Each year the Texas Bluebonnet Chapter of AAHAM offers a scholarship to AAHAM members and/or their immediate family members to assist in their educational goals. The award is based on an essay contest and this year’s question was:

Specifically what portions of the recent Healthcare Reform Bill will affect you and/or your family (how and why)? All things considered, what will the financial impact be for your and/or your family? Why do you believe that quality of care will or will not be affected?

Rachel Branscum submitted the winning essay for the 2010 AAHAM Texas Bluebonnet Chapter’s Scholarship Contest. Rachel is a graduate of Northwest High School in Justin, Texas. She worked as an athletic trainer during her Junior and Senior years. Rachel will be attending Tarrant County College for her freshman year and she plans to transfer to Baylor following that to continue her education at Baylor School of Dentistry.

Read Rachel’s winning essay in this edition of The Texas Tumbleweed (page 13) to see how she thinks she and her family will be impacted by the recent Healthcare Reform Bill.

Scholarship Winner 2010

Congrats to Rachel Branscum!
Winner 2010 Texas Bluebonnet Chapter Scholarship & Future Dentist

us posted on your progress.

Special thanks to Lynn Giddens-Branscum, Scholarship Chair for our Chapter. Thanks, as well, to the independent panel of judges that reviewed this year’s essays to award the 2010 Texas Bluebonnet Chapter scholarship, Jim Eaton, Mike McQuiston, Danielle Scroggins, Marilyn Franklin, and Karen Arthur.

Also, thanks to all who submitted essays for consideration in this year’s contest. If your essay was not selected this year, please try again next year.

Good luck in your studies and future endeavors, Rachel! Keep
As fall approaches, I begin to dream of cooler weather and football. Here in Missouri, the leaves are already changing colors and the cooler weather has arrived. I hope that by the time you read this in Texas, you will be getting to enjoy the cool evenings and brisk mornings as well.

As I am writing this, it is the ninth anniversary of 9/11 and I cannot help but be reminded of where I was when I saw the towers fall. I am reminded of Flight 93 and the bravery of those men and women that gave their lives; of the Pentagon in flames and the uncertainty that every American felt that day. Since then there have been many changes in security, healthcare and life overall. I pray that we as a nation never forget what happened that day and how we felt. That is what unites us as a country and as individuals.

Onto our healthcare work however... Currently, your education committee is preparing for the Fall Regional Event in Houston and it is looking like another great educational opportunity. Another educational opportunity is the Annual State Institute, our annual Summer conference. The dates and location are being confirmed now and we will begin sending notices to the membership and even outside the membership. It is you, the members of the chapter that make the ASI a success. We need your input for topics. Please send any ideas or requests for topics to Carolyn Swanson, your education chairperson.

I would like to take this chance to also welcome the Louisiana chapter members to the Texas Bluebonnet chapter. The Louisiana chapter was recently merged into our membership and we are exploring some additional ways to reach out to them and get them involved in our chapter. If you know someone in Louisiana, please give them a warm Texas welcome.

Our committees are always looking for fresh faces and ideas. If you have an idea, area of expertise or just want to be more involved in AAHAM, feel free to contact me or any of the other board members and committee chairs. We want and need your input. This is your chapter and we want to grow it to meet your needs, but we need your help to do that.

Best regards,

Chris
Chris.Morgan@Mercy.net

Visit TraceCommunication.com
Calendar of Events

October 13-15, 2010
NOTE - NEW DATES
2010 Annual National Institute (ANI)
Harbor Beach Marriott
Fort Lauderdale, Florida

October 17-23, 2010
Patient Account Management Week
(PAM Week)

October 18-23, 2010
Fall CPAM /CCAM exams

November 5, 2010
Fall Professional Development Seminar
Texas Payor Symposium
Houston, HCA Shared Services Center
8101 West Sam Houston Parkway South
Suite 100
Houston, Texas 77072

November 8-19, 2010
CPAT /CCAT /CCT exams

December 1, 2010
Registration deadline for February 2011 exams
CPAT /CCAT /CCT

PFS Group. Because when it comes to your patients, you need someone who cares as much about connection as they do collection.

Recognizing the value of excellence for your patients.

Twitter.com/pfs_group  Facebook.com/pfsgroup

877.784.4410
Houston | Denver | Crystal City
AAHAM would like to extend congratulations to Brian A. Moore who passed the CPAT exam in May! We apologize that he was not included in the list of newly certified members in the last issue.

Good luck to the October CPAM/CCAM examinees who will be taking their exam very soon!!

Certification Exam Study Manual
Order online or download an order form at www.aaham.org.

Certification Calendar
October 18-23, 2010 – Fall CPAM /CCAM exams
November 8-19, 2010 – CPAT /CCAT /CCT exams
December 1, 2010 – Registration deadline for February 2011 exams: CPAT /CCAT /CCT

If you would like to be a part of the Certification Committee or if you are interesting in sitting for an exam, please contact our Chapter’s Certification Chairperson for further information:

Emily M. Goertz, CHFP, CPAM, CPC-A
Director of Patient Accounting
Texas Children’s Hospital
emgoertz@texaschildrens.org

Revenue Cycle Intelligence™
What has your data done for you lately?

www.passporthealth.com 888-661-5657
AHA calls for changes to proposed home health payment rule

The Centers for Medicare & Medicaid Services should withdraw its proposal to increase the calendar year 2011 home health payment cut for coding and documentation, the AHA said today. Commenting on the proposed CY 2011 home health prospective payment system rule, AHA said the agency instead should refine its case-mix methodology to target the drivers of real case-mix change. The AHA also urged CMS to focus on the particular organizations that misuse Medicare’s home health benefit, rather than relying on imprecise across-the-board cuts that penalize all providers. In addition, AHA urged CMS to allow more than 15 days for the physician certifying the care plan to meet face-to-face with the patient after home care begins, to avoid delaying medically necessary care.

Welcome Louisiana Chapter!

I would like to take this chance to welcome the Louisiana chapter members to the Texas Bluebonnet chapter. The Louisiana chapter was recently merged into our membership.

I would also encourage our Texas members to join me in extending a warm Texas welcome.

Hope to see you soon at one of our upcoming conferences. See photos below for some of the fun you missed so far.

Howdy, Ya’ll!

Chris Morgan, President

Member Spotlight

Lora Willis
Corporate Partners Chair

The 2010-2011 Corporate Partners Chair is Lora Willis. Lora is currently the Director of Patient Financial Services for Texas Health Partners, a wholly owned subsidiary of Texas Health Resources. Texas Health Partners in Addison, Texas manages joint venture hospitals for Texas Health Resources. Lora has worked for Texas Health Partners since early 2006. Previously, Lora managed patient financial services and outpatient rehabilitation business operations for Cook Children’s Medical Center in Fort Worth and she has worked in some form of healthcare since 1985.

Lora is a Native Texan, from the Tarrant County area. She has three children; two grown daughters and a son, Walker, that is in first grade. He keeps Lora busy, busy, busy! She is an avid reader, finishing one to two books per week and she loves movies and hanging out with her family. Favorite topics for reading and movie-going include action and Sci-Fi.

Lora’s son, Walker is in the first grade.

Lora’s son, Walker is in the first grade.
How Can I Set My Staff Up for Success?

In the second half of “Assembling a Revenue Cycle Team,” Julie Waddell discusses how education and training along with process improvements and technology, can contribute to high-performing staff and satisfied patients.

Look for Part I of this article in the Summer 2010 edition of The Texas Tumbleweed, pages 12-13.

Orientation, Education & Training

Once the employees that comprise the revenue cycle team are identified and hired, then the real work begins. Each employee must participate in a proper orientation program, complete with all necessary training needed to get started in their jobs with minimal delay and maximum results.

Even after the orientation process, employees must participate in an ongoing evaluation of their skills and take part in training programs. Employees at all levels should be aware of their career paths within the organization, as well as succession planning, and a mentoring program should be established to encourage growth. Employees should also be encouraged to participate in professional organizations related to their job functions. At Presbyterian Hospital of Denton, each patient access associate is strongly encouraged to obtain CHAA (Certified Healthcare Access Associate) status from NAHAM. A $500 one-time bonus is offered to those who sit for and pass the NAHAM certification exam. The exam consists of 115 multiple choice questions related to patient access services. As of June 2010, 97% of Tammy’s staff have been certified.

As part of the ongoing education and training at Presbyterian Hospital of Denton, staff members rotate throughout the revenue cycle positions to gain a better understanding of how their performance affects others. For example, patient access staff is trained on back-end billing and collections to gain a better understanding of their accuracy and effectiveness on the front-end processes. Each month access staff is required to spend four hours following up on accounts in which patient balances are due but have yet to be collected in the pre-service area.

Policies, Procedures, Processes, & Compassion

With a strong focus on finding the right people to join a revenue cycle team, hospital executives can also look at their processes to make sure they are setting their staff up for success. It is critical to clearly define the expectations, policies, procedures and processes for every job function. Goals should be set and performance should be measured. In particular, customer satisfaction should have the highest expectations and the highest standards. Nothing less than optimal customer satisfaction should be accepted. One example includes Presbyterian Hospital of Denton’s adoption of the “Red Coat Program.” Representatives from the Admissions Department can be seen around the hospital wearing a red scarf, tie or pocket scarf as they “sweep” through the area outside of Admissions to see how they can assist patients. From finding a magazine to providing directions, grabbing a cup of coffee or even taking the extra time to sit with a nervous patient, the Red Coats can be seen meeting patients’ needs in simple and heart-felt ways.

“But personally reaching out to the patients and families, we are showing them that we are aware of their circumstances,” states Kenna Karmel, admitting manager. “We see them. They are not forgotten, and we genuinely care about their comfort.”

Technology & Workflow Tools

Next, stakeholders should evaluate their hospital’s technological needs, both for the present and the future. Workflow tools can be implemented to improve efficiencies. These tools align users operationally, emotionally and strategically to the vision of the revenue cycle team by distributing accountability and focusing on personal results. In addition, they identify gaps and collection opportunities that could improve the bottom line.

Perhaps most importantly, workflow tools can provide users with personal worklists and reminders that can deliver quantifiable results. For example, users can view a segmented personal accounts receivable analysis which clearly identifies accounts that require follow-up. This type of regular, daily feedback encourages users to focus on activities that produce results.

Presbyterian Hospital of Denton has experienced improvements in patient satisfaction, collections, and a reduction in denials due to accuracy. In 2009, the hospital exceeded their upfront cash target by $836,000 while increasing patient satisfaction particularly in the ER and outpatient services areas. Additionally, employee morale is at its highest historical levels, with the hospital experiencing a 91% retention rate and a 15% increase in employee satisfaction, compared to 2008.

For hospitals wishing to enhance their revenue cycle efforts, the roadmap to success is clear. They must clearly define the behaviors and skills of each position, evaluate skill sets of current employees to identify gaps, and seek out talent to fill any gaps that may exist. With the appropriate individuals in place, executives must implement performance criteria, monitor and measure performance, encourage mentoring and establish career paths. Next, they must identify technology that can assist their employees and implement the necessary training associated with any new technology. By monitoring customer satisfaction – both internal and external – revenue cycle leaders will quickly learn what works and what does not. And through incentive programs and celebrations, as well as clear communication at all levels, healthcare providers will reap the benefits of these arduous but important steps.
Advertising Guidelines

- Advertising with sponsorship only.
- All ads and logos should be in .eps, .tif, .jpg, or .pdf format at a minimum of 300 dpi.
- Ads cannot be “re-sized”.
- Please do not send any graphics or logos embedded in MS Word or Acrobat text files.

<table>
<thead>
<tr>
<th>Level</th>
<th>Ad Size</th>
<th>Ad Dimensions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diamond</td>
<td>Full Page</td>
<td>9 3/4” H x 5 1/8” W</td>
</tr>
<tr>
<td>Platinum</td>
<td>Half Page</td>
<td>4 7/8” H x 5 1/8” W</td>
</tr>
<tr>
<td>Gold</td>
<td>Quarter Page</td>
<td>2 1/2” H x 5 1/8” W</td>
</tr>
<tr>
<td>Silver</td>
<td>Business Card</td>
<td>2” H x 3 1/2” W</td>
</tr>
</tbody>
</table>

Please submit ads to Debbie Peterson at dpeterson@cmpmanagement.com.

House panel urged to exempt hospitals from DME program

At a hearing on September 15, 2010, the House Energy & Commerce Health Subcommittee examined the impact on patients, providers and suppliers of Medicare’s competitive bidding program for durable medical equipment and supplies. Henry Ford Health System President and CEO Nancy Schlichting, testifying for the Detroit-based health system, urged Congress to fully exempt existing hospital-based DME providers from the program, reimbursing them for DME services at the rates determined by the competitive bidding process in their region. Currently, hospitals are exempt from the program if they furnish crutches, canes, walkers, glucose monitors, infusion pumps and manual wheelchairs. These “are not the services we require to manage needs of patients discharged from a hospital stay, or to prevent a readmission or to reduce emergency department visits,” Schlichting said. Legislation (H.R. 6095) introduced last month by Rep. John Dingell (D-MI) would exempt qualified hospital-related DME entities from the program.
Do your career ambitions include a promotion to greater responsibilities? Are your efforts to move into management getting you no where in the job market? You are not alone. One of the most common career challenges is moving up the corporate ladder. As a career coach, one of the most frequently asked questions I get is, “how can I make my resume convince employers I can do the job when I don’t have management experience?” Let me share with you three tips for transforming your resume into a tool to help you move up in your career.

1. Emphasize strategic activities
Transitioning into management generally means going from tactical responsibilities to strategic planning; meaning those in management plan the work of others. Employers want to know how closely you have been involved with strategic activities. Perhaps you’ve worked with a team that came up with strategic solutions. Maybe you’ve assisted your boss in devising a better way of doing something. It could be that you took the initiative to develop a more efficient system of operations. Use these examples in your resume to show that you understand what it takes to be a strategic thinker.

2. Emphasize your accomplishments
Employees are always looking for individuals with drive and initiative to promote into management roles. What better way to illustrate your potential than through your accomplishments. Think back on the challenges you’ve met on the job. What problems did you fix? How did you contribute to corporate bottom-line objectives? Can you prove your worth by the time you’ve saved or the costs you’ve cut or procedures you’ve streamlined? How well have you contributed to the income or revenue growth of your company? These are issues on the minds of all hiring managers. Include accomplishments in your resume that illustrate your ability to solve the problems of potential employers.

3. Emphasize your leadership skills
The hallmark of great management is the ability to lead others. You don’t have to have had the role of manager to have opportunities to lead. Challenges represent opportunity to exercise leadership. Anytime you were able to motivate others, you practiced leadership. Mentoring is another example of leadership. Training others is yet another form of leading. Taking part in a team that solved significant problems is a great way to show your leadership potential.

So, you see, there are many ways to illustrate in your resume your ability, skills and drive toward management. Remember, employers look for potential as well as actual management experience. Write your resume with these three tips in mind and you’ll soon see career growth opportunities knocking at your door.

Deborah Walker, CCMC is a career coach helping job seekers nationwide. Her clients gain skills in resume writing, interviewing and salary negotiation. See her sample resumes and read more job search tips at: http://www.AlphaAdvantage.com
DOJ Headlines
$23 Million HIV Infusion Scheme

On September 9, 2010, the Department of Justice announced that a Miami-area resident who owned and operated J & F Community Medicare Center, Inc., an HIV infusion clinic, pleaded guilty for her participation in a $23 million HIV infusion Medicare fraud scheme.

According to the plea documents, Flor Crisologo, conspired with a physician and others to order unnecessary tests, sign false medical analyses and diagnosis forms, and authorize treatments to make it appear that medical services were being provided to Medicare beneficiaries.

Crisologo admitted that she and her conspirators paid Medicare beneficiaries kickbacks to induce the beneficiaries to claim they received legitimate services at the clinic when in fact the HIV infusion services were either not provided or were not medically necessary.


2010 AAHAM ANI
“CATCH THE WAVE OF HEALTHCARE REFORM”

Fort Lauderdale, Florida
October 13-15, 2010 • Harbor Beach Marriot

THE DILEMMA:
DECO began providing eligibility services for a facility in Texas in July 2009. Shortly thereafter DECO received an account from case management that had been screened and deemed ineligible prior to DECO’s arrival. The patient had been in house for over 4 months and the charges were quickly growing.

To read the entire story and learn how the DECO Difference can work for you, log onto www.decorm.com or contact us at 972-765-7503.
Florida judge may allow health reform challenge to proceed

A federal judge is expected to decide by Oct. 14 whether attorneys general in Florida and 19 other states have legal standing to challenge the constitutionality of the federal health reform law. According to news reports, Judge Roger Vinson of the U.S. District Court for the Northern District of Florida said at a hearing yesterday that he will rule on the case’s standing by Oct. 14 and is likely to allow at least part of the lawsuit to proceed. The suit, filed in March, challenges the health reform law’s requirement that most Americans have health insurance by 2014 as well as other provisions. In August, a federal district judge in Virginia denied the federal government’s motion to dismiss a similar lawsuit brought by Virginia’s attorney general.

Payor News

Aetna E-News for Providers


Cigna & Great-West Newsletters
http://cigna.com/customer_care/healthcare_professional/newsletters/index.html

Humana News for Providers
http://www.humana.com/providers/newsletters/HumanaWeb3rdQ10/index.html

United Healthcare Network Bulletin
https://www.unitedhealthcareonline.com/b2c/CmaAction.do?channelId=01af50581693b010VgnVCM100000c520720a____

HHS seeks comments on national quality strategy

The Department of Health and Human Services is accepting comments through Oct. 15 on proposed principles and priorities for a national health care quality strategy, as required by the Patient Protection and Affordable Care Act. HHS must submit the initial strategy to Congress by Jan. 1, 2011. Comments may be submitted online at www.hhs.gov or e-mailed to national_quality_strategy@hhs.gov.
Welcome New Members!

The Texas Bluebonnet Chapter of AAHAM would like to welcome its new members!

Rosemary Eldousoky, Sidra
Diana McVay, PHNS
Christine Nelson, North Texas Medical Center
Maria Glenn
John Hemenes, PFS Group
Treva Buchanan, Conifer Health Solutions
Jennifer Tharp, Brownwood Regional Medical Center
Kirk Nealy, The University of Texas M.D. Anderson Cancer Center
John Willy, Moore
Nancy Klock, Denver Health Medical Center
Fernando Chacon, Scott & White Health Care

Just a reminder, local Chapter membership benefits include:

• Discounted registrations to chapter meetings
• Staying up to date with chapter events and topics via our membership email distribution list.

Please let me know if I can assist in this process in any way and feel free to contact me if you have any questions.

Again, welcome new members!

Julie A. Shaw
Membership Chairperson
800-872-1818
Julie@parrishshaw.com

Volunteers Needed

• Photographers
• Committee report solicitors
• Reporters
• Article writers

Contact Carolyn Gay, Publication Chair, for more information: cgay@houstonlaw.com

You don’t need one more partner.
You need one partner that does more.

You and Emdeon.

more complete revenue cycle management  more cost savings  more revenue, faster
Save The Date

November 5, 2010

AAHAM Fall Professional Development Seminar

Texas Payor Symposium

Free for Members • $75 for Non Members

8:30 am to 2:30 pm • Lunch will be provided

HCS Shared Services Center
8101 West Sam Houston Parkway South, Suite 100
Houston, Texas 77072

Registration Deadline is October 29, 2010.

• REGISTER TODAY! •

This program will be worth 5.0 CEUs.
Visit http://www.aahamchapter.org/Events.cfm?chapter=40 for registration and additional information.

Publication Information

The Texas Tumbleweed is published quarterly by the Texas Bluebonnet Chapter of the American Association of Healthcare Administrative Management as a communication medium to Chapter members. Opinions expressed in articles are those of the authors and do not necessarily reflect the views of the Texas Bluebonnet Chapter or its members.

Members are encouraged to submit articles and report news of interest to the membership. Contact the chapter editor to obtain deadlines for submitting articles. The editor reserves the right to edit any submission for clarity and length, and to accept or reject any submission. Please send all submissions (articles in MS Word, advertising in .jpg, .pdf, or .tif files) to:

Carolyn Gay, Publications Chair • cgay@houstonlaw.com

<table>
<thead>
<tr>
<th>Submission Deadlines:</th>
<th>Publication Date</th>
<th>Advertising Date</th>
<th>Articles Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Winter</td>
<td>January 15</td>
<td>January 2</td>
<td>December 7</td>
</tr>
<tr>
<td>Spring</td>
<td>April 15</td>
<td>April 1</td>
<td>March 15</td>
</tr>
<tr>
<td>Summer</td>
<td>July 15</td>
<td>July 1</td>
<td>June 15</td>
</tr>
<tr>
<td>Fall</td>
<td>October 15</td>
<td>October 1</td>
<td>September 15</td>
</tr>
</tbody>
</table>
Four states receive matching funds for EHR incentives program

The Centers for Medicare & Medicaid Services recently awarded American Recovery and Reinvestment Act funds to Medicaid programs in four states for planning activities to implement electronic health record incentive programs. North Dakota will receive $226,000; Hawaii, $836,000; Ohio, $2.29 million; and Massachusetts, $3.56 million. The ARRA provides a 90% federal match for state planning activities to administer EHR incentive payments to Medicaid providers, ensure proper payments through audits, and promote interoperability and meaningful use of EHR technology. CMS began awarding the matching funds to states and territories last November. For more information, visit www.cms.gov.

2010 AAHAM Scholarship Essay Contest
by Rachel Branscum

With recent events in the United States many people have chosen to disagree with the way that our government as a whole works. Many people in the U.S. feel that our freedoms as a whole are being taken away be it the health care bill reform, the changes to the second amendment, and the new taxes being put into place on things that we as Americans enjoy on a daily basis such as junk food and oil. The new health care bill reform will affect everyone in the United States in someway or another, via it being hospital personal or even just the people who rely on governmental assistance.

Personally, my family will be affected drastically by the new bill simply because of our involvement in the hospital. My parents work for the hospital and that is where the majority of our income comes from. Without the financial support of the hospital we would not be able to afford many of the basic parts of our everyday life such as rent, utilities, and food. The new health care bill reform will cause a shortage in our income causing us to cut back on the luxuries that we do have the privilege to enjoy, because this bill will make it where the doctors will eventually be paid less causing it where the amount that is brought into the hospital will go down and then my parents jobs are at risk simply because the “goal of the month” will not be met and employers will need to cut staff.

The new health care bill reform has affected me personally because I used to want to be a doctor but with the doctors being required to take on more Medicaid and Medicare patients it will cut down on the number of patients that they can see who have insurance that will actually make them money. The new bill will eventually cut down on the income of the physicians and will cause it where there is less people wanting to go into health care such as myself. The way that the majority of students going into either starting their careers or even just their education are looking at is: The more money that is taken away from our incomes means the less we have for our own personal use but the amount of student loans is still the same which means we will be paying off our debts without actually making any money. This bill has made me decide that instead of helping people as I had wished, I will instead be forced to work in a job that makes money so that I can support my family and myself.

This new bill has affected many people in the United States and I believe that it will affect the overall quality of our health care. I believe this because I think that the majority of Americans are like myself in the fact that we have to look out for ourselves and our families and when money is not being brought into the household people have to find new jobs. I think that the number of people wanting to become health care providers will be cut by an increasing amount and that even the number of people in health care will be cut, therefore causing a shortage in being able to chose who to go to for the best service and even affecting whether or not that service is offered due to new insurance regulations.

Health care bill reforms as a whole are a very good idea, but to enforce this new bill on Americans just causes more confusion and issues. If our country were at a good standing financially and not having so many problems right now then I would believe that this is for the better, but the way that it is written out to be that all citizens are required to have it even though it will only add to our overbearing amount of financial debt this leads me to ask why is it we are required to have it when Congress and Senate are not, is it because they are above what will be the quality provided to the “average American,” or is it that we are just the guinea pigs on how this will all work out? I think that we should focus more on education and our financial budget, then this new health care bill reform.
Chapter Officers & Committee Chairs

**President**
Chris Morgan, CPAM
Grace Financial Services, LLC

**First Vice President**
Scott Noel, CPAT, MPA
HCA - San Antonio

**Second Vice President**
Alan Spiegelhauer
MAX Revenue Solutions, Ltd.

**Secretary**
Karol Hopkins
Scott & White Hospital

**Treasurer**
Angie Box
Healthcare Recovery

**Chairman of the Board**
Marji Henry, CCAM
Scott & White Hospital

**Corporate Partners Chair**
Lora Willis
Texas Health Partners

**Membership Chair:**
Julie Shaw
ParrishShaw

**Practice and Standards Chair:**
Patt Lowe
Texas Health Resources

**Certification Chair:**
Emily Goertz, BS, CPAM
Texas Children’s Hospital

**Legislative Chair:**
Greg Page
The Methodist Hospital

**Chapter Excellence Chair:**
Sheila Weber, CPAM
St. Luke's Episcopal Hospital

**Constitution & Bylaws Chair:**
Greg Hightower
DECO Recovery Management

**Publications Chair:**
Carolyn Gay
Hollaway & Gumbert

**Education Chair:**
Carolyn Swanson
Conifer Health Solutions

**Website Chair:**
Robin Gates
Deloitte Consulting LLP

**Scholarship Chair:**
Lynn Giddens-Branscum
Wise Regional Health System

**Chapter Administrator:**
Debbie Peterson
CMP Management

---

Financial Corporation of America
Proud Sponsor of AAHAM Texas Bluebonnet Chapter