Excellence through Collaboration

January 24-26, 2024 KI Convention Center | Green Bay, WI

ATTENDEE BROCHURE

MGM







hfma[™] wisconsin chapter

Attendee Information

EVENT DESCRIPTION

The 2024 Mega Conference is a tremendous educational opportunity for Accounting, Billing, CEO, CFO, Clinic Office Managers, Coding, Collections, Compliance Officers, Customer Service, Directors of Patient Accounts, Patient Accounts Managers, Finance, IT Staff, Materials Managers, Privacy Officers, Registration, and many others.

Attendees have the opportunity to network with fellow associates, learn from industry speakers, and meet business associates from many different industries. This will be the eleventh bi-annual Mega Conference. Conferences in past years have drawn roughly 500 attendees.

2024 COMMITTEE MEMBERS

AAHAM Wisconsin Chapter Alicia Auman, AccuReg Katherine Prieve, Fort HealthCare

HFMA Wisconsin Chapter Ryan Holte, Froedtert Health, Inc. Art Mertig (Chair) Colleen Nolan, Grant Regional Matthew Clark, Froedtert Health Kyle Kovacevich, Black River Memorial Hospital Jess Vogen, Medix

WHIMA

Wil Limp, UW Health Cherri Fields, SSM Health Teri Brunner, University of Wisconsin-Madison Bryanna Schoeffel, SSM Health

WMGMA

Todd Noggle, Advocate Aurora Health Care Jean Thomas, Wisconsin Medical Group Management Association Joel Gehring, Grant Regional Health Center Kevin Murray, M3 Insurance Sandra Scola, Reedsburg Area Medical Center Amy Lindloff, Prairie Clinic SC

CANCELLATIONS / REFUNDS

A full refund of the registration fee, less a \$25 processing fee, will be granted if cancellation is received by Sunday, December 24, 2023. NO REFUND will be granted if cancellation is received after that time (even if weather related).

SUBSTITUTIONS

We understand that in rare instances a registrant may not be able to attend. Should a registrant desire to send a substitute to attend on their behalf, notification is required so that the correct name badge will be available upon checkin. Please contact mega@badgerbay.co to provide the updated information.

REGISTRATION

Attendee registration is available online.

RATES	Early Bird Rate BY JANUARY 5, 2024	Regular Rate AFTER JANUARY 5, 2024
Full Conference (includes socials		\$325
· ·	• • •	1
Thursday Onl	y \$200	\$225
Friday Onl	y \$100	\$125
Guest Social Pass fo Wednesday and Thursday Evening	\$ /5	\$75

HOTEL INFORMATION / BOOK YOUR STAY

Hyatt Regency Green Bay 333 Main Street Green Bay, WI 54301 920-432-1234

Book in the Mega Conference Block Online Here

A room block has been reserved for attendees of this event at a special discounted rate. Reserve your room using the link above. Don't wait! Space is limited and the deadline to reserve a room in the block is January 2, 2024.



WEDNESDAY, JANUARY 24, 2024

6:00pm-9:00pm

Welcome Reception Trivia hosted by Premier Trivia 6:30-8:30pm

Join us for an evening of networking and entertainment at our Wednesday Welcome Reception from 6:00 pm to 9:00 pm. Indulge in delightful food and drinks as you mingle with fellow attendees. To add a touch of friendly competition, from 6:30 pm to 8:30 pm, we have an exciting Trivia session hosted by Premier Trivia. It's the perfect opportunity to unwind, connect with industry peers, and showcase your knowledge in a fun and engaging atmosphere. Don't miss out on this chance to combine networking and entertainment for a memorable start to the 2024 Mega Conference.

THURSDAY, JANUARY 25, 2024

7:00am-8:00pm	Registration
7:00am-8:30am	Breakfast
8:15am-8:30am	Day 1 Welcome
8:30am–10:00am	Opening Keynote: Make It Happen – The 3 High Performance Practices to Improve Productivity & Happiness Presented by Michelle McCullough, CEO, DreamBoard Media
	Embark on a journey of self-discovery and productivity enhancement in our session, "Make it Happen - The 3 High Performance Practices to Improve Productivity & Happiness." Explore the intricacies of finding your purpose and acquiring tools for sustained focus. Learn the nuances of building a support system and cultivating a Power Team to navigate professional challenges. Uncover practical productivity strategies designed to streamline your workflow and amplify your output. Delve into the art of effectively seeking support within your key relationships. This session promises a deep exploration of high-performance practices, providing you with tangible insights and tools to enhance both your productivity and overall sense of well-being.
10:00am-10:30am	Break
10:30am–11:30am	Breakout 1.1 2024 CPT Changes Susan Rohde, Senior Manager, Eide Bailly, LLP Over 400 CPT code changes will be effective as of January 1, 2024. Many of which focus on common sections within CPT such as survival services, radialogy

Which focus on common sections within CPT such as surgical services, radiology, cardiology and anesthesia. We will cover the highlights of the 2024 changes to help you and your organization prepare for next year.

Breakout 1.2 Rethinking Collections, How to Create a Payer Escalation Program as Part of the RCM Continuum Jose Loza, Divisional Vice President Revenue Cycle Transformation, Acclara Matthew Thomas, Founding Partner, Acclara



As volumes have increased and staffing has decreased, it has become challenging for healthcare facilities to recover 100% of the contracted insurance's expected reimbursement. Existing collection practices work, but they are limited in their ability to achieve optimal performance. The primary objective should be ensuring expected reimbursement is accurate upfront and learning to identify potential "trends" that can be bucketed to reduce the amount of manual work effort to recover underpaid claims, ultimately reducing aging and improving throughput. There are five main components of the program:

1) Establish a stand-alone "Expected Reimbursement Integrity" team. This is maintaining the reimbursement platform, consistently evaluating over and underpayments for potential trends, and assess consistently over and underpayments for potential trends, and identifying false variances due to system errors (e.g., contract programming and remit posting issues).

2) Create protocols that limit the number of "touches" and empower employees to identify potential trends or issues with reimbursement.

3) Establish an escalation pathway across Revenue Cycle teams that includes pursuit levels, documentation best practices, and technology workflows to standardize the organizational approach to payor escalation.

4) Create a stand-alone "Payer Escalation" team that is focused on scrubbing data and creating projects that group "like issues or trends" for escalation to the payers

5) Establish a "Legal Referral Program" designed to take the following steps if necessary and create a standing agreement with a local attorney who understands the healthcare environment.

This combination allows an organization to shift focus as payers change their behavior. Expected outcomes can generate anywhere from a 1-2% increase in Expect Reimbursement over 12 months.

Breakout 1.3

Cyber Attacks and the Risks: Effects of Ransomeware in Healthcare

Ben Owings, CDPSE, CCSFP, CHQP, Senior Manager, Forvis Ray Baxter, CISSP, CISA, PMP, Director, Forvis

The healthcare industry is the number one target of cyber attacks for 13 years in a row – and the number 2 of affected people is rising drastically. We will discuss the trends, threats, and ways to improve an organization's cybersecurity posture via a more proactive risk management and compliance program.

Breakout 1.4

Access to the Left, Billing to the Right & Those Sticky

Middle Revenue Cycle Processes

Roger Rego, Revenue Cycle Manager, BerryDunn Denny Roberge, Principle, BerryDunn

We hear much about the front and back end of the revenue cycle, but what do we know about the middle of the revenue cycle? Why does it matter? We will look at concerns around compliance risks, friction in conversations with medical staff and how the middle is the most challenging part of the revenue cycle for healthcare financial leaders.



11:30am-1:00pm Lunch and Associate Updates

1:00pm-2:00pm

Breakout 2.1

TEFCA Update Doug Fridsma, CMIO, Health Universe, Inc.

Update on the progress, use cases, and exchange using the TEFCA framework.

Breakout 2.2

Effective Denials Prevention and Management Colleen Goethals, VP, Mid-Revenue Cycle, Xtend Healthcare

Denials are on the rise in healthcare. Health care administrators are making denials management a number one priority in 2023. Eleven percent (11%) of hospital claims are initially denied costing health systems up to 2% of net patient revenue. Ninety percent (90%) of those claims are preventable yet facilities don't take the time to respond or have the insight to do so. This presentation will share with the participants how to manage the denials; identify and address root cause(s); discussion of top trending denials; how to write successful appeal letters; and how measure success.

Breakout 2.3

Virtual Voices – Managing a Remote Team Julie Hable, Operations Manager, Mayo Clinic

Explore the best practices that define successful remote leadership, uncover the advantages and disadvantages of virtual teams, tackle common challenges headon, and engage in an insightful Q&A session. Discover the key attributes that make a remote employee and leader successful, master effective leadership practices for a virtual environment, and learn the art of crafting effective teams in the everevolving world of remote work. Join us as Virtual Voices transform challenges into opportunities, reshaping the way we lead and collaborate in the digital age.

Breakout 2.4

Improving Margin through Analytics and Al Jamie McGlothin, Health Care Analytics National Lead, RSM US LLP

We will discuss the ways data and technology can help health systems increase revenue and reduce cost while improving patient experience and quality. We will provide real world use cases.

2:00pm-2:15pm Break

2:15pm-3:15pm Breakout 3.1

How to Achieve Optimal ROI on your Vendor Relationships

Mike Blievernicht, Senior Diretor of Client Services, Healthfuse

Today's revenue cycles leaders are relying on vendors more than ever to get it all done. But how can you ensure you've selected the right vendor, they are charging a fair rate, and they're optimized to their fullest potential? Is there a better way to track, measure, and analyze vendor performance? These are just a few of the questions our speakers will address as they outline best practices in vendor management.

Breakout 3.2 Time for What Matters: Optimizing Resources and Time in Your Revenue Cycle Management Lori Zindl, President, OS inc.





This presentation will delve into innovative strategies for freeing/creating more time for you and your revenue cycle teams to get back to doing the work you love. Work that can really make a difference in the growth and management of your organization. Rather than solely focusing on time management, we will explore how efficient resource allocation and optimization can provide opportunities to pursue our passions within the business context. Key topics include identifying and eliminating time-wasting activities, streamlining processes, utilizing technology effectively, redefining priorities, and aligning tasks with our strengths and interests. By incorporating real-world examples and case studies, attendees will gain insights into unlocking valuable time resources and discovering ways to combine their passions with business goals, resulting in heightened productivity, job satisfaction, and sustained growth.

Breakout 3.3 Transforming YOUR Team into a Performance Powerhouse

Brian Garver, Senior Vice President, KeyBridge Medical Revenue Care

Transforming YOUR Team into a Performance Powerhouse! The key to success is the people that surround you. Learn how to build an effective, high-performing team that delivers results. Teams have always been, and will always be, an essential ingredient for building a successful business. But building great teams isn't something that just happens. It takes planning and ongoing effort to get them right--and to keep them that way. Each team member plays a role and each individual is part of the whole. The combined efforts of their team members not only produce superior results, they also build a sense of solidarity within their organizations.

Breakout 3.4

No More Pandemic Relief Funding – Now What?

Eric Lopata, Director, Forvis Adam Walter, Vice President, Lument

Hospitals and health systems continue to navigate through turbulent times, all while striving for the goal of brining quality health care to their communities. As facilities continue to age and the importance of quality health care becomes increasingly evident following a pandemic, hospitals and health systems 2 recognize the need for facility expansion and capital projects. In a difficult economic environment with strains on cash flow and liquidity, the means in which organizations finance these types of expansion and capital projects becomes more important than ever. Access to safe and quality health care services may be dependent on it. This program will discuss the current economic environment, the opportunities for capital financing, the importance of developing reasonable financial projections to support that capital financing in a post-COVID era and the key financial metrics to consider in assessing the viability of capital financing.

3:15pm-3:30pm Break

3:30pm-4:30pm Keynote

Leading Multi-Generational Organizations Presented by Dr. Alonzo Kelly

The impact of up to five generations working side by side in the workplace presents a plethora of experiences that can evolve and challenge authentic relationships. Each generation, has a unique experience and understnading of the concept of respect, hard work ethic, and civility. How each of these are defined will influence how individuals recognize and respond to the world around them. As we become more intentional about shared definitions, we are more inclined to actively participate in contributing to a desired Organizaitonal Culture.





4:30pm-6:30pm

Reception and Exhibit Fair *stay until the end! Exhibitors drawing prizes at the end of the day

Cap off an enriching day at our Reception and Exhibit Fair on Thursday from 4:30 pm to 6:00 pm, immediately following Thursday's final session. This is your chance to network and engage with our valued sponsors and exhibitors in a relaxed setting. Enjoy an array of delectable food and refreshing drinks while exploring the diverse offerings at the exhibit fair. We encourage all attendees to stay until the end, as exhibitors will be drawing exciting prizes, adding an extra layer of anticipation and enjoyment to this networking extravaganza. Make the most of this golden opportunity to forge new connections and discover innovative products and services.

FRIDAY, JANUARY 26, 2024

7:00am-8:30am	Breakfast
8:15am-8:30am	Day 2 Welcome
8:30am–10:00am	Legislative Panel The Future of Healthcare in Wisconsin Eric Borgerding, WHA Mark Grapentine, WMS Jeremy Levin, RWHC Sean Kirkby, Wisconsin Health News (moderator)
	Delve into the intricacies of Wisconsin's healthcare future with our Legislative Panel at the upcoming leadership conference. Featuring panelists Eric Borgerding from WHA, Mike Grapentine from WMS, and moderated by Sean Kirby of Wisconsin Health News, the session will critically examine the evolving legislative landscape and its profound implications for healthcare in the state. Expect a nuanced exploration of policy, practice, and public health as these influential voices dissect key issues shaping Wisconsin's healthcare trajectory. This panel is a unique opportunity to gain deep insights into the complexities and potential transformations that lie ahead in the healthcare arena.
10:00am-10:30am	Break
10:30am–11:30am	Closing Keynote: The Importance of Teamwork and Creating the Right Environment for Success Presented by Harry Sydney, former Green Bay Packer player Harry's keynote, titled "The Importance of Teamwork and Creating the Right Environment for Success," draws on his remarkable journey from the gridiron to the boardroom, highlighting the pivotal role teamwork plays in achieving excellence. He shares his invaluable experiences, emphasizing the power of collaboration, trust, and leadership to drive individuals and organizations towards victory. Prepare to be inspired as Harry Sydney imparts a wealth of wisdom and lessons from his years in the NFL, leaving you with actionable takeaways that can be applied both on and off
11:30am-11:45am	the field. Door prize drawing *must be present to win





Michelle McCullough CEO, DreamBoard Media

Michelle McCullough started her first business when she was 19 and currently runs 3 companies including consulting other businesses all over the world. She's the author of four best selling books including the "Make It Happen Blueprint" and "The Time Blueprint for Entrepreneurs".

In addition to being the CEO of DreamBoard Media - a digital marketing agency, Michelle is a seasoned speaker and former corporate trainer, who teaches high performance and leadership strategies that boost employee engagement and retention.

Since 2008, Michelle served as partner and managing director for Startup Princess, an international business and blog, listed by Forbes as "One of the top 10 resources for Women Entrepreneurs". She's worked with top brands like Visa Small Business, UPS Store, AWeber and more.

A sought-after speaker, she's spoken for the Air Force Reserve, Goldman Sachs and Ancestry.com, Utah National Guard, and more. She's been featured on entrepreneur.com, in the 40 under 40, Fox TV and NBC Affiliates and has been interviewed for television and radio over 200 times, including Good Morning America and The Today Show.

She was named the Top 100 Small Business Influencers with Inc Magazine, Michael Gerber and Grant Cardone in 2015.

In addition to her business leadership and experience, Michelle is active in her community and industry where she serves on the board of the ALA Utah Girls State program and served as president of the National Speakers Association Mountain West Chapter 2018-2019.

Her own radio show "Make It Happen" entertains and educates business leaders weekly. Since it's inception, the podcast has had over 1.75 million downloads.



Susan Rohde Senior Manager, Eide Bailly, LLP

Susan has over 25 years experience in the healthcare industry, with 22 years being at Eide Bailly. Susan works mainly with professional coding, with a focus on documentation, medical necessity and compliance. Susan is proficient in all surgical specialties and works extensively with Evaluation and Management (E/M) coding and documentation.



Jose Loza

Divisional Vice President Revenue Cycle Transformation, Acclara

Jose Loza, Division Vice President, leads the company's transformational partnership with Commercial Clients—twenty years of experience in the healthcare industry. Jose has broad business development, project management, and team experience. He works to identify opportunities that provide transformational revenue growth, establish solid client and partner relations, and inspire team members to achieve their personal and professional best. He has held many organizational leadership roles that have given him broad exposure to the critical factors of successfully advancing business solutions, operations, and process optimization. Jose was previously General Manager/Division Leader for Cognizant's Revenue Cycle Management Division. He was also at IES as the Chief Revenue Cycle Officer & Conifer Health Solutions, where he was Vice President, Revenue Cycle Management/AR Management for Commercial clients. Jose holds a bachelor's degree in Business Administration from the University of Texas, Dallas. He obtained his master's degree from the University of Saint Scholastica and earned a master's in Health Informatics. 1/25/24 • 8:30-10:00am

Opening Keynote Make it Happen – The 3 High Performance Practices to Improve Productivity & Happiness

1/25/24 • 10:30-11:30am

Breakout 1.1 2024 CPT Changes

1/25/24 • 10:30-11:30am

Breakout 1.2 Rethinking Collections, How to Create a Payer Escalation Program as Part of the RCM Continuum



Matthew Thomas Founding Partner, Acclara

Matthew Thomas is a revenue cycle and healthcare consulting professional and founding partner of RemedylQ with over ten years of progressive leadership experience in the healthcare industry – consulting for providers in the areas of revenue integrity, reimbursement compliance, technology, and revenue cycle process improvement. Passionate about healthcare accessibility, he believes healthy communities begin with financially stable healthcare providers and he aims to empower providers to do what they do best – help, care, & heal – through trusted partnerships, customized recommendations, and results that drive immediate value.

Most recently, Matthew has supported Providence with his technical and managed care expertise to validate build, rectify errors, and maintain Epic's Expected Reimbursement for both Hospital & Professional Billing. Matthew also served as interim Director within

Providence Revenue Cycle to develop the standard operating procedure, optimize Epic workflows, prepare for expansion, and onboard the newlyformed enterprise Underpayment Team.

Previously, Matthew was the Vice President leading Cloudmed's Underpayment operation. Matthew has a proven track record of developing strong client relationships, increasing revenue and gross margin, identifying and implementing process improvements, fostering a supportive work environment, and strategic planning.

Matthew is Project Management Professional (PMP) certified and an Eagle Scout. As a San Francisco Bay Area native and resident, Matthew enjoys all the outdoor activities California has to offer, discovering new restaurants, reading, and spending time with family.



Ben Owings, CDPSE, CCSFP, CHQP Senior Manager, Forvis

Ben has worked in the healthcare industry for more than 13 years. His knowledge spans across cybersecurity, regulatory compliance requirements, and operational risk sectors of the healthcare industry, allowing him to bring exceptional value to clients.

Career Highlights

- Supported the implementation and training associated with Cerner's EHR
- Trained providers and staff on EHR functionality
- Performed Security Risk Analyses to assist with Meaningful Use reporting and Compliance initiaves
- Executed HIPAA Compliance Assessments for covered entity and business associate clients of all sizes and complexities
- Provided HITRUST service offerings, including Validated Assessments with Certification
 Supported the completion of Enterprise Risk Management Assessments, including Board of Directors presentations
- Executed Data Retention assessments on behalf of covered entity clients
- Performed IT Due Diligence Assessments alongside FORVIS' Transaction Advisory team for buyers and sellers
- Led IT Controls Assessments to support FORVIS' Assurance teams and their financial audits
- Performed Governance Risk and Controls Analysis for multiple entities
 Elected to FORVIS' Healthcare's Enterprise Performance Committee (EPC), working to assist the development and advancement of the Healthcare practice
- Before joining FORVIS, Ben performed an IT Project Manager role at Carolinas Healthcare System (now
- Atrium Health). Ben led Electronic Health Record (EHR) implementations and end-user trainings for providers, clinicians, and clerical staff throughout the organization.

1/25/24 • 10:30-11:30am

Breakout 1.2 Rethinking Collections, How to Create a Payer Escalation Program as Part of the RCM Continuum

1/25/24 • 10:30-11:30am

Breakout 1.3 Cyber Attacks and the Risks: Effects of Ransomeware in Healthcare



Raymond Baxter Director, Forvis

Matthew Thomas is a revenue cycle and healthcare consulting professional and founding partner of RemedylQ with over ten years of progressive leadership experience in the healthcare industry – consulting for providers in the areas of revenue integrity, reimbursement compliance, technology, and revenue cycle process improvement. Passionate about healthcare accessibility, he believes healthy communities begin with financially stable healthcare providers and he aims to empower providers to do what they do best – help, care, & heal – through trusted partnerships, customized recommendations, and results that drive immediate value.

Most recently, Matthew has supported Providence with his technical and managed care expertise to validate build, rectify errors, and maintain Epic's Expected Reimbursement for both Hospital & Professional Billing. Matthew also served as interim Director within

Providence Revenue Cycle to develop the standard operating procedure, optimize Epic workflows, prepare for expansion, and onboard the newlyformed enterprise Underpayment Team.

Previously, Matthew was the Vice President leading Cloudmed's Underpayment operation. Matthew has a proven track record of developing strong client relationships, increasing revenue and gross margin, identifying and implementing process improvements, fostering a supportive work environment, and strategic planning.

Matthew is Project Management Professional (PMP) certified and an Eagle Scout. As a San Francisco Bay Area native and resident, Matthew enjoys all the outdoor activities California has to offer, discovering new restaurants, reading, and spending time with family.



Roger Rego Revenue Cycle Manager, BerryDunn

Roger is a Revenue Cycle Manager in BerryDunn's Healthcare Practice Group. Roger has over 30 years of healthcare experience. In his role with BerryDunn he provides revenue cycle assessments and optimization, interim management, denials management, Electronic Health Record (EHR) implementation and policy and procedure development. Roger attended the University of Wisconsin – Madison and majored in Finance and Business Administration.

Before joining BerryDunn Roger served as the CFO of a Federally Qualified Health Center (FQHC) for over 8 years and has worked in multiple revenue cycle leadership roles for hospitals and health systems. He also worked for TRICARE and Medicare in the areas of program integrity, fraud and abuse and provider enrollment.

Roger has presented for professional organizations and done podcasts on topics like Denials Management, Strategic Leadership, Clinical Documentation, and other topics impacting the Revenue Cycle. He is currently a faculty member for the National Association of Community Health Centers (NACHC) Leadership Institute and has been involved as a member of multiple boards and committees for professional organizations and health systems.



Denny Roberge Principle, BerryDunn

Denny is a Principal at BerryDunn and is a recognized leader in revenue cycle management. He possesses subject matter expertise regarding pricing transparency and modeling, patient accounting system (EMR/PAS) conversions and optimization, revenue cycle best practices, reimbursement transformation, and using metrics to achieve and sustain results.

Denny's work includes authoring legislative reports related to recommended healthcare reform, Revenue cycle transformation and optimization, development, and implementation of fee-for-value reimbursement models, denials prevention, and numerous revenue cycle initiatives.

1/25/24 • 10:30-11:30am

Breakout 1.3 Cyber Attacks and the Risks: Effects of Ransomeware in Healthcare

1/25/24 • 10:30-11:30am

Breakout 1.4 Access to the Left, Billing to the Right & Those Sticky Middle Revenue Cycle Processes

1/25/24 • 10:30-11:30am

Breakout 1.4 Access to the Left, Billing to the Right & Those Sticky Middle Revenue Cycle Processes



Doug Fridsma CMIO, Healthfuse

1/25/24 • 1:00-2:00pm

Breakout 2.1 TEFCA Update



Colleen Goethals VP, Mid-Revenue Cycle, Xtend Healthcare

Colleen Goethals, MS, RHIA, FAHIMA has over 35 years of healthcare experience possessing vast knowledge of revenue cycle management and is a subject matter expert on HIM operations and privacy. Ms. Goethals is the Vice President of Mid-Revenue Cycle for Xtend Healthcare. Past experience includes HIM/Revenue Cycle Regional Director; Consultant; HIM Director and Corporate Privacy Officer; and adjunct college instructor. She is an author and frequent speaker on topics related to leadership, revenue cycle, release of information, and HIPAA Privacy.

Colleen is a past AHIMA Board member and current member of AHIMA's State Advocacy Leaders Committee; past-President, Director and Delegate of the Illinois Health Information Management Association (ILHIMA), ILHIMA Distinguished Member, an AHIMA fellow and NARA Certified in Federal Records Management. She is also the recipient of AHIMA's Triumph Award for Advocacy and Policy.



Julie Hable Operations Manager, Mayo Clinic

Julia Hable, an MBA and RHIA-certified Operations Manager at Mayo Clinic, leads the Record Content Management Section within Health Information Management Services (HIMS) Operations. In her role, she oversees a diverse team of 230 employees across multiple Mayo Clinic locations, including Arizona, Florida, Mayo Clinic Health System (MCHS), and Rochester, with two managers as her direct reports. Reporting to the Enterprise HIMS Operations Administrator, Julia is known for her strategic approach and instrumental role in successfully implementing OnBase and Epic workflows throughout the Mayo Clinic enterprise. She is also a proficient archive manager, having introduced efficient back-scanning workflows for paper medical records and devised a proposal for the consolidation of Mayo Clinic's medical records, all with a keen focus on improving operational efficiency and enhancing patient care within the healthcare industry.



Jamie McGlothin Health Care Analytics National Lead, RSM US LLP

Dr. Jamie McGlothlin leads RSM's health care analytics practice. Jamie focuses on using data to drive performance improvement for providers operationally, financially and clinically. Jamie has generated millions in ROI for health systems and published 13 peer-reviewed papers with health care clients. 1/25/24 • 1:00-2:00pm

Breakout 2.2 Effective Denials Prevention and Management

1/25/24 • 1:00-2:00pm

Breakout 2.3 Virtual Voices – Managing a Remote Team

1/25/24 • 1:00-2:00pm

Breakout 2.4 Improving Margin through Analytics and AI



Mike Blievernicht Senior Director of Client Services, Healthfuse

Mike Blievernicht is a seasoned professional in the healthcare industry, currently serving as the Senior Director Client Services at Healthfuse, where he has been instrumental for the past 2 years in driving revenue cycle vendor performance through innovative approaches. His extensive career includes various roles of increasing responsibility, including Senior Advisor at Healthfuse, Vice President of Research Operations at Healthcare Business Insights, and Executive Director of Membership Experience at Healthcare Business Insights, Part of Clarivate. Mike's expertise lies in delivering research insights, analysis, and benchmarks to support hospitals and health systems nationwide, with a focus on enhancing member satisfaction and engagement. His career journey also includes a significant role as Research Director of Revenue Cycle, where he ensured the accurate delivery of research and oversaw a team of analysts, achieving remarkable growth. With a solid educational foundation, including a BA in English from Wisconsin Lutheran College and studies in Secondary Education and Teaching at Carroll University, Mike brings a wealth of knowledge and experience to the healthcare landscape.

1/25/24 • 2:15-3:15pm

Breakout 3.1 How to Achieve Optimal ROI on your Vendor Relationships



Lori Zindl President, OS inc.

An entrepreneur and industry leader, Lori Zindl built OS inc., on the principles of valuing both clients and employees – equally. Under her direction, OS inc. has become one of the foremost authorities in revenue cycle management for hospitals, clinics and other healthcare providers. Lori has over 30 years of experience in the revenue cycle management field. She is a nationally recognized speaker, seminar leader, consultant and trainer. Lori has developed well-received training A/R collection and billing programs and has authored several articles for various industry trade journals. 1/25/24 • 2:15-3:15pm

Breakout 3.2 Time for What Matters: Optimizing Resources and Time in Your Revenue Cycle Management



Brian Garver

Senior Vice President, KeyBridge Medical Revenue Care

Brian Garver is a passionate business development leader in the Healthcare Revenue Cycle space with over 20 years of leadership experience. Brian is also nationally recognized as an expert facilitator and speaker focused on Patient Experience, Organizational Culture and Business Leadership. In his presentations, Brian delivers actionable content with an engaging, compelling message that will inspire new, thoughtful changes within your team.

His ability to touch every attendee with humor, emotion, empathy and care have made his presentations nationally recognized and highly sought after. His powerful speaking engagements have taken him across the country from New York to Los Angeles with many stops in between.

Brian resides in Lima, Ohio and is an active member of the American Association of Healthcare Administrative Management (AAHAM) and the Healthcare Financial Management Association (HFMA). He also hosts the live podcast series... "The Revenue Cycle Rundown". 1/25/24 • 2:15-3:15pm

Breakout 3.3 Transforming YOUR Team into a Performance Powerhouse



Eric Lopata Director, Forvis

Eric has served the healthcare and nonprofit industries for more than 14 years. He is a member of the Healthcare Practice, where he performs financial statement and employee benefit plan audits and provides consulting services. He assists clients with feasibility studies as well as financial forecasts prepared in accordance with expected bond offerings, loans from banks, and other governmental entities.

These forecasts have been prepared for both internal and external use. He is the engagement executive for several hospitals, long-term care facilities, and nonprofit organizations. He is responsible for managing several client engagements and supervises teams through the audit and forecasting process, including presenting recommendations for improving operations and communicating results to senior management and boards of directors.

Eric is a member of the American Institute of CPAs, Missouri Society of CPAs, and the Wisconsin chapter of Healthcare Financial Management Association. He is a graduate of Northwest Missouri State University, Maryville, with a B.S. degree in accounting and an M.B.A. degree.



Adam Walter Vice President, Lument

Adam Walter is an Associate Director at Lument working out of the Overland Park, KS office. He has closed and committed diverse transactions for senior living facilities and hospitals totaling more than \$700 million, including FHAinsured mortgages, bridge loans, taxable and tax-exempt bonds, and USDAinsured mortgages.

Adam joined the organization in 2015, bringing six years of experience in management and consulting roles. He holds securities licenses Series 79, 52 and 63.

Adam has an MBA in finance from the University of Iowa and a bachelor's in finance from The University of Iowa's Tipple College of Business.



Dr. Alonzo Kelly

A dynamic Executive Coach, Professor, 3x Best Selling Author, and Radio Host, Dr. Alonzo Kelly has gained international and global attention as a premier consultant and strategist. Alonzo is recognized as one the nation's leading experts on leadership development, strategic thinking, planning, and acting which results in individual and organizational goal achievement. He has appeared on America's Premier Experts which airs on major networks across the country including ABC, NBC, CBS, and FOX. Alonzo has served over 1,000 individuals through personal and professional development, delivered training to a plethora of Fortune 500 Companies, College and Universities, Foreign Countries (Netherlands, Belgium, Canada, Guam), nonprofit organizations, and is consistently retained to be the keynote speaker at large and small events across the country.

He holds a bachelor's in Accounting, three master's degrees (Public Administration, Human Resource & Labor Relations, Business Administration), an Honorary Doctorate Degree in Business & Entrepreneurship, and is nearing completion of a PhD in Multidisciplinary Human Services. He is also currently in the process of obtaining his Doctorate in Business Administration.

He currently serves as the National Board Representative for the Wisconsin State Board of Directors for the ACLU (American Civil Liberties Union), the Fire and Police Commission for the City of Howard, and Board of Directors for Family Services of Brown County. Find more at www.alonzokelly.com 1/25/24 • 2:15-3:15pm

Breakout 3.4 No More Pandemic Relief Funding – Now What?

1/25/24 • 2:15-3:15pm

Breakout 3.4 No More Pandemic Relief Funding – Now What?

1/25/24 • 3:30-4:30pm

Keynote Leading Multi-Generational Organizations



Eric Borgerding

Eric Borgerding is President and Chief Executive Officer of the Wisconsin Hospital Association. He has been with WHA since 2002 and previously held positions as Vice President of Government Relations, Senior Vice President and Executive Vice President. Prior to joining WHA, Borgerding served as Director of Legislative Relations for the Wisconsin Manufacturers and Commerce. He served as the Director of State Legislative Affairs for the University of Wisconsin-Madison from 1994 to 1997 and as the WHA Director of Legislative Relations from 1991 to 1994. During Borgerding's tenure, WHA has become one of the most influential and effective advocacy and lobbying organizations in Wisconsin, respected and recognized for its public policy leadership and building bipartisan consensus on a host of health care issues.



Mark Grapentine, JD

As Chief Policy and Advocacy Officer at the Wisconsin Medical Society, Mark is responsible for representing and protecting the interests of more than 10,000 Wisconsin Medical Society members at the state and federal level.

Before starting with the Society in 2003, Mark was chief of staff to former State Senator Peggy Rosenzweig (2001-02), and coordinated the Senator's work on the powerful Joint Committee on Finance. Mark was also a Policy Advisor to former Governor Tommy G. Thompson (1998-2001), concentrating on Corrections and Justice issues. Prior to his service in the executive branch, Mark was a legislative assistant to former State Assembly Representative Scott Walker (1997-98), who represented Wauwatosa in the State Assembly.

Mark serves Society members' interests by serving on a number of boards and committees involved in matters affecting health care. He is a board member of the Wisconsin Civil Justice Council, Inc., which focuses on monitoring and improving the state's civil liability climate. Mark is also one of four health care liaisons to the state's Worker's Compensation Advisory Council, which regularly updates the state's worker's compensation statutes and administrative code.

Mark is a 1997 graduate of the University of Wisconsin Law School. He graduated from the University of Wisconsin in 1990, majoring in journalism and political science. In between degrees Mark was a television sports anchor and reporter at WKOW-TV, the ABC affiliate in Madison. He is married (Wendy Warren) and has two children: a son, Jordan and a daughter, Lexey.



Jeremy Levin

Jeremy Levin is the Director of Advocacy at the Rural Wisconsin Health Cooperative (RWHC). Jeremy has been with RWHC since 2008, advocating at both the state and federal levels government in the area of health policy for their network of rural hospitals. Prior to his time at RWHC, Jeremy spent five years advocating for physicians at the Wisconsin Medical Society. He also worked in the Wisconsin State Legislature and served on the Dane County Board. Jeremy received his bachelor's degree from Denison University in Granville, OH and earned a Capstone Graduate Certificate from the La Follette School of Public Affairs at the University of Wisconsin-Madison. He received his Masters of Healthcare Administration at the University of Minnesota.



Sean Kirkby Wisconsin Health News (moderator)

Sean is the person that other healthcare business leaders seek out when they want a fresh perspective and a sound opinion about their practices. With over 20 years' in healthcare, he has a unique blend of experience in operations, consulting, product, business development, and strategic planning. He is currently leading our Velocity consulting team and helping our clients discover hidden cash, automate processes and optimize all aspects of their revenue cycle.

1/26/24 • 8:30-10:00am

Legislative Panel The Future of Healthcare in Wisconsin

1/26/24 • 8:30-10:00am

Legislative Panel The Future of Healthcare in Wisconsin

1/26/24 • 8:30-10:00am

Legislative Panel The Future of Healthcare in Wisconsin

1/26/24 • 8:30-10:00am

Legislative Panel The Future of Healthcare in Wisconsin



Harry Sydney former Green Bay Packer player

With a storied career spanning several seasons in the NFL, Harry's insights into the world of teamwork and the essential elements for creating a successful environment are nothing short of extraordinary. Harry's keynote, titled "The Importance of Teamwork and Creating the Right Environment for Success," draws on his remarkable journey from the gridiron to the boardroom, highlighting the pivotal role teamwork plays in achieving excellence. He shares his invaluable experiences, emphasizing the power of collaboration, trust, and leadership to drive individuals and organizations towards victory. Prepare to be inspired as Harry Sydney imparts a wealth of wisdom and lessons from his years in the NFL, leaving you with actionable takeaways that can be applied both on and off the field. 1/26/24 • 10:30-11:30am

Closing Keynote The Importance of Teamwork and Creating the Right Environment for Success