

NM HFMA 2023 Fall Conference

FUTURE OF HEALTHCARE: BECOMING AGENTS OF CHANGE

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• Presented by:

• Jennifer Boese, Director of Health Care Policy & Innovation-CLA (CliftonLarsonAllen)





Julia Ruetten, Director, Government Regulation and Reimbursement Policy-New Mexico Hospital Association

With more than a decade of experience in New Mexico state government, government relations, and healthcare public policy, Julia advocates for New Mexico's hospitals within the complex regulatory and financing landscapes as the Director of Government Regulation and Reimbursement Policy at the New Mexico Hospital Association. She is most interested in finding sustainable approaches to preserve and expand access to healthcare and to support and grow the dedicated healthcare workforce in our state.

Prior to joining the state Hospital Association, Julia worked for Presbyterian Healthcare Services, New Mexico's largest private employer, as the Manager for Government Relations and Public Policy. There she helped develop and support the public policy needs of Albuquerque Ambulance Service and the system's regional hospitals, as well as played a significant role in advocating for legislation that would best serve the employees, members, and patients of the organization during the annual state legislative sessions. Additionally, Julia's state government experience consists of three years with the New Mexico Department of Finance and Administration and more than four years with the Office of Governor Susana Martinez.

Born and raised in Montana, she holds a bachelor's degree from the University of Northern Iowa and a master's degree from the University of New Mexico School of Law.

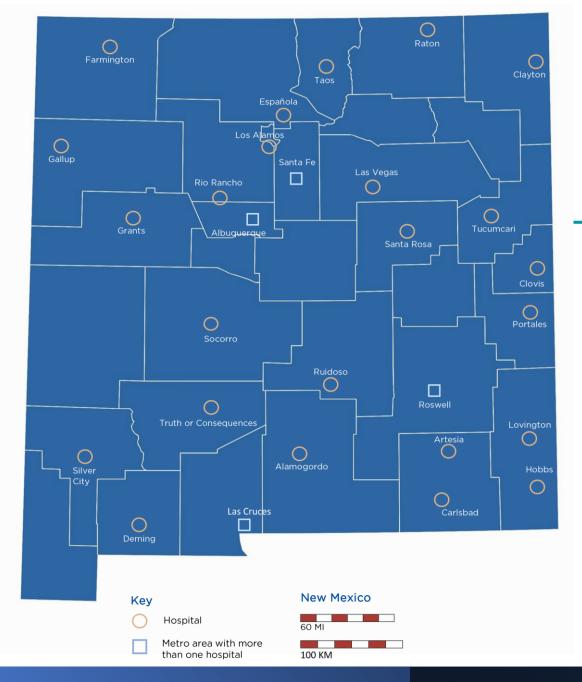
Hospital Financing: State Legislative & Regulatory Updates

New Mexico Hospital Association

Prepared for the NM HFMA 2023 Conference September 18, 2023







New Mexico Hospital Association (NMHA)

Membership comprised of 47 rural, urban, academic, and specialty hospitals.

We work with others to advance public policy solutions to create a healthier New Mexico by ensuring access to quality care.



Today's Focus

Hospital Financing Public Policies in NM:

- Where We Are...
- What's Coming...
- Looking Ahead...

Where We Are...



Rural hospitals at the brink

Revenue, inflation, staff and transport among challenges

By Geoffrey Plant Aug 30, 2023 Updated Aug 31, 2023 💂 0



NM rural hospitals struggling to find insurance coverage

By Landry Sena The Staff of The News

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Last updated 8/26/2023 at 12:59pm

SANTA FE NEW MEXICAN

Hospitals say New Mexico's rising malpractice payout cap puts insurance out of reach

By Marianne Todd mtodd@sfnewmexican.com Sep 3, 2023 Updated Sep 4, 2023 💂 30



NEW MEXICO'S LEADING NEWS SOURCE

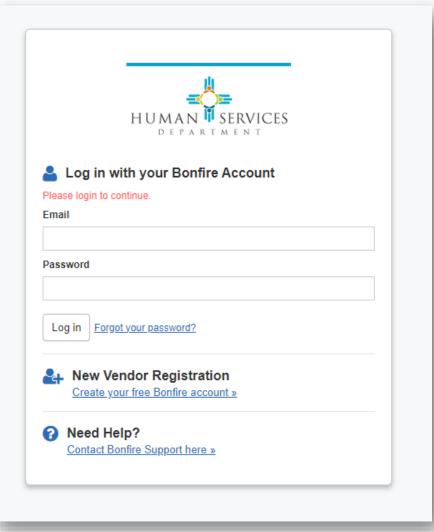
New Mexico hospitals cite financial pressure and care 'deserts' as they brief lawmakers on rural challenges
By Dan McKay / Journal Capitol Bureau
Aug 24, 2023 Updated Aug 24, 2023

...Where We Are...

- ✓ Targeted Medicaid Rate Increases Effective 7/1/23
 - Outgrowth of HSD benchmarking studies in 2022 (<u>Providers</u> | <u>Facilities</u>)
 - \$399.4 million investment
 - Providers: (proposed rates)
 - Primary care, maternal health, and behavioral health services providers
 - Medicaid reimbursement rates increased to 120% of Medicare or equivalent
 - Other service codes raised to **100%** of Medicare or equivalent
 - Hospitals: (proposed rates)
 - Raises the rates for "rural hospitals, hospitals, and nursing facilities <u>up to</u> 100% of Medicare or equivalent"
 - By class, raises rates 4%-20%
 - Prioritizes underserved-area and rural hospitals by exhausting fee-for-service (FFS) upper payment limit (UPL)
 - <u>Letter of direction #103</u> 9/12/23: Medicaid Provider Payment Rates State Fiscal Year 2024 Payment Rate Increases

...Where We Are...

- ✓ Rural Health Care Delivery Fund
 - \$80 million investment
 - Provides start-up and defrayed operating losses grant funding for new or expanded inpatient, outpatient, primary care, specialty care, or behavioral health services in rural NM counties (pop. below 100k)
 - Cannot be used for:
 - Existing services
 - Construction costs or the purchase of land and/or buildings
 - Awards made via a competitive application process (opened 8/21)
 - Deadline for expedited funding is 9/21 (this Thursday); general deadline is 10/21
 - More information (including application):
 https://www.hsd.state.nm.us/primary-care-council/



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...Where We Are

- ✓ New Mexico is ranked 48th in total Medicaid expenditures recipient
- ✓ Medical malpractice cost pressures
 - Rising premiums and increasing recovery cap
 - Cap raises to:
 - \$5 million on 1/1/24
 - \$5.5 million on 1/1/25
 - \$6 million on 1/1/26
 - Adjusted annually by the CPI for all urban consumers beginning 1/1/27
 - Hospitals removed from the Patient's Compensation Fund beginning 1/1/27
- ✓ Ongoing inflated agency staff expenses
- ✓ Lingering licensing timelines

Annual Per Capita Medicaid Expenditures: NM Relative to US Median and Minimum

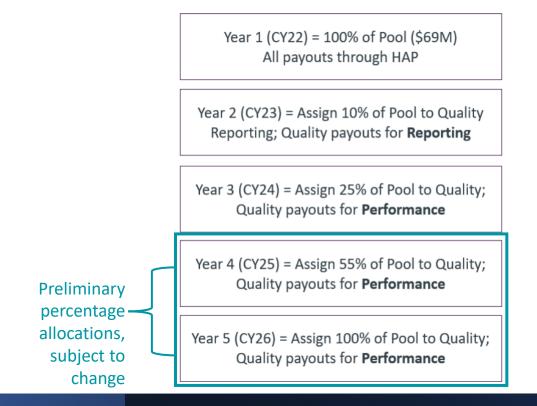


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What's Coming...

- ✓ Hospital Value Based Payment Program (HAP/SNCP)
 - New hospital supplemental payment program using former HAP and HQII funding
 - Former SNCP hospitals eligible to participate
 - Under CMS review, effective 1/1/23



NEW MEXICO HOSPITAL ASSOCIATION September 18, 2023

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...What's Coming...

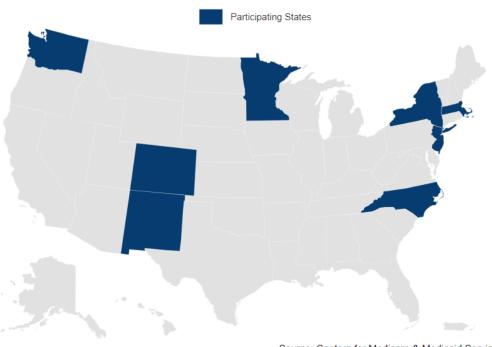
- ✓ Credentialing and Loading Updates
 - <u>SB 232</u> (2023): **30 days** for fully insured commercial carriers to credential and load providers into payment system; anticipate complementary rulemaking from OSI
- ✓ Gold Card Prior Authorization Regulation (13.10.31.12 NMAC)
 - Requires fully insured commercial carriers to report annually to OSI
 - In 2023, carriers must select at least **30%** of **high compliance providers** and "enter into an agreement... on an alternative to the standard requirement to submit a prior authorization request for a discreet service or set of services that otherwise require one..." (effective 1/1/24)



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...What's Coming

- ✓ Making Care Primary Payment Models (State & Federal)
 - Similar payment models designed to increase the use of primary care by enhancing payments, incentivizing coordination, and reducing the use of emergency care
 - State program rolls out in 2024 and is an incentive-based value-based payment program
 - More information & resources: https://www.hsd.state.nm.us/primary-care-council/
 - Federal program launches July 1, 2024 in New Mexico and seven other states
 - Participation is by <u>competitive application</u> due November 30
 - More information & resources:
 https://innovation.cms.gov/innovation-models/making-care-primary



Source: Centers for Medicare & Medicaid Services

Looking Ahead...

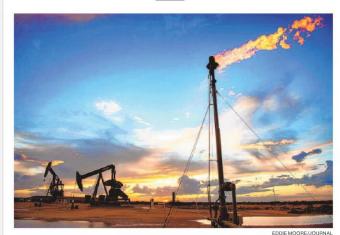
ALBUQUERQUE JOURNAL

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Methane gas is burned off at a site of three oil wells in Lea County in this 2019 photo.

BOOM!

Oil, gas to help state generate \$3.5B in new spending

SANTA FE NEW MEXICAN

Locally owned and independent Thursday, August 24, 2023 santafenewmexican.com \$1.50



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...Looking Ahead

What we don't know in the short-term...

- Full impact of Medicaid redeterminations?
- CY 2024 premium rates for Patient's Compensation
 Fund and independent carriers?
- CMS policy change: UPL to ACR
 - Medicaid rate increases in FY25?
- Medicaid rate increases (for maintenance if not, ACR)?
- Dedicated Medicaid/health care trust?
- Additional funding for the Rural Health Care Delivery Fund?
- Ongoing labor shortage...?
- ...???

What we don't know in the long-term...

- Expanded Medicaid eligibility (Medicaid Forward, study)?
- Continued hospital global budgeting & single-payer efforts (Health Security Act)?
- Ongoing labor shortage...?



What we do know...

- ✓ Turquoise Care, effective 7/1/24
- ✓ Hospital volume pressures on financial sustainability

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✓ Rural/frontier hospital sustainability concerns

Questions? Thank You!



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Contact:

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Managing a Remote Work Force

• Presented by: Presbyterian Healthcare Services

 Laura Calkins, Vice President of Revenue Cycle;

 Jerald Archibeque, Director Hospital Billing;

 Tamara Hidalgo, Director HIM, Informatics, Auditing and Professional Billing;

 Cindy Naranjo, Director of Patient Access-





Laura Calkins, Vice President of Revenue Cycle- Presbyterian Healthcare Services

Laura L. Calkins is currently the Vice President of Revenue Cycle at Presbyterian Healthcare Services in Albuquerque, New Mexico where she has been a member of the leadership team since 1999. The Presbyterian Revenue Cycle team has been awarded the HFMA Map Award for High Performance in Revenue Cycle seven times in the past nine years with four being in the Integrated Delivery System category. Laura has been in the healthcare finance industry for over 30 years and remains passionate in her pursuit to help others in their most vulnerable times. Laura has a BSBA and MBA in Finance and Accounting



Jerald Archibeque, Director, Hospital Billing- Presbyterian Healthcare Services

Jerald's career in healthcare began in 1999 (23 years). He has been with multiple organizations in his career that include Presbyterian (16 years), Lovelace (6 years), Rehoboth in Gallup (1 year), and 2 DME companies (1 year). He has experience in Patient Access, Cash Management, both Commercial and Government Billing and Collections, as well as revenue recovery (contract underpayments & overpayments). He has also managed the Home Health and Hospice billing for Presbyterian. He now is the Director over Hospital Billing for Presbyterian Healthcare Services.



Tamara Hidalgo, CCS-P, CPC, COC Director, HIM, Informatics, Auditing and Physician Billing Presbyterian Healthcare Services

Tamara has been at Presbyterian for over 25 years in a variety of roles within the Revenue Cycle. She completed her bachelor's degree in business administration from the University of New Mexico, Anderson School of Management in 2003. Since then, she has enjoyed working on projects within Presbyterian such as the implementation of the Electronic Health Record, computer assisted coding, Voice Recognition transcription, documentation management systems, along with numerous automation projects within the revenue cycle.

Tamara has 2 daughters, ages 18 and 15, who are both active in 4-H and FFA. They raise and show registered Brown Swiss dairy cattle all over the southwest. We also enjoy riding horses.



Cindy Naranjo-Director of Patient Access EW Presbyterian Healthcare Services

Cindy Naranjo-Director of Patient Access EW

Cindy has been with Presbyterian Healthcare Services for 35 years in a variety of positions within Patient Access and the Revenue Cycle. In 35 years with Presbyterian, she has had the opportunity to integrate an educational platform for new employees in Patient Access, as well as be part of opening new healthcare facilities in Rio Rancho and Santa Fe NM. Her passion is working on the frontline and helping patients.

Cindy, and her husband Jason, have been married for 35 years, and have two daughters Reyna and Adrianna. In their spare time, Cindy and Jason love to travel and attend a variety of sporting events.



Managing a Remote Workforce

Jerald Archibeque, Director Hospital Billing Laura Calkins, Vice President Revenue Cycle Tamara Hidalgo, Director HIM, Informatics, Auditing & Professional Billing Cindy Naranjo, Director Patient Access



PAST & COVID

Prior to COVID

- Limited to business need only.
- Lack of organizational and leadership acceptance/support.
- Significant Human Resource hurdles.
- Lack of infrastructure to support.
- Concern about maintaining and fostering the Presbyterian culture.

During COVID

- Moved to nearly 100% remote workforce within two days.
- Move based on organizational need.
- Human Resource policies adapted to new reality.
- Developed infrastructure to support.
- Culture wasn't a consideration at first.



PRESENT

Successes

- Productivity improved overall.
- Modified employee onboarding processes.
- Improved hours of operations while providing flexible schedules.
- Improved Key Performance Indicators.
- Reduced office expenses.
- Developed daily, weekly, and monthly huddle system.
- Virtual team gatherings.
- Quarterly off site team gatherings.
- Fostered Presbyterian culture.

Considerations

- Tracking staff activities is critical and time consuming.
- Still need to see each other regularly via Web cameras.
- Develop team building activities to keep staff engaged and help team members get to know one another.
- Individual and team recognition is more important than ever before.
- Must reengage with onsite personnel and teams as needed.



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Presented by:

Deanna Saulnier, Chief Health
 Strategy Officer- Planned
 Parenthood of the Rocky
 Mountains



Deanna Saulnier, Chief Health Strategy Officer- Planned Parenthood of the Rocky Mountains

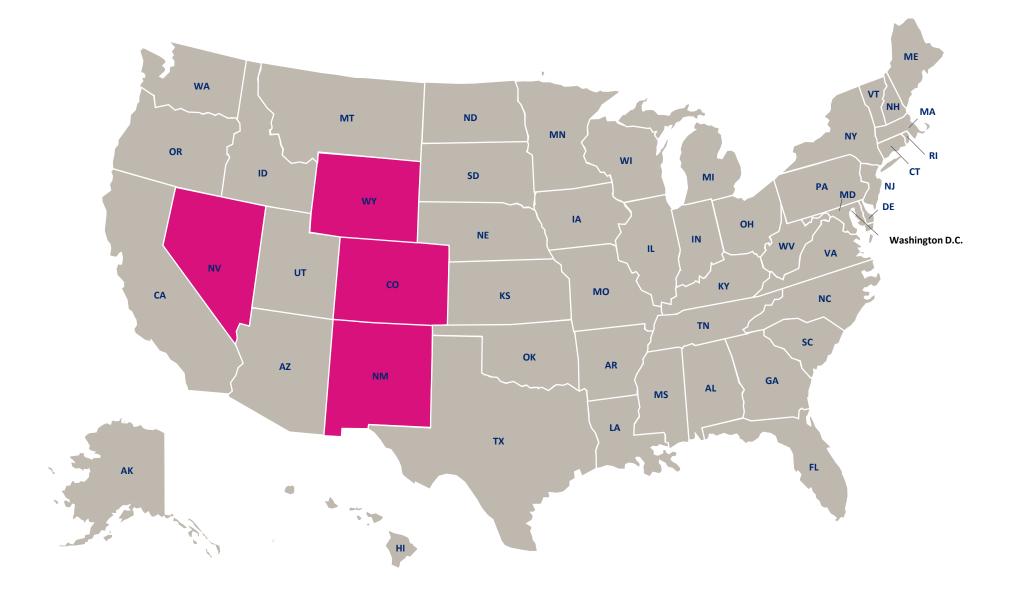
Deanna began her career with Planned Parenthood in 2005 as a Health Center Assistant. She has since held many roles in the organization – learning, organizational development, clinical operations, and most recently CHSO. She works with brilliant directors and partners with our incredible Chief Medical Officer to oversee the health system at PPRM. Overseeing the 3-state Health Center system, the 4-state Virtual Care function, the Impact and Analytics team, and a Projects team. She is deeply committed to the mission of Planned Parenthood and loves that her work helps contribute to a more just, equitable, and healthy world.



Fundamentals of Virtual Care

Deanna Saulnier (she/hers)
Chief Health Strategy Officer

PPRM Footprint







Background

- Small site-to-site telehealth programs operated managed by Ops team
- Call Center program in a separate line
- Nurse triage line staffed by HC nurses including during their HC shifts
- CFU program under clinical quality team



Virtual Care Programs

- Telehealth
 - Synchronous
 - Site to Site (S2S)
 - Direct to Patient (DTP)
 - Asynchronous



Virtual Care Programs

- Call Center
- Centralized Follow-up (CFU)
- 24/7 Nurse Triage
- Patient Portal
- Online Appointment Scheduling
- Patient Navigation
- Behavioral Health*

Why virtual care?



- Centering equity reduce barriers to care
 - Physical
 - Logistics
 - Finances
- Remove as much work as possible off HC staff
- Move some lower acuity visits out of HCs
- Manage imbalances in staffing and just-intime disruptions
- Optimize rural locations
- Provide centralized support and oversight of higher risk areas



Requirements



- Manage HIPAA compliance with all technology and service models
- Licensure and credentialing providers in all states of care
- Fluency in various state regulations
- Manage payor contracting and RCM for virtual services
- Technical contingency planning
- Flexible staffing
- Internal and external partnerships and networks for hybrid service
- Thoughtful and flexible leadership



Challenges

- Covid rapidly advanced format, rules and regulations are still catching up and evolving
- External forces impact service options, making it difficult to map strategy
- Technology issues
 - Patients not connecting
 - Obtaining consent
 - Sending asynch videos securely
 - Focused time for patients
- More technology could push out vulnerable populations
- Technology had been a la carte. Much is now consolidated. Difficult to disentangle established solutions



Opportunities



- Additional services and support within patient navigation
- Expanding the use of technology
- Networking and partnering with community resources to reduce tech barriers (i.e., libraries)
- Behavioral health
 - PHQ-9 identifies patients with needs but connection to care is not always accessible
 - Just-in-time support for HC staff
 - Direct support and connection for patients in need



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Merger Acquisition Transition Panel

- Presented by:
- Chris Benson, Executive Director- Juniper Advisory;
- Pete Seaman, Vice President of Finance- Gerald Champion Regional Medical Center;
- Darlene Fernandez, Chief Financial Officer-Sandoval Regional Medical Center



Chris Benson, Executive Director- Juniper Advisory

Chris Benson joined Juniper Advisory after nearly 25 years at the Mayo Clinic, beginning as an Administrative Fellow and ending as Vice Chair of domestic and international provider relations. This included growing the Mayo Clinic Care Network from inception to over 35 nonprofit health systems in the United States and Il global members across Mexico, India, China, Korea, Singapore, Philippines, Saudi Arabia, Egypt, the United Arab Emirates.

He has an unparalleled understanding of how organizations in the hospital industry can create value together short of change of control transactions. His experience at Mayo included emphasis on clinical operations, quality improvement, cultural development and strategic collaborations. At Juniper Advisory, Chris continues his work supporting independent hospitals and systems through advising boards and leaders on competitive positioning, partnerships, and growth.

Chris is a native of Iowa and earned a Master of Health Administration at The University of Iowa



Darlene Fernandez, Chief Financial Officer- Sandoval Regional Medical Center

Darlene Fernandez is a Certified Public Accountant with over 25 years of financial experience. Fernandez serves as the CFO of UNM Sandoval Regional Medical Center (SRMC), a not-for-profit healthcare Medical Center in Sandoval County. She began her career with UNM Health System in 2003. With an accounting degree from the University of New Mexico, she has lead various teams ranging from Accounting, Budget, Patient Financial Services, Revenue Cycle, Patient Access, Case Management, and Materials Management to Food & Nutrition Services. In her current role as a Chief Financial Officer, she serves as an advisor to the CEO of UNM SRMC.

Prior to joining UNM, Darlene served as an Assistant Controller for Presbyterian Healthcare Services. She started her career at Sun Healthcare, a publically traded company. Fernandez also worked for United Healthcare, a healthcare insurance organization. Darlene has a wide range of healthcare finance experience.

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• Presented by:

• Robert C. Tyk, FHFMA- Kaizen Consulting



Robert C. Tyk, FHFMA-Kaizen Consulting

Bob has over forty (45) years of experience in the healthcare arena with more than thirty (55) of those years as a Chief Financial Officer (CFO) or Chief Executive Officer (CEO). He has worked in hospital systems, physician group practices and stand-alone hospitals ranging in size from 25 bed Critical Access Hospitals to University owned facilities. Ownership of these facilities includes Not-for-Profit, For Profit, County and Religious Based.

A great deal of his experience is in turn-around opportunities across the country. Change management has been the majority of the focus in all his assignments. While working with these organizations, he has assisted with the implementation of improved processes which resulted in improved financial viability for the organizations as well as a marked change in customer/employee and physician satisfaction.

Bob holds a Bachelor's Degree in Commerce – Accounting Major and a Master of Business Administration with a Major in Accounting from De Paul University in Chicago, Illinois.

Bob is also a Certified Manager of Patient Accounts with HFMA and a Fellow with the Healthcare Financial Management Association (HFMA). Bob has been a member of HFMA for over 45 years and has served at the Chapter level with the New Mexico Chapter as well as a member of the National Board of Directors of HFMA.



During his tenure with HFMA, he has recruited many new members to HFMA and provided leadership at all levels including stints in regional leadership. Mr. Tyk has provided ideas, direction and leadership to all New Mexico chapter committees over the years. He has worked in many healthcare organizations within New Mexico and has performed contract work for healthcare organizations throughout the United States. He has been an ambassador for NM HFMA wherever he has gone. Mr. Tyk has received HFMA awards for service, attained fellowship designation and certainly merits recognition as a lifetime HFMA member.

• 45 Years of Membership



Chapter Life Membership

The Frederick T. Muncie Gold Award

Presented to a member who has earned a total of 75 (formerly 300) member points. This award honors Frederick T. Muncie, an organizing member of the AAHA, and the first president of the association (1947-1949). Muncie also assisted in the organization of the first AAHA chapter (First Illinois)

Congratulations John Mcmullin!



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Putting Mental Health Literacy in Finance Professionals Toolboxes

- Presented by:
- Adam Nemer, Founder- Simple Mental Health





Adam Nemer, Founder-Simple Mental Health

Adam Nemer was a CFO and Sr. Ops Executive at Kaiser Permanente for 19 years all the while suffering from undiagnosed depression and anxiety. Fortunately, a compassionate boss encouraged him to get help, and his life shifted. During Adam's recovery, he experienced the effect of the stigmas of mental illness firsthand. So, he started sharing his story, and found he was making a difference. Inspired, Adam founded Simple Mental Health to put mental health literacy in leaders' toolboxes.





Simple Montal Health









Simple Mental Health





Simple Montal Health Leadership Consulting

Mental Health Literacy

is understanding that mental illness is just as real and painful as physical illness, knowing how to recognize if someone is struggling with their mental well-being, and knowing how to help them get help.







Simple Montal Health Leadership Consulting

Mental Wellbeing Impacts







Productivity

Attendance

Retention







Individual Employee Satisfaction

A Toxic Workplace is the NEW SMOKING



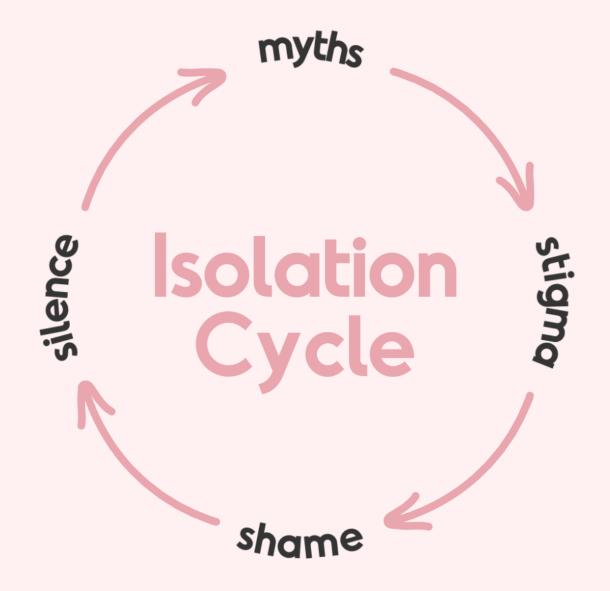


Simple Mental Health



Stigma

alone prevents 80% of employees from seeking out mental health support



Simple Mental Health



www.mentalhealthfirstaid.org

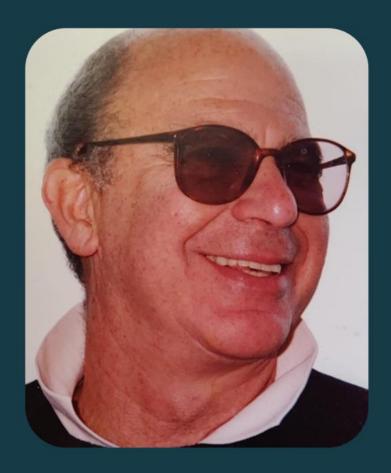




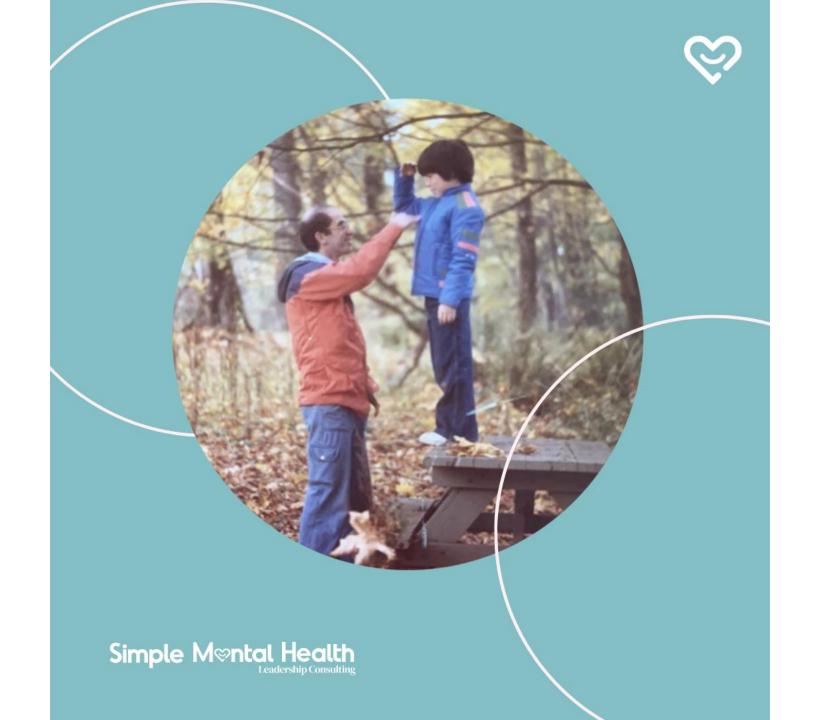




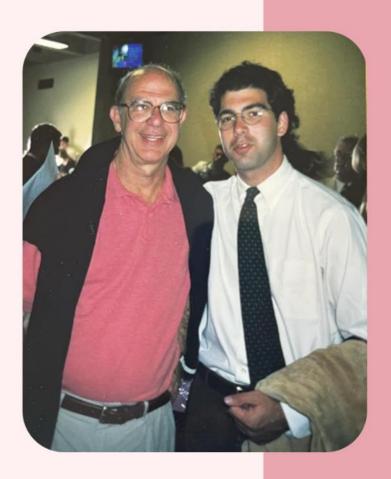




Simple Montal Health Leadership Consulting













Simple M®ntal Health Leadership Consulting







How to Make your Workplace

Stigma-free

Decide to become mental health literate

Invest a day in a mental health literacy class

Take what you learned and use use it at work





www.mentalhealthfirstaid.org

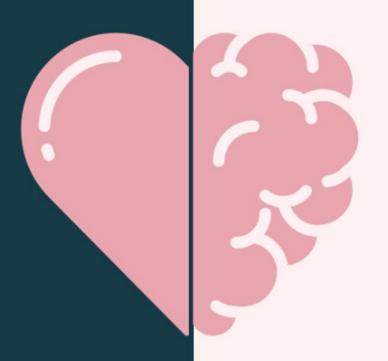


Simple Mental Health Literacy 101



Simple Montal Health Leadership Consulting

Mental Mork 10,9%







Simple Montal Health Leadership Consulting



LinkedIn, Simple Mental Health



Instagram, Simple Mental Health



Facebook, Simple Mental Health





Finance Shining the Light and Leading the Way





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