HAWKEYE HIGHLIGHTS

Fall 2009



Fun and Fundamentals for Fall Conference

Day Equsquiza - Featured Speaker

Written By: Melynda Crawford, CPAM

Day Equsquiza

Once again the Hawkeye AAHAM Chapter will be holding their annual fall conference at the Johnston Hilton Garden Inn on Sept. 17th and 18th.

Roundtable topics are being generated along with lining up speakers. The feature presenter is Day Egusquiza who has over 28 years of experience in health care reimbursement, hospital business operations, contracting and compliance implementation. She is known as an entrepreneur in hospital and physician practice accounts receivable management as well as a leader in redesigning numerous organizations. Day's strength is her ability to "operationalize" complex regulations into teachable concepts.

Equsquiza will be delivering a talk on *Indentifying Revenue Capture Opportunities- thru Charge Master and Charge Capture Ownership.* This presentation will focus on the ideas and process for ensuring the ongoing integrity of the charge master and the department head's integration into all aspects while not forgetting who the audience is for the CDM. Various implementation issues will be discussed with the emphasis on the department head's involvement as being key.

In planning this conference, the Hawkeye Chapter committee is interested in getting suggestions from members about potential roundtable discussion topics along with any member who is interested in hosting a roundtable discussion. Please e-mail any topic suggestions and if you would like to volunteer to be a host to Tara Spidle at tspidle@d-c-h.org.

In past meetings, payers have been invited to present information. Send along any suggestions for payer presenters to the aforementioned e-mail address. IME, Wellmark, Medicare and United Healthcare have offered presentations.

This conference promises to be both educational and entertaining. Plans are being hatched for a particularly unique hospitality experience. Members are advised to polish their gaming skills.

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HAWKEYE CHAPTER ADMINISTRATION OFFICERS & BOARD MEMBERS

Pam Brindley Tara Spidle Kristina Gursky Connie Dudding Luke Gruber Melynda Crawford Vera Cummings Shari Mitchell Diana Hiatt Pam Brindley

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Presidents Message

Dear AAHAM Member:

Live Long and Prosper....

Sorry, I had to do that. I'm still floating in space after seeing the latest *Star Trek* movie. Never in a million light years did I ever think anyone could replace William Shatner...

On a more earthly note, much planning and preparation is being done in advance of the Hawkeye Chapter AAHAM's fall conference scheduled for Sept. 17th and 18th at the Hilton Garden Inn located in Johnston, IA at I-80 and 86th Street. While planning this meeting, Tara Spidle is putting an emphasis on FUN and FUNDAMENTALS. It promises to be both educational and entertaining. Day Egusquiza will be a featured speaker. Her talk will center on *Identifying Revenue Capture Opportunities- thru Charge Master and Charge Capture Ownership.*

Melynda Crawford is concentrating on making this a FUNTASTIC experience. Be sure to sharpen up your gaming skills. Preliminary plans for hospitality include a Wii Bowling Challenge and a Poker Tournament with prizes awarded at the meeting the next day.

I would like to seriously encourage all members to consider becoming involved in the AAHAM Hawkeye Chapter. You don't have to be a board member in order to participate on some of the committees. We are always looking to "beam up" new recruits with fresh ideas. Who knows, maybe someday we'll recruit William Shatner to do a presentation about saving money on Priceline.

Roundtable discussion topics and presenters are being formulated at this time. A future President's Message will provide more specific details. From October 14th to 16th I will be journeying to another dimension for the Fall ANI in Scottsdale, AZ. I expect to return with much information and many new ideas which I will be sharing in a future President's Message. Any members who would like to attend this meeting are highly encouraged to do so and you don't even have to be a Trekkie. Since budgets are tight, the conference organizers have designed the ANI to cost less than \$200 per day for meals, CEUs and education all in one place. Many networking opportunities will also be available for helping to build relationships and give members an edge in today's competitive economy and job force.

May the Force Be With You,



Respectfully, **Pam Brindley** President

P.S. Yes, I know the closing was not from *Star Trek*. I like *Star Wars*, also- the first three.



THE HEALTH CARE STATUS QUO: Why lowa Needs Health Reform

Submitted by David Cartier, Outreach Services Reprinted from: http://www.healthreform.gov/reports/statehealthreform/iowa.html

Congress and the President are working to enact health care reform legislation that protects what works about health care and fixes what is broken. Iowans know that inaction is not an option. Skyrocketing health care costs are hurting families, forcing businesses to cut or drop health benefits, and straining state budgets. Millions are paying more for less. Families and businesses in Iowa deserve better.

IOWANS CAN'T AFFORD THE STATUS QUO

- Roughly 1.9 million people in Iowa get health insurance on the job¹, where family premiums average \$12,206, about the annual earning of a full-time minimum wage job.²
- Since 2000 alone, average family premiums have increased by 88 percent in Iowa.³
- Household budgets are strained by high costs: 19 percent of middle-income Iowa families spend more than 10 percent of their income on health care.⁴
- High costs block access to care: 8 percent of people in Iowa report not visiting a doctor due to high costs.⁵
- Iowa businesses and families shoulder a hidden health tax of roughly \$600 per year on premiums as a direct result of subsidizing the costs of the uninsured.⁶

AFFORDABLE HEALTH COVERAGE IS INCREASINGLY OUT OF REACH IN IOWA

- 10 percent of people in Iowa are uninsured, and 71 percent of them are in families with at least one full-time worker.⁷
- The percent of Iowans with employer coverage is declining: from 71 to 65 percent between 2000 and 2007.⁸

- Much of the decline is among workers in small businesses. While small businesses make up 76 percent of Iowa businesses,⁹ only 39 percent of them offered health coverage benefits in 2006 -- down 2 percent since 2000.¹⁰
- Choice of health insurance is limited in Iowa. Wellmark BC and BS alone constitutes 71 percent of the health insurance market share in Iowa, with the top two insurance providers accounting for 80 percent.¹¹
- Choice is even more limited for people with pre-existing conditions. In Iowa, premiums can vary, within limits, based on demographic factors and health status, and coverage can exclude pre-existing conditions or even be denied completely.

IOWANS NEED HIGHER QUALITY, GREATER VALUE, AND MORE PREVENTATIVE CARE

- The overall quality of care in Iowa is rated as "Average."¹²
- Preventative measures that could keep Iowans healthier and out of the hospital are deficient, leading to problems across the age spectrum:
 - 11 percent of children in Iowa are obese.¹³
 - 21 percent of women over the age of 50 in Iowa have not received a mammogram in the past two years.
 - 36 percent of men over the age of 50 in Iowa have never had a colorectal cancer screening.
 - 74 percent of adults over the age of
 65 in Iowa have received a flu
 vaccine in the past year.¹⁴



The need for reform in Iowa and across the

country is clear. Iowa families simply can't afford the status quo and deserve better. President Obama is committed to working with Congress to pass health reform this year that reduces costs for families, businesses and government; protects people's choice of doctors, hospitals and health plans; and assures affordable, quality health care for all Americans.

¹ U.S. Census Bureau, Current Population Survey. HIA-4 Health Insurance Coverage Status and Type of Coverage by State--All Persons: 1999 to 2007, 2007.

² Center for Financing, Access and Cost Trends, AHRQ, Medical Expenditure Panel Survey - Insurance Component, 2006, Table X.D.

Projected 2009 premiums based on Centers for Medicare and Medicaid Services, "National Health Expenditure Data," available at

http://www.cms.hhs.gov/nationalhealthexpenddata/.

³ Center for Financing, Access and Cost Trends, AHRQ, Medical Expenditure Panel Survey - Insurance Component, 2000, Table II.D.1.

Center for Financing, Access and Cost Trends, AHRQ, Medical Expenditure Panel Survey - Insurance Component, 2006, Table X.D.

Projected 2009 premiums based on Centers for Medicare and Medicaid Services, "National Health Expenditure Data," available at

http://www.cms.hhs.gov/nationalhealthexpenddata/.

⁴ Center for Financing, Access and Cost Trends, Agency for Healthcare Research and Quality, Medical Expenditure Panel Survey, 2006.

 ⁵ Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2007.
 ⁶ Furnas, B., Harbage, P. (2009). "The Cost Shift from the Uninsured." Center for American Progress.

 ⁷ U.S. Census Bureau, Current Population Survey. Annual Social and Economic Supplements, March 2007 and 2008.
 ⁸ U.S. Census Bureau, Current Population Survey. HIA-4 Health Insurance Coverage Status and Type of Coverage by State--All Persons: 1999 to 2007, 2007.

⁹ Center for Financing, Access and Cost Trends, AHRQ, Medical Expenditure Panel Survey - Insurance Component, 2006, Table II.A.1a.

¹⁰ Center for Financing, Access and Cost Trends, AHRQ, Medical Expenditure Panel Survey - Insurance Component, 2001, 2006, Table II.A.2.

¹¹ Health Care for America Now. (2009). "Premiums Soaring in Consolidated Health Insurance Market." Health Care for America Now. ¹² Agency for Health Care Research and Quality. 2008 State Snapshots. Available http://statesnapshots.ahrq.gov/.
 ¹³ Child and Adolescent Health Measurement Initiative. 2007 National Survey of Children's Health, Data Resource Center for

Child and Adolescent Health.

¹⁴ Behavioral Risk Factor Surveillance System Survey Data. Atlanta, Georgia: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, 2007.



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AAHAM Board Meeting Minutes

May 20, 2009

<u>Attendees:</u> Luke Gruber, John Currier, Kristina Gursky, Vera Cummings, Mike Dobbs, Connie Dudding, Diana Hiatt, Melynda Crawford, Tara Spidle, Pam Brindley, Shari Mitchell, Steph Hultman

John Currier from the National AAHAM office is attending. John is responsible for Chapter Development and has the opportunity to visit each chapter. John provided the Hawkeye Chapter with some good information:

- Make sure we are using National resources when we need to.
- Each position-chair has a national counterpart (membership, publications, etc.)
- Networking even at national level is worth membership dues alone. Good example is use of Mark Windsor to develop Hawkeye Chapter of AAHAM website (referral from IL chapter)
- National AAHAM website (<u>www.aaham.org</u>) is a great source of information
- Corporate sponsors-refer to them as partners and not vendors. Also, think outside the box. Examples include GA chapter having breakfast sponsored by Costco. Other retailers can bring good benefits to the chapter
- Highlights—add membership application. Steph needs in word— Kristina will follow up with National to see if they have available. Also add a movers and shakers page.
- National level-what are they doing to attract attendees to ANI? Some concern

about shortage of corporate partners and attendees due to budget cuts

• Operations report was due at end of March. We scored 99/100. Lost point due to lack of corporate partners.

Chapter Excellence:

- This is not a one-person task. Too much is involved for one person to handle.
- Melynda and Pam have volunteered to be graders this year.
- We will need a Chapter Excellence committee
- Very detailed information needed as part of application
- We could win 2 free ANI registrations
- Time period evaluated is from July to June
- General membership needs to know we are applying, and what they can do to score points towards chapter excellence.
- VA and WI chapters are good resources. Last Journal from National has information
- Pam/Tara/Kristina will get together and get survey questions for members to gauge activity.

Bylaws-Need to Update and Review:

- Luke and Pam have reviewed these and identified a few small changes
 - o 1st page-Journal name
 - Publications changed to Communications Committee
 - Added more certifications beyond just professional
- Membership must vote on the changes.
- All board members need to review and vote on changes before membership votes
- Pam will send info out electronically

• Bill Carlson can provide us with information for wording on the vote from the IL chapter.

National Communications Committee:

- Pam is serving on the national communications committee.
- LinkedIn.com is being looked at as a way to reach membership.
- IA is being used as a test to see if linkedin.com can be beneficial
- Discussion had over some email servers blocking linkedin.com from usage.
- National also testing Google with healthcare certification as tag words.

National election deadline is May 20th for anybody looking to run for national office.

National AAHAM scholarship applications are due May 31st. We will put more information in our highlights in the future to promote this.

ANI-Check the national website and LinkedIn.com for more information and updates.

MN/WI Bi-State meeting in July and Music Chapter meeting is in July. We will send details to our membership for the membership's consideration.

Hilton Garden Inn provided us with information on discounts and other benefits we may be eligible for with other vendors in the area.

The minutes from the last board meeting were approved.

CD's for the Spring Conference have been completed and will be available to each registrant of the meeting. A new table skirt is also ready to be used at the registration table. The vendor who did the skirt can also print a skirt for the lectern to help with AAHAM branding.

Treasurer's Report:

• \$21,621.63 in the bank

- All bills paid (exception of Spring 09 expenses)
- Treasury appears healthy. According to John Currier anything over \$15,000 is good

Tara's hospital is providing the projector for this meeting. IHA will not provide one anymore. Suggested we buy one for the chapter.

Bridgefront may be available to present information at the Fall 2009 meeting.

Everything is in place for Spring 2009 meeting. Suggested we ask our membership to submit questions to the payers prior to the meeting so payers are aware and prepared for our questions.

There is the potential to have a joint meeting between the AAHAM group and the association for medical records. Becky Venner can send a list of focal points that may be impacted by both groups.

Thursday night at the hospitality suite Steph Hultman will ask people to leave when it has been determined the room has been open for long enough.

Fall 2009 Meeting:

- Scheduled for September 17-18
- Thursday-Day Esquinza will be presenting. Scheduled for 2 ¹/₂ hours
- Roundtables Thursday PM-list of topics ask members for their feedback
- NE Chapter had panels to discuss how hospitals are handling certain topics
- A future phone call with Diana, Steph, Tara, Melynda, Pam, Kristina will be scheduled to discuss meeting more in depth
- Mike has information on provider based from Phil Schmidt in South Dakota
- Friday morning will be payers

May 2010 meeting looking at 5/27 and 5/28. September 2010 meeting looks like the 16-17.

Continued on Page 8...

Legislative Day was a success. An article was published in the last highlights. Record attendance by AAHAM members was had. Good contacts were made with Senator Grassley's people. Wonderful venue to have voice heard on healthcare issues.

We will present one member with free ANI registration. Drawing will be held 11:30 on Friday, member must be present to win.

Doing well with Corporate Sponsors—several new partners

Elections this year will have 2 board positions

Vera has compiled a book to manage the website.

Connie will be handling nominations for the election. Also, we will put out more information on how to become involved with board and with the running of the chapter. We need more volunteers to serve on a committee. A volunteer does not need to be a board member of officer to serve the chapter.



Respectfully,

Kristina Gursky Secretary



Outpatient Proposed Rule

Submitted By: Heather Hulscher

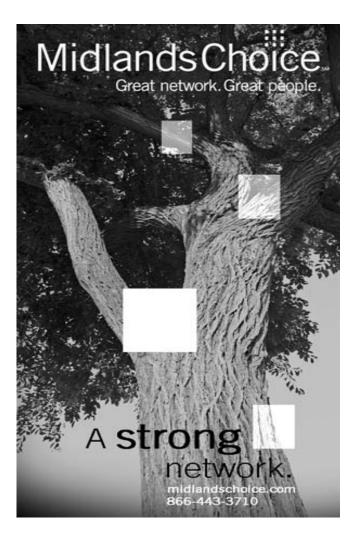
The Centers for Medicare & Medicaid Services (CMS) released its <u>proposed rule</u> on Wednesday, July 22nd updating payment policies and rates for hospital outpatient departments and ambulatory surgical centers for calendar year 2010. CMS projects that proposed payment rates under the outpatient prospective payment system would result in a 1.9 percent increase in Medicare payment for providers paid under the outpatient Prospective Payment System. Among other provisions, the proposed rule includes changes to the hospital outpatient quality data reporting program, and would establish procedures to make the data collected through the reporting program publicly available.

One of the most troubling policies in the 2009 final outpatient rule was the "clarification" of the "Incident to" rule which requires direct physician supervision for therapeutic and diagnostic outpatient services provided in both the hospital and provider-based facilities. In other words, CMS would not pay for these services if a physician was not immediately available.

After hearing concerns from the hospital and physician community CMS is making three proposals. They include:

Non physician practitioners, specifically physician assistants (PA), nurse practitioners (NP), clinical nurse specialists (CNS), and certified nurse-midwives, may directly supervise all hospital outpatient therapeutic services they may perform themselves in accordance with their State law and scope of practice and hospital-granted privileges, provided they continue to meet all additional requirements. Clinical psychologists may already provide direct supervision.

Continued on Page 9..



• CMS also made clarifications applicable to Critical Access Hospitals that would be to require a physician to be present 24/7.

However, direct physician supervision remains required for cardiac, intensive cardiac and pulmonary rehabilitation.

• For services provided on a hospital's main campus CMS is proposing that direct supervision means that the supervisory physician or non physician practitioner must be present on the same campus, in the hospital or the on-campus provider-based department, and immediately available to furnish assistance and direction throughout the performance of the procedure.

CMS is proposing to define "in the hospital" as meaning areas in the main building(s) of a hospital that are under the ownership, financial, and administrative control of the hospital; that are operated as part of the hospital; and for which the hospital bills the services under the hospital's number.

The supervisory physician may not be located in any other entity, such as a physician's office, or hospital-operated provider such as a skilled nursing facility.

For off-campus provider-based clinics, the physician or non physician practitioner must be present on the clinic's campus. This does not mean the practitioner must be in the room when the procedure is performed.

• For diagnostic services, CMS is proposing to add a new paragraph to indicate that for services furnished directly or under arrangement, in the hospital or in an on-campus department, direct supervision means that the physician must be present on the same campus, in the hospital or the providerbased clinic of the hospital. The physician must be immediately available to furnish assistance and direction throughout the procedure.

CMS will accept comments on the rule through Aug. 31. IHA will continue its review of this rule and will provide a detailed summary to hospital CFOs. Questions regarding this rule can be directed to <u>Heather Hulscher</u> at IHA.

Corporate Sponsors

The Hawkeye Chapter wishes to thank its Corporate Sponsors. Their generous financial contributions help ensure our chapter meets its goals and objectives, and allow us to provide educational programs, social functions, training programs for member certification, and the *Hawkeye Highlights* newsletter.

Platinum	AHC/CBA The CBE Group, Inc. H&R Accounts, Inc.
Gold	Hauge Associates, Inc. Eagle Recovery Associates DSG The Data Systems Group
Silver	AAMS General Service Bureau, Inc. Midlands Choice Professional Service Bureau, Inc. Relay Health

Bronze Emdeon Mail Communications Group



AAMS excels in bad-debt healthcare recovery services and "out-sources and supports" our state-of-the-art web-based recovery platform so you can recover your own accounts.

Luke Gruber: 515.225.0525 Toll Free: 877.770.5252

Mark Your Calendars

Spring 2010 AAHAM Meeting

May 27-28, 2010

Hilton Garden Inn – Johnston, IA Des Moines/Johnston, IA

Website Alert

The Iowa Hawkeye Chapter is excited to announce our website for members at <u>www.hawkeyeaaham.org</u>. The site includes:

Chapter officers and board members Upcoming events-Calendar of events Chapter Bylaws Sponsor information Membership information Link to the National AAHAM website Current and Past Newsletters Photos from past meetings

Watch for more information to be added every month. Since the site is new, we are looking for any ideas for additional information from our members. Please contact board member Vera Cummings at <u>vcummings@bchealth.info</u> with ideas.

HAWKEYE CHAPTER OF AAHAM

TREASURER'S REPORT FOR PERIOD ENDING: 6/30/2009

B ALANCE SHEET		
ASSETS:		
Cash in Bank	\$14,580.05	
Certificate of Deposit TOTAL ASSETS	\$7,500.00 \$22,080.05	
JABILITIES:	¢ ,000000	
Payables	\$0.00	
COUITY:		
TOTAL LIABILITIES AND EQUITY	\$0.00	
OPERATING STATEM	ENT	
EVENUES:		
Corporate Sponsors	\$5,700.00	
Registrations 2009 Spring	\$8,030.00	
Certifications	\$1,800.00	
TOTAL REVENUE	\$15,530.00	
EXPENSES:		
Travel	\$3,790.90	
Certifications		
Web Design	\$770.00	
Insurance Bond and Liability	\$575.00	
Spring Meeting	\$6,297.18	
Miscellaneous	\$290.98	
Membership Dues	\$225.00	
TOTAL EXPENSES	\$11,949.04	
NET INCOME (LOSS)	\$3,850.96	
BEGINNING CASH BALANCE	\$14,580.05	
ENDING CASH BALANCE	\$18,161.01	
OTHER (INCREASE OR DECREASE IN CASH) FUTURE PAYABLES		
ACCRUED CASH BALANCE	\$14,580.05	



Connie Dudding Chapter Treasurer



Linking into LinkedIn

A Business Networking Site and More Submitted By: Pam Brindley, CHFP, CCAE, CPAT, CCAT

In today's challenging economy and work environment, business networking has become even more vital. For individuals and businesses seeking new relationships and establishing networks, LinkedIn is to the business world what Facebook is to the social networking world.

"LinkedIn is an invaluable tool for groups like AAHAM; especially for local chapters," according to David Cartier, Director of Business Development with Outreach Services in Minneapolis-St. Paul, MN. "We all get a lot of e-mail. Some of it is vital and needs to be acted on right away; another portion is valuable, but can wait until there is time to go through it, and then there is SPAM."

Another LinkedIn feature that AAHAM members have found to be invaluable have been discussion threads about current issues in healthcare. For instance, AAHAM member Gina McNaughton of the McNaughton Group in Los Angeles recently commented in a discussion group titled: "The White House wants to know: What are the most important issues for small businesses when it comes to health care." The original post was made by Christina Romer, Chair of the Council of Economic Advisors.

"What was great about this was that over 1,500+ LinkedIn users responded to which the White House held a press conference LIVE to answer a few of the questions. Great to see how the social network can affect the White House, too. Even after the LIVE broadcast more folks participated on LinkedIn," said McNaughton.

Rolene Lampi, Director of Business Services at St. Luke's Hospital in Duluth, MN also enjoys the discussion threads in the program. "I have found LinkedIn useful to review current topics and read comments. It has also been beneficial to locate peers in the industry and learn more about their initiatives. I think it's a great networking tool," commented Lampi.

Besides the discussion threads, the multiple networking advantages of LinkedIn have been realized by Richard Rogers, Vice President of Strategic Services Magnet Solutions in Milwaukee, WI. "I use and enjoy LinkedIn because it has allowed me to stay connected with business colleagues and associates. In addition, I have found it helpful in finding and reconnecting with former business contacts from years ago. In two cases, I was actually able to glean business referrals from colleagues I had lost touch with but found on LinkedIn," said Rogers.

The basic LinkedIn service is free and quite easy to join. At the LinkedIn website members can perform a wide variety of functions. The Home Page features a toolbar on the left-hand side of the screen that conveniently lets members perform a variety of tasks. The parts of the toolbar are *Groups*, *Profile*, *Contacts*, *Inbox* and *Applications*.

Groups. Here members in your network can write comments about topics that you post in this section. People also have the option of privately replying to a group if they do not want their comments read by other members in your network. This feature has the same appearance and functions in the same manner as Facebook.

<u>Profile.</u> After becoming a member, one of the first steps is to create a professional profile that summarizes yourself along with your business. Your background information along with a photo of yourself is posted here. Members can also utilize a program named Slide Share to create brief business presentations containing information associated with the nature of your work.

<u>Contacts</u>. The Connections portion alphabetically lists all of the people who are part of your network. The Imported Contacts alphabetically lists people who you have imported into your network. And finally, under the Network Statistics section, you are able to access your own connections, your connections' connections (2nd degree connections), as well as your 2nd degree's connections (called your 3rd degree connections). From this network, individuals can learn of and search for jobs, business opportunities, and people.

Inbox. Messages can be composed, received and stored in this location.

<u>Applications</u>. In this last section, members can link to other web sites for extending their network. Some options include Google Presentation, Blog Link, Word Press, Company Buzz, Reading List by Amazon, etc.

Other LinkedIn features include "LinkedIn Answers" developed in January 2007. A free feature, "LinkedIn Answers" allows registered users to post business-related questions that anyone else can answer.

Currently 40 million users representing 150 industries around the world utilize LinkedIn as a professional networking site. Competitors to LinkedIn include Xing, Doostang and Ecademy.

An upgrade is available for your account, but entails a monthly fee. The upgrade is designed in three parts. One section is for collecting warm leads, another is for directly contacting decision makers and the last one is for building a funnel of qualified leads. For most people, the basic free service is adequate.

As with other social networking sites on the Internet, LinkedIn follows a strict privacy guideline. All connections made are mutually confirmed and individuals can only appear in the LinkedIn network by their own consent.

Volunteering for AAHAM

Written By: Kristina Gursky, CPAT, CCAT

The Hawkeye Chapter of AAHAM relies on the hard work of so many wonderful people to put together educational conferences and to keep our membership updated on the many things that affect all of you. The chapter couldn't possibly do all the great things it does if it weren't for the many volunteers taking on such tasks like making sure speakers are lined up, membership directories are published, the website stays updated, the hotel rooms are blocked at a good price, and many other events.

I am fortunate enough to be one of those volunteers. Throughout the years I've had the opportunity to serve the Hawkeye Chapter of AAHAM as the membership chairperson and chapter secretary. Volunteering to help serve AAHAM has been so rewarding. I've not only been able to help the chapter but along the way I've also been able to meet some wonderful new people and create good memories with friends I will speak with for years to come.

Our chapter needs your help if we want to continue to be successful. While there are elections for the board member and office positions, there are also several committees that could use the assistance of a good volunteer. There are hundreds of different ways you can volunteer to help your local AAHAM chapter. You can help print name badges, set up the hospitality room, submit new member profiles, contact corporate partners for goodie bag handouts....the list just goes on and on! Even if you only have five or ten minutes to help out during the conference we can find a job for you.

If you would like to take advantage of the chance to help your local AAHAM chapter please see any one of the chapter's officers or board members. We will gladly welcome any assistance you can offer!



Don't Forget AAHAM!

If you've recently had a change to your personal contact information, please let AAHAM know. If we aren't able to contact you, we can't keep you informed of all the great benefits AAHAM has to offer. So please, keep us in mind as your life changes and let us know how to reach you. To update your local chapter records, please contact Kristina Gursky, membership chair, by calling 651-481-6533, or by emailing kgursky@icsystem.com. To update your national file, please log on to www.aaham.org, click on Members Only, and after logging in, click on "Click Here to Update Your Contact Information." You may also fax your change of information to AAHAM, attn: Debra Fernandez, fax # (703) 359-7562, or you may mail your information to:

AAHAM

Attn: Debra Fernandez 11240 Waples Mill Road, Suite 200 Fairfax, VA 22030

