



Emerging Issues in Productive and Effective Governance

Webinar TX0920

Wednesday, September 20, 2017
12:00 noon – 1:00 p.m. (CDT)

Overview

Over the past year, we have observed significant departures of hospital executives in certain states due to miscommunication and other differences between the C-suite and board of directors. This breakdown in communication often begins in the professional background differences between the board and leadership. Many directors and commissioners don't have a background in healthcare, especially in smaller communities. Additionally, there is a division in opinion within the industry on whether leaders with a clinical versus financial or operational background are a benefit or a hindrance to the success of the organization or whether it matters at all. Divisions between leadership and board opinions appear to be more common in rural settings but larger urban facilities are not immune to these disputes. Board members with little health care experience may focus on the wrong metrics to gauge success due to a lack of understanding about healthcare finance and operations. For instance, they may focus too closely on bottom line net income as opposed to the balance sheet and cash flow statements to gauge the health of the hospital's financial position.

In working with hospitals, hospital associations and other industry lobbying groups around the nation, we have found there are best practices that can be employed to improve board and executive relations. An understanding between these governing groups over core competencies, relevant financial metrics, regulatory updates, key reimbursement concepts and overall mission are crucial to a successful partnership. In this presentation, faculty will focus on how an organization can achieve optimal communication between leadership and the board.

Target Audience

Board Members, CEOs and Board Liaisons

Objectives

- Focusing on advocacy and fiduciary responsibility
- Building and maintaining core competencies for directors and commissioners
- Awareness of regulatory issues and financial concepts
- Opening communication channels with hospital leadership

Faculty

Paul Holden is a senior manager of Moss Adams, LLP, and has been in public accounting since 2003. He provides reimbursement consulting and business assurance services to health care providers in acute and post-acute settings throughout the western United States. Paul is well-versed in preparing Medicare and Medicaid cost reports, assisting clients during third-party audits, formulating appeals of audit issues in connection with cost reports, and assisting hospitals, sole community hospitals, critical access hospitals, rural health clinics, and federally qualified health centers with billing and reimbursement issues. He explores the role of the Medicare cost report and claims data in the DRG and APC rate setting processes; wage index cost finding and labor market definitions with a focus on wage index reform; and Medicare cost report data-mining and benchmarking.

Sandy Johnson, attorney with Hall, Render, Killian, Heath & Lyman, P.C., focuses her practice on state and federal health care law as applied in transactions, operations, compliance and other matters. Sandy brings a unique perspective to her health law practice, having significant management experience in the health care industry prior to beginning her legal career. The former CEO of a hospital system, she has also served in senior management positions with long-term care, home health and assisted living providers. As a member of Hall Render's health care practice, Sandy counsels hospitals and hospital systems, physicians and group practices, clinical laboratories, long-term care providers, pharmaceutical manufacturers and durable medical equipment manufacturers/distributors, retail pharmacies and other health care organizations on a broad range of federal regulatory issues in the context of operational compliance and corporate transactions.

Sandy's experience includes state and federal and state regulatory compliance matters, including the Stark Law and Anti-Kickback Statute, HIPAA and EMTALA, as well as Medicare/Medicaid and other public and private payor reimbursement issues. Her extensive experience also includes providing operational counsel on issues ranging from physician compensation, medical staff credentialing and risk management to physician-hospital relationships,

including provider recruitment and joint ventures. Additionally, Sandy assists tax-exempt health care organizations with governance and day-to-day operational matters.

Certificates of Attendance

Certificates of Attendance will be issued to all registrants. These certificates should be placed on file at your hospital as evidence of attendance. Certificates of Attendance will not be awarded for recorded sessions.

Registration

\$150 for AAHT Member Hospitals

\$175 for AHA Member Hospitals not holding membership in AAHT

Registration includes **one** internet connection and **one** telephone connection at **one** location and an unlimited number of participants from your organization in **one** listening room. **Hospitals holding membership in the Arkansas Association of Hospital Trustees receive a \$25 discount on registration.**

Two days prior to the event, you will receive instructions and passwords for accessing the event, along with the slide presentation and other resource materials. It is the responsibility of the registrant to download and/or access presentation materials prior to the day of the event.

Participants should register at least five business days prior to the event to ensure optimal processing of conference materials. To register, please submit the attached registration form. If you have not received an e-mail with instructions ([via the e-mail provided on the registration form](#)) or if you are unable to download or open presentation materials, at least two business days prior to the event, please contact Anna Sroczynski at (501) 224-7878 or asroczynski@arkhospitals.org. **Without payment (via check or credit card), your registration cannot be processed, and you will not receive connection instructions.**

Cancellation Policy

Refunds, minus a \$25 processing fee, will be granted if requests are received in writing by the AHA at least 5 business days prior to the program. No refunds will be issued after that date. Fax cancellation/refund requests to the Education Department at (501) 224-0519.

(Registration Form on Next Page)

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Registration fee covers one or multiple participants at one location (**one connection per registration**) and includes one set of instructional materials/handouts. Upon receipt, additional handouts can be copied.

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