

CONFERENCE AGENDA

SUBJECT TO CHANGE

Monday, November 11

1:30 p.m.-2:45 p.m.

Welcome to HPS 2024!

Jason Considine, Chief Commerical Officer, Experian Health

Hot Topic #1: Security

Let's connect with Experian Health's lead security officer and chat about one of the most pressing topics of 2024.

Collin Smith, VP of Security and Risk, Experian Health

Hot Topic #2: Change Healthcare security breach

The cyberattack of February 2024 halted the healthcare industry. Hear from your provider peers on how they bounced back and what they learned from this incident.

Betsy Brentz, VP of Claims Operations, Experian Health; Brenda Kelley, AVP of Corporate Revenue Cycle, Bassett Healthcare; Denise (Dee) Montee, VP of Revenue Cycle, HonorHealth

Hot Topic #3: AI and Innovation

The topic of AI is headline news in every industry – including healthcare. Hear from Experian leaders on actual use cases and gain a first look at the potential solutions we are exploring to simplify healthcare.

Clarissa Riggins, Chief Product Officer, John Menard, VP of Analytics and Innovation, Ari Surmeier, Sr. Product Manager, and Ali Saffari, Sr. Director of Innovation, Experian Health

Tuesday, November 12

8:30 a.m.-10 a.m.

President's welcome.

Tom Cox, President, Experian Health

Keynote

When you're chasing failure, you're either going to win or learn. Gain a blueprint for success to see what the predictable failures might be, so you can circumvent those more easily, or deal with them more effectively when they arise.

Ryan Leak, speaker, coach, consultant and author of Chasing Failure

4:15 p.m.-5:30 p.m.

Client Panel

Hear your peers tackle questions on revenue cycle, technology/AI, regulation and more.

April York, VP, PFS and RCS Innovation, Novant Health; Kwynn Smith, VP, Payer Contracting, Mount Sinai Health System; Susanne Suldickas, AVP Revenue Cycle, Lakeland

Closing Remarks

Monday, November 11

8:30 a.m.-10 a.m.

BREAKFAST

Salon E-F

8:30 a.m.-1:30 p.m.

THE HUB OPEN

Third floor, pre-function area

8:30 a.m.-6 p.m.

REGISTRATION

Third floor, pre-function area

10 a.m.-11 a.m.

It takes a village: exploring the Customer Community universe

Get guidance on how to navigate the Customer Community, including the Communication Center. You'll learn about Knowledge-Centered Services, training options for your teams and be able to ask anything in Q&A. Bring it on!

Jae-Jae Lombardo, Content and Salesforce Community Manager, Experian Health

CONFERENCE ROOM 1-2

Track: Operational Excellence

10 a.m.-11 a.m.

Unlocking Power Reporting: lessons from hesitation to action

After years of sitting on the sidelines, we're finally putting Power Reporting to work across our hospital—and the difference is clear. Don't make the mistake we did—start using it now to see the benefits for yourself.

Joshua Gayman, Manager, Mary Fair, Analyst, and Kristina Mauldin, Patient Accounts Training Coordinator, University of Tennessee

SALON D

Track: Operational Excellence

10 a.m.-11 a.m.

Data + Analytics: an RCM leader's 1-2 Punch in battling collections

The RCM team at Cornell understands the impact outstanding balances have on their patients – and their system. Learn how they use segmentation to develop a cohesive collection strategy, along with how the system prioritizes account balances based on patient needs.

Carey Lawrence, Revenue Cycle Administrator Customer Services & Self-Pay Collections, Weill Medical College of Cornell University

CONFERENCE ROOM 3-4

Track: Operational Excellence

11:30 a.m.-12:30 p.m.

Three key focus areas to boost your self-pay collections

Learn how the teams at Cone Health and Novant Health have improved their self-pay collections by embracing three key elements in their revenue cycle strategy – automation and segmentation, enhancements as a result of automation, and selecting the right partner to bring it all together.

Wendi Cardwell, Sr. Director Patient Finance, Novant Health and Wanda Taylor, Director Patient Accounting, Cone Health

CONFERENCE ROOM 3-4

Track: Patient Financial Services: Collections

Monday, November 11
continued

11:30 a.m.- 12:30 p.m.

How three patient-centric systems are lowering denial rates through analytics and education

What do Northern Light Health, Northwell Health and TriState Health all have in common? Yes; all three are incredibly dedicated to improving the health and lives of their patients, but more importantly, they've all successfully used Power Reporting to reduce denial rates. Hear their stories and shared successes.

Luke Leavitt, Director Patient Access Operations, Northern Light; Michael Gottesman, Assistant Vice President of Revenue Cycle Operations, Northwell Health; and Robyn Koehler, Experian Systems Analyst, TriState Health

CONFERENCE ROOM 1-2

Track: Operational Excellence

11:30 a.m.-12:30 p.m.

Meet the teacher: new digital self-service eLearning tutor

In this session, meet your own digital tutor – Experian Health's on-demand education platform. Designed to support eCare NEXT and Contract Manager clients with new-hire and refresher training, our library of targeted eLearning and video tutorials is self-paced, accessible 24/7 and doesn't give bad grades.

Michele Montes, Sr. Director of Training, Experian Health

SALON C

Track: Operational Excellence

11:30 a.m.-12:30 p.m.

Power Reporting 101: how to build, maintain and leverage Claim Scrubber Power Reports for clean claims

Analyze edits to improve clean claim rate and reduce denials. Learn how to use the Claim Scrubber Power Reporting dashboard to drill down and find the root causes of denials.

Melissa Thomas, Manager of Revenue Cycle Applications, Denise Price, Business System Analyst, Rady's Children Hospital

SALON D

Track: Patient Financial Services: Operational Excellence

12:30 p.m.-1:30 p.m.

LUNCH

Salon E-F

1:30 p.m.-2:45 p.m.

GENERAL SESSION

Salon I-M

2:45 p.m.-5 p.m.

THE HUB OPEN

Third floor, pre-function area

Monday, November 11 continued

2:45 p.m.-3:45 p.m.

The money report: data leads to revenue

Contract Manager is a powerful solution. Contract Manager Advanced Reports takes it to the next level, improving workflows based on the data and then optimizing revenue based on those workflows. Boston Children's Hospital has it figured out, so come learn from someone who's done it.

Ashia Richardson-Epps and Katherine Healy, Reimbursement Analysts, Boston Children's Hospital

CONFERENCE ROOM 3-4

Track: Patient Financial Services: Contract Management

2:45 p.m.-3:45 p.m.

Burn the Post-it® notes. How guided scheduling drives patient, staff and provider satisfaction

Often overlooked but always impactful, a patient scheduling process can make or break a system. Summit Orthopedics needed a sophisticated but simple-to-use scheduling system to scale with its growing business, as well as enhance patient convenience and improve satisfaction. It turned to Patient Schedule and ditched the colored sticky notes.

Cassandra Englund-Thompson, Director of Experience Strategy, Summit Orthopedics

CONFERENCE ROOM 1-2

Track: Patient Access

2:45 p.m.-3:45 p.m.

New leader, new vision

Learn how a new leader accelerates change and optimizes tools to transform the revenue cycle engine when entering an organization.

Courtney McNamee, Payer Revenue Management and Patient Services Director, Altru Health System

SALON D

Track: Patient Financial Services: Claims

2:45 p.m.-3:45 p.m.

Add speed, accuracy and efficiency to your financial assistance process

eCare NEXT and Experian data are a powerful combination when determining financial assistance need and eligibility. Hear how Baptist Health prioritizes and presumptively approves patients for financial assistance.

Amy Purvis, Executive Director Patient Access and Lindsay Kelly, Access Support Manager, Baptist Pensacola

SALON C

Track: Patient Access

2:45 p.m.-3:45 p.m.

Winning big with a flawless patient estimator rollout

Integrating new solutions can take time, resources and patience. But it doesn't have to be intrusive. Find out how Self Regional Healthcare onboarded Patient Estimates for big wins in point-of-services collections.

Savannah Green, Director, Access Manager, Self Regional Healthcare

SALON B

Track: Patient Access

Monday, November 11 continued

4:15 p.m.-5:15 p.m.

Learn a new magic trick: make more authorizations appear

Join Amy Grissett, Senior Director of Physician Practices Revenue Cycle at University of South Alabama, as she reveals a top hat full of behind-the-curtain secrets for doing more with less using Prior Authorization. Learn how to add more services, enhance workflows, track productivity and distribute work evenly. Voila!

Amy Grissett, Senior Director of Physician Practices Revenue Cycle, USA Health University Hospital

SALON D

Track: Patient Access

4:15 p.m.-5:15 p.m.

You want loyal patients? Give them estimates.

One of the main reasons for patient dissatisfaction is always "did not get cost estimate." It's also a consistent reason patients switch providers. The good news? It's a fixable problem. Join us to learn how Amberwell Health turned it around in one year with Experian Health's Patient Estimates.

Amber Wagner, Director of Revenue Cycle, Amberwell Health

CONFERENCE ROOM 3-4

Track: Patient Access

4:15 p.m.-5:15 p.m.

An Epic migration and mitigating an epic level of effort

West Tennessee Health Care's migration from Millennium to Epic offers lessons learned, what to prepare for and how Experian Health is a valuable partner through the process.

Anthony Myers, Director, Patient Access, West Tennessee Healthcare

CONFERENCE ROOM 1-2

Track: Operational Excellence

Monday, November 11 continued

5:15 p.m.-6:30 p.m.

FREE TIME

6:30 p.m.-9:30 p.m.

WELCOME RECEPTION

Pearl Rooms 1-3 at the conference hotel, San Antonio Marriott Riverwalk

Tuesday, November 12

6 a.m.-7:30 a.m.

5K RUN AND WALK

Main Lobby

7 a.m.-5 p.m.

REGISTRATION OPEN

Third floor, pre-function area

7 a.m.-8:30 a.m.

BREAKFAST

Salon E-F

8:30 a.m.-10 a.m.

GENERAL SESSION

Salon I-M

7 a.m.-8:30 a.m.

THE HUB OPEN

Third floor, pre-function area

11:15 a.m.-12:15 p.m.

LUNCH

Salon I-M

Tuesday, November 12
continued

10:15 a.m.-11:15 a.m.

Patient Payments: digital convenience and better collections

Technology is moving the patient payment experience toward something more like other transactions in a patient's life, offering greater transparency and personalization. Learn how providers can completely change healthcare's legacy payment experience into something that actually makes patients happier.

Berenice Navarrette, Director, Product Management, Experian Health

CONFERENCE ROOM 3-4

Track: Patient Financial services

10:15 a.m.-11:15 a.m.

One Epic, three Institutions: how NYP makes Contract Manager work

Join us for a behind-the-scenes look at how the tripartite at New York Presbyterian Health System juggle their own goals, customize Contract Manager workflows, and embrace different levels of adoption — all without missing a beat.

Javier Espinal, Revenue Cycle Manager, Columbia Physicians; Jarrett Cox, Administrator, Revenue Cycle Analytics & MC Reimbursement, Weill Medical College of Cornell University; and Monique Magaletti, Supervisor of Reimbursements, New York Presbyterian Physician Services Organization

SALON C

Track: Patient Financial Services: Contract Management

10:15 a.m.-11:15 a.m.

The X Factor: using Experian data to drive financial assistance automation

There is a lot of new state regulations requiring health systems to screen for charity. Experian data can help you prioritize and presumptively approve charity, allowing you to not only stay compliant with state regulations but to automate processes and potentially reduce staff as well.

Emily Brown, Operational Excellence Director, Providence Medical Center and Brandon Burnett, VP, Revenue Cycle, Community Health System

SALON B

Track: Patient Access

10:15 a.m.-11:15 a.m.

Changing the game: transforming payer relations with actionable insights

Unlock the power of data to level the playing field in payer-provider negotiations. Explore innovative tools and strategies that give you the edge with actionable insights to drive stronger financial outcomes in every contract discussion.

Kwynn Smith, VP of Payer Contracting, Mount Sinai; Mindy Mcnamara, Senior Product Manager, Innovation, Experian Health

CONFERENCE ROOM 1-2

Track: Operational Excellence

Tuesday, November 12 continued

10:15 a.m.-11:15 a.m.

How to approach automation inoperability challenges

Learn about the shared CMS inoperability problems – and individual solutions – that faced leading health systems. In this session, you'll understand its impact on their Patient Access teams, and how each has coped. Hint: Authorizations sits at the center.

Rhiannon Cooper, Access Optimization, Baptist Health Care; Tammy Anderson, Director Revenue Cycle, and Tony Rumberg, Assistant Director Revenue Cycle, Charleston Area Medical Center

SALON D

Track: Patient Access

12:30 p.m.-1:30 p.m.

Unlocking hidden value: Mount Sinai's secret sauce to superior payer contract negotiations

Learn how Mt. Sinai benchmarks payers, determines where aggressive negotiations are most needed, and mitigates potential financial pitfalls. This session provides the insights needed to understand the true impact of contract terms and how to navigate payer relationships with confidence.

Alex Monard, AVP Contract Compliance and Enforcement; Mt Sinai Hospital

SALON B

Track: Patient Financial Services: Contract Management

12:30 p.m.-1:30 p.m.

Supercharge your plan selection and eligibility accuracy

Plan selection and eligibility accuracy don't have to be trench work. Leveraging the right combination of data and tools can put you on the fast track to Patient Access success.

Sandra Hern, Senior Director of Patient Access, McDonough Health

CONFERENCE ROOM 3-4

Track: Patient Access

12:30 p.m.-1:30 p.m.

Stop guessing: know exactly how your collections agency is performing

Optimize collections agency results in self-pay management by developing a scorecard and automating performance monitoring. Insight is the first step to improvement.

Cody Robinson, Supervisor Self-Pay, Washington University Physicians and Melissa Perna, Associate Director - Corporate Business Services, Yale New Haven Health

SALON C

Track: Patient Financial Services: Collections

Tuesday, November 12 continued

12:30 p.m.-1:30 p.m.

Patient Access at a new velocity: how the Patient Access Curator is redefining the category

With the introduction of Experian Health's hottest new product, the Patient Access Curator, early adopters are experiencing fewer claims denials, accelerating cash collections and defining the new age of denial prevention. Explore early success stories with our pioneering panel.

Peggy Madden, Senior Director Revenue Cycle Systems and Analytics, Exact Sciences; Randall Gabel, Senior Director, Revenue Cycle, Ohio Health; Mounika Kata, Senior Director, Enterprise Patient Financial Services, Trinity Health

SALON I-M

Track: Patient Access

12:30 p.m.-1:30 p.m.

Success is a journey, not a destination

Discover how a collaborative revenue cycle team's journey with Registration QA helped an Indiana-based system achieve benchmark-breaking registration accuracy while also driving down denial risk.

Angie Hobbs, Director of Patient Access and Support Operations and Erin Stergios, Access Services Director, Beacon Health System (Hospitals)

SALON D

Track: Patient Access

1:45 p.m.-2:45 p.m.

Women's networking: building and maintaining your career

Network with fellow women leaders as we discuss the challenges and opportunities of juggling careers, families and full lives – all while committed to simplifying healthcare for our communities.

Mindy Fortson, COO and Kerry Rivera, Vice President, Marketing, Experian Health

CONFERENCE 1-2

Track: Operational Excellence

1:45 p.m.-2:45 p.m.

Tap in: health data portability and patient experience reimagined

Portable, accurate patient data across Experian's network? Yes. See how the Tap passport powers a radically simpler experience and offloads work queues, so your bottom line is no longer hindered by registration-based denials.

Christine Migliaro, VP of Revenue Cycle Operations, Northwell Health; Ari Surmeier, Senior Product Manager, Innovation, Experian Health

SALON B

Track: Operational Excellence

Tuesday, November 12
cont.

1:45 p.m.-2:45 p.m.

Using payer status codes to reduce A/R days

Tired of throwing FTEs at the denial problem? Payer status codes changing daily? Learn how automation and obtaining proprietary status codes can beat payers at their own game and take pressure off the team, giving them time to work on other important things.

Jake Reid, Senior Director - Enterprise Billing Office, St. Luke's Health System

SALON C

Track: Patient Financial Services: Claims

1:45 p.m.-2:45 p.m.

Maximize patient retention by improving access to patient scheduling

What's the number one complaint of patients, according to Experian Health's annual State of Patient Access survey? Not being able to see a practitioner quickly. A big contributor to that frustration is scheduling. IU Health embraced online scheduling and it's been a game changer, making patients happier and more loyal.

Justin Baur, Manager Patient Access and Referral Management; Josh Brown, Program Manager, Provider Match; Erin Jones, Manager, System Patient Access and Alex Nussman, System Patient Access Manager, IU Health

SALON D

Track: Patient Financial Services: Contract Management

1:45 p.m.-2:45 p.m.

The many benefits of automated NOA

Learn how Virtua Health automated NOA, added payers and increased cash flow -- while reducing denials and eliminating manual work. Virtua was even able to provide its team a work-from-home option.

Ginny Norton, Lead IT Applications Analyst, Virtua Health

CONFERENCE ROOM 3-4

Track: Patient Access

3 p.m.-4 p.m.

Registration QA: a key factor in preventing denials

Is a 100 percent RQA score even attainable? It is if you are LMH Health. Discover how collaboration and commitment consistently keep them at 99 percent and up.

Michele Vanomi, Sr. Director, Revenue Cycle, LMH Health

SALON D

Track: Patient Access

Tuesday, November 12
cont.

3 p.m.-4 p.m.

Denial prevention in action: how UC San Diego Health leverages AI to prevent denials

Investing in a strong denial strategy has helped UC San Diego Health buck current claim denial trends. That's where AI Advantage™ comes in. Hear from Chief Revenue Cycle Officer Miguel "Mike" Vigo IV on how his team has embraced the solution, how it has impacted cashflow, and what's next for this innovative health system.

Miguel Vigo IV, MBA, Chief Revenue Cycle Officer, and Keri Whitehead, System Director of Patient Financial Services, UC San Diego Health

CONFERENCE ROOM 1-2

Track: Patient Financial Services: Contract Management

3 p.m.-4 p.m.

Faster claims and better information: The digital registration advantage

Providence Medical Center of Nebraska's approach to medicine puts patients at the center of every visit. That goes for pre-visits, too. Hear how PMC's patient-first approach creates less time in waiting rooms and more time with physicians.

Brittany Peters, CRCR, Director, Revenue Cycle, Providence Medical Center

CONFERENCE ROOM 3-4

Track: Patient Access

3 p.m.-4 p.m.

Power Reporting: better business decisions based on better information

How can you consistently make the right decisions to improve performance and productivity? It's in the data. Learn how Power Reporting takes the mystery out of consistently improving business processes.

Michelle Borkovic, IT Project Manager, Jefferson Health

SALON C

Track: Operational Excellence

4:15 p.m.-5:15 p.m.

GENERAL SESSION

Salon I-M

5:15 p.m.-6:15 p.m.

FREE TIME

6:15 p.m.-7 p.m.

DEPARTURES FOR OFFSITE CLOSING PARTY

Main Lobby

7 p.m.-10 p.m.

CLOSING PARTY

The Historic Pearl