

VIKINGLAND VIEWPOINT

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MN HFMA

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ATTENTION TO CONTRACT DETAILS PAYS OFF BELLIN HEALTH REALIZES REFRESHING REVENUE RETURNS

By Pam Brindley, Regional Account Executive, H&R Accounts, Inc. & Matt Golas

Bellin Health System in Green Bay found a key to increase the facility's financial health - simple idea - find a detail oriented person have them focus on the many individual payor contracts' financial and non-economic terms. When Wendy Schultz came on board in 2004, her task was just that straightforward - understand the contracts and make sure the terms were being honored.

By paying attention to contract details, Schultz, Bellin's Managed Care Leader, dramatically increased the health facility's financial bottom line. Since 2004, over \$7.8 million in underpayments were recovered by her team. In 2008 alone, Bellin Health recovered \$2.5 million in underpayments. In 2009, that number was \$1.7 million and in the first seven months of Fiscal Year 2010, over \$900,000 has already been recovered. In addition, almost \$580,000 in disputed claims are awaiting payment from

insurance companies. "It is crucial for health systems to monitor their payments from insurance companies," Schultz said. "Improper contract loading by insurance companies and claim processing errors have resulted in huge amounts of underpaid claims."

Before hiring Schultz, Jeff Hampton, Team Leader of Revenue Cycle Management, had identified a major issue plaguing many providers. After administration had taken painstaking care in negotiating and signing a favorable contract, it was thrown into a file cabinet never to be seen again. Hampton asked the simple question, "Are we being paid correctly?" When Schultz was hired, she had no medical background, but Hampton was confident that her business skills would translate well as she organized Bellin's contracts into a workable system. Looking back to the start of the project, Schultz

now laughs "I didn't even know the difference between a UB and a 1500."

Awaiting Schultz when she initially arrived at Bellin Health, currently home to a 167 bed acute care hospital, a 55 bed psychiatric hospital, a critical access hospital and 30 clinics, was a file cabinet full of contracts that were in total disarray. Schultz started by reading the terms of the contracts, paying special attention to the financial and non-economic terms like timely-filing limits. She took information regarding payment rates, entered it into a spreadsheet and distributed it to those on her team in the business office. Once the contracts were organized, Schultz began the process of auditing variances or anything else that appeared out of order and disputing underpaid claims.

Before long, the manual auditing process had become too tedious

Continued on Page 2

STRATEGIC PRICING — WITH A FOCUS ON THE MARKET

By Mark Jeziorski, President of Sophysical Solutions

Generating additional third party payments and improving the overall profile of your hospital's prices relative to the market is possible. By strategically setting prices in the context of the market, additional third party payments can be generated and a better price profile achieved.

A strategic pricing project with a focus on the market is a significant undertaking but one that is also worthwhile. The approach for conducting such a project has many components however, there are six key components of a successful approach. Continued on Page 3

"It is absolutely essential to involve those that work on the front line in the negotiation process,"

Cover story continued—Attention to Contract Detail

and Schultz brought in Pat Riley, Business Applications Manager, to automate the process by modeling the payor contracts. Schultz identified the terms that were valuable to her team to make sure that the hospital was being paid according to the terms of the contracts and Riley created a home grown system to identify variances in expected versus posted adjustments. Now, on a daily basis, Schultz's team runs daily variance reports. Each claim that hits the report is investigated to identify if the claim has been underpaid or if there is another type of error. Disputed and recovered underpayments are tracked on a spreadsheet and reported to Administration on a monthly basis

When Chief Financial Officer Jim Dietsche was hired in 2005, he was instrumental in making another important change - involving Schultz in the contract negotiation process. "It is absolutely essential to involve those that work on the front line in the negotiation process," Schultz said. "They can identify potential pitfalls and tighten up contract language based on payor issues they have experienced. This is valuable after the contracts are signed as well. Once a contract is in place, those working with

insurance companies on a daily basis need to be aware of pertinent information like financial terms, timely filing deadlines and payor policies and procedures."

Another piece to the correct payment puzzle Schultz's team had to master was monitoring payor refund requests. "We receive hundreds of refund request letters and many of them are not valid," said Schultz. Her team has denied over \$1.1 million in refund requests since the process began in 2008. Each refund request letter is analyzed to determine its appropriateness before a refund is made. Some reasons for denied requests include those requiring patients to pay more due to recalculation of benefits and those with incorrect contract rates.

With a net impact to the bottom line of nearly \$10 million, it is easy to see why Bellin Health has recognized the importance of this function and given Schultz the autonomy and resources to expand the functionality of the team and scope of the project. The team has grown from Schultz sifting through forgotten file cabinets on her own to, six years later, eight people tracking

contracts on a daily basis. The team now consists of four Reimbursement Specialists to monitor payments, three Refund Specialists to review refund request letters and work credit balances, and a Revenue Audit Coordinator to reduce risk by working with departments on billing compliance. "The annual salary of the entire team can be reclaimed within a month or two, so the return on investment is remarkable," Schultz said. "It is not difficult to track the tangible impact of underpayment recoveries and denied refund requests. What is not as easy to quantify is the money saved in wasted hours and the overall impact that the team has had on issues that are now being addressed at the source. It is a little difficult to imagine how many dollars could have been lost if we had not been proactive and fixed the root cause of the issues we've identified."

Schultz is proud of the system she developed and believes a similar process is not implemented by many providers. When attending conferences, Schultz shares her story with other providers and challenges them to configure their own process in order to increase revenue. Schultz is willing to lend assistance and answer any questions about implementing such a process. "In our current economy, it is so important that providers be paid according to the terms of these agreements if we're to remain financially stable."



Front row left to right: Audrey Carson, Brenda Winney, Karen Sagen , Sue Berg

Back row: Karen Shablak, Deb Vande Voort, Kristen Theisen, Andrea Engel, Wendy Schultz

Cover story continued—Strategic Pricing

1 - Set Project Parameters

There are various parameters that influence the development strategically established prices. Some critical parameters include: the targeted change in gross revenues, maximum allowable price increase, minimum prices and whether prices for the same services should be equalized. Some of these parameters affect how the pricing model is constructed and need to be established early in the process.

2 - Define the Market

The market consists of the hospitals that will be used as benchmarks for price comparisons. The market could be hospitals within a certain geographic area, hospitals of similar size within a certain geographic area, or similar hospitals throughout the entire country. Once the hospitals have been identified, their prices can be obtained from various vendors.

3 - Working With the Benchmark Data

Hospital pricing data may not always be robust. There may be minimal or no hospital prices for some of the charge/service codes in your CDM. Options for limited benchmark prices include using the prices of other hospitals or multiples of third party reimbursement rates as the benchmarks for price comparisons.

Another aspect of working with benchmark prices that needs to be considered is outliers. A decision needs to be made whether to include or exclude outliers from the analysis. If outliers are excluded, a definition of an outlier needs to be established.

Finally, benchmark prices are not current and may be more than a year old. There are two ways to address this issue; prices can either be used as is or a trending factor applied to them in an effort to estimate current prices

4 - Use a Comprehensive Scope

The benefits derived from the project are directly related to the scope and increase as the scope of items included in the project increases. In order to generate the maximum amount of benefits, the scope should include items in the CDM with CPT/HCPCS codes, room and board charges, items charged on the basis of time, and cost-based items.

5 - Develop a Pricing Model

A critical component of the successful approach includes developing a sophisticated model that is able to accurately calculate changes in payments that result from changes in prices. The model should incorporate the benchmark prices, managed care contract terms, historical usage at the charge/service code, patient type, plan code and service/registration area level and claims data to address “lesser of” and “stop loss” contract provisions. The model should be designed to develop initial prices that optimize third party payments given the set of constraints (e.g. maximum increase in gross revenues, prices not exceeding a certain level, prices not going below the minimum prices, equalization of prices for charges codes with the same CPT/HCPCS code, etc.).

6 - Review Every Price from the Model

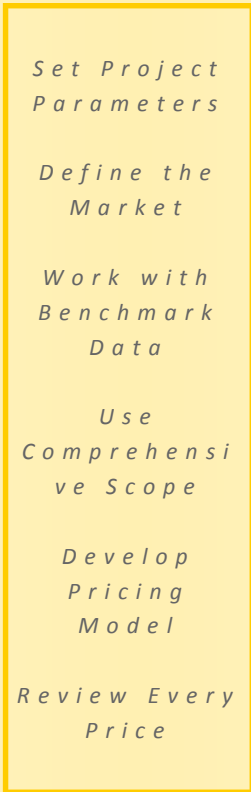
Models are wonderful tools that provide tremendous benefit in the realm of strategic pricing. However, models are not perfect. Some imperfections are due to the benchmark data and other are due to the high cost of developing more sophisticated models that require less intervention. As a result, it is important to review every price generated by the pricing model. The review should include checking that items are leveled appropriately (e.g. CT with contrast is priced higher than a CT without contrast).

Another Consideration

Hospitals receiving Medicare outlier payments may want to determine the impact of the new prices on outlier payments and the cost-to-charge ratios. In fact, these hospitals may want the new prices developed such that additional third party payments are generated without impacting the amount of outlier payments. Incorporating the impact of pricing changes on outlier payments and cost-to-charge ratios adds another layer of complexity to the process.

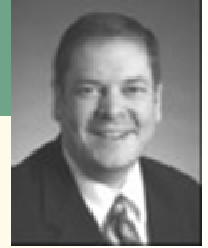
Conclusion

Strategically setting prices with a focus on the prices in the market can result in additional third party payments and an improved profile of prices. Using the six key component approach can assist in the success of the strategic pricing project.





PRESIDENT'S MESSAGE



Member (and Patient) Satisfaction – Job #1!

Greetings Fellow Minnesota HFMA Chapter Members!

In the midst of this seemingly fragile economic recovery, I have noticed a heightened interest on the part of many health care and non-healthcare businesses to renew their focus on quality, customer satisfaction, and attention to detail. Quality and customer service can be compelling competitive differentiators and often trump pricing considerations - whether you are in the business of selling health care services or like me, are in the business of selling and delivering professional services.

Your HFMA membership is no different. It's not cheap to belong to HFMA – and you should expect value from your membership that extends beyond the monthly hfm magazine and mere membership in an association. This fall (probably in late October), many of you will be selected to participate in a "Member Satisfaction Survey" from HFMA National. In addition to providing comments on how we can exceed your expectations in the future, you will also be asked to indicate whether you are "Very or Extremely Satisfied", merely "Satisfied", "Dissatisfied" or "Neutral" with your chapter.

Your board members, officers, and committee leaders have worked hard over the past year to provide more low-cost educational offerings through webinar type formats and to provide more opportunities for networking – especially in outstate Minnesota. We also recently held an inaugural CFO forum, our regular series of outstate rural health conferences in partnership with the Minnesota Hospital Association in May, and are currently "touring the state" with monthly golf outings combined with tours of the local host organization's health care facilities.

Our hope is really three-fold:

- That you (or someone from your organization) will have the opportunity to take advantage of many of the new networking and program opportunities when we are in your part of the state,
- That our efforts have not gone unnoticed by you and that when surveyed, you will be able to indicate that you are "Very or Extremely Satisfied" with your chapter, and
- That you will use the survey tool to continue to give us ideas and feedback that will help us continue to develop our programs and activities in a way that adds greater value to your HFMA membership.

I recently came across some client satisfaction survey statistics in my profession that I found to be quite interesting. Of the professional service firms that responded to the survey, nearly 95% collected feedback on client satisfaction. However, less than 50% of the firms surveyed shared the results with their employees, and even less (10%) used the survey insights to develop tactical responses to improve their service. The power of taking the extra measures to use the survey results is compelling. I recently saw a comment from a client we serve who stated quite simply, *"You asked. I told you and you did something about it. And I really respect that."* I would encourage you to consider whether a renewed focus on client or patient satisfaction could create a competitive advantage for your organization in these challenging economic times.

Please know that in these challenging economic times, we are working hard to provide an extra measure of value for the investment you have made in your HFMA membership. When your HFMA member satisfaction survey arrives this fall, please give us your feedback. Rest assured, we will use your comments to continue our efforts to "do something about it" and make your membership well worth the cost.

Lastly, and consistent with this year's national theme for HFMA, I would encourage you "Step Up" your involvement to more actively become involved in our association. Your ideas, energy and passion are welcome at any time!

Regards,

Jeff

Jeffrey.Gendreau@bakertilly.com



“Step up and make it happen” was the message delivered by incoming HFMA Chair Debi Kuchka-Craig at this year’s Leadership Training Conference. As I have found this year as Regional Executive Elect, Region 8 is all about “Stepping Up.” Our region, when faced with challenging economic times, came up with an innovative region-wide project to provide lower cost yet offer dynamic education to their members, and as a result, in April 2009, the Region 8 webinar series was launched.

Region 8 is made up of nine very strong chapters. Each chapter has a solid history of providing effective and efficient education to its members. At the Leadership Training Conference in 2009 the Region 8 leaders had an informal discussion around the best way to utilize the educational strengths of each chapter to benefit the other chapters and the Region. This discussion was the beginning of the Region 8 Webinar series that was developed and executed in a collaborative force. The project was a way to overcome two of the concerns had by all the chapters; dropping attendance and education hours due to the economy, and providing a way to reduce the overall cost of education for our members and member organizations

The series, offered each second Tuesday of the month from September through May, averaged 206 attendees at more than 70 sites per session with an average satisfaction score of 4.0 out of 5. The number of DCMS education hours per webinar was 204. The cost of the webinars came to approximately \$11 per attendee, delivering on the primary goal of providing lower cost education to members.

In addition to meeting the goals determined at the outset of the regional project, the chapters within the Region have developed a closer working relationship which will strengthen the Region in the future and has significantly enhanced the sharing of new ideas and best practices within the group.

There definitely were some lessons learned along the way which all of the chapters will be able to utilize to strengthen the overall webinar program as we take it into the future. This year the webinars will again be held the second Tuesday, from noon to 1:30 p.m. They will begin in August 2010 and run through April 2011.

The Region 8 webinar project generated a lot of interest from National and from other regions and we found ourselves sharing our success throughout the year. We were also asked to present the project as an innovative best practice at this year’s LTC in Phoenix. And to top of a great success, we won a Yerger award for our webinar series. A special thanks to Tracy Packingham and Chris Vairo for their assistance with the best practice presentation and the Yerger award.

In addition to stepping up with the webinar project in 2009-2010, Region 8 chapters again led the way with amazing DCMS and CBSC results. Together we won more than 21 DCMS awards and 16 Yergers!

- 6 Excellence for Education
- 6 Henry Hottum for Educational Performance Improvement
- 5 Excellence for Certification
- 4 Excellence for Membership Growth
- 16 Yerger awards



The most exciting news of all, though, was the announcement that the Nebraska Chapter won the prestigious Robert M. Shelton award for sustained chapter excellence! Congratulations, Nebraska!

The Robert M. Shelton Award for Sustained Chapter Excellence is presented each year to the single chapter judged as displaying exemplary service to members over a sustained period of the immediate past five years. The award, unveiled in 1979 in honor of Robert Shelton’s long-standing contributions to the Association, was presented for the first time in 1980. It is the ultimate honor a chapter can receive.

Over the years several Region 8 chapters have received the honor: Sunflower, 2008; Iowa, 2004; South Dakota, 1986 and 1991.

I’d like to thank Carol Friesen, outgoing RE, Nebraska, for her leadership this year and I’d also like to welcome Teri Reger, from Greater St. Louis, as our incoming REE. I know with the great leadership we have in Region 8 we’re at the beginning of another really successful year. Thank you for the opportunity to serve as Regional Executive of the best region in HFMA!

Vicki L. Mills, Region 8 Regional Executive

Committee Updates

Certification

Interest in being certification continues to grow. The Chapter recently ordered two additional study guides due to increased interest. A study session is scheduled on Wednesday afternoon September 29th just prior to the Fall Institute which starts Thursday morning September 30th. In addition, a proctored exam session is scheduled for Friday afternoon right after the Institute closes at noon. This is a great opportunity for those who are studying to set your calendars in preparation for taking the exam this year. For those interested in becoming certified and would like further information, please consider attending the study session on Wednesday afternoon, September 29th.



For those planning on attending the session on September 29th and taking the exam on October 1st, please contact Bill Fenske by September 1st. You can contact Bill at 320-231-4009 or fenskeb@rice.willmar.mn.us.

Fall Institute

2010 MHA-HFMA Fall Finance Conference:

Understanding the Future of Health Care Finance

The future of health care finance is quickly changing with implementation of both state and federal health reform. To remain informed of the latest developments, attend the jointly-sponsored MHA-HFMA fall conference scheduled for September 30 – October 1, 2010 at the Plymouth Radisson Hotel. Topics will include state and federal policy updates, RAC, HIT/meaningful use implementation strategies, leadership development and information on accountable care organizations (ACOs). Tom Stinson, State economist, will present his projections for the state's economy and for the health care sector.

Newsletter

Vikingland Viewpoint

Whether you are new to healthcare finance or a long-timer, there's no question that the issues we face every day are complex and ever-changing. The Vikingland Viewpoint strives to provide useful and current information to assist healthcare financial professionals in leading their organizations. In order to accomplish the goal, the Newsletter Committee needs your input - what topics are of interest? Do you have a best practice to share with Chapter members? How about a feel-good story on a personal experience? Let us know - submit an article!

If you are interested in becoming more involved in HFMA, have a few hours to spare each quarter, and are interested in spreading the news, join the Newsletter Committee by contacting Vera at 218-283-5410 or vschumann@rainylakemedical.com.

Committee Updates

Networking

Summer Tour Plagued From Above

It was a very good networking idea that Fenske had. For the four months of our pleasant time of year in Minnesota let's have a CFO host an outing at their Hospital. We would be able to tour their facility and see what creative or innovative ideas they've implemented. We could then have a lunch and in a casual atmosphere and solve all the problems besetting the medical community in Minnesota. Then for those interested we would play a round of golf at one of the finer local courses.

In June our first stop was Rice Memorial Hospital, Willmar hosted by Bill Fenske. Personally I don't see the problem in playing during flash floods and severe weather with the possibilities of tornadoes. But the course had a "no cart" policy in effect, and that to me was a deal breaker. Unfortunately the event was canceled and will be rescheduled during our 2011 tour.

July looked about as bad the morning of the 22nd. I'm told that Duluth enjoys its 6 days of summer during this month (see picture for proof). We had to skip the tour of St Lukes Hospital because of some road construction going into town. Although a severe weather warning was issued in some of the areas around Duluth we were lucky enough to get a pleasant round of golf in at Black Bear G.C. Bring lots of balls if you plan on playing it someday. Thanks to Jim Wuellner, CFO at St. Lukes for the thoughtful event he planned. It really was a lot of fun that day. The golf ball manufacturers should also thank him for the boost in sales.

Next month we're in Bemidji on August 20th with our host being Craig Boyer, CFO of North Country Regional Hospital. The Town & Country Golf Course is one of the fine old courses in the State. Mark your calendar and watch your e-mail for details. We'll watch the radar for you.

Ray Costello, Networking Chair
with special Thanks to Bill Fenske



July 22, 2010 - Black Bear Golf Outing

Left to right: Dustin Gasman, Renee Erickson, Gregg Redfield, Jim Wuellner, Matt Oja., Tom Osberg, Mark Dale, Ray Costello, Bill Fenske, Rob Wengler. Not pictured, Deb Carl

SPRING NETWORKING EVENT

GUTHRIE THEATRE

MAY 10, 2010



Members enjoying refreshments provided by Chapter Corporate Sponsors



President Jeff Gendreau and Past President Candace Peterson



What a view!
See it for yourself at the Guthrie!

Check out the ghosts on the ceiling. They float about the walls and ceiling of the Guthrie.



No lack of atmosphere at the Guthrie - especially if you like blue!



Guthrie staff provided "behind the scenes" tours to interested members.



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UPCOMING EVENTS

Region 8 Webcast

“RAC Complex Coding and DRG Targets”

August 10, 2010

12:00 noon - 1:30 PM

HFMA Webinar

“Expanding Your Financial Analyses for a Changing Healthcare Environment”

August 18, 2010

Regional Golf Outing

Town & County Golf Course, Bemidji MN

August 20, 2010

2010 MHA - HFMA Fall Institute

“Understanding the Future of Healthcare Finance”

September 30 - October 1, 2010

Radisson Hotel, Plymouth, MN

Watch for Email announcements for more details on upcoming events

CHAPTER CONTACTS

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| | |
|--|-------------------|
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| Bill Fenske , FHFMA, CPA | Certification |
| Greg Brock | Website |

Our objectives are to provide members with information about chapter and national HFMA activities and to provide a forum for reporting state and national issues relating to the healthcare industry.

Vikingland Viewpoint is published two-four times annually for the members of the Minnesota Chapter of the Healthcare Financial Management Association as part of the communication series including Month End Entries. No part of Vikingland Viewpoint may be reprinted without receiving prior consent from the Editor. Responsibility for the content of Vikingland Viewpoint lies solely with the Chapter's Communications Committee. The Editor welcomes and encourages the submission of material for publication. Articles should be e-mailed in Microsoft Word and may include a short biography of the author.

The Communications Committee reserves the right to edit material and to accept or reject contributions, whether solicited or not. Opinions expressed in Vikingland Viewpoint are those of the authors, and do not necessarily reflect the view of the Communications Committee, HFMA Minnesota Chapter Leadership, or the members of the Minnesota Chapter. Any questions or comments may be directed to the VP of Communications.

Vera Schumann, CHFP

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**The Vikingland Viewpoint is the official newsletter of
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