

# Local Notes

Central New York HFMA Chapter

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To get your company name listed here  
Contact Eric Fehrman at  
(315) 446-3600

## Get Involved!!

In case you missed it in your annual directory, your local HFMA chapter has a lot of ways for you to participate and make your membership better. Here is a sample:

**Membership:** The membership committee is focused on expanding the Chapter's membership base. It recruits and welcomes new members, follows up with members that have not renewed and produces the annual directory.

**Long-Term Care Committee:** This committee puts together specialized education sessions pertaining to long-term care members.

**Education/Programs:** This committee does everything associated with the education sessions for the chapter. From planning to registration to the evaluation sheets, this committee focuses on getting you the information you need.

**Special Events:** This is the committee that puts on the fantastic Networking events including last years' baseball game and awards presentation. (See the last page of the Newsletter for details on this year's awards presentation.)

This is just a few of the committees that the Chapter has. Head over to the website to see what else you can become involved with. If you are interested in joining any committee or becoming a board member, you can contact President Matt Huber at [Matthew\\_T\\_Huber@KeyBank.com](mailto:Matthew_T_Huber@KeyBank.com).

## *A Word from our Chapter President*

Dear Fellow HFMA Member,

What an exciting time to be a member of HFMA! There are numerous changes in effect for this year and more to come. Our goal as your chapter Leaders is to enhance the educational programming being brought to you, expand our membership base and streamline many processes necessary to make HFMA the 1<sup>st</sup> stop for all Healthcare Financial Professionals.

In May 2006, the HFMA National Board of Directors approved a recommendation to incorporate all HFMA chapters in Illinois to achieve administrative streamlining and to reduce potential liability for HFMA's members and volunteer leaders.

Currently, chapters operate as unincorporated associations affiliated with the National organization. When a chapter amends its bylaws, it must comply with applicable state laws that can vary considerably from state to state. By incorporating all chapters under Illinois law, chapter bylaws, policies, and procedures will need to comply with only one state's laws and can therefore be more consistent with HFMA's documents and with those of other chapters. In addition, Illinois law is flexible and provides broad and significant limitations on liability of officers, directors, and members. HFMA National will undertake primary responsibility for the initial filings as well as for processing administrative filings for annual compliance.

In order to achieve incorporation for all chapters, each chapter's leadership must ask its members to formally approve a resolution for the HFMA of Central NY's Board of Directors to create a new nonprofit corporation under the laws of the State of Illinois and that the officers can transfer all the assets of the current chapter to the new HFMA chapter (primarily this means our savings and checking accounts). Lastly, it will allow the Board Members to dissolve the current chapter.

In typical Central NY Chapter style, we have scheduled a Special Meeting of the Members, in conjunction with an Awards and Networking Event. Hopefully you've already received your notice of the February 8, 2007 Meeting/Party – FREE TO ALL MEMBERS - at Coleman's Tavern. RSVP information is included in this Newsletter and on the HFMA of Central NY web site <http://www.cnyhfma.org>.

Lastly, we have included a multitude of additional information in this quarter's newsletter. I encourage you to join us for all the upcoming education seminars and Meeting of the members.

My door, phone line and email are always open to you the members. Please contact me at anytime for ideas, information, or if I can help you in anyway.

My most sincere wishes to you, your family, and organizations in 2007.

Matt Huber  
HFMA of Central New York Chapter President

From the HFMA Website....

## Total Employee Development for Healthcare Organizations

By: Scott MacStravic, PhD

There are three main elements and goals in customer relationship management (CRM) – 1) acquiring customers who promise and deliver the optimum benefit for their cost to the firm; 2) retaining them for as long as possible, or at least as long as they continue to deliver at least a decent ROC (“return on customer”); and 3) developing them over their “customer lifetime”, so that they increase their benefit to the firm, while not threatening their longevity.

As a career marketer, I have always been interested in all three purposes of CRM and their impacts on ROC. But as a compulsive meddler, I have also been interested in the adaptation of the CRM/ROC concepts and techniques to other sets of “customers” with respect to healthcare organizations. In my last position before retiring, as Vice President for Strategy and Marketing for a multi-hospital system in Denver, I was explicitly responsible, at least for a while, for physician relationships, including a program I inherited from the CEO involving “sales reps” who regularly visited physicians in order to boost their referrals to medical staff physicians, and admissions to our hospitals, and were paid bonuses based on their success.

I was also involved in employee relations, at least to the extent of devising and implementing annual employee surveys, and advising on recruitment and retention issues. But the potential for “Employee Relationship Management” and “Return on Employee”, based on the CRM/ROC counterparts eluded me during my career. Nobody really thought of marketing or marketers as experts in human resources management, though I was involved in employee satisfaction surveys at the last two positions I held, both in multi-hospital systems, for a total of fifteen years.

And the most promising, yet untapped application of these two concepts, at least to my mind, appears to be in employee development, though this obviously includes both recruitment and retention of the best possible performers in the first

## CAREERS

Looking for a job?  
Do you have one to post?

Then check out the CNY HFMA website!

Several New Positions have been added:

### Charge Description Master Coordinator

Nyack Hospital  
Nyack, NY

### Senior VP and CFO

Tyler & Company

### Finance Director

St. Luke Health Services  
Oswego, NY

### Audit Manager

CHAN Healthcare Auditors  
Albany, NY

### Vice President and CFO

Schuyler Hospital  
Montour Falls, NY

For more information on any of these positions, or to see more opportunities please visit [www.cnyhfma.org](http://www.cnyhfma.org) and click on the “careers” link.

If you would like to post a position, please put your listing into either a Word or pdf file and email it to either Matt Huber at [Matthew T Huber@Keybank.com](mailto:Matthew_T_Huber@Keybank.com) or Michele Mecomonaco at [michelemecomonaco@cgh.org](mailto:michelemecomonaco@cgh.org).

place. And the two best, yet to be fully exploited opportunities for improving ERM and ROE seem to be in the synergistic areas of employee health management (EHM) and pay for performance (P4P).

EHM offers opportunities for significant, even dramatic reductions in labor costs, which typically represent something like 75% of total operating costs in HCOs, where cost cutting is paramount wherever possible. Hospitals have proven success in reducing their employees sickness care costs (Providence Everett in Washington is an example) and even their WC costs, absences and turnover as well (Fairview Health Services in Minneapolis). Moreover, other employers have reported added performance benefits such as improved customer satisfaction and new customer revenue resulting from healthier employees (Standard Life Healthcare in the UK).

On the other hand, my personal preference is that EHM be labeled “employee” or “personal” health development when it is presented and marketed to employee prospects. This will make clear that EHD is part of the HCO’s overall staff development strategy, and promote EHD’s being integrated with other developmental efforts. Moreover, it is at least likely that employees will prefer being “developed” to being “managed”, as all employees move more toward independence and autonomy in the best performing organizations. And being “developed” offers a far better foundation for improving employee retention than does being “managed”.

P4P fits well with EHM by offering what may be an additional extrinsic reward for employees who become and/or remain healthy and good performers. Many employers pay directly for employees who participate in EHM programs, for example, while since healthier employees perform better, they could also gain P4P bonuses for their better performance. And like EHM, P4P tends to improve employee retention, particularly among good-performers, since poor-performers tend to go where they are not paid on a P4P basis, while good performers tend to remain where they are.

The combination of EHM and P4P offers a new basis for recruiting good performers, since most employee prospects like at least the idea of having an employer concerned about and invested in employee health, while good performers are likely to be attracted to employers who pay them extra for being good performers. It is likely to be equally effective in retaining good employees, since both the experience of gaining health and financial benefit combinations from both, and the anticipation of gaining even more such benefits in future are sure to promote retention of precisely the kinds of employees that HCOs want to retain.

Moreover, both EHM and P4P should at least be instrumental in supporting other HCO efforts to develop employees, via training, education, mentoring, succession planning, work-life balance programs, etc. And like these programs, both have been shown to improve the quality and quantity of employee performance and thereby of the HCO’s performance as well. The CRM/ROC models fit themselves almost perfectly to those HCOs that aspire to be “high-performing” organizations, and to make the most of whatever P4P opportunities they are already taking advantage of or await them. [L. Redd & R. Champion “Fit for the Future: A Road Map to High Performance in US Health Care” Accenture.com 2006]

# Education Wonderland

It's that time of year again - the Education Committee has three great offerings ready for you with more to come.

## ***February 13<sup>th</sup> Revenue Cycle Day - A full day event covering:***

- Ten questions Leadership Should be Asking About Their Revenue Cycle
- HIM and Patient Finance Working Better Together
- Measuring Up; and Interactive Workshop About Using Benchmarks to Improve
- Financial Performance
- Managing Denials
- Ensuring Patient Financial Clearance

Head to [www.cnyhfma.org](http://www.cnyhfma.org) for more information and registration

## ***Save the Date for:***

### ***March 5<sup>th</sup> Annual Medicare/Medicaid Regulatory Update***

- Gary Fitzgerald President Iroquois Healthcare Alliance will present
- John Gahan Assistant Director NYS Department of Health Bureau of Primary & Acute Care Reimbursement
- Bruce Lombardo Health Program Administrator II NYS Department of Health Office of Medicaid Management speaking on the "New DSH reporting"
- Others to be scheduled

### ***March 29<sup>th</sup> Annual Cost Report Update***

- DOH representatives
- KPMG
- Others to be scheduled

Have an idea for a session? Contact Anita Anderson at [anita.anderson@sjhsyr.org](mailto:anita.anderson@sjhsyr.org).

# Welcome to the Chapter!

Alice Kwan  
Financial Manager  
Mount Sinai School of Medicine

Patricia Ungemach  
Manager, Financial Planning  
United Health Services Hospital, Inc.

David Mannes  
Director of Finance  
Our Lady of Lourdes Memorial Hospital, Inc.

## Member News...

We are always looking for updates on members or your places of business. If you have something that you would like to suggest for the newsletter, please contact Michele Mecomonaco at [michelemecomonaco@cgh.org](mailto:michelemecomonaco@cgh.org).

# Party!!

... NETWORKING EVENT... MEMBER MEETING... WHATEVER YOU WANT TO CALL IT.

COME JOIN US AT **COLEMAN'S IRISH PUB** ON THURSDAY **FEBRUARY 8<sup>TH</sup>**.  
MEMBERS ATTEND FOR **FREE!** NON-MEMBERS ARE \$20.

OPEN BAR STARTS AT 5:30 WITH THE ANNUAL MEMBERSHIP MEETING STARTING AT 6:15.  
THE ANNUAL AWARDS PRESENTATION WILL BE AT 6:30 AND WE ENCOURAGE YOU TO STICK AROUND AFTER FOR NETWORKING.

## *SPECIAL THANKS TO OUR CO-SPONSORS:*

KEY BANK  
LABORATORY ALLIANCE OF CENTRAL NEW YORK  
KOPP BILLING AND COLLECTION SERVICES

PLEASE RSVP BY **FEBRUARY 2<sup>ND</sup>** TO MIKE STOLICKER AT 442-4924  
HOPE TO SEE YOU THERE!