NEWSCAST

Metro NY HFMA

Fall 2020

Volume 50, Issue 3

Honoring Diane McCarthy on a successful year



We look forward to celebrating her service at her Past President's Dinner Dance

Your Challenge. Our Mission. 20-21

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PRESIDENT'S MESSAGE

PERSEVERANCE...this word has served as my go to for many computer passwords. I tap into this word often to keep me going. Keep looking forward, one step in front of another and another and another, always moving forward. I believe PERSEVERANCE describes our current state as we continue to plow through the many challenges we have encountered over the past several months. We have all taken on another layer of complexity to an already busy life, but we PERSEVERE. Over the past several months, I have seen PERSEVERANCE in motion time and time again within our Chapter, members who have stepped up to lead our educational committees as chairs



and co-chairs and those who serve as committee members. These are the folks that volunteer their time brainstorming on program ideas, securing speakers and organizing calls. I am grateful for our Chapter volunteers who have taken on these responsibilities even though their own personal and business lives have shifted. They continue to PERSEVERE and are dedicated to the sustainability and advancement of our Chapter. I am proud of all they have accomplished; they are what keeps our Chapter going and I look forward to what they have in store for 2021.

As I write this, Thanksgiving is just 2 weeks away. A time to reflect on all that I am thankful for; I am thankful for my family, friends and colleagues, and of course, my HFMA family. I am very grateful to our Chapter Corporate Sponsors who during a time of uncertainty remain unwavering in their commitment to our Chapter and the HFMA mission. Thank you for believing in us and please know we are exploring ways to unite our Corporate Sponsors with our members. I appreciate your patience and support.

A special thank you to Alicia Weissmeier and Jessica Daly for another outstanding edition of Newscast ~ Thank you!

On behalf of Sean Smith, Cathy Ekbom, Andrew Weingartner and myself, we wish all of you a healthy and peaceful holiday season and wish you the very best for 2021.

Warmest wishes!

Donna



EDITOR'S MESSAGE

As you read this edition of Newscast, fall is upon us, the leaves will have turned their amazing shades of gold, orange and red, the dog days of summer are behind us and we are unfortunately facing a new surge in the COVID 19 pandemic. I search for words to adequately express how I am feeling at this time and how I expect all our members are feeling and for the first time I am at a loss. I agree with Donna that Perseverance does describe our current state as we continue to put one foot in front of the other, hopefully walking towards an end of this pandemic. On the lighter side of things, I guess Donna will be changing her computer passwords after this edition is published.



On a more serious note, this Chapter has had to adapt to the current situation and move all activities to virtual platforms. This has been no easy task and there have been many obstacles to work through. I am confident that had National HFMA continued the Yerger program we would have successfully achieved many Yergers for the work the various Committees have done.

Newscast has also needed to adapt to the virtual reality of our current state of affairs. We didn't have the opportunity to honor Diane at a Past President's Dinner, thus the cover of this edition honors her and the support of her family with the hopes that we can have a Past President's Dinner honoring her and the lovely photos to publish to the not too distant future. The Chapter was unable to host the Annual Golf Outing, so we invite you to take a walk down memory lane with a ten year review photo spread. We continue our Scenes from MetroNY feature and supplement it this edition with Marty's feature "Lunch."

We aim to continue to provide relevant educational content to our members through webinars in this time of remote learning. In addition, we hope you will find the articles in this edition of Newscast relevant to issues you are all facing relating to the impact of COVID on hospital finance.

With each edition of Newscast we hope that the content meets your expectations as members. We welcome hearing from you and although we don't have a letters to the editor feature in Newscast, we would love to begin one. Please feel free to drop me a note, write a letter, author an article or send in a photo for additional to the next edition of Newscast.

Happy Thanksgiving and as we head into the holiday season, sincere wishes for a happy and healthy end to this year and start of the next year.

Alicia aweissmeier@millermilone.com

Your Challenge.

Our Mission. 20-21

CHAPTER OFFICERS AND BOARD OF DIRECTORS

President	Donna Skura
President-Elect	Sean P. Smith, CPA, FHFMA
Vice President	Catherine Ekbom, CRCR
Treasurer	Andrew R. Weingartner, FHFMA
Secretary	Mario Di Figlia, FHFMA
Immediate Past President	Diane McCarthy, CPA, FHFMA

BOARD OF DIRECTORS

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Daniel Corcoran

Laurie Radler, FHFMA

Alicia A. Weissmeier, Esq., FHFMA

James Linhart

Class of 2022

Leah Amante Robert Braun Susane Lim Shivam Sohan, FHFMA Robin Ziegler

PAST PRESIDENTS

2018-2019	Mario Di Figlia, FHFMA
2017-2018	Maryann J. Regan
2016-2017	David Woods
2015-2016	Meredith Simonetti, FHFMA
2014-2015	Wendy E. Leo, FHFMA
2013-2014	David Evangelista
2012-2013	Palmira M. Cataliotti, FHFMA, CPA
2011-2012	John I. Coster, FHFMA
2010-2011	Edmund P. Schmidt, III, FHFMA

EX-OFFICIO

All Past Presidents of the Metropolitan New York Chapter, HFMA Bea Grause, R.N., J.D., President, Healthcare Association of New York State

Kenneth E. Raske,

President, Greater New York Hospital Association Kevin W. Dahill,

President & CEO, Nassau-Suffolk Hospital Council

Newscast Committee

EDITOR:

Alicia A. Weissmeier, Esq., FHFMA

COMMITTEE VICE CHAIR:

Marty Abschutz, CPA, CGMA

COMMITTEE MEMBERS:

Kiran Batheja, FHFMA Wendy Leo, FHFMA Cynthia Strain, FHFMA Jessica Daly, CRCR

Metro NY HFMA Newscast Winter Schedule

Electronic Publication Date
Article Deadline for Receipt by Editor

1/29/21 1/4/21

2020-2021 CORPORATE SPONSORS

PLATINUM

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BKD CPAs & Advisors

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Instamed

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Withum Smith + Brown PC

CHAPTER MEMBER NEWS

IMPORTANT DATES

Upcoming Webinars

1NOV 4, 2020 HOWAN T AUTOMATION/ AT T EVOLVING WORKFORG	Nov 4, 2020	HUMAN + AUTOMATION/AI = EVOLVING WORKFORCE
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8:30 am Hosted by HFMA Region 2

Nov 5, 2020 THE JOURNEY TO ADVANCED COSTING:

12:00 pm STORIES FROM TWO HOSPITAL EXECUTIVES

Hosted by HFMA National

Nov 5, 2020 2021 E/M TRANSITION AND FINANCIAL IMPACT

1:00 pm Hosted by HFMA National

Nov 10, 2020 PAYER-PROVIDER COLLABORATION IN A DIGITAL WORLD

3:00 pm Hosted by HFMA National

Nov 11. 2020 MAXIMIZING REIMBURSEMENT REVENUE IN A POST-COVID WORLD

1:00 pm Hosted by HFMA Metro NY

Nov 18, 2020 RWJBARNABAS IMPROVES ACCESS WITH AGGRESSIVE

2:00 pm GROWTH STRATEGY

Hosted by HFMA National

Dec 1, 2020 OFFERING LONG-TERM PAYMENT PLANS TO MEET PATIENT FINANCIAL NEEDS

2:00 pm Hosted by HFMA National

Dec 2, 2020 RTEMPERED REVENUE RECOVERY EFFORTS AMID COVID-19

2:00 pm IMPACT PROFITABILITY

Hosted by HFMA National

Mar 10-12, 2021 METRO NY CHAPTER ANNUAL INSTITUTE (VIRTUAL CONFERENCE)

Events

TBD PAST PRESIDENTS DINNER DANCE

HFMA Seminars provide timely, in-depth strategies and metrics to help you keep pace with the healthcare finance topics you care about the most. View all upcoming HFMA Seminars and register at www.hfma.org/seminars.

NEW CHAPTER MEMBERS

The Metropolitan New York Chapter of HFMA Proudly Welcomes the Following New Members!



By Robin Ziegler, Membership Committee Chair

MetroNY HFMA is pleased to welcome the following new members to our Chapter. We ask our current membership to roll out the red carpet to these new members and help them see for themselves the benefits of HFMA membership. Encourage them to attend seminars and other Chapter events. We ask these new members to consider joining a Committee to not only help the Chapter accomplish its work, but to expand their networks of top notch personal and professional relationships. See the list of MetroNY HFMA Committee Chairs, along with their contact information, listed in this eNewsletter.

JULY 2020

ROB MCCORMICK BDO

DEBRA PERLMAN

CAMILLE MAY, CSAF
New York Presbyterian Hospital

KIRK CASTILLO

ZACHARY CORRADINO
Public Consulting Group, Inc.

CONNOR GILROY Northwell Health

WILLIAM MITCHELL

SAMANTHA SHAPIRO
Berkeley Research Group

AUGUST 2020

SHANTELLE PRYCE

JENY ESPINAL
Columbia University

SHELLY LANNING

SWL Healthcare Holding LLC

SHAHRIAR DANESHVAR
Medalliance Medical Health Services

SEPTEMBER 2020

SARAH ZAIDI, CRCR

ROWAN FERNELON

LAURA MCKINZIE-HINTON

Northwell Health

ANGELA WEFER

Stony Brook University Hospital

ARIEL CONTRERAS

NATALIE GALVEZ URENA

ANTHONY ZACCARELLI St. John's University

ANGELA KELLY

Quality Billing Service

SWOPNA GANGADHARAN

The Mount Sinai Hospital

SANJANASREE MOHAN

DANIEL LINDENBERG

Northwell Health

SOPHIA SALEEM

Mount Sinai Health System

NADIA HUNT-GUZMAN

ANDREW SCHWARTZ

Maimonides Medical Center

JERRY VELEZ

LUCIE OLIVIER







HFMA METRO NY PRESENTS

ISLAND HARVEST FOOD DRIVE

During this holiday season and in the spirit of giving, please visit our virtual food drive for donations to benefit fellow New Yorkers in need

October 21st through December 31st 2020 E Your Challenge.

DONATE AT: HTTPS://YOUGIVEGOODS.COM/DRIVE-HFMAMETRONY

In the spirit of giving during this holiday season, the HFMA Metropolitan New York Chapter, in collaboration with Island Harvest, a proud member of Feeding America program, will proudly be running a virtual food drive so that our members can easily donate to a very worthy cause. There is no doubt that we have all be through a lot this very unique year, but when we come together anything is possible. When we give, we heal, our hearts are full; when we receive, we remain humble. I ask that we come together; one or two clicks can help so many.

Please visit our unique link that makes it easy to raise 10,000 lbs. of food for New Yorkers in need:

https://yougivegoods.com/drive-hfmametrony

Island Harvest was created in 1992 by one woman with a cooler, a station wagon, and a strong desire to help people in need. Linda Breitstone, Founder, was infuriated that food from a local convenience store was being thrown away at the end of the day – with a safe house for women and children down the street. In response, she established Island Harvest and the mission, "to end hunger and reduce food waste on Long Island."

Since those early days, Island Harvest has become Long Island's largest hunger-relief organization. Their volunteers and staff now deliver millions of pounds of good, surplus food – much of which might otherwise go to waste – to a network of 570 Long Island-based food pantries, soup kitchens and other non-profit organizations that offer feeding services for those in need. By doing this, they provide a vital supply of food to counter the sharply rising problem of hunger here.

In recent years, they have begun to attack hunger in targeted and strategic ways. The most visible example of this is their Weekend Backpack Feeding Program. Piloted in 2006, this initiative provides 35,000+ packs of nutritious food to schoolchildren who rely on school lunches and breakfasts and may not receive solid meals on weekends.

We are Metro New York Strong!

I thank you in advance and feel free to contact me
Catherine Ekbom, VP of Education cekbom@betzmtichell.com

METRO NY CHAPTER MEMBERS' RESPONSE TO THE COVID-19 PANDEMIC – LUNCH

Helping Two "Birds" with One Idea

What does a member do in reaction to the COVID-19 pandemic, aside from following CDC guidelines in our personal and professional lives? Most of us do not have the training to be front-line healthcare workers. Many of us can continue to provide our services to providers, whether as employees or vendors who provide important services. Yes, we can do those things. Many of us feel more needs to be done. To say we truly have been frustrated do something more would be an understatement.

In addition to the healthcare industry, another industry that has been hard hit by COVID-19 is the restaurant industry. The State of New York banned in-person indoor dining, causing many restaurants to suffer severe negative economic consequences. In late March, Bob Jacobs and Ann Russo, President and Vice President of Health Resources Optimization, Inc., (Health/ROI), respectively, came up with the idea of reaching out to metropolitan area hospitals to arrange for local restaurants to provide lunches for their frontline workers, at Health/ROI's expense. This was a small token of Health/ROI's gratitude for frontline healthcare professionals' heroic work.

Not surprisingly, the hospitals' responses have been overwhelmingly positive. Likewise, the local restaurants, i.e., Unico in Hartsdale and Russ & Daughters in Brooklyn, were grateful for the opportunity to provide lunches to frontline healthcare workers, while helping them to address their ability to keep their staffs employed and pay their rent. The related photos give you an idea of how individuals appreciated the lunch.

Among the hospitals that participated:

- NYU Winthrop
- White Plains Hospital Medical Center
- Nassau University Medical Center
- The Brooklyn Hospital Center
- Montefiore Health System

- Montefiore Nyack
- Moses Campus
- Einstein Campus
- Wakefield Campus
- Bronxcare Health System

We encourage you to send your stories of how you've aided frontline workers and/or first responders in your way.

Marty Abschutz, CPA, CGMA

Director of Reimbursement Services, Health/ROI

Newscast Vice Chair, HFA Metro NY Chapter





"I wanted to add my thanks to those you have already received. Our doctors and nurses are so grateful for the 100 lunches you have been delivering from Russ & Daughters!" (Debbie Niederhoffer, The Brooklyn



VIRTUAL EDUCATION

To say 2020 was atypical would be an understatement. The Metro NY Chapter had a myriad of inperson events planned to round out our 2019-2020 educational year under the leadership of Diane McCarthy, including the chapter hallmark "Annual Institute." As the pandemic loomed and spread the threat of the virus was uncertain but ominous. Our education teams began meeting to discuss the fate of the already planned and booked events. Venues, speakers, catering, education requirements and more were all in question. For the safety of our members and colleagues swift decisions were made by our Chapter President, Diane McCarthy and her Executive Team, to cancel all in-person events through April.

Leadership and the education committees immediately started planning on virtual events to sublet the education requirements and keep their members engaged. While the new education year officially starts in June, the teams started working in April to strategize new virtual education opportunities for the Chapter and Region 2. Our theme of Webinar Wednesdays and Finance Fridays brought the Chapter opportunities for each education committee to provide valuable content to our members.

With COVID being the hot-topic for webinars, the Chapter scheduled a series of webinars addressing topics like 1135 waivers, regulatory and payment issues for finance, impacts on the Revenue Cycle and recovery. While attempting not to over saturate our members with COVID-19 material, our committees worked with our vendors and partners to provide legislative updates, education relating to Revenue Cycle and financial updates. Throughout the summer months the Chapter provided content to over 600 attendees, which is an accomplishment in itself as traditionally the Chapter did not host this number of events in summer months and summer events traditionally did not have many attendees.

As we transitioned into the fall months the Chapter made a conscious decision to refrain from planning any in-person events through the end of 2020. The education executives and committees meet regularly to discuss ideas on how to keep the Region engaged without replicating webinars and content. Recently, General Education Co-Chair, Alyson Belz, spearheaded executive level panels to provide candid conversations surrounding professional topics. On October 28th, 2020 the chapter conducted "Secrets of Effective Communicators" which provided our members with a 1 hour candid discussion with C-Suite level leaders in our region. On November 4th, 2020 the Region will host a second panel of C-Suite leaders to discuss "Human + Automation/AI= Evolving Workforce."

As our industry and Chapter adapt to this virtual environment, the Chapter is excited to continue to produce educational and informative educational opportunities. Be on the lookout for our Education Committee's educational staples such as Women in Leadership, The Revenue Cycle Academy, Knowledge Is Power and more. The Region's education committees meet regularly to discuss new ideas for content including podcasts, blogs, webinars and recorded content. This period has provided our Chapter and organization with the opportunity to brainstorm to bring new and exciting content and mediums to our Chapter.

If you have ideas or suggestions for educational content, feel free to reach out to me at leah.amante@stonybrookmedicine.edu and we will look ways to bring your ideas to fruition. If you are interested in volunteering for one of our educational committees feel free to reach out to me also. We are excited for what educational opportunities in this new future will bring us.



Leah Amante

Director of Patient Financial Services, Stony Brook Southampton Hospital

General Education Committee Chair and Board Member, HFMA Metro NY Chapter



HFMA METROPOLITAN NY PRESENTS

SKILL PATH

FRIDAY, NOV. 20TH 2020 NOON - 2:00PM

PROFESSIONAL
DEVELOPMENT COURSE |
CREATING A POWERFUL
PERSONAL BRAND

Consider who stands out because of a positive brand reputation. Learn the essentials of how to build a powerful personal brand and why it's important.

HFMA MEMBERS - FREE

NON-MEMBERS - \$50



HFMA METROPOLITAN NY PRESENTS

SKILL PATH

FRIDAY, DEC. 18TH 2020 NOON - 2:00PM

PROFESSIONAL
DEVELOPMENT
COURSE | REFLECTION FOR
PURPOSE AND PLANNING

The path looks clear when the plans are finally made. Then the todo lists and obstacles got in the way. The plan gets set aside in order to handle the current issues of life. This module takes the time to give some purpose and a plan for next steps.

HFMA MEMBERS - FREE

NON-MEMBERS - \$50

THE METRO NY CHAPTER DOES IT AGAIN!

The Helen M. Yerger Award recognizes outstanding chapter performance in the categories of Collaboration, Education, Improvement, Innovation, Member Communications, Member Service, and Membership Recruitment and Retention. For many years our chapter has consistently been recognized for our innovation and initiatives by receiving multiple Yerger awards each year.

This year is no different and our chapter received Yerger Awards in the following categories in the 2019/2020 year:

Innovation – Executive Summit Meeting Member Services/Community Outreach – MS Climb to the Top Collaboration – Digital Disruption

While these initiatives required a team effort, I would like to give a special thanks to the chair of our Yerger committee, Dana Keefer, as well as committee members Michele Manuel and Marty Abschutz. It is because of the many hours they have spent gathering the information and documentation needed, and writing essays, that we have had so many winning Yerger applications, enabling us to celebrate the recognition we are receiving for our efforts.

Under Dana's leadership, in the past 18 years we have been awarded almost 50 Yergers! I know I speak for many people when I say thank you for all you have done!

This is once again proof that our chapter is one of the best in the country – and while we always set the bar high we never seem to miss. It is a testament to the hard work and dedication of all of you and I thank you again for your hard work. Kudos to all of you and once again thank you for your support this past year.

Diane McCarthy CPA FHFMA Immediate Past President

COLLECTIONS DURING COVID

Healthcare collections during the COVID-19 pandemic are crucial to the operation and success of hospitals across the United States. The coronavirus continues to spread across the country, infecting over 4 million Americans, and causing approximately 3.8 million to file for unemployment – and experts say, this is only the first wave (nytimes.com). To attempt to help individuals, many organizations have put a hold or a complete stop to patient debt collection. Without cashflows from collections, hospitals may not be able to pay operational bills, employee salaries, or provide needed healthcare to patients. If hospitals cannot afford to stay open, who will care for the patients who need it most?

Some organizations have suspended their debt collections, while many states have put limits on what income debt collectors can garnish wages from, making some seizures illegal (ftc.gov). Some believe that these measures should also extend to collections of debt for hospitals and medical facilities as well. This perspective is based on a misunderstanding of the vital role collections plays in the healthcare revenue cycle, and the repercussions of that would come with bringing them to a halt.

Bills, Bills, Bills

Every day, frontline healthcare systems and providers across the nation evaluate, treat, and manage about 140 million patients (<u>cdc.gov</u>), including those diagnosed with COVID-19. Medical treatment and management are not cheap and make up approximately 54% of hospital expenses (expresshealthcaremanagement.com).

The typical expenses incurred when a hospital or provider treats a patient include staff/provider salaries, facility overhead, medical supplies (including PPE), equipment (standard, specialized, lifesaving, etc.), and patient medications at a minimum. These expenses don't disappear during a crisis, instead they increase — right now hospitals in the last four months have seen incurred financial losses of \$202.6B because of COVID-19 (aha.org). To continue to provide the healthcare services our country so desperately needs, it is crucial to continue to have cashflow/revenue coming into hospitals and provider practices.

Collections Effect on Healthcare

In order to continue providing these services to patients and their communities, there must be a way to pay these expenses. Fewer patients are seeking medical care because of the pandemic, translating to fewer revenue dollars walking in through the front door. A study done by the Office of Inspector General found increased costs and loss of revenue are quickly depleting hospitals' cash reserves and could be disruptive operations going forward (npr.org). The reality of the situation is cash is king, and the cash that collectors secure directly supports hospitals and providers.

3 Ways to Deliver Positive Collection Experiences

Everyone is doing their best to deal with the anxiety and fear caused by COVID-19. For collections to work during this time, the old standard techniques used to complete collections can no longer be followed. New methods and practices must take into account each individual's unique financial situation - one size cannot possibly fit all. Three ways to eradicate the notion of healthcare collectors as a group of money-hungry vultures, and replace that perspective with them as providing the lifeblood to hospitals and providers across the nation, are:

Maintain an Empathetic & Understanding Mindset

Having bills to pay is something everybody understands, even the collection industry. An empathetic approach to collections not only improves the patient experience, but also promotes further cooperation and increases the likelihood of them paying balances. Remembering to consider the patient's perspective and understand what they are going through without judgement is the first step in continuing collections during the pandemic.

Active Listening

No one likes to ask a question and not actually receive a straight answer or have someone halfway help you with an issue. To boost trust, collectors need to actively listen to the patients' situations, questions, and needs. Actively listening means listening without interruption, concentrating on what is being said, and not thinking of responses or rebuttals while they are speaking. The collector should seek not to direct the patient with opinions, but to guide the patient to make the best decision for themselves.

Giving Options

Giving patients a wider range of options creates an atmosphere of support during the collection process. Patients should be given options for payment plans and ways for them to pay (self-service telephone payments, online patient portal, SMS, Apple Pay, etc.). Technology should be used to help predict preferences for patients and options should be made available if the patient expresses interest or need. Having options available simplifies the collections process and makes it more patient friendly.

Healthcare is a vital service needed across our country, especially during the COVID-19 pandemic. Continued collections are meant to supply these hospitals and providers with the necessary finances to provide care. Although the desire to help offset patient debts during this time is understandable, facilities and providers must continue to complete collections in an empathetic manner to safeguard and sustain healthcare operations.

Citations/References:

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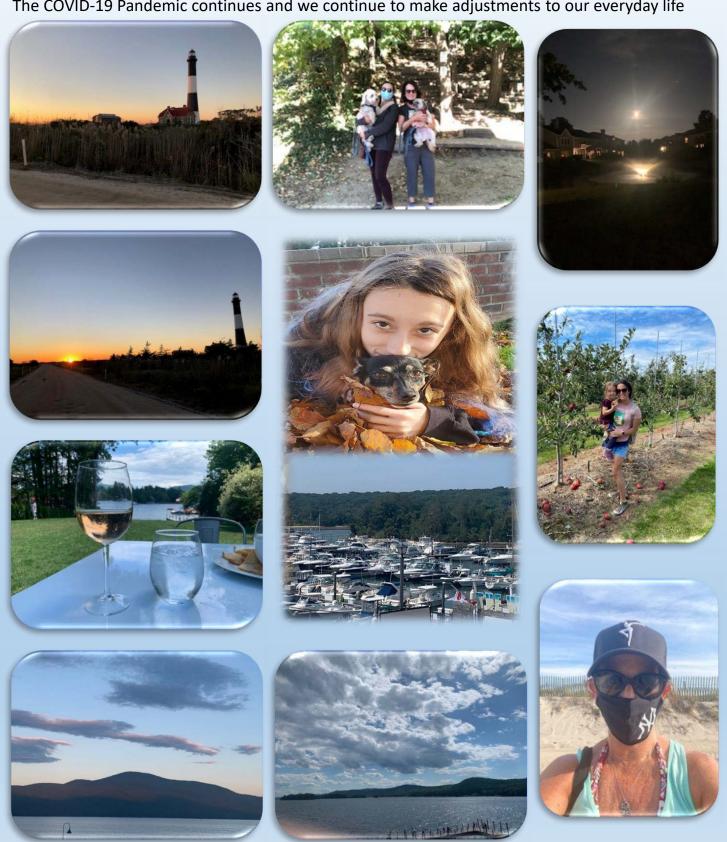
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Scenes across MetroNY

The COVID-19 Pandemic continues and we continue to make adjustments to our everyday life





We commemorated 9/11 with tributes altered by coronavirus precautions but the Tribute in Lights lit up the night sky.











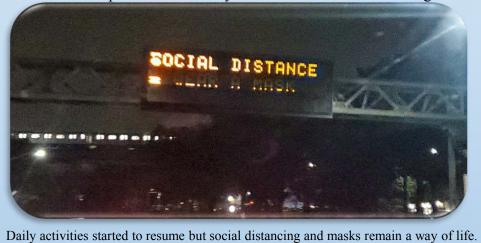






School began, whether in person or remote the experience is entirely different for students of all ages.







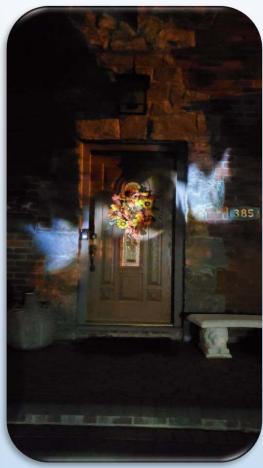














To Trick or Treat or not that is the question!

Traditions continue amid great debates they just take different forms

Making Strides Against Breast Cancer by driving instead of walking!







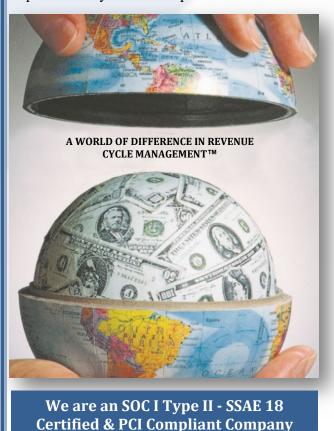
When it comes to Revenue Cycle Management and Recovery of your patient accounts, **POM RECOVERIES**, **INC.** is a leader in the Healthcare Industry since 1983.

We base our success on your bottom line, not ours. The growth and acceleration of your cash flow is our prime objective. It is this dedication that has earned our clients the highest recovery rate for their accounts receivable.

We're Professionally Staffed

POM's team consists of seasoned Health Care Agents, Paralegals, System Analysts, Programmers, Attorneys, Outsourcing Staff, and Support Personnel.

Our recovery agents are in-house, full time, and working as a team to convert your accounts receivable into cash assets in the shortest time possible; up to 60 days faster than is usually experienced by healthcare providers.





Metro NY Spotlight

on

Catherine Ekbom, CRCR

HFMA Metro NY Vice President of Education 2020-2021

Executive Vice President, Betz Mitchell

Director of Revenue Cycle, Medisys Health Network Flushing Hospital Medical Center & Jamaica

Hospital Medical Center

One of my first memories of learning about HFMA Metro NY in 1993 was from my early days at Betz Mitchell. It was instilled in us that all members of the team needed to belong to this premier educational organization. I quickly became intrigued and was happy to join. Attending seminars, learning about new industry trends and challenges intrigued me more and more. I would see from an audience view people working hard behind the scenes putting events together and I realized that I wanted to learn more, do more and become involved. I need to thank my dear friend David Evangelista who pushed me to jump out of my comfort zone to go from an audience attendee to "just get involved and jump in" as he so easily said to me more than once.

Over the 27 years having earned The Frederick T. Muncie Gold, The Robert H. Reeves Silver, & the William G. Follmer Bronze Award, I have had the honor to work with and alongside so many great healthcare leaders as clients, vendors and ultimately friends. Some of my proudest moments in my tenure are chairing and cochairing two phenomenal Annual Institutes, the 59th and 60th. A milestone for me has been the opportunity to share a personal experience with a disease that effects so many, Breast Cancer, with an attempt to help others. This allowed me to use HFMA as a platform to create our Knowledge is Power series, which is now in its seventh year with eight successful programs under our belt. I have had the pleasure of being part of the Yerger Team a few years in the making and helping the Chapter receive high honors for our inaugural Women In Leadership event.

I never miss a chance to learn from my friends, team members and colleagues in this fast-paced, ever changing environment. I pinch myself and say I'm not sure where the time has gone when I reflect back on my early HFMA days to current day. I look back with a sense of accomplishment, a smile and look forward to what is yet ahead of us.

When we commit to embracing change, our achievements – and the future that we are shaping – will surpass our expectations. In order to change and be successful in the future we as leaders in healthcare must change our way of thinking. Our industry is at a critical point and with new ideas and techniques we can expand the reach of HFMA both on a local and national level. I urge you to participate in our success. Pursue leadership opportunities by volunteering; take advantage of local education; and participate in virtual and soon inperson networking opportunities. If you have an interest in getting more out of your membership and going beyond please contact me for further details: cekbom@betzmitchell.com Be involved, stay involved: Knowledge is Power! Wishing you to stay safe & healthy!



MEDICARE COST REPORT GUIDANCE FOR HEALTH CARE PROVIDERS WITH COVID-19 FUNDING

The annual Medicare cost report is a critical document for cost-based reimbursed providers, such as critical access hospitals, whose payments are based on this report. According to the Centers for Medicare & Medicaid Services (CMS), "Medicare-certified institutional providers are required to submit an annual cost report to a Medicare Administrative Contractor (MAC). The cost report contains provider information such as facility characteristics, utilization data, cost and charges by cost center (in total and for Medicare), Medicare settlement data, and financial statement data." On August 26, 2020, the CMS released updated information in the Medicare Fee-for-Service Billing FAQ document. Prior to that, there wasn't clear guidance on how the Provider Relief Fund (PRF) and other COVID-19-related financial benefits, such as payroll tax deferral, would be treated on the cost report.

Background

The PRF is \$175 billion authorized by the Coronavirus Aid, Relief, and Economic Security (CARES) Act and the Paycheck Protection Program and Health Care Enhancement Act. The PRF has been given to health care providers in various distributions, starting on April 10, 2020, as well as via claims-submission to the Uninsured Program. Medicare- and Medicaid-enrolled providers are generally eligible for a payment of 2% of their annual patient revenue, plus any additional targeted allocations that may be applicable. Rural providers or nursing homes, among others, are examples of those that were eligible.

Medicare Cost Report Guidance

Following is a breakdown of how to report COVID-19 funding on your cost report:

PRF Payment Amount

Providers must report PRF payments in aggregate on the statement of revenues, and the revenue amount must be classified as "COVID-19 PHE PRF." For a comprehensive list of PRF program payments that should be reported in the category, please refer to the PRF website or our frequently updated article that details COVID-19 grants and funding updates for the health care sector.

Expenses: PRF Payment Amount

Providers shouldn't adjust expenses on the cost report based on PRF payments, including use of the funds toward lost revenue. Providers must adhere to federal guidance regarding appropriate use of funds, as outlined in the PRF terms and conditions and FAQs. This includes ensuring "the money is used for permissible purposes (namely, to prevent, prepare for, or respond to coronavirus, and for health care related expenses or lost revenues that are

attributable to coronavirus)" and that PRF money isn't used "to reimburse expenses or losses that have been reimbursed from other sources or that other sources are obligated to reimburse," according to the new guidance.

PRF Uninsured Program Payments

Subsection (d) hospitals that utilize the Inpatient Prospective Payment System (IPPS) must not report charges reimbursed by the PRF Uninsured Program on Worksheet S-10 of the cost report.

SBA Loan Forgiveness Amount

Small Business Administration (SBA) forgiveness for a Paycheck Protection Program (PPP) loan must be reported in aggregate on the cost report's statement of revenues, using the same field that PRF payments are reported. If the provider doesn't receive forgiveness for a portion of the PPP loan, the provider reports no forgiven amount for this portion. If the provider pays interest on any portion of loan, the provider may report the interest expense, similar to other interest expenses. It's likely you won't know if your loan is forgiven and by how much until 2021, which will have implications on your tax planning and financial reporting.

Expenses: SBA Loan Forgiveness Amount

Providers shouldn't offset the PPP loan forgiveness amount against expenses on the cost report, unless the amounts can be attributed to specific claims, such as payments for uninsured. The PPP loan is designed to provide an incentive for businesses to retain their workers on their payroll. The SBA loan forgiveness is available to recipients who meet employee retention criteria and use the funds for eligible expenses, as outlined in the FAQs.

Employer's Social Security Tax Payment Deferral

Providers that elect to utilize the employer's share of Social Security tax payment deferral may expense this liability on the cost report in the year the costs were incurred. This must be done in accordance with 42 CFR 413.100(c)(2)(i)(B), which states "if, within the 1-year time limit, the provider furnishes to the contractor sufficient written justification (based upon documented evidence) for nonpayment of the liability, the contractor may grant an extension for good cause. The extension may not exceed 3 years beyond the end of the cost reporting period in which the liability was incurred." Contractors may grant extensions for good cause for COVID-19 related deferrals of the employer's share of Social Security taxes that were permitted under Section 2302 of the CARES Act. Section 2302 of the CARES Act allows employers to defer the deposit and payment of the employer's portion of Social Security taxes and certain railroad retirement taxes that would have otherwise been required to be made during the payroll tax deferral period of March 27, 2020—December 31, 2020. Employers are then required to deposit 50% of the deferred taxes on or before December 31, 2021, and the remaining 50% by December 31, 2022. However, if employers received SBA loans and such loans were forgiven under Section 1106 of the CARES Act, they aren't eligible for this tax deferral relief.

Guidance at a Glance GUIDANCE **COVID-19 FUNDING** PRF payment amount, in aggregate Include on statement of revenues SBA loan forgiveness amount, in aggregate PRF payment amount Don't adjust expenses SBA loan forgiveness amount, unless attributed to specific claims Don't report on PRF Uninsured Worksheet S-10 Program payments Employer's share of Allowed to include Social Security tax as liability payment deferral

Considerations for Providers

Careful tracking and reporting of all payments and expenses identified above are critical for proper cost report settlements and rate setting. The lasting effects of COVID-19 both operationally and economically could affect federal and state funding for many years to come. Providers will need to follow all prescribed reporting instructions and evolving guidance to avoid unintentional consequences when it comes to reimbursement and future reporting and distribution of aid funds.

Paul Holden has practiced public accounting since 2003. He provides business assurance and reimbursement consulting services to health care providers in acute and post-acute settings throughout the western United States. He can be reached at (503) 478-2108 or paul.holden@mossadams.com.

Georgia Green has worked in the health care industry since 2011. She provides strategic and operational consulting services to health care providers and payers and has extensive experience helping clients integrate value-based care models from start to finish. She can be reached at (916) 503-8251 or georgia.green@mossadams.com.

Special thanks to Scott Murphy, staff, Moss Adams, for his contributions to this article.







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NEW SUPPORTING DOCUMENTATION REQUIREMENTS FOR MEDICARE COST REPORTS

The Centers for Medicare & Medicaid Services (CMS) previously issued new requirements for supporting documentation to be submitted with Medicare cost reports as part of the fiscal year (FY) 2019 inpatient prospective payment system (IPPS) final rule-making cycle. The final rule was posted in 2018, but will soon go into effect for the first time for some hospitals, contingent upon when their cost report is due. Below, we explore details of these changes and considerations for your organization when submitting cost reports.

Key Information

The FY 2019 IPPS final rule is applicable to cost reporting periods beginning on or after October 1, 2018. Cost report types and items affected by these new requirements include:

- Disproportionate share hospitals (DSH)
- · Charity care and uninsured discounts
- Bad debt

Medicare DSH Data

Each DSH-qualifying hospital must include a detailed listing of its Medicaid eligible days that correspond to the Medicaid eligible days claimed in the cost report as supporting documentation. Failure to provide the required support will result in cost reports being rejected for lack of supporting documentation. Going forward, if a hospital submits an amended cost report, whether that be the 12-month cost report or another amended cost report, supporting documentation must include either:

- An amended listing
- · An addendum to the original listing

Worksheet S-10 Data

Additionally, for charity care detail, CMS provided examples of the information needed to support Worksheet S-10 data that corresponds to the amount claimed in the hospital's cost report such as:

- Patient name
- · Dates of service
- Insurer
- · Amount of charity care or uninsured discounts provided

Summary Reports

Summary reports historically used to report S-10 values no longer suffice under this new requirement. Summary reports won't meet Medicare Administrative Contractor (MAC) S-10

audit requirements because they can vary greatly from the actual detail of charity and bad debt write-offs that occurred during the fiscal year. When filing support for Worksheet S-10, it's important to submit your uncompensated care data in an audit-ready format that contains all data specifications required by the MACs.

Medicare Bad Debt

CMS will also require the supporting detail for providers claiming Medicare bad debt.

Data Submission

There isn't a current standard format for submitting this data, other than for bad debt. CMS, however, plans to include a template in the Paperwork Reduction Act notice. In the FY 2020 IPPS final rule, CMS also noted that the Paperwork Reduction Act would include proposed changes to the Worksheet S-10 instructions. A public comment period will be provided for questions about and suggestions for modifications to Worksheet S-10.



Michael Newell is a partner at Moss Adams and has worked in health care financial management since 1982. He's worked with hundreds of hospitals for thousands of fiscal years to prepare and review Medicare DSH and Worksheet S-10 for cost report filings. For more information on these new requirements, compiling the required data, or for help with your organization's compliance needs, Michael can be reached at (469) 587-2120 or michael.newell@mossadams.com.



FINANCE FRIDAYS WEBINAR SERIES

As a result of the incidence of COVID-19, and out of an abundance of caution for the health and safety of our members, we were not able to host our usual in person semi-annual reimbursement seminar. We utilized this as an opportunity to pivot from the status quo and access the creative side of our brains and establish a series of weekly webinars, dubbed "Finance Fridays" where we hosted a different hour-long webinar almost every Friday since October. We've been able to have sessions covering Medicare's 2021 IPPS Final Rule, Reimbursement Hot Topics, and Provider Relief Funds Reporting Guidance. We're working to finalize and schedule our remaining upcoming topics as follows:

- Friday, November 13th from 8:30am 9:30am: 340B Update
- Friday, November 20th from 8:30am 9:30am: ICR Audit Update
- Friday, December 4th from 8:30am 9:30am: Price Transparency, Part 1: Requirements
- Friday, December 11th from 8:30am 9:30am: Price Transparency, Part 2: Provider Panel on Preparation and Strategies

With the success of Finance Fridays for the semi-annual reimbursement topics, the Education Committee is looking to extend this into the beginning of calendar year 2021 and continue the weekly Finance Fridays webinars as we move to our Annual Accounting and Auditing Update topics. We're currently planning to have topics to include an Upcoming Accounting Standards (GAAP) Update, Refresher and Lessons Learned from Early Adopters of the New Lease Standard, and a Community Benefit and Tax Update, with a few other items hoping to be added to the list. Stay tuned for more information as we finalize the final topics and dates for the return of Finance Fridays in early 2021!

We hope to see you soon on an upcoming Finance Friday!

Nick Rivera
Senior Manager, BKD CPAs & Advisors
Finance Committee Vice Chair, HFMA Metro NY Chapter



Remembering Past Golf Classics

2019



2018







































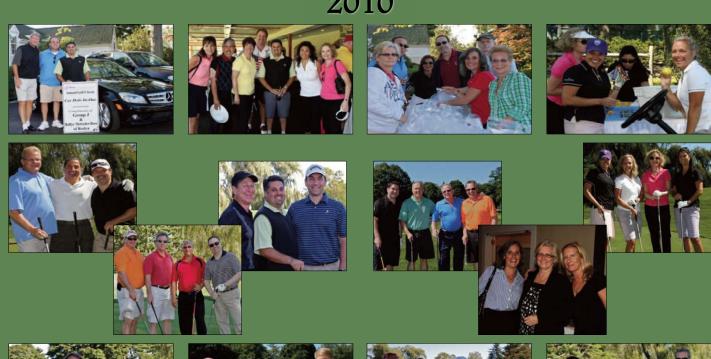




2011



2010











Celebrating the life of:

Daniel J. Rinaldi Valued HFMA Member August 23, 1947 – October 16, 2020

The MetroNY HFMA Chapter expresses our deepest sympathy.

May loving memories bring happy thoughts, smiles and comfort.

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