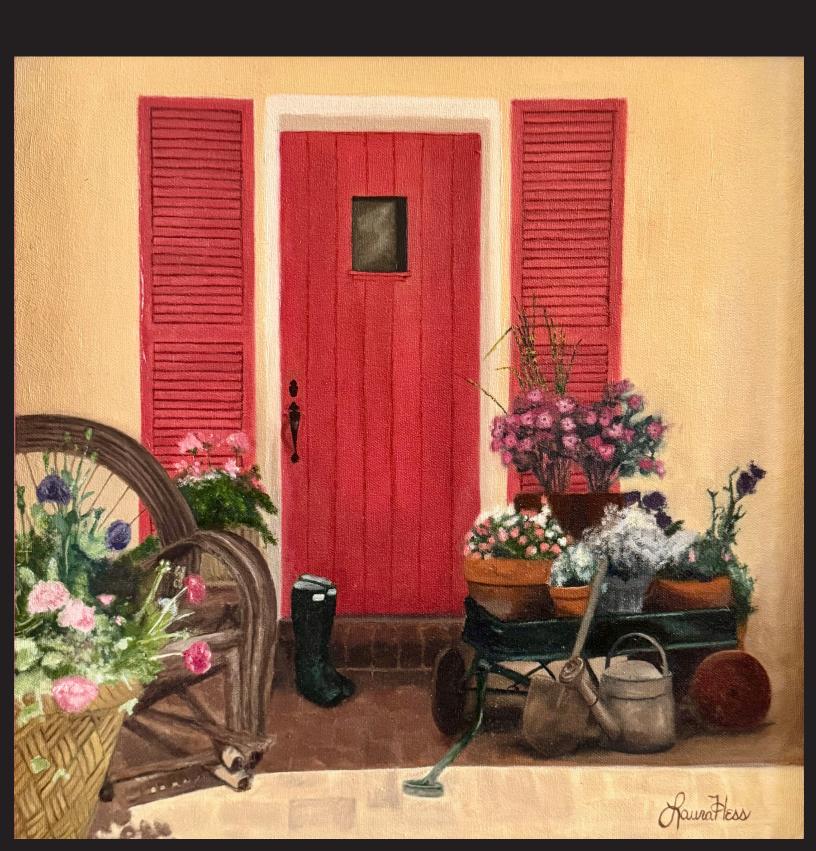
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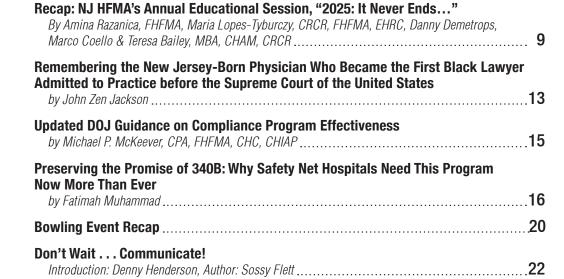




The Corporate Transparency Act: Where It Stands and What May Come Next

Withum





From Classroom to Career: A Rutgers Student's Journey in Healthcare Finance

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Who's Who in the Chapter 2024-2025

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IDENTIFICATION STATEMENT

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Our objective is to provide members with information regarding Chapter and national activities, with current and useful news of both national and local significance to healthcare financial professionals and as to serve as a forum for the exchange of ideas and information.

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The Communications Committee reserves the right to accept or reject contributions whether solicited or not. All correspondence is assumed to be a release for publication unless otherwise indicated. All article submissions must be typed, double-spaced, and submitted as a Microsoft Word document. Please email your submission to:

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The President's View . . .

Dear Chapter Members,

It is with great pride and a profound sense of responsibility that I address you today. Our collective achievements, shaped by the dedication and passion of each member of our organization, have laid a strong foundation for a future brimming with promise and potential.

Reflecting on Our Journey

Over the past year, we have navigated unprecedented challenges and seized numerous opportunities. Our resilience and adaptability have been tested, and I am proud to say that we have emerged stronger and more united.

As we reflect on our journey, it is essential to acknowledge the contributions of every member of our chapter. Your unwavering commitment and tireless efforts have been the driving force behind our success. Together, we have created an environment where ideas thrive, and creativity is nurtured.



Maria Facciponti

I am proud of our chapter accomplishments so far this year and will continue to strive ahead.

Looking Ahead

As we look to the future, I am filled with optimism and excitement. We will continue to build on our strengths, explore new opportunities, and push the boundaries of what is possible. I invite each of you to join us on this journey, to share your ideas, your talents, and your passion.

Closing Thoughts

In closing, I want to express my heartfelt gratitude to each member of our chapter. Your support, your dedication, and your belief in our mission are what make us who we are. As we move forward, let us continue to work together, to support one another, and to strive for excellence in all that we do.

Thank you for being part of this incredible journey. I look forward to the many achievements and successes that lie ahead.

With deepest appreciation,





From the Editor . . .

Hello Everyone and Happy Spring!

The beginning of 2025 has been a whirlwind as the Trump Administration settles in for its second term. With his new Cabinet now fully constituted and Elon Musk heading up the cost saving efforts of DOGE, many in the healthcare industry are anxious about what the tightening of the federal fiscal belt will mean for them and their organizations.

Some of those fears may have been allayed slightly during the Administration's February Cabinet Meeting. When asked by a reporter, "Can you guaranty that Medicare, Medicaid, Social Security will not be touched," President Trump tersely responded, "I have said it so many times, you shouldn't be asking me that question. Ok. This will not be 'read my lips.' There won't be 'read my lips' anymore. We're not going to touch it." Rather, he reiterated that his Administration will be focusing its attention on routing out fraud, waste and abuse in these programs.



Jim Robertson

Despite what appears to be President Trump's unambiguous statements about his intentions surrounding Medicare and Medicaid cuts, there can be little debate that the healthcare industry will be experiencing significant shifts in policy over the next several years. The appointment of Robert F. Kennedy Jr. as Secretary of HHS could usher in a new approach toward vaccinations, and fresh initiatives addressing chronic childhood diseases and the use of certain psychiatric medications. The appointment of Dr. Mehmet Oz as the CMS Administrator could result in a heavier emphasis on covering Medicare beneficiaries through Medicare Advantage plans rather than through traditional Medicare. The pursuit of a more deregulated agenda and the continued development and use of artificial intelligence in healthcare could be transformative in ways we can't even predict at this moment in time.

As we travel together through these changes, your Garden State FOCUS Magazine will be there every step of the way, bringing you the latest developments in the industry as they happen. Thank you for continuing to rely on us. If you would like to submit an article on an area of healthcare in which you or your company are involved, you have an open invitation. Simply reach out to anyone on the Communications Committee listed on page 2 so we can include your article in an upcoming Edition!!

Kind regards,

The Corporate Transparency Act: Where It Stands and What May Come Next



By Fay L. Szakal

Fay L. Szakal

The question on every business owner's mind for the past two and a half months has been, what in the world is going on with the Corporate Transparency Act? For a period of time in December, the Corporate Transparency Act, or CTA, was all over the news reports, bouncing back and forth, up and down, between enforceability and unenforceability seemingly every day. From one minute to the next, the CTA was enjoined, or the injunction lifted, or enjoined again. And then suddenly the injunction was being vetted before the Supreme Court of the United States.

In that moment, we corporate lawyers breathed a sigh of relief – finally the see-saw would settle. SCOTUS would make a clear decision regarding the injunction, allowing time for the constitutionality of the CTA to make its way fully through the federal court system. But alas! We lawyers were fooled, for reasons to be explained.

By way of background, the CTA was originally passed on January 1, 2021, as part of the National Defense Authorization Act of 2021, which included the Anti-Money Laundering Act of 2020, in which the CTA appeared. While it had split support in the House of Representatives, the Senate vote was 82 in favor and 14 opposed, demonstrating the law's widespread bipartisan support. The Department of Treasury, and its Financial Crimes Enforcement Network ("FinCEN"), was tasked with developing regulations to implement the CTA, i.e., the "Reporting Rules," which would officially go into effect on January 1, 2024.

The CTA is intended to combat financial crimes committed through the use of shell companies, such as money laundering and wire fraud. To achieve this goal, the CTA imposes certain registration requirements on any domestic or foreign entity formed by the filing of a document with any jurisdiction's Secretary of State (a "reporting entity"). This includes companies, corporations, and limited partnerships, amongst other forms – totaling an estimated 40,000,000 reporting entities across the country. In the absence of qualifying for one of the twenty-three (23) exemptions under the Reporting

Rules, each reporting entity is required to report its "beneficial owners" and its "company applicant" in a federal database and to update that database each time its beneficial owners change.

The CTA quietly entered the public eye in January 2024, with its most acknowledgment coming from pop-up, third-party industry determined to capitalize on this otherwise free, new federal filing. Marketing was rife with entities charging \$150 to \$450 for facilitating the compliance of a single reporting entity. For frightened business owners alarmed by exorbitant fines and possible imprisonment, these relatively nominal fees were a small price to pay for painless compliance. To a lesser extent, state filing offices were also including on their business formation web portals information about the CTA reporting requirement, and slowly states were notifying entities pre-existing 2024 of their CTA reporting obligations as well. For just a few months, it seemed that the only parties truly concerned about CTA were lawyers and accountants, but that quickly turned tide in March 2024.

The first lawsuit, National Small Business United, et al. v. U.S. Department of the Treasury et al. was filed in the U.S. District Court for the Northern District of Alabama, which granted summary judgment in favor of the plaintiffs on March 1, 2024, stating that the CTA was not constitutional. On March 11, 2024, the DOJ appealed to the U.S. Court of Appeals for the Eleventh Circuit, where the lawsuit remains awaiting resolution. Other suits quickly followed around the country alleging violations of plaintiff's privacy rights as well as federal infringement on states' rights over corporate formation. Although there is some variance, the common arguments made across all of the lawsuits are these:

- The CTA exceeds congressional power to regulate interstate commerce because it also regulates purely domestic corporations that do not engage in interstate commerce, which domestic corporations fall under the domain of the individual state.
- The CTA interferes with **the authority of states** to regulate corporate formation.

continued on page 6

- The CTA violates personal privacy by requiring beneficial owners and company applicants to disclose personal information, which could lead to identity theft, other privacy breaches, and legal issues for high-profile persons engaged in sensitive businesses.
- Compliance with the CTA is **unnecessarily burdensome** for small businesses.
- The CTA infringes on First Amendment rights to free association because some people will be less inclined to engage in business due to the reporting requirement for beneficial owners.
- The CTA is not authorized under the Necessary and Proper Clause because it is not related to foreign affairs nor is it reasonably related to ensuring compliance with federal tax laws.

In response, the Department of Justice argues that the CTA is, in fact, a proper exercise of congressional authority. The DOJ argues:

- The CTA is authorized by the Commerce Clause because Congress may regulate any activity that substantially affects interstate commerce, including activities that are purely local but related to a class of activities that may impact interstate commerce, i.e., local activity that threatens the national market.
- Congress is authorized, through means like the CTA, to prohibit financial crimes and harmful economic activity, like money laundering, human and drug trafficking, and securities fraud.
- The Necessary and Proper Clause authorizes the CTA because identification of corporate ownership facilitates the taxing power, as wrongdoers may obscure their financial gain from businesses to avoid taxation.
- The CTA facilitates congressional authority and power to counter money laundering, human and drug trafficking, securities fraud and financial fraud with foreign nations, amongst the state, and with Native American tribes.
- The CTA is no different than any number of federal laws that require private information be disclosed to a government entity, such as the requirement for taxpayers to file returns or employers to report employees' wages. Corporations are often subject to similar forced disclosures for Securities Exchange Commission purposes.

The Federal District Courts have varied on where they fall regarding the constitutionality of CTA, and there is no consistency or predictability based upon the prior political trends of the judges in these matters. Every decision has been,

more or less, a roll of the dice.

That being said, two of the cases thus far have had a much greater impact because of perhaps some judicial activism on the part of the deciding judges. On December 3, 2024, Texas Top Shop, Inc., et al. v. Merrick Garland, Attorney General of the United States, et al., was filed in the United States District Court of the Eastern District of Texas. The six (6) plaintiffs, who ranged from a private individual to Texan domestic and foreign corporations, made the same common arguments as the other cases had alleged and requested a temporary injunction of the CTA while its constitutionality was decided by the courts. Judge Amos L. Mazzant, III, granted the temporary injunction, but took it a step further than the relief requested by the plaintiffs. Citing the Administrative Procedure Act, on December 3, 2024, Judge Mazzant issued a nationwide temporary injunction of the CTA, prohibiting enforcement by FinCEN against any reporting entity that had failed to report as of the decision date. Almost immediately thereafter, on December 5, 2024, the DOJ appealed Judge Mazzant's decision to the U.S. Court of Appeals for the Fifth Circuit, and on December 13, 2024, the DOJ filed an emergency motion with the Fifth Circuit to stay, or put aside, the injunction while its appeal was to be considered.

In response to the emergency motion, the Fifth Circuit accelerated the briefing schedule on the motion to stay the injunction, and by December 23, 2024, the Fifth Circuit granted the DOJ's motion. For almost three (3) days, the CTA was back! But that rather quickly ended on December 26, 2024, when another Fifth Circuit panel overruled the first Fifth Circuit panel and vacated its own stay of the injunction. After this intense judicial ping pong, the DOJ filed an emergency appeal to SCOTUS to stay Judge Mazzant's nationwide injunction on December 31, 2024.

Meanwhile, as Texas Top Shop was flying up the proverbial judicial flagpole and making national news, another Eastern District of Texas case was sneaking under the radar. In a matter entitled Smith v. U.S. Dept. of Treasury, Judge Jeremy D. Kernodle also issued a nationwide temporary injunction to stay enforcement of the CTA and its attendant Reporting Rules for largely the same reasons as were cited in Texas Top Shop. However, Judge Kernodle's injunction, dated January 7, 2025, went unaddressed by the DOJ – and virtually unnoticed by everyone else - for several weeks.

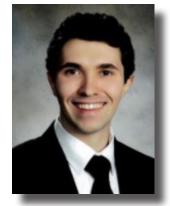
In fact, SCOTUS returned its decision on the DOJ's request to stay the nationwide temporary injunction in Texas Top Shop before the DOJ responded to the Smith

Focus on Finance

Employment Tax Reporting: 2025 Due Dates and Best Practices for Healthcare Entities



John Smith



Tim White

By: John Smith and Tim White

Employment taxes are always scrutinized by the IRS and state taxing authorities, particularly in the healthcare industry. Audit issues include reclassification of workers from independent contractor to employee; an individual receiving both a Form W-2 and Form 1099 in the same calendar year; incorrect employment tax forms preparation; the failure to issue Forms 1099; and general non-compliance with Form W-9 record-keeping. Form 1099 non-compliance penalties for failure to file and failure to furnish can be substantial, as well as the imposition of backup withholding, which is currently 24% for tax years through 2025 for non-maintaining certain vendor-completed Forms W-9.

Question: What are the due dates and thresholds for employment tax reporting?

Answer:

Different due dates concerning Forms 1099-NEC and Forms 1099-MISC

The 2024 Form 1099-NEC is due to both recipients and the IRS by January 31, 2025, regardless of whether filing electronically or by paper. The 2024 Form 1099-MISC is also due to recipients by January 31, 2025; however, Forms 1099-MISC are due to the IRS by February 28, 2025, for paper filing or by March 31, 2025, for electronic filing.

Electronic filing requirements concerning Forms W-2 and Forms 1099

The electronic filing threshold for informational returns filed after January 1, 2024, remains at 10 for the 2024 reporting period.

Question: What are Withum's employment tax recommendations?

Answer:

The IRS and state taxing authorities consistently review employment taxes for non-compliance. As a result, we recommend a comprehensive review of your employment tax reporting function, including:

- 1. Payroll and accounts payable personnel should identify and review any workers who may be receiving both Form W-2 and Form 1099.
- 2. Your written worker classification policy should be reviewed and potentially revised.
- 3. Your accounts payable files should include a fully completed Form W-9 for all vendors.
- 4. Utilize the IRS Taxpayer Identification Number ("TIN") matching program, which is offered to payers and enables validation of TIN and name combinations prior to submission of Form 1099-NEC or MISC.
- 5. A review of all your current "non-1099 required" vendors should be completed to determine whether a Form 1099-NEC or MISC should be issued.
- Review the vendor file to determine whether to report certain vendors and payments on Form 1099-NEC Box 1, nonemployee compensation, or Form 1099-MISC Box 6, medical health care payments.
- 7. Maintain and update internal Form 1099-MISC and Form 1099-NEC policy to incorporate updates to IRS rules and regulations.

We recommend that an organization forms an internal working group to accomplish the above tasks, which includes representatives from finance, IT, legal and internal audit.

decision. Such that, when SCOTUS stayed the injunction on January 23, 2025 – thereby invalidating it and restoring CTA to its enforceability (at least theoretically) – the Smith nationwide temporary injunction continued to render the CTA unenforceable despite SCOTUS' decision. The highest court in the land could not overrule the decision in a case that was not brought before it, nor had the highest court made any legal determination regarding the propriety of nationwide injunctions generally.

Thus, despite a SCOTUS decision declaring that the injunction of the CTA in Texas Top Shop is vacated, the CTA remained enjoined on a national level pursuant to Smith. Almost a month after the fact, the DOJ finally filed its appeal of the Smith decision to the Fifth Circuit in the early days of February and officially moved before Judge Kernodle to stay his nationwide temporary injunction on February 2, 2025. After a very short deliberation, Judge Kernodle reversed his own nationwide injunction, specifically citing the precedence of SCOTUS.

As of now, on the judicial spectrum, there are two things every business owner of a reporting entity should know: (1) All filing entities must now report to FinCEN by March 21, 2025, only days before argument in the Fifth Circuit. (2) The constitutionality of the CTA is awaiting judicial determination in both the U.S. Court of Appeals for the Eleventh Circuit and the Fifth Circuit, with the Fifth Circuit hearing oral arguments on March 25, 2025. It is anticipated that whichever side loses their argument will further appeal the issue to SCOTUS. In the meantime, compliance is no longer voluntary. If you have questions regarding reporting, contact your attorney.

Of course, ultimately the CTA is a federal law, and so politically speaking, our representatives can address the looming issues presented by the CTA. And politicians have responded to the unrest, but in a surprising manner. On February 10, 2025, by a unanimous vote (407 in favor, none opposed) the House of Representatives passed the Protect Small Business from Excessive Paperwork Act of 2025, also known as the Nunn Bill, addressing one provision of the Reporting Rules. The Nunn Bill only extends the CTA reporting deadline for entities that pre-existed January 1, 2024, making their new

deadline to report January 1, 2026. Note that the Nunn Bill has no companion bill in the Senate, although it is anticipated that one will be filed. If passed by both the House and Senate, and signed by the President, at least entities pre-existing 2024 will have some reprieve while the ultimate decision on CTA constitutionality is deliberated. Nonetheless, any entity that was formed in or after 2024, is still subject to the reporting deadlines contained in the Reporting Rules (if the injunction is stayed), i.e., ninety (90) days post-formation for 2024 entities, and thirty (30) days post-formation for 2025 entities and beyond. As noted, all reporting entities that are not subject to the 30-day post-formation reporting, must report by March 21, 2025 (unless some other exception or extension applies). Oddly, FinCEN has announced it will not levy any monetary penalties for failure to reportor update BOI until it issues a new "interim final rule" later in March. FinCEN also vows to invite public comment for entire revisions to the CTA reporting rules, which may expand exemptions or reduce penalties. This waiver of fines and penalties is certainly a sign that CTA gusto is waning.

Arguably, the CTA is one of the most fascinating pieces of legislation in the past fifty years, certainly in this author's lifetime. This divisive exercise of congressional power begs the questions, how much discretion do we allow our government when it comes to protecting us? Is our privacy the line in the sand that cannot be erased or crossed, no matter the potential cost? In these coming months, we will certainly find out what exactly "necessary and proper" means, how far the constitutional authority extends under current jurisprudence, where – in this virtual economy – the line between interstate commerce and intrastate commerce is drawn, and whether corporate privacy outweighs the crime-fighting advantages of transparency.

Fay L. Szakal is a Partner in the Corporate, Healthcare, and Real Estate Departments of Greenbaum, Rowe, Smith & Davis LLP, with her offices in Woodbridge and Red Bank, New Jersey. Her practice concentrates on serving general businesses and healthcare organizations of all sizes with regard to their corporate governance, business restructuring, mergers and acquisitions, and general transactions. Fay can be reached at fszakal@greenbaumlaw.com.

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Moreover, documentation of the process undertaken with respect to the above review should also be maintained, particularly in the event of an IRS or state employment tax audit examination. Assistance from your external tax adviser is also recommended.

Please contact a member of Withum's Healthcare Services

Group with any questions.

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Recap: NJ HFMA's Annual Educational Session, "2025: It Never Ends..."

By: Amina Razanica, FHFMA, Maria Lopes-Tyburczy, CRCR, FHFMA, EHRC, Danny Demetrops, Marco Coello & Teresa Bailey, MBA, CHAM, CRCR

The NJ HFMA Patient Financial Services and Patient Access Committees hosted their annual educational session, "2025: It Never Ends...", on Thursday, January 23 at Pines Manor in Edison. With over 100 registrants in attendance, the event offered an engaging lineup of presentations and panel discussions, providing attendees with the opportunity to earn six Continuing Professional Education (CPE) credits.

The day's agenda featured six insightful sessions, kicking off with a keynote address by Travis Dommert, Senior Vice President of Talent at OneDigital. In his engaging presentation, Travis shared the best practices for employee retention and strategies to stand out as an employer of choice through effective and meaningful employee benefits.

One of the central themes of Travis's speech was redefining success in the workplace. He emphasized:

"Success in thriving shouldn't be how quickly and how cheaply we do it, but how we do it."

Travis also introduced the concept of self-transcendence, a recent addition to Maslow's hierarchy of needs. This idea suggests that beyond the foundational needs of safety, belonging, esteem, and self-actualization, individuals are driven to seek purpose and contribute to a cause greater than themselves.

Applying this concept to the workplace, Travis highlighted



Teresa Bailey, Wally Elliot, Yolanda Martinez, Nicole Redwood

the importance of creating environments where employees feel valued, inspired, and connected to a larger mission. He noted that while employees want a great place to work, organizations don't necessarily need to achieve perfection, rather, they should focus on avoiding toxic or disengaging environments. In his words:

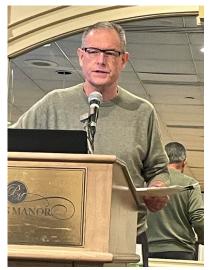
"You don't even need to be that great—just don't stink."

This candid yet impactful statement served as a reminder

that fostering a healthy and positive work culture is fundamental to employee satisfaction and retention.

Following the keynote, Marie Mathieu, VP of CDI at Hackensack Meridian Health and Julie Alverson, Manager of Clinical Documentation at Hackensack Meridian Health, led a session on Building a Resilient Clinical Documentation Improvement (CDI)

Program. The speakers outlined essential



Mark Somerville

components such as leadership support, best practices for clinical documentation, and continuous improvement through data analytics and regulatory adaptation. By integrating these key elements, organizations can establish and sustain a high-performing CDI program that enhances documentation integrity, supports accurate reimbursement, and improves patient care outcomes.

Next, the Revenue Cycle from All Experiences panel took center stage. The session began with a series of presentations capturing the revenue cycle from all experiences before leading into a panel that had the audience captivated with every question. Andrew Gordon, a Licensed Social Worker and grantfunded researcher led the group which included Dan Bonner, a patient turned patient advocate and keynote speaker, former

continued on page 10

health insurance executive and New York Times Bestselling author Wendell Potter, and Saint Peter's University Hospital Chief Financial Officer Garrick Stoldt.

Andrew Gordon set the stage by illustrating the disconnect between cost and quality before highlighting the practice of direct contracting between healthcare providers and employers as a growing remedy. "The core focus throughout these narratives will be on what components should - and should not - be included in a trusted, transparent, and valuable revenue cycle operation," Gordon stated. Dan Bonner shared a heart wrenching personal story about a life-saving organ transplant that was everything but routine as he navigated healthcare's administrative complexity. "At one point, my lack of health insurance coverage was preventing me from getting the care I needed," Bonner recalled.

Wendell Potter captivated the audience with a storyline that illustrated the Wall Street wired objectives of health insurers and the damage this has caused to those providing and receiving care. "The insurance companies in this country have a fiduciary duty to their shareholders. Wall Street is priority number one, not patient care," Potter stated. Garrick Stoldt of Saint Peter's built on Wendell's remarks sharing, "the relationship between payers and providers is more tumultuous now than ever before." Denial rates are at all-time highs, and it can take months, if not years, to be paid for the services the hospital delivers. Gordon wrapped the session up by bringing the room together to sing Happy Birthday to Dan Bonner after mentioning that his birthday fell on the day of the event. The afternoon continued with an engaging game of Jeopardy, hosted by Teresa Bailey, alongside a team of knowledgeable

Associate Directors: Wally Elliott, Nicole Redwood, and Yolanda Martinez from RWJBarnabas. The game featured categories such as Patient Access, Registration Quality, Eligibility and Authorization Automation, Estimates and Point of Service Collections, Denial Prevention, and Engagement. This innovative approach provided an enjoyable and educational experience, effectively maintaining the participants' interest throughout the event.

Next, Mark Somerville, Director of Mental Health at Palisades Medical Center, discussed managing difficult relationships in healthcare. In recent years, verbal and physical attacks on healthcare staff have increased by disturbingly high levels, as reported by the New Jersey Hospital Association. Healthcare staff now face more hostile work environments and open questioning and opposition from some patients and patient family members. Such attacks prompted New Jersey to change its law (Code of 27 Criminal Justice, N.J.S.2C:1-1 et seq) to specifically cover assaults against healthcare staff. And yet, for decades, all staff have experienced "difficult" patients and visitors: people who are overly argumentative and oppositional, regardless of the treatment they may receive. Dealing with such people is immensely frustrating and factual arguments and efforts at conflict resolution too often fail or even lead to escalation of conflicts.

The reactions to the recent killing of a healthcare executive in NYC has highlighted the levels of frustration and anger directed at healthcare institutions. Finance and registration staff are frontline workers who often have to deal directly with frustrated and angry people, with little support or specialized training for doing so. There is no template for doing this but



Marie Mathieu



Garrick Stoldt



Travis Dommert and James Jacobi

there are solid guidelines to minimize conflict and address such situations more effectively and safely.

Patients, visitors, and family members have more access to medical and billing information than ever before and it is unsettling to see how much incorrect information they receive. Inappropriate and erroneous posts become a basis for anger and backlash, and staff must be aware of how often a conflict has begun without facts. The capacity for empathy and kindness is reduced when we are under stress, yet the ability to remain calm and caring is the single best way to address conflicts. How staff respond to conflict is the greatest variable for successfully addressing conflicts. Staying away from personal feelings and counter arguments can direct situations to significantly better resolution, or, in extreme circumstances, to clear decision making to involve help, such as security, when needed.

There is surprising power from what we do not do: not arguing, not raising our voice, not rehashing facts or not negotiating with a difficult person. Because conflict is inevitable, how we manage it, not whether it exists, needs to be our greatest focus.

The event concluded with the Revenue Cycle Executive Panel, featuring Jason Kane from Jefferson Health, Josette Portalatin from Valley Hospital and Cynthia Ziegler from Holy Name Medical Center. They tackled pressing issues such as denials management, regulatory compliance, automation, and workforce shortages, emphasizing AI-driven efficiencies and payer-provider collaboration as crucial to future success. They

underscored the value of strong leadership, cross-departmental collaboration, and continuous staff education in maintaining a resilient revenue cycle operation.

To close the day, attendees and speakers gathered for a networking event, fostering valuable discussions and professional connections. Conversations continued in a relaxed setting, reinforcing the conference's impact on knowledge-sharing and collaboration in the ever-evolving healthcare finance landscape.

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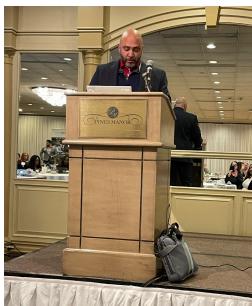
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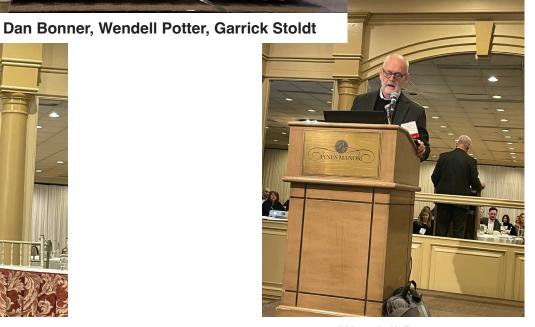
Maria Facciponti



Marco Coello



Travis Dommert



Wendell Potter

Remembering the New Jersey-Born Physician Who Became the First Black Lawyer Admitted to Practice before the Supreme Court of the United States



John Zen Jackson

By: John Zen Jackson

Among the observations to be made during the just-concluded Black History Month were remembrances concerning Dr. John S. Rock. Born in Elsinborough Township in Salem County, New Jersey on October 13, 1825, John S. Rock was a person with amazing talents. After years of working as a physician, for health reasons he turned to the practice of law and in 1865 he became the first Black lawyer admitted to practice before the Supreme Court of the United States. But his entire life is marked by accomplishments.

With New Jersey's enactment of legislation for the abolition of slavery in 1804, Rock was a free-born African American. Unusual for the time, he remained in school until about the age of 18. He became a teacher and eventual head of a Quaker school in Salem County.

In Salem, Rock became active in the struggle for the abolition of slavery and the fair and equal treatment of his race. He was appointed secretary of the Colored Convention that met in Salem in 1849 and was one of the drafters of a petition to the New Jersey Legislature to amend the recently adopted new constitution of 1844 to remove the word "white" that had been included in Article 2, Section 1 setting out the right of suffrage giving the right to vote to "[e]very white male citizen of the United States, of the age of 21 years." He subsequently prepared comments addressing the "citizens" of New Jersey on behalf of a "disenfranchised portion of the legal taxpayers of New Jersey." He reviewed the principles set forth in the Declaration of Independence and the experience of the Founders contrasted with that of Blacks who were obligated and expected to pay taxes, comply with the laws, and fight for the country as had been done during the American Revolution. He identified the sophistry of some who said that Blacks should go back to Africa pointing out that if the national origin of forefathers was determinative, it would require that many Whites go back to Europe. He declared that "[t]he country a man is born in, is

his country." These comments were disseminated nationally in The North Star newspaper published by Frederick Douglass. Rock's intellectual appetite led him to the study of medicine. Initially this was through borrowing books from two local physicians that he studied after completing his duties at the Quaker school. However, encountering the barriers of racial prejudice, he was unable to gain admission to a medical college and was unable to pursue a medical career in New Jersey. He relocated to Philadelphia and undertook the study of dental surgery. He opened a dental practice in 1850 and in 1851 won an award for the specimens of artificial teeth he was able to make. He would later publish an article in the Boston Medical and Surgical Journal, the predecessor to the New England Journal of Medicine.

Philadelphia had one of the largest free Black populations in antebellum America. There Rock returned to his quest to become a physician. While maintaining his dental practice, he attended lectures at the American College of Medicine in Philadelphia and received his degree in 1852. In Philadelphia, he became acquainted with William Still, an important figure in anti-slavery activities and who is identified as the Father of the Underground Railroad. William Still kept detailed notes concerning fugitives passing through Philadelphia to help reunite families. He was able to reunite with his brother Peter who had remained enslaved for 40 years after their mother escaped with two daughters. Still's family settled in Burlington County, New Jersey and included an older brother James Still, an herbalist known as the Black Doctor of the Pines. It has been holding family reunions in Lawnside, New Jersey for over 150 years.

In 1853, Rock and his wife relocated to Boston where he opened a dental and medical practice. Rock lived in the African American community located in the Beacon Hill area. He frequently treated fugitive slaves who came to Boston on

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their way to Canada using the Underground Railroad. He continued to write, lecture, and speak publicly in support of equal rights for the members of his race. A speech that Rock delivered in 1858 is recognized as the source of the "black is beautiful" expression that emerged in the 1960s.

Rock began to have health problems and in 1858 he wanted to travel to France for surgical treatment of a throat condition. That plan, however, was initially blocked by his being denied a passport. Then United States Secretary of State Lewis Cass relied on the opinion of Chief Justice Roger Taney in the Dred Scott case in which he had ruled that because African Americans were not citizens, they could not be issued a passport which was evidence of citizenship. The Massachusetts legislature overcame this obstacle, however, by issuing Rock a state passport. While in France, Rock studied French and German. He achieved such a significant level of fluency that a correspondent for a German-language periodical reported this about a lecture that Rock gave in 1860 about Madame de Stael, a philosopher and political theorist in Parisian and Genevan circles in time of Napoleon: "This thinking, educated German and French speaking negro proved himself as learned in German as he is in French literature."

Rock's French physician had advised him that his medical condition would not permit his continued practice of medicine. While cutting back on his medical practice, Rock began to study law and was admitted to the Massachusetts Bar in 1861. He became familiar with Charles Sumner, the United States Senator for Massachusetts whose antislavery views had prompted an attack in 1856 by a Congressman from South Carolina who beat Sumner with a cane while he sat at his desk on the Senate floor.

In 1863, Rock asked Sumner to support his admission to the bar of the Supreme Court. At this time, admission to the Supreme Court bar was within the discretion of the Chief Justice. Roger Taney was still Chief Justice and Sumner cautioned against making the attempt. But on October 12, 1864, Taney died, and President Lincoln appointed Salmon P. Chase as his successor. Chase had been part of the Team of Rivals that composed Lincoln's cabinet. Chase had a long record as an antislavery advocate and served as Secretary of the Treasury until June 1864.

Rock renewed his request to be admitted to the Bar. On February 1, 1865, Rock went to the Supreme Court and the Chief Justice granted Senator Sumner's motion for his admission. The swearing in of Rock overlapped with significant political and historical events. On January 31, 1865, the House of Representatives approved the adoption of the Thirteenth Amendment after its earlier passage by the Senate abolishing slavery in the United States. Though not needed

for legal reasons, as a symbolic gesture of approval, President Lincoln signed the Joint Resolution submitting the proposed amendment to the state legislatures for ratification on February 1. It was ultimately ratified by the necessary number of states on December 6, 1865. The Thirteenth Amendment is the only constitutional amendment to be later ratified that was signed by a president.

Still sitting on the Court at the time of Rock's swearing-in were four of the justices who had joined in Taney's opinion in Dred Scott. Reporting in the New York Daily Tribune of February 7, 1865 noted that with the admission of Rock to the bar, "[t]he grave to bury the Dred Scott decision was in that one sentence dug; and it yawned there, wide open, under the very eyes of some of the Judges who had participated in the judicial crime against Democracy and humanity."

The Dred Scott decision regarding the non-citizenship status of African Americans would not actually be overturned until enactment of the Fourteenth Amendment on July 9, 1868 with its birthright citizenship provisions. As part of his activist involvement in Boston, Rock had made a speech on March 5, 1858, condemning the Dred Scott decision that had been issued the preceding March of 1857. He did not experience the actual overturning of Dred Scott. Although admitted to the Supreme Court bar, Rock did not argue or handle any case before the Court before his death on December 3, 1866.

The memory and legacy of the contributions of Dr. John S. Rock are preserved by the Salem County Historical Society. It raised funds to restore the stone marker at his grave in Everett, Massachusetts and provides an annual scholarship in his honor to a student attending Salem County College. It will hold the twenty-first annual John S. Rock Memorial Lecture in October 2025.

John Zen Jackson is Of Counsel to the Healthcare Department of Greenbaum, Rowe, Smith & Davis, LLP in Woodbridge, New Jersey. He is certified by the New Jersey Supreme Court as a civil trial attorney and is a Fellow of the American College of Trial Lawyers. His practice concentrates on healthcare litigation including Board of Medical Examiners proceedings and appeals, hospital privileging matters and litigation, medical liability, and other aspects of healthcare regulation. He is the current Vice President of the Medical History Society of New Jersey. This article originally appeared as part of the Healthcare Perspectives blog of Greenbaum, Rowe, Smith & Davis, LLP and draws from research done by Jackson for articles previously appearing in the New Jersey Law Journal in February 2014 and February 2021 as well as in the Winter issue of MDAdvisor in 2016. John can be reached at (732) 476-3336 or jjackson@greenbaumlaw.com.

Updated DOJ Guidance on Compliance Program Effectiveness

By: Michael P. McKeever, CPA, FHFMA, CHC, CHIAP

As practitioners of healthcare compliance know, the initial impetus for implementing compliance programs was contained in the United States Sentencing Guidelines, which describe, in part, the potential impact an effective program might have when deciding the punishment for illegal acts. Organizations should recognize the importance of competent legal counsel at every step of an investigation and negotiation of settlement for committing inappropriate or illegal acts. That being said, the Department of Justice Criminal Division document titled Evaluation of Corporate Compliance Programs ("the Guidance") provides an excellent template for both the design and ongoing evaluation of an organizations' compliance program. This document has been updated periodically to address changes in the business environment and the risks applicable to organizations, with the most recent update issued in September 2024. The purpose of this article is to provide an overview of the changes incorporated in the most recent update.

In the introductory portion of the Guidance, three underlying questions are posed that go to the heart of compliance program effectiveness: (1) is the program well designed, (2) is the program properly resourced to reduce compliance risk, and (3) does the program work in practice. The individual questions are further broken down into sub-sections that have evolved to address the changing healthcare business environment. In addressing program design, certain changes were made to the discussion of risk assessment, specifically the need for the analysis to recognize emerging risks, both internal and external, and whether the entity's approach is proactive or reactive. The Guidance also recognizes the potential impact of emerging technologies, including Artificial Intelligence, on operations, specifically referencing the entity's governance approach, integration of emerging technologies into the overall risk framework, and the need for controls to monitor the reliability of data resulting from these technologies.

Updates to the section addressing policies and procedures were also included in the recent changes. Describing policy design, the Guidance now suggests that there be a process for incorporating lessons learned, by the entity or others in similar lines of business, when updating existing policies. And



Mike McKeever

again, the need to incorporate the risks related to emerging technologies in policy updates

was emphasized. The concept of lessons learned is also included in the updates related to training. Also included is the entity's evaluation of employee engagement in the training provided.

Essential to any effective compliance program is the process by which issues are confidentially reported and investigated. Included in the current Guidance is language questioning if the entity encourages, or conversely, deemphasizes the reporting of questionable practices. Assessing employees' willingness to report misconduct is also included. Additional language is included relative to whistleblower protection and antiretaliation policies. The updated Guidance asks if the entity trains employees on both internal whistleblower and antiretaliation policies as well as any legal protections contained in external programs. It also asks if those involved in misconduct are treated differently if they reported the activity than those who were involved but did not report.

The final sections addressed under the scope of compliance plan design involve third party vendor management and mergers and acquisitions. Changes related to third party vendor management stress the importance of timely review of potential vendors and the need for evaluating vendor risk during the lifecycle of the arrangement. When reviewing integrations, the updated Guidance addresses the need to combine risk planning systems as part of the process and looks to define compliance's role in the integration strategy. Post transaction, focus is on the process to ensure the establishment of the compliance program in the new entity, along with how the new entity is integrated into the existing policies and practices.

The second major focus of the Guidance addresses program resources and the entity's commitment to the program. An effective compliance program helps establish and ensure a culture of compliance, wherein employees are aware of the risks inherent in the industry and how the entity's compliance program helps to mitigate those risks. The major changes to this section ask if the entity has a mechanism to measure the

Preserving the Promise of 340B: Why Safety Net Hospitals Need This Program Now More Than Ever



Fatimah Muhammad

By: Fatimah Muhammad

The healthcare landscape in Middlesex County, New Jersey, tells a story of resilience amid mounting challenges. As 2025 unfolds, the region's safety net hospitals face a perfect storm: skyrocketing drug prices, tightening margins, and an increasingly complex web of regulatory demands. At the heart of this struggle lies the 340B Drug Pricing Program, a critical lifeline that many fear is threatened just when it is needed most.

The impact of recent healthcare policy shifts is palpable across New Brunswick's healthcare district and throughout Middlesex County's diverse communities. The implementation of the Inflation Reduction Act's Medicare drug price negotiations has created unexpected ripple effects for 340B hospitals. While the law aims to lower drug costs for seniors, some pharmaceutical manufacturers have responded by tightening their distribution networks and implementing more restrictive 340B pricing policies.

The timing couldn't be worse for New Jersey's safety net hospitals. In Middlesex County alone, uncompensated care has reached historic highs, driven by a post-pandemic surge in chronic conditions and delayed care finally catching up with the healthcare system. The region's unique position between New York City and Philadelphia makes it a crucial healthcare hub for a highly mobile, diverse population that often falls through the cracks of traditional insurance coverage.

Recent changes in New Jersey's healthcare landscape have only intensified the pressure. While well-intentioned, the state's new healthcare transparency laws have added layers of compliance requirements that strain already stretched hospital resources. Meanwhile, pharmaceutical companies have implemented increasingly complex contract pharmacy restrictions, creating additional barriers to medication access for vulnerable patients. The challenges facing Middlesex County's healthcare institutions reflect broader issues affecting safety net hospitals nationwide but with distinct local implications. The region's high cost of living means that many working families earn too much to qualify for Medicaid but not enough to afford comprehensive health insurance. These patients often rely on safety net hospitals' ability to leverage 340B savings to provide discounted or free care.

Current market conditions have created a precarious situation. Specialty drug prices continue their steep climb, with some critical medications seeing price increases of up to 15% in the past year alone. For safety net hospitals operating on razorthin margins, the 340B program's discounts often make the difference between maintaining essential services and having to cut them. The impact extends far beyond hospital walls. Throughout Middlesex County, community health programs funded by 340B savings serve as crucial access points for preventive care and chronic disease management.

These programs, from diabetes clinics to mental health services, help prevent costly emergency room visits and reduce the overall burden on the healthcare system.

Yet, despite its clear benefits, the 340B program faces mounting challenges. Some pharmaceutical manufacturers have implemented new restrictions on contract pharmacy arrangements, limiting hospitals' ability to serve patients across their communities. Others have introduced burdensome reporting requirements that strain hospital resources without demonstrably improving program integrity.

The situation has reached a critical juncture. Without strong protection for the 340B program, many of New Jersey's safety net hospitals warn they may need to scale back essential services. This would disproportionately affect Middlesex County's most vulnerable residents, including working families, elderly patients on fixed incomes, and those managing complex chronic conditions.

Looking ahead, preserving the 340B program seems more crucial than ever. As healthcare costs continue to rise and economic pressures mount on working families, the program provides a vital buffer that helps ensure access to care for those who need it most. For Middlesex County's diverse communities, the stakes couldn't be higher.

The path forward requires a delicate balance. Maintaining program integrity while ensuring access to vital medications demands careful consideration from policymakers. Yet one thing remains clear: in today's challenging healthcare landscape, the 340B program's role in supporting safety net hospitals has never been more critical.

For Middlesex County's healthcare institutions, preserving

value of compliance and risk identification resources; whether compliance personnel have access to adequate and timely data that is accurate as well as sufficient data analytic tools to fulfill their assessment of risk; and whether the technological resources available to compliance personnel are proportionate to those available elsewhere within the entity to ensure the ability to detect and mitigate risk.

The final area of discussion contained in the Guidance is whether an entity's compliance program actually works in practice. The primary question focuses on the effectiveness of the program at the time the issue was identified, particularly if the problem had been ongoing. The Guidance does recognize, however, that the occurrence of the issue does not mean that the program was ineffective. The updated language calls for an evaluation of the program's history of preventing or detecting similar issues and the extent of exercised due diligence to prevent these issues. It also questions the extent to which the entity has utilized available data to assess the effectiveness of the program. Finally, the updated Guidance addresses emerging technologies, asking if the entity is testing the technologies to ascertain if they are performing as intended and that the outcomes are appropriate.

Hopefully this article will assist entities in evaluating the changes to the published Guidance by which the Department of Justice considers the effectiveness of their corporate compliance programs. While some readers may not recall a time when compliance programs were ubiquitous in healthcare entities, it is essential to recognize that changes become necessary as the environment changes, and to remain effective, a program must be constantly evaluated and updated.

Special thanks is due to Dhara Satija, Director, Life Sciences Consulting Group at Paul Hastings, LLP for providing a red lined version of the updated Guidance dated September 2024. Dhara, who was previously active with the NJ Chapter's Care Forum, is currently the President-Elect of the Massachusetts-Rhode Island Chapter of HFMA. The full text of the updated Guidance can be accessed at https://www.justice.gov/criminal/ criminal-fraud/page/file/937501/dl?inline=

About the author

Michael P. McKeever is retired after a long career in Healthcare Finance, Compliance and Audit. A graduate of Rider College, he is a member of the AICPA, NJCPA, HCCA and HFMA, where he is a Past-President of the New Jersey Chapter and former Regional Executive representing Region 3. He is a Certified Public Accountant, an HFMA Fellow and is certified in Healthcare Compliance and Healthcare Internal Audit. He can be reached at m.mckeever2@verizon.net.

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the promise of 340B isn't just about maintaining a drug discount program - it's about ensuring the continued ability to serve their communities' most vulnerable members. As pressures mount and challenges multiply, the program's importance to the healthcare safety net grows. The question now isn't whether we need the 340B program but how to ensure its survival for those who need it most.

About the author

Webinar

Fatimah Muhammad, MPH, is Director of 340B Pharmaceutical Services and Drug Replacement at Saint Peter's University Hospital. She can be reached at fmuhammad@saintpetersuh.com.

Mark Your Calendar

New Jersey HFMA Beyond Compliance: Advancing Healthcare and Excellence

April 3, 2025

Annual Golf Outing

May 8, 2025

Annual Women's Leadership & Development Session

May 21, 2025

DoubleTree Hotel, Tinton Falls, NJ

Mercer Oaks, West Windsor Township, NJ

Watermark Summer Social

June 11, 2025, 5-7 PM Watermark, Asbury Park, NJ

New Jersey & Metro Philadelphia HFMA 49th Anniversary Annual Institute

October 29 - 31, 2025

The Hard Rock Hotel & Casino, Atlantic City, NJ

Watch for updates on all of these events, or visit the Chapter website at hfmanj.org



2025 NJ HFMA WOMEN'S LEADERSHIP AND DEVELOPMENT EVENT

PURSUING YOUR DREAMS WHILE MAINTAINING BALANCE

Featuring Keynote Speaker

Amy Mansue

President, Inspira Health Network

Date: Wednesday, May 21st, 2025

Location: Double Tree by Hilton Hotel

Tinton Falls - Eatontown, NJ



CERTIFICATION CORNER:

Revised 2025 Recertification Due Date

In November 2024, HFMA notified all members about changes to the due date for the 2025 Certified Revenue Cycle Representative (CRCR) and Certified Specialist (CS) [CSAF, CSBI, CSPR, CSPPM] designations. The due date was initially adjusted from May 31, 2025, to August 31, 2025. However, due to delays in the transition to a new learning management system, the recertification due date has been extended further, impacting the recertification timelines for CRCR and CS certificants.

Updated Due Date:

The recertification due date for CRCR and CS certifications has now been extended from August 31, 2025, to September 30, 2025.

Overview of Changes: Please note that these adjustments apply only to 2025 recertifications.

- HFMA has communicated to all those due to recertify in 2025.
- The 2025 recertification window will now run from March 1 to September 30, 2025.
- This extension provides an additional month to complete the recertification process, allowing seven months of access instead of the usual six.
- The updated recertification due date (September 30, 2025) will appear in learner profiles under "My Development" within the next week.
- On March 1, 2025, HFMA will automatically enroll learners in the applicable recertification study materials and assessment. No action is required for enrollment.

Recertification Process: To recertify as a CRCR or CS, individuals must complete a 50-question assessment every two years. Upon successful completion of the 2025 Recertification exam, the new recertification date will be May 31, 2027. **Cost:** Free for HFMA members (auto-enrollment). \$100 for non-members.

If you have any questions about the 2025 process, please contact HFMA at <u>careerservices@hfma.org</u> or Amina Razanica at arazanica@njha.com.

Coming February 2025: HFMA's New Learning Platform!

HFMA is thrilled to introduce a cutting-edge learning platform designed to support your professional growth like never before. This all-in-one hub brings together career-advancing resources with innovative learning and unmatched convenience.

What's in Store?

- ✓ Intuitive Dashboard Navigate with ease
- Personalized Course Recommendations Tailored to your needs
- Enhanced Assessments Gain deeper insights
- ✓ Improved Course Management Stay organized effortlessly

And this is just the beginning! Future updates will include fully enhanced courses featuring engaging videos and compelling graphics.

Get ready for a smarter, faster, and more personalized way to elevate your expertise. Stay tuned!

Bowling Event Recap













Don't Wait . . . Communicate!

Introduction: Denny Henderson

Author: Sossy Flett

In healthcare revenue cycle operations, where every decision impacts both patient care and financial outcomes, effective communication becomes more than just a skill—it's a necessity. Yet even seasoned healthcare finance leaders often find themselves hesitating when crucial conversations need to happen, whether it's addressing denials management challenges with payers, discussing revenue leakage with department heads, or providing feedback to team members about productivity metrics.

Delayed communication in revenue cycle management can lead to costly denials, decreased collections, and strained relationships with both staff and external stakeholders. In this article, Sossy Flett explores why leaders wait to communicate, the hidden costs of hesitation, and practical strategies to foster open dialogue that drives both financial performance and team engagement.

Don't Wait . . . Communicate!

When we don't get the results we want, it's worth examining our approach. We often use absolutes like "I never"

or "we always," shaping our reality through perception. For example, saying, "They never appreciate my work" reflects a belief that became a decision and then a reinforced truth.

There are moments when communication is crucial, yet we hesitate. Waiting to communicate can lead to deep regrets. We shape our futures through choices: act, wait, or do nothing.

As an executive coach, I often hear regrets about communication. People wish they had said no instead of yes. They miss opportunities and fail to ask for help. Many also feel they don't spend enough time with family. The biggest regret? Fear of rejection, leading to silence instead of truth.

Common Reasons for Not Communicating:

- I don't feel ready.
- I lack authority.
- It's none of their business.
- I won't be heard.

- I'm waiting for the right moment.

Moving Past Waiting

Excuses feel real, but they're often barriers we create. Openended questions can challenge these beliefs:

- Why do I believe this?
- Why am I waiting?
- How do I know this is true?

We may wait because it feels safer. Waiting has benefits. It can help you avoid discomfort, keep things the same, or

skip extra work. But, it also costs us opportunities, joy, and connection.

Costs vs. Payoffs of Waiting

Change is scary, but new possibilities require stepping outside our comfort zones.

Denny Henderson

Sossy Flett

Costs: Missed connections, lost joy, indecision, and wasted time.

Payoffs: Avoiding discomfort, maintaining familiarity, and reducing risk. Call to Action!

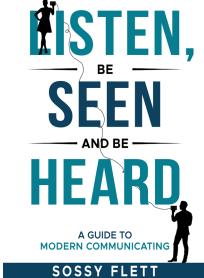
Communication is action. Without it, we rely on assumptions. We hesitate because we don't know what to say or how to say it. Preparation and practice help.

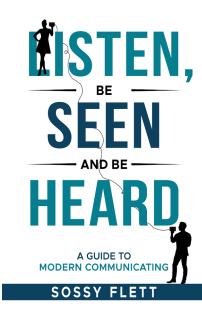
"Don't wait" doesn't mean act recklessly. It means prepare and act instead of waiting indefinitely. The decision to communicate is as vital as the message

Hugo: Asking for Clarity Earns Kudos

Hugo, a newly promoted executive, struggled with a project deadline. He lacked clarity from his boss but feared

asking for it. His team awaited his guidance, but he hesitated.





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When I suggested reaching out to his boss, he was shocked. His belief? Asking questions would make him look incompetent. But avoiding the conversation could cost millions and a major partnership.

We reframed his request. Instead of appearing uncertain, he would seek clarity to ensure success. Hugo made the call. Seven minutes later, he had the information he needed. His boss appreciated his initiative and thanked him for his proactive approach.

Hugo's suffering was unnecessary. His fear of looking weak almost cost his company dearly. The key takeaway? Asking for clarity is a strength, not a weakness.

Best Practices for Effective Communication

Do:

- Speak clearly to be heard.
- Take responsibility for your message.
- Listen attentively.
- Understand others' perspectives.

- Prepare thoroughly.

Don't:

- Assume others understand you.
- Expect people to read your mind.
- Regret missed chances.
- Blame others.
- Wait to communicate.

Questions for Reflection

- 1. What mindset causes your hesitation?
- 2. Who can support you in moving past waiting?

About the Author

Sossy Sarikhanian Flett is a global executive coach with over 25 years of experience. She has worked with Fortune 100 and 500 companies, helping leaders communicate effectively. She is the founder and CEO of Thousands of Impact Consulting and the author of Listen, Be Seen, and Be Heard. Sossy can be reached at sflett@thousandsofimpact.com.

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hfma[™]

new jersey chapter

Dear Fellow HFMA Members:

I am pleased to invite members, member's spouses, or member's dependents to apply for this year's 2025 NJ HFMA Thomas G. Shanahan Scholarship. The New Jersey Chapter of HFMA will be offering at least one scholarship at a minimum of one thousand dollars. You, your spouse or dependent may be eligible for the scholarship if you meet the following criteria:

- Member, in good standing, of the New Jersey Chapter for the last two years.
- Spouse or dependent of a member, in good standing, of the New Jersey Chapter, for the last two years.
- Enrolled in an accredited college, university, nursing school or other allied health professional school.

Preference will be given to applicants pursuing degrees in finance, accounting, healthcare administration or a healthcare related field of study. Tuition not paid by an employer or other scholarship will qualify for the HFMA scholarship.

We make our selection based on merit, academic achievement, civic and professional activities, course of study and content of your application and essay. We do not use income in our selection process. To apply, please submit a completed Scholarship Application no later than March 15, 2025. Members of the Chapter's Board of Directors, Officers and Advisory Council and their spouses or dependents are not eligible for scholarships. Prior awardees are not eligible for a subsequent scholarship, although other dependents in the member's family are still eligible.

We will announce the recipient(s) of the 2025 NJ HFMA Thomas G. Shanahan Scholarship at our annual golf outing on May 8, 2025. If you have any questions or wish to receive additional applications, please contact Laura Hess at njhfma@aol.com.

We look forward to receiving your application and wish you success in your academic endeavors.

Respectfully submitted,

Heather Stanisci

Heather Stanisci Chair, 2025 Scholarship Committee

NEW JERSEY HEALTHCARE FINANCIAL MANAGEMENT ASSOCIATION MEMBER'S ANNUAL SCHOLARSHIP APPLICATION

MEMBER INFORMATION	PART 2 – EDUCATION BACKGROUND
Member Name Member Address	Highest Level of Education Attained
Membership #	GPA Degree Major
Years in HFMA # Years in NJ Chapter	(Documentation must be provided documenting Grade Point Average)
Member Employer	
APPLICANT INFORMATION PART 1 - PERSONAL DATA	PART 3 – PROFESSIONAL CAREER
Applicant Name	Employment History (List employment history as Attachment A .)
Address	PART 4 – COMMUNITY AND PROFESSIONAL ACTIVITIES
College Course (s) to be taken	Please describe your civic and professional activities and contributions to your community, profession, HFMA or other organizations. (Please label as Attachment B.)
	PART 5 - ESSAY
Matriculated Student YES NO Degree/Program Pursued Anticipated Graduation Date Major Annual Tuition Amount of Employer Support	Please submit an essay describing your educational and professional goals and how this scholarship will assist you in achieving such goals. (Please label as Attachment C.)
Amount of Other Scholarships Awarded	PART 6 - REFERENCES
(Documentation must be provided supporting tuition and/or books, employer's reimbursement policy and enrollment in school.) (Please label as Attachment D.)	Please furnish three formal reference letters
SIGNATURE	DATE
Please return completed package no later than March 15, 2025 to:	Heather Stanisci at NJHFMA@aol.com or mail to: Chair Scholarship Committee, NJHFMA Healthcare Financial Mgmt. Assoc NJ Chapter PO Box 6422 Bridgewater, NJ 08807

Focus 25

ARE YOU FEELING STRESSED?

HFMA NJ is introducing a new column in the Garden State FOCUS Magazine

STRESS LESS & THRIVE MORE: TIPS FROM COACH LISA HAMMETT

Have a question or need some advice?

Email <u>info@lisahammett.com</u> to be featured in the column. Participants will remain anonymous.



Spring Refresh: Decluttering Your Life for Personal & Professional Success



Lisa Hammett

By: Lisa Hammett

Spring is a time for fresh starts and new beginnings. We often associate spring with decluttering our personal spaces. Decluttering our lives can positively impact us personally and professionally.

In my international best-selling book, <u>From Burnout to Best Life</u>, <u>How to take charge of your health & happiness</u>, I share tips for setting up our environments for success. How our spaces are arranged can impact our productivity which directly impacts our goal achievement.

Organize Your Workspace:

Clear out unnecessary items such as supplies, papers, and personal and miscellaneous items, that impede productivity. Use space-efficient storage containers for supplies and other materials that are used less frequently. This will improve efficiency by reducing distractions.

Organize Your Closet:

An organized closet will save you time getting ready in the morning and reduce stress.

- Donate or consign clothing that is the incorrect size, in good condition, outdated, or hasn't been worn in at least six months. Keep seasonal clothing if you wore it in season.
- Purchase a shoe cubby or a hanging shoe organizer for storage. If you prefer to keep shoes in boxes, snap a photo of the shoes and attach it to the outside of the box for easy reference.
- Place handbags, scarves, gloves, socks, neckwear, belts, and other miscellaneous accessories in drawers or on shelves. Hanging belts, ties, and scarf organizers help free up drawer space.

Organize Your Bathroom:

Similar to the closet, an organized bathroom saves time getting ready in the morning and reduces stress.

- Toss lotions, makeup, cleaning products, and personal care items that are no longer used.
- Use plastic bins or baskets to store like items together (ex: cleaning supplies, fragrances, lotions, miscellaneous

personal care items).

• Donate personal care product samples (ex: shampoo, soap, deodorant, toothpaste) to a local shelter or church.

Organize Your Kitchen:

- Go through cupboards, the spice rack, the pantry, and the refrigerator and discard expired and tempting foods that do not align with your wellness goals.
- Keep healthy foods, such as cut-up fruit and veggies, in clear containers, front, and center in your refrigerator.
- Pre-cook and portion meal essentials (ex: rice or quinoa, oatmeal, hard-boiled eggs, and chicken) and store in clear containers in your refrigerator for easy meal prep.
- In the pantry, move healthier snacks to eye-level to encourage healthy habits.
- Fill snack-size containers and bags with healthy snacks to prevent overeating and for easy grab-and-go as you are heading out the door.
- Organize drawers and cupboards to keep the kitchen tools and appliances that you use most often handy.

Declutter Your Digital Space:

Organize files, folders, photos, and email inboxes. Delete or archive unnecessary emails, apps, photos, and digital files to streamline your digital workspace to improve efficiency and increase storage capacity.

Declutter Your Finances:

Simplify your finances by consolidating accounts, automating bill payments, and tracking expenses. Create a budget, and review weekly, to avoid financial stress and maintain control over your finances.

Take Control of Your Schedule:

- Say no to commitments and activities that do not align with your business objectives or personal values.
- Prioritize self-care by scheduling time for good sleep, exercise and activities that you enjoy. Block time for regular breaks and meals.
- Time block work and personal tasks to avoid multi-

tasking and improve productivity.

Prioritize Tasks:

Focus on high-priority tasks that align with your business and personal goals and delegate or eliminate less important ones.

If prioritizing tasks is challenging, an easy way to assess what is most important is to create an accomplishment list. Take a piece of paper and divide it into three columns. In the left column, list tasks that are due today. In the middle column, list tasks that require completion this week. In the right column, list tasks that are due the following week or later. Next, break down the tasks that are due today by completion time. Review all lists each evening or first thing in the morning, before work.

Streamline Processes:

Simplify workflows by eliminating unnecessary steps and automating repetitive tasks. Outsource tasks that are time suckers and take the focus off more important tasks. For example, hire a bookkeeper to keep your tax information organized. Use a virtual assistant to help with administrative

tasks.

When we take the time to declutter our lives, we reduce stress, improve productivity and efficiency, and generate greater health and wellbeing.

About the author

Lisa Hammett is an accomplished motivational and TEDx speaker, an international best-selling author, a Certified Positive Intelligence PQ Coach, and a wellness expert, helping stressed and burned out Executives and Leaders in Healthcare and HR develop mental fitness to manage stress, improve productivity and communication, and regain their health and wellbeing. She reached burnout, after 26 years in the corporate retail sector. After a transformative health and wellness journey, where she lost 65 pounds, Lisa decided to dedicate her life to helping others achieve their health and wellness objectives. She has empowered thousands of individuals to make sustainable, healthy lifestyle changes. Lisa can be reached at info@lisahammett.com.



From Classroom to Career: A Rutgers Student's Journey in Healthcare Finance



By: Fatimah Muhammad

Fatimah Muhammad

As Alexandra Billitteri approaches her graduation from Rutgers University this May with a degree in Health Administration and Business, she reflects on the transformative experiences that have shaped her path in healthcare finance. Her journey exemplifies how early engagement with professional organizations and meaningful mentorship can create a strong foundation for a career in healthcare financial management.

The impact of learning from industry leaders has been paramount in Alex's academic journey at Rutgers. In particular, CFO Garrick Stoldt's approach to teaching has fundamentally shaped her perspective on healthcare finance. His emphasis on "starting with the end in mind" has

become a guiding principle in her academic and professional development. Rather than focusing solely on individual concepts or immediate challenges, this approach has taught her to consider the broader context and long-term implications of financial decisions in healthcare.

During her time at Rutgers, Alex had the opportunity to intern in the 340B pharmaceutical service and drug replacement department, where classroom principles came to life. The 340B Drug Pricing Program, which requires pharmaceutical manufacturers to provide outpatient drugs to eligible healthcare organizations at significantly reduced prices, represents a crucial intersection of healthcare finance, operations, and patient care. This hands-on experience allowed her to witness how effective financial management directly impacts healthcare delivery and patient outcomes. Working within the 340B program provided insights into the complexities of pharmaceutical pricing, inventory management, and the delicate balance between cost optimization and regulatory compliance. Her experience as an intern, shaped by her work within the cohort and by the guidance from her mentors, sharpened her ability to write concisely, convey key information effectively, and confidently explain policy and compliance structures.

A particularly transformative aspect of Alex's journey was her involvement in healthcare advocacy work alongside leader Fatimah Muhammad, FHFMA. This collaboration culminated in the opportunity to speak with state representatives in



Alexandra Billitteri

Washington, DC about the significance of the 340B program. The experience proved to be an eye-opening revelation about the intricate relationship between healthcare policy and patient care. Standing before lawmakers and articulating the real-world impact of the 340B program on healthcare organizations and their patients brought into sharp focus the critical importance of advocacy in healthcare finance. This experience helped Alex understand that financial decisions in healthcare are never just about numbers – they're about ensuring access to care and supporting the communities that healthcare organizations serve.

Alex's academic career was becoming a student member of the Healthcare Financial Management Association (HFMA). For students considering a career in healthcare finance, HFMA membership offers an invaluable head start. These resources have proven especially valuable in bridging the gap between theoretical knowledge and practical application. Alex emphasizes the invaluable role of networking at HFMA events, where she actively seeks diverse perspectives and

One of the most significant decisions in

insights from seasoned professionals. Engaging with peers and industry leaders at these events has not only expanded her understanding of current trends but also provided crucial opportunities to hear from individuals in different positions, with new perspectives, that influenced her career aspirations.

Early involvement in HFMA can be transformative for college students. The organization offers specialized resources and opportunities tailored to those just beginning their healthcare finance journey. Through HFMA events and educational programs, students gain exposure to current industry trends, challenges, and innovations while building a professional network that can support their career development. The relationships formed through HFMA often evolve into mentoring partnerships that provide guidance and support throughout one's career journey.

As Alex looks ahead to her post-graduation plans this May, she is particularly excited about continuing her involvement with HFMA. The foundation built through her academic studies at Rutgers, enhanced by real-world experience, advocacy

work, and HFMA membership, has prepared her for the dynamic challenges and opportunities in healthcare finance. The mentorship she's received, particularly from industry professionals like Garrick Stoldt and Fatimah Muhammad, has emphasized the importance of maintaining a broad perspective while mastering technical skills and understanding policy implications.

For students considering a career in healthcare finance, early engagement with professional organizations like HFMA can provide a significant advantage. The healthcare finance sector continues to evolve, driven by technological advances, regulatory changes, and shifting patient needs. Having access to industry insights, professional networks, and educational resources during the academic years helps students develop a more comprehensive understanding of the field and its opportunities.

The journey from classroom to career involves more than just acquiring knowledge—it's about building relationships, gaining practical experience, and developing a strategic mindset that encompasses both financial expertise and policy awareness. Through the guidance of experienced professionals and the opportunities provided by organizations like HFMA, students can better prepare themselves for successful careers in healthcare finance. Alex's experience demonstrates how combining academic excellence with professional engagement and advocacy creates a strong foundation for future success.

Alex looks forward to transitioning from student member to professional member within HFMA, carrying forward the lessons and connections she's developed during her time at Rutgers. Her story serves as an inspiring example of how early involvement in professional organizations, coupled with strong academic preparation, meaningful internship experiences, and advocacy work, can shape a promising career in healthcare

finance. The support and resources provided by HFMA have been instrumental in her journey, and she encourages other students to take advantage of similar opportunities early in their academic careers. In the near future, Alex is eager to leverage her knowledge in healthcare administration and business within a hospital setting, where she aims to enhance patient care while collaborating closely with financial departments. Her goal is to implement strategic financial initiatives that directly benefit healthcare delivery and patient outcomes. As her career progresses and she gains experience within the hospital setting, Alex envisions transitioning into the private sector, where she can apply her expertise to the pharmaceutical and medical device industries. By leveraging her background in healthcare administration and finance, she aims to drive financial strategies that support the development and accessibility of innovative medical solutions.

"In healthcare finance, our role extends far beyond spreadsheets and bottom lines. Through HFMA, we empower emerging professionals to become advocates for positive change in healthcare delivery. When we bring students like Alex to Washington and show them how policy shapes patient care, we're cultivating leaders who understand that every financial decision ultimately impacts someone's access to healthcare." Fatimah Muhammad, FHFMA

About the author

Fatimah Muhammad, MPH, is Director of 340B Pharmaceutical Services and Drug Replacement at Saint Peter's University Hospital. She can be reached at fmuhammad@saintpetersuh.com.

FOCUS ON ... NEW JOBS IN NEW JERSEY

JOB BANK SUMMARY LISTING

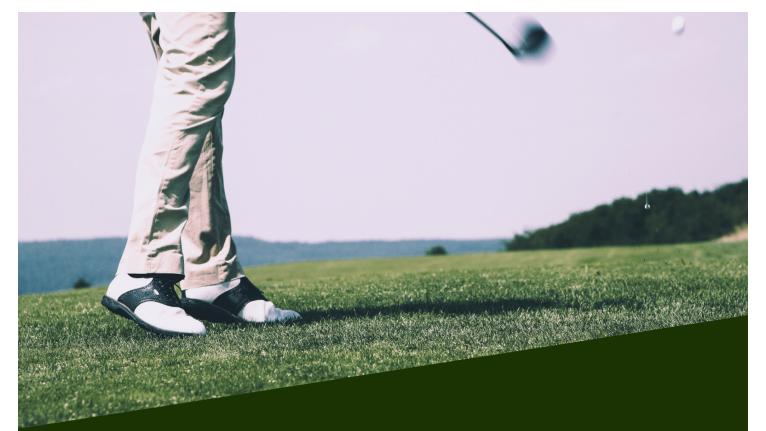
HFMA-NJ's Publications Committee strives to bring New Jersey Chapter members timely and useful information in a convenient, accessible manner. Thus, this Job Bank Summary listing provides just the key components of each recently-posted position in an easy-to-read format, helping employers reach the most qualified pool of potential candidates, and

helping our readers find the best new job opportunities. For more detailed information on any position and the most complete, up-to-date listing, go to HFMA-NJ's Job Bank Online at www.hfmanj.org.

[Note to employers: please allow five business days for ads to appear on the Web site.]

Job Position and Organization

FINANCE OPERATIONS ANALYST CentraState Healthcare System MANAGER OF NON-GOVERNMENTAL BILLING Atlantic Health



HFMA NEW JERSEY PRESENTS

2025 GOLF CLASSIC

Thursday, May 8, 2025

11:30 AM - REGISTRATION, LUNCH BUFFET
1:00 PM - SHOTGUN START
3:30 PM - GOLF CLINIC

5:30 PM - COCKTAIL HOUR, HORS D'OEURVES, DINNER WITH OPEN BAR

> Mercer Oaks Golf Course West Windsor, NJ

REGISTRATION

- Please register online at www.hfmanj.org
- Payments, can be made with credit card on the website or with check by mail. Mail checks to: Laura Hess, HFMA-NJ Chapter, PO Box 6422, Bridgewater, NJ 08807
- Registrations or Cancellations must be received by May 1, 2024.

REGISTRATION FEES

•	GOLF*	\$400
•	COCKTAIL HOUR & DINNER <u>ONLY</u>	\$150
•	FOURSOME*	\$1600
•	FOURSOME & TEE*	\$1800
•	GOLF CLINIC**	\$200

^{*}Includes Lunch Buffet, Refreshments & Snacks on the Course, Cocktail Hour & Open Bar, Dinner & Raffle Prizes.

SPONSORSHIP OPPORTUNITIES

•	GOLF CARTS	SOLD
•	BAG TAGS	SOLD
•	DINNER CO-SPONSOR	SOLD
•	LUNCH CO-SPONSOR	SOLD
•	COCKTAIL PARTY CO-SPONSOR	SOLD
•	BEVERAGE CART CO-SPONSOR	\$1000
•	driving range co-sponsor	\$500
•	putting green co-sponsor	SOLD
•	CONTESTS	\$300
	contests to be determined, contact njhfma	@AOL.COM FOR DETAILS
•	GIVEAWAYS	\$200
	giveaway fee waived if additional sponsorsi	HIP IS PURCHASED
	sponsors to provide items, contact njhfmag	DAOL.COM FOR DETAILS
•	TEE SPONSORSHIP (PER HOLE)	\$250

^{**}Includes Cocktail Hour & Open Bar, Dinner & Raffle Prizes.

NJ HFMA: Who We Are

Included below is a recent snapshot of the NJ Chapter's membership, broken down Into general categories based on the information contained in the Chapter Roster.

Organization Type:		
Hospital or Medical Center	577	48.1%
Health System Corporate Offices	364	30.4%
Consulting Firm	138	11.5%
Accounting Firm	56	4.7%
Educational Institution	22	1.8%
All Others	42	3.5%
Total Membership @2/1/2025	1199	100.0%
Job Level:		
CFO	40	3.3%
President/CEO	68	5.7%
Vice President	111	9.3%
Director	216	18.0%
Manager/Supervisor	202	16.8%
Staff Specialist/Analyst/Accountant	436	36.4%
All Others	126	10.5%
Total Membership @2//2025	1199	100.0%
Membership Category:		
Professional All Access	289	24.1%
Business Partner All Access	131	10.9%
Enterprise Professional All Access	644	53.7%
Enterprise Business Partner All Access	93	7.8%
Student All Access	18	1.5%
All Others	24	2.50
Total Membership @2/1/2025	1199	100.0%

The membership breakdown was last published in the 2023-2024 Winter Edition of the Garden State Focus. Since that time the membership grew by 175, or 17%. The increase was primarily in the Healthcare System Corporate Offices organization type, within job level of Staff Specialist/Analyst/Accountant and membership category Enterprise Professional. This is consistent with the movement from traditional membership to Enterprise seen across the Association.

Source: NJ Chapter Roster 2/1/2025

Need to Get Your Name Out There?

CONSIDER TAKING OUT AN AD IN THE GARDEN STATE FOCUS!

THE AWARD WINNING MAGAZINE IS
PUBLISHED FOUR TIMES A YEAR AND
REACHES MORE THAN 1,000 OF OUR
MEMBERS IN THE HEALTHCARE
COMMUNITY

CONTACT NJHFMA@AOL.COM FOR MORE INFORMATION



To view our most recent publications visit: www.hfma.org/chapters/region-3/new-jersey/newsletter/

