



**hfma™** southern california  
healthcare financial management association



**hfma™** northern california chapter  
healthcare financial management association



American Association of Healthcare Administrative Management

**The Southern & Northern California Chapters of HFMA and  
The Southern California Chapter of AAHAM**

Proudly Presents

**CHAPTER EDUCATIONAL  
GEOGRAPHIC PROGRAM**

***New Technologies and Best Practices in Healthcare Finance:  
A Payment Processing Boot Camp***

Friday  
February 20, 2009

**Kaiser Permanente Fontana Medical Center**  
Palm Court II Call Center Conference Rooms  
17284 Slover Avenue  
Fontana, CA 92337  
Free Parking

**7:45 - 8:15 a.m.      Registration & Continental Breakfast**  
**8:15 - 8:30 a.m.      Announcements**

<b>8:30 – 10:00 p.m.</b>	<b>Program</b>
<b>10:00 -10:15 a.m.</b>	<b>Break</b>
<b>10:15 – 12:00 p.m.</b>	<b>Program (continues)</b>
<b>12:00 p.m.</b>	<b>Conclusion</b>

**This course is relevant for:**

- Revenue cycle directors** who wish to automate 100% posting of health plan payments and improve denial management results
- Business office managers** who want to implement image-document management
- Patient Access directors** who wish to increase point of service collections
- Controllers** who want to improve the efficiency of cashiering and reconciliation for all payment processing while reducing risk of fraud.
- Cash managers** who want to learn about the latest in bank products and services

This program will present tools available to providers to automate payment receipt and posting for front end point of service payments and back office health plan and patient statement payment processing. Participants will perform a self assessment against “best practices” for cashiering, posting efficiency and accuracy, accounting controls, HIPAA and PCI compliance and related metrics.

Participants will learn from how to plan for implementation of image lockbox and electronic claims payment, HIPAA compliant ERA and EFT receipt and point of service collection with related estimation tools used by patient access staff.

**Your faculty:**

**James J. Moynihan**

*SVP, U.S. Bank, MBA, FHFMA, CTP and CHBME*

Mr. Moynihan is the Revenue Cycle Executive of US Bank in its Healthcare Payments Division. He has 30 years of banking and consulting experience and has specialized in healthcare for over 15 years. His background includes acting as co-chair of the ANSI X12 Payments Work Group that produced the 835 EDI standard and he authored the first implementation guideline for that standard. His many articles have appeared in the, Healthcare Financial Management magazine and many other publications. Mr. Moynihan is also a commissioner of EHNAC the network accreditation organization for clearinghouses, banks and third party medical billers.

**Rena D. Price**

*CPA, CHBME, CMPE*

Rena D. Price an HBMA member with extensive revenue cycle experience. As a KPMG alumnus focused within the healthcare industry for over 20 years, she has facilitated multiple revenue and process improvement initiatives within key segments of the healthcare delivery system. Her background includes executive and leadership roles within one of the nation's largest publicly traded health benefits companies, as well as comparable experience in the provider sector. Previous positions include finance director for a hospital, COO of a pathology lab and CEO of a multi-specialty billing company.

**REGISTRATION FORM**

**HFMA Education Program  
Kaiser Permanente Fontana**

February 20, 2009

***Registration Fees***

	<b>Pre-Registration to Feb 9, 2009</b>	<b>Rec'd after Feb 9, 2009</b>
HFMA/AAHAM Member	\$55.00	\$75.00
HFMA/AAHAM Certified Members	\$40.00	\$45.00
Non-Members	\$80.00	\$100.00
Three or More from the Same Facility	\$45.00. <b>Pre-Registered only must be submitted together.</b>	

**NOTE:** If more than one person from your company is registering, please copy and use separate forms.

**Refunds must be requested in writing 72 hours prior to the seminar by fax to (714) 844-9354**

Name: \_\_\_\_\_

HFMA AAHAM HASC Member# \_\_\_\_\_ Chapter \_\_\_\_\_

Member Certification FHFMA CHFP CPAT CPM

Title: \_\_\_\_\_

Company: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mailAddress: \_\_\_\_\_

**(please print clearly)**

Amount Paid \$ \_\_\_\_\_

**Payment Options:**

Check One: VISA MasterCard American Express  
Card # \_\_\_\_\_

VISA/MC ONLY-3 digit CVC2 # \_\_\_\_\_ (Located on back of card after credit card #)

Expiration Date: \_\_\_\_\_

Print Cardholder Name: \_\_\_\_\_

Billing Street Number (ex: 439) \_\_\_\_\_ Billing Zip Code \_\_\_\_\_

OR Check Check # \_\_\_\_\_

**Please Make Checks payable to:** HFMA Southern California Chapter  
**Mail check to:** Lori Kuwahara  
P.O. Box 18687, Anaheim, CA 92817

**Contact Info: Lori Kuwahara (323) 266-HFMA (4362)**  
**Email registrations to lori.kuwahara@gmail.com or fax to (714) 844-9354**  
**NOTE: Confirmations will be sent by E-mail prior to the event.**