

# Hawkeye Highlights

Iowa AAHAM Chapter

Fall 2016

Volume 8, Issue 3

Photo By: Steph Hultman

## Message from the President.....

Well, this political season has certainly turned out to be interesting. Whatever the outcome in November, we are guaranteed that the world of healthcare and healthcare billing will continue to change. Hillary is proposing fixing Obamacare, working on getting a public option added, while looking for mechanisms to lower prescription drug costs. Donald Trump wants to repeal Obamacare and use free market initiatives to assure coverage of Americans. Me? I'm just sitting in my office thinking about how I am going to get my Medicaid claims paid correctly today.

We are all experiencing immense change in everything we do. Without the help and support of others in our field, we would be unable to keep up on these changes. It is this help and support that is the backbone of AAHAM. From the webinars offered in conjunction with HFMA, to our 2 meetings in Des Moines, to the use of email to contact fellow members, there is always a resource available to help in deciphering the many rules and regulations we face. This is not going to get easier; any and all help will be needed.

Hope you all have a safe and enjoyable Thanksgiving!

Respectfully,

Cristie Knudsen



Cristie Knudsen  
President, Iowa AAHAM

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## HAWKEYE HIGHLIGHTS EDITORIAL POLICY & OBJECTIVES

The HAWKEYE HIGHLIGHTS newsletter is published four times annually by the AAHAM IOWA CHAPTER to update the membership regarding chapter and national activities as well as to provide information useful to health care administrative professionals. Opinions expressed in articles or features are those of the author(s) and do not necessarily reflect the views of the Iowa Chapter. AAHAM, the NATIONAL AAHAM organization or the editor. Reproduction and/or use of the format or content of this publication without the expressed permission of the author(s) or the editor are prohibited. © Copyright 2013. ▲

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*It Pays to be Different!*

# 2016 Iowa AAHAM ANI Scholarship Winners

## What the ANI Scholarship means to me . . . .

Submitted By: Steph Hultman, CHFP, CRCS-I,P



Tara Spidle

### What made you apply for the AAHAM ANI Scholarship?

I attended my first ANI in 2008 in Chicago. It was a great experience, and I have been fortunate to attend several others while serving as Hawkeye Chapter president. The reason I applied for the scholarship is that I find it disappointing that our membership did not utilize the scholarship last year, and it is a great opportunity to attend a fantastic conference for free.

### Why is participating and/or attending AAHAM's ANI important to you?

I think the ANI conference is full of valuable information and the networking provides even more insight into our industry changes. Over the years, I have formed many friendships within the National AAHAM group and reach out to them throughout the year. I have been able to see through traveling with Luke Gruber and Mike Dobbs that these friendships last a lifetime.

### What advice or words of wisdom would you share with our membership about AAHAM and how being part of the organization has benefited you at your facility?

AAHAM has had a huge impact on my personal growth. I was quite shy when I first joined the organization years ago and through serving on the local chapter's board, I felt I was able to reach

*Continued on Page 4 ....*



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outside my comfort zone and really interact with people. I love being part of an organization where we all fight the same battles each day, and we find comfort in coming together to share our issues and can even serve as group therapy to each other at times. Getting to really know fellow AAHAM members has been instrumental in giving me a network to reach out to when I have a need, and so many folks willing to help you by sharing their expertise.



Laurie Gaffney

### What made you apply for the AAHAM ANI Scholarship?


I have attended 2 prior ANI's and found the information to be excellent. I applied as I knew it would help my facility with expenses to be able to send me this year. I have been working hard on the newsletter and attending the meetings and webinars so it is a great way to be rewarded from our local chapter.

### Why is participating and/or attending AAHAM's ANI important to you?

I have found that the sessions at the ANI are top notch and many presenters are staff like you and I presenting their best practices. It is a great way to broaden your peer contacts and make new friends.

### What advice or words of wisdom would you share with our membership about AAHAM and how being part of the organization has benefited you at your facility?

I have loved being a part of this group since 2002. I have made lasting friendships across the state as well as peers I can contact with any revenue cycle questions. We are able to pull together to explain our struggles to the payers and lobby for change. The education provided has been very helpful in doing my job. Our chapter is very open and willing to take suggestions for educational topics and speakers. I would suggest that everyone serve on the board at least once during their membership.

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# Four Myths About the Healthcare EFT Standard, Debunked

Written By: Priscilla Holland, Senior Director, Healthcare Payments, NACHA  
Submitted By: Laurie Gaffney

While it's been in effect since January 2014, the Healthcare EFT Standard via ACH is still a source of confusion for many medical providers.

The standard allows providers to request that claims payments be made using EFTs instead of paper checks—that is, electronically transferred from the insurer to the provider's bank account via ACH, similar to direct deposit. Health plans are required, by law, to comply.

Converting to EFTs via ACH can result in substantial cost and time savings for healthcare practices. Yet, because the standard is still relatively new, many providers have received misinformation about EFTs via ACH that could be deterring them from making the switch.

Here are four common myths about the Healthcare EFT Standard and the reasons they're false:

## **Myth: Enrollment is difficult.**

In fact, new operating rules have standardized sign-up data requirements for providers, so the process is the same, no matter the health plan.

Additionally, the [CAQH Enroll Hub](#) allows providers to fill out one form and enroll with multiple insurance carriers all at once. Clearinghouses can also assist providers with the enrollment process.

## **Myth: Receiving healthcare EFTs via ACH is costly and requires special equipment.**

Actually, the only item required to receive EFT via ACH payments is a bank account, and signing up costs nothing.

What's more, EFTs via ACH are more cost effective than many other forms of payment, including checks and virtual cards. Providers see an average savings of \$3.04 for every claims check converted to an ACH payment.

When EFTs are used in combination with ERAs—which allows for automated reconciliation of EFT and ERA and automated posting—cost and time savings increase even more. Providers can save \$7.21 per payment when they switch from checks and explanations of benefits to EFT and ERA.

Some practices may need to upgrade their practice management or accounting software to accommodate automated posting, but it's not necessary if a provider simply wants to receive EFTs.

... Continued on Page 6



**Myth: Healthcare EFTs via ACH are less secure than other methods of payment.**

In reality, healthcare EFTs via ACH are among the safest forms of payment available.

Funds are transferred directly from bank account to bank account via the ACH Network, which has been in use since the 1970s. Because EFTs are entirely electronic, using them eliminates the risk of a check being lost or stolen.

**Myth: Not all health plans offer the Healthcare EFT Standard.**

Health plans have been required by law, since January 2014, to offer the Healthcare EFT Standard via ACH to any provider who requests it. If a health plan refuses to offer the Healthcare EFT Standard via ACH, providers should speak with the company's compliance officer and, if necessary, file a HIPAA violation.

Additionally, some health plans are offering virtual cards for claims payments instead of EFTs and believe that this complies with the standard. It does not. The healthcare EFT standard is the NACHA CCD+ and must flow through the ACH Network. Providers have the option to say no to virtual cards, and all health plans must offer the healthcare EFT standard via ACH if it is requested.

It's easy to be misled by incorrect information, especially when it revolves around a new standard. To get the facts on the Healthcare EFT Standard, providers should always turn to reliable sources to research any outside information they receive. There are plenty of sources available online, including [NACHA's Healthcare Payment website](#), [NACHA's ACH Primer for Healthcare](#), and the American Medical Association's [EFT Toolkit](#) and [ERA Toolkit](#).

Priscilla Holland, Senior Director, Healthcare Payments, NACHA – The Electronic Payments Association. NACHA serves as the standards organization for the healthcare EFT standard. The NACHA Operating Rules govern the ACH Network, through which healthcare EFT standard transactions are processed.



# New AAHAM Chapter Benefit

Submitted By: Cristie Knudsen

AAHAM is offering another new chapter benefit called State Monitoring. AAHAM knows how important this is to you and has decided to make an investment in this program on your behalf. This service is provided at no charge to your chapter to help monitor top legislative issues in your state.

To get the most out of this benefit, the issue needs to be very specific. If you have the actual bill number, it assures the monitoring is extracting the appropriate data, but this is not required to participate in this program. Examples of specific requests are:

- HB 1221 regarding Medicaid presumptive Charity
- State Amendment 69 regarding becoming a one payer state
- Senate bill 216 for Worker's Comp amendments

If your topic is too broad, the data will not be meaningful and it will be difficult to obtain precise data. Examples of topics that are too broad include:

- Medicare
- OIG activity
- On-going sanctions

The Government Relations committee is available to assist you in identifying possible issues as well as distinguishing precise wording to help in your requests.

The results will be sent to chapter presidents and legislative chairs via email in a PDF format. Once the report is received, click on the blue hyperlink located under the state name. This link will provide data regarding a summary, the bill activity, sponsors and any votes that have taken place.

We're excited to offer you this new benefit to assist your chapter in your legislative advocacy efforts. "Raise the level"!

Rich Rogers, Government Relations Chair

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## Corporate Sponsors

The Iowa 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.

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## Website Alert

The Iowa Hawkeye Chapter is excited to announce our website for members at [www.hawkeyeaaham.org](http://www.hawkeyeaaham.org). 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 Becky David at

[BDavid@WaverlyHealthCenter.org](mailto:BDavid@WaverlyHealthCenter.org) with ideas. ▲



# Website Updates . . .

We have added a new page to our Hawkeye AAHAM website. We will list open supervisory and management level revenue cycle positions for our members. Someone at the facility must be a current member to use this feature.

Here is the link: <http://hawkeyeaaham.org/our-job-board/> Check it out!

If you have a position you would like to post please send it to me.

Respectfully,

Becky David



# Certification Passed Exams – CRCS-I, P

Submitted By: Sarah Sumpter, CRCS-I/P, CRCR

Congratulations to the following people on their recent certification testing! These folks were successful in obtaining their CRCS-I, P Certification. The exams were taken this past July - Congratulations on a job well done!!

Passed CRCS-I Exam in July		Passed CRCS-P Exam in July	
Margenele Carroll	UnityPoint Health - DMS	Bonnie Brock	Boone County Hospital
Vernestine Cole	UnityPoint Health - DMS	Laura Edenburn	UnityPoint Health - DMS
Arlene Danz	UnityPoint Health - DMS	Stephanie Fant	Avadyne Health
Lynn Ehrhart-Curlott	UnityPoint Health - DMS	Alissa Gardner	Avadyne Health
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Laurie Gotsch	Henry County Health Center	Angel King	Avadyne Health
Berta Heemstra	UnityPoint Health - DMS	Ana Morales	Avadyne Health
Jocelyn Hermanson	UnityPoint Health - DMS	Melanie Sayre	Avadyne Health
Mimoza Hysa	UnityPoint Health - DMS	Bridget Sheeder	Avadyne Health
Kelly Klossing	Henry County Health Center	Christina Bennett	Boone County Hospital
Catherine Krebs	UnityPoint Health - DMS		
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Marcia Smith	Avadyne Health		
Paula Vargas	Avadyne Health		
Laurel Walkowiak	Avadyne Health		
Dawn Zaiser	Henry County Health Center		

## 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 AAHAM Records please contact Stephanie Hultman, Membership Chair by calling 319-240-5306, or by emailing her at [sjhultman@mediacombb.net](mailto:sjhultman@mediacombb.net). ▲