivers in left lane

How do you relax: listening to music and when I can sit on the beach

Guilty pleasure: glass of wine before bed

Dream job: No job and relaxing in a tropical location
Revenue Cycle Management: A Deeper Dive

Dean Dorton’s next healthcare survey is delving into the revenue cycle — organizational structure and governance, physician integration trends and dynamics, changes in technology, performance indicators, and much more.

We want to hear your opinion!

Survey participants are provided with early access to the report and are eligible to receive customized reviews of their organization compared to overall results.

To participate, or for more information, contact: Adam Shewmaker, ashewmaker@deandorton.com.

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When the IRS released their 2015 – 2016 Priority Guidance Plan on July 30, 2015, it included 227 projects considered priorities for allocation of resources during the 2015 – 2016 fiscal year. Included in their “to do” list was an action item regarding proposed regulations under IRC Sec. 501(c)(3) relating to political campaign intervention. This is a topic that the IRS continually monitors and given that 2016 is an election season, the IRS will no doubt be paying special attention.

For a §501(c)(3) organization, any participation in a political campaign can result in the revocation of the organization’s tax exempt status. Additionally, §501(c)(3) organizations are limited as to the amount of involvement which they may carry on activities that would influence legislation (lobbying). Therefore it is important for the organization to establish guidance regarding these activities and communicate it to the board members, officers and employees of the organization.

Because it would be unrealistic for a tax exempt organization to prohibit its board members, officers and employees from participating in political activity, here are a list of do’s and don’ts that can help to insulate the tax exempt entity while allowing individuals connected with the organization an opportunity to support their candidate.

**Acceptable Activities**

An individual may use personal funds to contribute to a candidate’s campaign fund, a political action committee (PAC) or political party.

An individual may personally contact people soliciting support for or opposition to a candidate or contributions to a candidate, so long as the facilities or equipment of the organization are not used.

An individual may serve on a candidate’s campaign committee and allow their name to be listed on the campaign letterhead or otherwise used by the candidate to indicate the individual is a support of the candidate.

An individual may write letters to the editor or other editorial articles supporting or opposing a candidate for publication in newspapers or publications not sponsored by the organization, if the letters or articles make it clear the individual is *acting individually* and not expressing opinions of the organization.
An individual may send a written communication to employees encouraging them to support, oppose or contribute to a candidate. The communication should be on personal stationery, with none of the costs borne by the organization. It should also clearly state that the individual is acting personally, and not on behalf of the organization. Furthermore, the individual may not use the organization’s mailing list for this type of communication.

An individual may send a letter supporting or opposing a candidate and soliciting contributions on personal stationery, with mailing and printing costs paid for by the individual.

An individual may host a fundraiser or reception for a candidate at his/her home or at a location which is not owned by the organization if it is paid for by the candidate’s committee or by the individual personally.

An individual’s title may be used for identification purposes in any personal or campaign communication supporting, opposing or soliciting contributions to a candidate if it is clear and unambiguous in the communication that the individual is not acting on behalf of the organization.

An individual may personally contact employees and encourage them to support, oppose or contribute to a candidate. Any communication should make it clear that the individual is acting personally and not on behalf to the organization. Communications should not take place during working hours, on organization property or at an event paid for by the organization.

**Unacceptable Activities**

Organizational funds may not be used to contribute to or otherwise support candidates, a political party or PAC that contributes to candidates or political parties.

In kind contributions of materials, supplies or services may not be made by the organization, including any of its affiliates or chapters.

Letters supporting or opposing a candidate or soliciting contributions to a candidate may not be sent in the organization’s name or using the organization’s stationery.

Sponsoring candidate forums or permitting a candidate forum to be held on the organization’s property should be avoided.

Articles supporting or opposing a candidate may not be included in an organization’s publications, regardless of whether the publican is directed to employees or the public.

The organization should not permit political literature to be placed or otherwise distributed on the organization’s premises.
The organization may not use its assets to form a PAC or lend its name to a PAC.

Organizational funds may not be used to pay for or reimburse the cost of printing or mailing materials supporting or opposing a candidate or soliciting contributions.

Fundraisers or other receptions or events which support or oppose a candidate or raise funds for a candidate cannot be held on organization property.

Organization equipment may not be used to support or oppose a candidate.

Materials supporting or opposing a particular candidate may not be placed in employee interoffice mailboxes, pay envelopes or other organization communications.

The organization’s mailing list, including a mailing list of employees, as well as a list of supporters, may not be provided to a candidate or otherwise used to support or oppose a candidate. This includes the use of the organization’s mailing list by an executive or board member of the organization to contact employees or supporters to solicit support, opposition, or contributions to a candidate.

The organization should not provide a forum for discussions of political candidate’s staff meetings. Placing political issues or candidates on the agenda for staff meetings or otherwise encouraging such discussions should be avoided.

Sponsoring voter registration drives or permitting voter registration drives to be held on organization property should be avoided.

Obviously this list does not include all scenarios that a §501(c)(3) may encounter. The concept being communicated is that a board member, officer or employee may participate in political activities so long as it is clearly understood that, although the individual is connected with the organization, he or she is not acting on the organization’s behalf. More detailed guidance can be found in Rev. Rul. 2007-41, in which the IRS provides examples of acceptable and unacceptable campaign involvement. The IRS website (nonprofits and charities section) has additional resources, including answers to frequently asked questions on this topic. By providing this guidance to individuals connected with the organization, the organization can minimize exposure related to participating in political activities, thereby protecting the organization’s tax exempt status.
Upcoming HFMA Events

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<thead>
<tr>
<th>Month</th>
<th>Event</th>
<th>Location</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>March '16</td>
<td>Spring Institute</td>
<td>Louisville</td>
<td>17 - 18</td>
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**March 17-18, 2016**

*Spring Institute*
U of L Shelby Campus– Louisville, KY

Hotel reservations can be made at the Embassy Suites on Hurstbourne Lane

It’s our **50th** anniversary! We will be having a “Taking it back to where it all began” social outing. More information to follow

For more information or to register for these upcoming events please click [here](#)
KY Chapter Sponsors

Be sure to check out all of our 2015-2016 sponsors by clicking on their names

Platinum Sponsorship:

- experience
- Commerce Bank
- DEANDORTON
- MEDS

Gold Sponsorship:

- Cleverly & Associates
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- Revenue Recovery Corporation
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- Credit Bureau Systems, Inc.

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- MedAssist Solutions

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- Ernst & Young
- Franklin Collection Services, Inc.
- Frost-Arnett
- GLA Collection Company
- HIS Financial Services
- Medical Reimbursements of America
- MedShield, Inc.
- Mountjoy Chilton Medley, LLP
- Patientco
- PNC Healthcare
- ProAssurance Casualty Co.
- Quadax
- RevSpring, Inc.
- RSource
- Rycan– Revenue Cycle Solutions
- UCB, Inc.

Interested in becoming a corporate sponsor? Please click here for more information
Happy Anniversary!

35 years
Joe A. Bachmeier

30 years
Michael W. Gough
James A. Morris
Gary J. Ermers

25 years
Charles D Black Jr.

20 years
Bonnie K. Ciresi
John C. Hill

15 years
Patricia Major
Mukesh Yadav
Kimberly S. Muncy
John D. Britt

10 years
Anthony W. Montelisciani

5 years
Gary Brodarick
LaSandra L. King

1 year
Maria C. Rankin
David Pape
Chris Resing
Daniel Smith
Susan Rose
Jessica S. Bowen
Bryan Aldridge
Amanda Duckworth
Brandon Allen
Justin Hubbard
Jacqueline Todd Washington

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Helping patients is our reward

MEDS is an industry leader in Eligibility processing services. Our proven methods have produced unprecedented results for our clients. Our Eligibility Specialists are highly trained, highly compassionate individuals with a complete understanding of both the patient and hospital needs. MEDS will support our valued clients with adoption strategies in response to the implementation of the Affordable Care Act. The majority of our patient advocates are Certified Application Counselors and are adept at helping patients enroll for health insurance coverage through the marketplace. Our patient advocates will diligently work to obtain timely program approvals for Medicaid, SSI/SSDI, or any entitlement/charity program available.

Our Eligibility Specialists are deployed at the client’s designated access points at the facilities to ensure we can complete our interview and discovery process while the patient is at your facility. The staffing model deployed is customized to each facility based on peak times and desired coverage for specific intake points. Our Eligibility Specialists conduct point of entry and bedside interviews of uninsured and underinsured patients to determine the potential sources of reimbursement. The MEDS team will follow up and follow through with your patients in order to complete the eligibility determination. MEDS offers a full continuum of services to assist your pre-visit efforts including securing patient payment before or at Point of Service.

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Job Function: Finance

Director of Critical Care
B.E. Smith
Louisville, KY
Industry: Hospital & Health Care
Employment Type: Full-Time
Experience: Not Applicable
Job Function: Management

If you would like to post a job opening at your firm please contact Becca Burrus
rburrus@blueandco.com