2002



HBMA ANNUAL REPORT





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2009

Healthcare Billing and Management Association 1540 S. Coast Highway, Suite 203 • Laguna Beach, California 92651 Phone: 877/640-4262 • Fax: 949/376-3456 • www.hbma.org Brad J. Lund, Executive Director

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ABOUT HBMA



he medical billing industry is unusual in many ways. Most billing entrepreneurs began their companies without really expecting to own and operate such dynamic and technology-driven businesses. There are a small number of large companies—some with thousands of employees and hundreds of millions of dollars in revenue—and a large number of small companies—most with less than fifty employees and less than four million dollars in revenue. While the majority of billing companies eventually specialize in a few medical specialties, some serve a wide array of specialties. Large or small, specialized or diverse, billing companies' clientele are about 60% hospital-based physicians (radiology, pathology, emergency medicine, anesthesiology, hospitalists), about 30% office-based physicians (patients are seen by appointment), and about 10% non-physician providers (ambulance companies, ambulatory surgery centers, imaging centers, rural health centers, durable medical equipment (DME) companies, pharmacies, dentists, and others).

Most HBMA members utilize one of hundreds of commercial billing software products, although less than 5% have a so-called proprietary (in-house) billing program. It is estimated that there are around 1,500 to 2,000 billing companies (a non-residential address and one or more W-2 employees), but the number changes constantly. During 2006 and 2007, a cycle of merger and acquisition activity began—for the third time since the late 1980s—and new "start up" companies began operations.

If an "average company" can be described, it has 40-50 employees, uses commercial software, has been in operation over five years, has company revenues of \$2.5 to \$3.5 million (although the largest has over \$300 million in revenue), and processes about 350,000 to 400,000 claims per year (the largest companies submit millions of claims – per month). About 30% of billing companies have clients in more than one state.

Since it began in 1993, HBMA has been a non-profit, member-led trade association dedicated to member education, advocacy on behalf of our industry and our clients, collegiality, and sharing of knowledge and experience. We represent nearly 700 member companies employing over 30,000 nationwide and internationally. HBMA members are constantly seeking ways to improve their efficiency and productivity, their technical and operating skills, their ability to serve and anticipate their clients' needs, and of course, grow their business and make a profit.

Despite its modest membership size compared to other healthcare trade associations, HBMA has established itself as a recognized and authoritative resource for the government agencies that regulate or otherwise affect the U.S. healthcare system. More and more often, CMS and other agencies regularly seek HBMA's input and commentary on proposed regulatory and operational changes and proposed legislation. The commitment of HBMA membership to regulatory compliance is now in its 13th year, and includes the association's leadership in co-developing the Model Compliance Guidance for Third Party Billing Companies in 1997 and 1998.

In 2008 HBMA celebrated its 15th anniversary, and continues to dedicate membership dues and other income to improving the quality and diversity of educational offerings, ongoing and expanded advocacy at the federal level, and new and innovative services for its members. HBMA continues to expand its influence through meaningful relationships with other related not-for-profit associations in an effort to promote administrative simplification and efficient claim management.







LETTER FROM THE

president

hat an interesting year 2008 was, and what a remarkable year 2009 has turned out to be. A global financial collapse, record unemployment, auto company bankruptcies, a significant flu epidemic, and prospective healthcare reform. What a backdrop as we move forward.

Through all of this, your trade association is in the enviable position of being financially solid, largely due to the foresight, discipline, and wisdom of prior leadership. HBMA funds were safely invested in CD's and money market funds and consequently, your hard-earned dollars were preserved and are now being put to work for you.

LEADERSHIP FOUNDATION FOR THE FUTURE. This year, for the first time, your entire Executive Committee attended the American Society of Association Executives (ASAE) training on current issues and trends in association management. Also attending this training were legendary associations such as the American Dental Association (ADA) and others. Suffice it to say that this training was for the "big boys," and your executive team was second to none in the room, bringing home many cutting-edge thoughts, ideas, tools, and processes to enhance member benefit. While this might seem like a no brainer, please remember that the entire HBMA board is comprised of volunteers. This path and level of leadership has and will continue to require significant time, commitment, and accountability from HBMA leaders and staff.

INCREASING VOICE. HBMA's Government Relations collaborative advocacy efforts have increased its credibility with government payors and other associations as an objective source of industry data and expertise. The creation of a new Commercial Payor Relations Committee (CPR and no pun intended!) will allow HBMA to advocate, inform, and advise the commercial payor community of industry issues and potential domino effects resulting from new or changed policy. HBMA's Survey Committee collects and collates credible data to express our experiences to outside entities. With a focus on administrative simplification, HBMA, through these committees, is in a collegial position with government as well as the commercial payor industry and is perfectly poised to add value to current healthcare debate.

OFFERING GREATER MEMBER BENEFIT. As always, HBMA's Education Committee is producing stellar educational offerings at our national meetings



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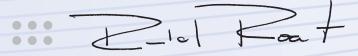
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and the 12+ Distance Learning programs. The recently formed Technology Committee is reviewing and evaluating the current technology environment, i.e., EHR, and is bringing new tools to the membership. Your Certification Committee is evaluating program revisions and new certification opportunities that allow HBMA members to demonstrate expertise in this changing billing environment. Ethics and Compliance is monitoring a plethora of new regulations and vetting them for member education and a new multi-year ICD-10 task force has been created to keep HBMA members abreast of these new coding protocols. HBMA's Vendor Affiliate Committee has wonderfully made our industry's leading vendors an integral part of HBMA's efforts and a resource to its members. And the Membership and Regional Development Committee continues to attract new members which bring new perspectives and financial resources to HBMA's efforts.

INCREASING VISIBILITY. Your Public Relations and Publications Committees have greatly expanded their roles, targeting broader distribution of HBMA communications and increased professionalism of work product. HBMA has retained a professional public relations firm to assist us in getting our message and achievements out to the industry. And over the next year, as HBMA's story reaches deeper into our industry, the physician community, and the payor communities, we believe you will have more tools and referenceable material to add value to your client efforts.

All in all, this annual report represents great achievement and potential for HBMA. I am personally honored and proud for my opportunity to be a steward of this association. Each HBMA member should take a measure of pride, too. After all, this association is a result of your support, input, and participation.



Randal Roat, CHBME

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DEFINING VALUE & RELEVANCE

HBMA'S STRATEGIC PLAN

HBMA continues to evolve by defining the value and relevance that our association provides to our members and to the healthcare community. A focused group of leaders, all highly dedicated professionals, provide resources in the form of time, energy, and money to ensure HBMA's success on many fronts. Ultimately, the contributions of these leaders allow HBMA to give its members the finest tools and support in running their businesses. Because of its leadership and member support, HBMA has become the authoritative voice in the industry.

GOALS

HBMA has identified seven core goals for 2009 to move the organization forward:

- 1) Grow membership numbers and dues revenues annually
- 2) Raise member participation and satisfaction in educational programs
- 3) Become the leading source of information and data for the medical billing and related management-services industry
- 4) Increase HBMA's influence, visibility, and credibility in the healthcare industry through effective branding
- 5) Enhance proactive national regulatory efforts to benefit the industry and clients
- 6) Expand core competencies and service offerings for increased member value

7) Further develop the professionalism, accountability, and fiscal responsibility of volunteer and staff leaders

Conference attendees enjoy visiting booths in the Exhibit Hall

MEMBERSHIP

For the past several years, HBMA has considered how to become more inclusive of individuals and organizations who do not meet the definition of a "third party medical billing company." The desire to share our resources and services with all those responsible for the submission of physician claims was brought to the general membership, and a bylaw change was passed to allow "first party medical billing organizations" to join HBMA.

In 2009 a new membership drive has been designed to attract practice managers, hospital billing staff, and other key billing professional into our organization. HBMA is also reaching out to billing companies that are currently not members. It is of critical importance that HBMA continues to build a broad representation, allowing the association to appropriately represent all aspects of the industry.

EDUCATION

HBMA continues to expand its educational outreach programs. Providing cost-effective Distance Learning programs assures the delivery of timely and quality information to the greatest possible number of members. Through the latest technology and the efforts of the Education Committee, HBMA produces monthly program offerings to members at a very affordable cost. These offerings have been widely accepted and are in high demand by members.

The HBMA Education Committee continues to work on diversified offerings for all members, from the highest-level executives to front-line staff. One of the goals is to create the "HBMA University," which will become the premier source of information for the medical billing community. It is our objective to brand HBMA University and develop it into an HBMA educational icon.

The building and expanding of an HBMA library on the HBMA website has added to the educa-





tional resources available to members. A few of the growing list of valuable membership benefits include enhanced website resources, Washington Report newsletters, member email communications on pertinent regulatory issues, up-to-the minute announcements from CMS, and timely information in the *Weekly Digest*. The bi-monthly journal, *Billing*, provides in-depth information articles for members on various aspects of running a billing company.

INFORMATION RESOURCE

HBMA is committed to positioning itself as the gold standard for information concerning the medical billing industry. One of the key means of gathering industry benchmarks and related data is through membership surveys. In 2009 a variety of very important surveys will be conducted which will be designed to yield information on HBMA membership, the industry, and government/commercial payor processes. Initiatives to provide members with the most current technology advantages are outlined as a priority.

Information will be disseminated to the membership through educational offerings and publications. HBMA has published a white paper on electronic medical records and through its Technology, EHR Task Force, and ICD-10 committees, a multitude of tools and resources are being developed as our industry moves into the electronic age.

PUBLIC RELATIONS

Earlier this year HBMA engaged the service of a public relations firm to assist in the continuing efforts to solidify the HBMA "brand," which is intended to increase our influence, visibility, and credibility in our industry. The development of a media kit for distribution to new and existing members has been completed. The public relations

effort includes press releases about HBMA activities and involvement in the industry. HBMA proudly displays a multi-media web promotion that helps our members educate their clients. The Public Relations Committee has launched a new tool that allows members to create their own newsletter using articles and information provided by HBMA.

GOVERNMENT RELATIONS

HBMA continues to strengthen its relationship with decision makers in charge of regulatory policy and healthcare. Our interests are represented by HBMA's government affairs office, located in Washington D.C., which, along with the Government Relations Committee, maintains contact with lawmakers and regulatory agencies to sustain an ongoing focus on legislation and rulings important to our members and the industry. The committee is also responsible for forging communications and solidifying our relationship as a resource for the Centers for Medicare and Medicaid Services (CMS). An annual meeting with CMS brings together members of the Government Relations Committee and key members of CMS, another example of the implementation of our strategic plan to be proactive on national regulatory and legislative issues.

ORGANIZATIONAL EFFECTIVENESS

Over the past year we again were able to reach many of our stated strategic planning milestones through the continuing allocation of resources to our management company, the International Society and Association Management (ISAM). Through an ongoing review of staff work, product, and key leadership participating in an annual ASAE-sponsored leadership conference, HBMA has been able to put policies and procedures in place to create cohesive work initiatives for the Board of Directors, our standing committees, and our supporting administrative staff. During 2009, the Board has continued to work on reviewing the current policies and procedures that are in place, fine-tuning each to ensure it meets the current needs of our organization.



HBMA VISION

HBMA shall be the leading authority on healthcare billing and management services for association members and their employees, government decision makers, and other industry stakeholders.

HBMA CORE VALUES

HBMA values the highest level of professionalism, integrity, and compliant business practices in every aspect of our industry. We expect transparency and accountability from our leaders while ensuring the continued growth of the association by providing valuable benefits and resources to our members and other industry stakeholders.

HBMA MISSION STATEMENT

HBMA is committed to advancing the healthcare billing and management industry through advocacy and by providing education, information, and other valuable resources to its members while promoting high ethical and professional standards.

HBMA CODE OF ETHICS

HBMA Members Pledge to:

- · Exercise sensitive professional and moral judgment in all business activities
- Act in a way that will honor the public interest and demonstrate a commitment to professionalism and competence
- · Perform all business activities with the highest sense of integrity
- · Maintain objectivity and avoid any conflict of interest
- Strive to improve the quality and competence of services performed through continuing education
- · Exercise care and diligence in providing services
- · Maintain confidentiality of patient and client information
- · Strive to comply with all relevant federal, state, and local laws and regulations
- Refrain from making misleading or false statements about professional qualifications, experience, performance, or results that can be achieved



WHO WE ARE

MEMBERSHIP DEMOGRAPHICS SNAPSHOT

HRMA MEMBERSHIP BY CATEGORY.

Affiliate Members				
Principal Members693				
Satellite Members 9				
Vendor Affiliates				
Total Membership 813				
PRINCIPAL MEMBERS BY COMPANY SIZE:				
# of Employees # of Companies % Total				
1 to 15				
51 + 111 18.1%				
PRINCIPAL MEMBERS BY REGION:				
Great Lakes153Midwest83Northeast128Pacific142Southeast104Southwest83Total693				
TOP TEN SPECIALTIES MEMBERS BILL FOR:				
Specialty # of Members				
Internal Medicine241				
Radiology210				
Family Medicine				
General Surgery188				
Anesthesiology172				
OB-GYN170				
Emergency Medicine 120				
Pediatrics115				
Pathology111				
Orthopedic Surgery101				
Total Number of Employees				
of Member Companies 29,840				



MEMBER RESOURCES

HBMA EDUCATIONAL PROGRAMS

- Spring Educational Conference
- Fall Annual Conference
- Two to three Owners & Managers Conferences for HBMA members only, designed for owners and senior management
- Annual Compliance Courses for Third Party Medical Billing Companies
- Monthly Distance Learning programs on specific subject matter important to our industry
- · Specialty workshops to address our rapidly changing industry

HBMA MARKETING EFFORTS FOR MEMBERS

HBMA offers members a variety of tools to promote their companies, including:

- Public relations firm Dodge Communications
- A website search engine of member companies that can be searched by location and/or specialty. HBMA markets this service to the medical community
- Exhibition at a variety of annual conferences of medical and medical management associations, promoting HBMA and the website search engine
- Speakers made available for national associations of medical and medical management professionals
- Strong working relationships with other industry associations, including:
 - AAFP (American Academy of Family Practice)
 - AAHAM (American Association of Healthcare Administrative Management)
 - ACA (American Collectors Association)
 - ACMCS (American College of Medical Coding Specialists)
 - ACR (American College of Radiology)
 - AHIMA (American Health Information Management Association)
 - AHIP (America's Healthcare Insurance Plans)
 - AHRA (American Healthcare Radiology Administrators)
 - AMA (American Medical Association)
 - APF (American Pathology Foundation)
 - BCBS (Blue Cross/Blue Shield) Association
 - Cooperative Exchange
 - HASC (Healthcare Administration Simplification Coalition)
 - HCCA (Health Care Compliance Association)
 - HFMA (Healthcare Financial Management Association)
 - MGMA (Medical Group Management Association)
 - RBMA (Radiology Business Management Association)
- HBMA Online Resources at www.hbma.org:
 - State-specific and national billing resources and information

MEMBER RESOURCES

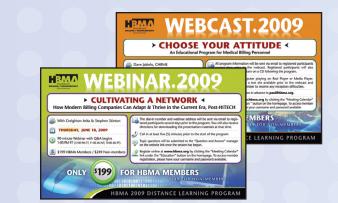
HBMA PUBLICATIONS

- The HBMA official journal, Billing, published bi-monthly on the HBMA website in the "Members Only" section, with back issues archived
- The HBMA Federal Legislative Update published monthly on the HBMA website in the "Members Only" section, with back issues archived
- The Washington Report, a monthly report on federal laws and legislation from our legislative consultant

HBMA ONLINE RESOURCES AT www.hbma.org

- · Archive of all HBMA publications
- HBMA Message Board covering:
 - Coding
 - Compliance
 - ICD-10
 - · State specific billing resources and information
 - General Business Practices
- Online Membership Directory
- HBMA Document Library that enables members to upload forms and documents for others to view and download
- Email notification of legislation and government regulations by state
- · Online store





HBMA's Distance Learning programs bring education to the members with webinars and webcasts.

HBMA PARTNERSHIPS

- Over 60 companies have joined HBMA as vendor affiliates and are committed to providing the finest products and services to our membership
- Quality Errors & Omissions Insurance program designed for the needs of third party medical billing companies
- Access to coding and other related publications at a 20-30% discount

CERTIFICATION PROGRAMS

HBMA also offers two certification programs that distinguish members as having proven knowledge of the industry and competency in the field:

- Certified Healthcare Billing and Management Executive (CHBME) for owners and senior managers
- Certified Medical Billing Associate (CMBA) for department heads and other key middle management





The HBMA website offers easy acess to member resources.

HBMA LEADERSHIP

PAST PRESIDENTS



1993-1995
James Robertson
Cambridge Integrated Services Group, Inc.



2000 - 2002Victor S. Glorioso
Professional Management Inc.



1995-1997 Douglas C. Jones Portland Billing Service



2002-2003 David C. Purvis, CHBME HealthOne



1997 - 1998 David F. Jakielo, CHBME Seminars & Consulting



2003 - 2004Robert B. Burleigh, CHBME
Brandywine Healthcare Services



1998-1999Charles M. Barker, CHBME
Med Group Billings & Collections



2004 - 2005 Timothy M. Maher Medical Data Systems, Inc.



1999-2000 Jean M. Campbell Next Gen



2005 - 2006Bing Herald, CHBME
Medical Business Service, Inc.



2006 - 2007Sherri L. Dumford, CHBME
Three Bridges Consulting, LLC



2007 - 2008Kenneth Goodin, CHBME
Emergency Physicians Billing Services

*** HBMA LEADERSHIP

EXECUTIVE COMMITTEE 2009

The HBMA Executive Committee is responsible for overseeing the day-to-day activities of the association. It meets, as needed, to take care of any business matters between scheduled Board meetings. Members are the President, President-Elect, Secretary, Treasurer, and Past President.



PRESIDENT Randal Roat, CHBME CBIZ MMP



TREASURERJackie Willett, CHBME TERM Billing, Inc.



VICE PRESIDENT AND PRESIDENT ELECT Scott H. Everson, CHBME ArborMed Corporation



PAST PRESIDENT
Kenneth Goodin, CHBME
Emergency Physicians Billing Services



SECRETARY
Patrick Lukacs, CHBME
Medinomics, Inc

BOARD OF DIRECTORS 2009

The HBMA Board of Directors is elected by the membership of HBMA and is the governing body of the association. The Board is responsible for all the activities of HBMA and meets annually at the HBMA National Meetings and monthly via conference call.



DIRECTORBill Carns, CHBME
PracticeMax



DIRECTORJudson S. Neal, CHBME
Physicians Business Network, Inc.



DIRECTORShawn Keough-Hartz, CHBME
Provider Resources, Inc.



DIRECTOR
Barry S. Reiter, CHBME
Faculty Practice Services, Inc.



DIRECTOR
Andrew P. Kokosa, CHBME
Medi-Data Services, Ltd.



DIRECTORDon Rodden, CHBME
HealthPro Medical Billing, Inc.



DIRECTOR
Holly J. Louie, CHBME
Practice Management, Inc.



DIRECTORJoe Schendel, CHBME
Provider Support Services

*** HBMA LEADERSHIP



STANDING COMMITTEES

EDUCATION COMMITTEE

The Education Committee provides appropriate educational programs for the membership of HBMA and the third party medical billing community. This committee is charged with the development of educational program curriculum, engaging knowledgeable faculty, and finding appropriate venues for all HBMA educational programs.

Goals for 2009:

- Expand offerings to diversified, broadened audiences
- Seek diverse topics and speakers and explore new delivery modes, such as pre-recorded formats, pod casts and CBT (Computer Based Training)
- Develop the HBMA University concept and make recommendations to the Board
- Document the effectiveness of programs via evaluations, surveys, testing, website responses and trend information in a report to the Board annually
- Review conference sites to increase attendance and make recommendations to the Board
- Continue to produce cost-effective Distance Learning and carefully monitor and review all profit/loss reports for each meeting

Interim Chair

Richard C. Papperman, CHBME Cape Professional Billing, Inc.

Vice Chair

Joe Schendel, CHBME Provider Support Services

Judy R. Cardenas, CHBME HealthMed, Inc.

Susan Chandler, CHBME Twin Physician Services, Inc.

Carrie Clements, CPC, CHBME SVA Healthcare Services, LLC

Lyle Evans, CHBME Professional Office Management Service

Kenneth Goodin, CHBME Emergency Physicians Billing Services

Cindy Groux, CHBME Health Care Practice Management David F. Jakielo, CHBME Seminars & Consulting

Judson S. Neal, CHBME Physicians Business Network, Inc

J. Paul O'Haro CompOne Services, Ltd.

Barry S. Reiter, CHBME Faculty Practice Services, Inc.

Mary Ellen Scalise, CHBME Healthcare Billing, Inc

Roxanne Smith-Kovac, CHBME Precision Medical Management, Inc

Kellie Swartz, CHBME Professional Medical Billing LTD, Inc.

Richard B. Usry, CHBME Healthcare Management Systems

Peggy Wagner Coderyte, Inc.

CERTIFICATION COMMITTEE

The Certification Committee provides an educational-based certification program for the HBMA membership and the third party medical billing industry community. This committee is charged with maintaining the eligibility to earn and maintain certification status with HBMA.

Goals for 2009: Promote and market CHBME and CMBA Certification to HBMA members and their employees. Work with other HBMA committees to promote areas of education and compliance and to expand the number of members that currently represents this committee.

Chair

Judson S. Neal, CHBME Physicians Business Network, Inc.

Susan Chandler, CHBME Twin Physician Services, Inc.

Andrew P. Kokosa, CHBME Medi-Data Services, Ltd.

Barry S. Reiter, CHBME Faculty Practice Services, Inc.

Information-packed conference sessions give attendees take-home knowledge to improve their businesses.



*** HBMA LEADERSHIP

STANDING COMMITTEES

ETHICS & COMPLIANCE COMMITTEE

The Ethics & Compliance Committee provides the membership of HBMA with the highest quality compliance program for third party medical billing companies in the industry. This committee is also responsible for enforcing the HBMA Code of Ethics and deals with any violation of the Code of Ethics as set forth the in HBMA Policy.

Goals in 2009: Compliance FAQs and other frequently requested resources have been launched on the HBMA website. These tools will be expanded on an ongoing basis. An article regarding compliance will be included in every issue of *Billing* to provide our members with peer ideas and compliance tools. Compliance educational offerings will include webcasts and sessions at each national meeting.

Chair

Holly J. Louie, CHBME Practice Management, Inc.

Robert B. Burleigh, CHBME Brandywine Healthcare Services

Karen L. Collier, Esq. Emergency Physicians Billing Services

Kenneth Goodin, CHBME Emergency Physicians Billing Services

Shawn Keough-Hartz, CHBME Provider Resources, Inc.

Lynne W. Kottman, CHBME Alamo Physicians' Services, Inc.

Joseph McCloskey, CHBME Advanced Data Processing, Inc.

J. Dennis Mock Medical Business Bureau, LLC

Cindy Pittmon, CHBME Specialty Group Services, LLC

Jim Trotter, CHBME Management Services Network, LLC

Jackie Willett, CHBME Term Billing, Inc.

FINANCE COMMITTEE

The Finance Committee manages the financial affairs of HBMA by coordinating all financial activities with the accounting office and the executive director. This includes:

- Preparing the annual budget for approval by the Board of Directors.
- Reviewing monthly financial statements to monitor HBMA's performance against budget and, when appropriate, recommending specific corrective action to assure financial stability.
- Overseeing the responsible management and investment of HBMA funds to insure safe yet maximum return on investments.
- Preparing other accounting and bookkeeping instruments as appropriate.

Goals in 2009: Continue to refine HBMA's finance policies and procedures. Seek ways to reduce accounting and bookkeeping expenses by using technology to maximize efficiency. Further refine the budget process to properly fund the work of HBMA.

Chair

Jackie Willett, CHBME TERM Billing, Inc.

Scott Everson, CHBME ArborMed Corporation

Kenneth Goodin, CHBME Emergency Physicians Billing Services

Andrew P. Kokosa, CHBME Medi-Data Services, Ltd.

Patrick Lukacs, CHBME Medinomics, LLC

Randal Roat, CHBME CBIZ MMP





GOVERNMENT RELATIONS COMMITTEE

The Government Relations Committee represents HBMA membership in all legislative and regulatory issues affecting the third party medical billing industry. Tasks include:

- Establishing a presence in Washington D.C. to appropriately represent HBMA.
- Meet regularly with the Centers for Medicare and Medicaid Services (CMS) in Baltimore to discuss industry issues and act as a resource for industry information.
- Structuring the committee to differentiate between legislative and regulatory issues
- Coordinating and advising HBMA members on national issues facing our industry
- Identifying and maintaining a mechanism for keeping HBMA members aware of state regulatory and legislative issues

Goals for 2009: Continue to maintain a Washington, DC, presence for HBMA. Provide written comments to appropriate legislative committee on proposed legislation. Expand member communication on legislation and regulations that impact our industry.

Chair

Barry S. Reiter, CHBME Faculty Practice Services, Inc.

Bill Finerfrock, Legislative Consultant Capitol Associates

Robert B. Burleigh, CHBME Brandywine Healthcare Services

Kathryn J. Canny, CHBME Physicians' Service Center, Inc.

Sherri L. Dumford, CHBME Three Bridges Consulting, LLC

Kenneth Goodin, CHBME Emergency Physicians Billing Services

Susan J. Gregg, CMPE, RCC, CHBME Shared Management Services, Inc.

Lonnie Johnson CBIZ MMP Tim Karhu, CHBME Adds Up, Inc.

Shawn Keough-Hartz, CHBME Provider Resources, Inc

Holly J. Louie, CHBME Practice Management, Inc

J. Dennis Mock Medical Business Bureau, LLC

Judson S. Neal, CHBME Physicians Business Network, Inc.

David Nicholson, CHBME Professional Management, Inc.

Randal J. Roat, CHBME CBIZ MMP

Don Rodden, CHBME HealthPro Medical Billing, Inc.

VENDOR AFFILIATE ADVISORY COMMITTEE

The Vendor Affiliate Advisory Committee serves as the vital communications link between HBMA and the vendor community. The committee seeks feedback on all marketing programs HBMA offers to the vendors of HBMA and maintains and enforces all marketing and communications policies of HBMA marketing programs.

Goals for 2009: Clearly define the relationship of our vendor supporters. Create and maintain a strong relationship between our members and our supporting vendors. Continue to reiterate the value of our vendors to the HBMA membership without favoritism or endorsement.

Chair

Judy R. Cardenas, CHBME HealthMed, Inc.

Doug Allem CPU Medical Management Systems

Michael Andrus Centron Data Services, Inc

Phil Ellis CIPROMS, Inc.

Marla Harmon MEGAS, LLC

Bonnie Shupe, CHBME Medical Billing, Inc.

Mark J. Snow PSC Info Group

Richard B. Usry, CHBME Healthcare Management Systems

Dan Vastag AMICAS, Inc.

HBMA STANDING COMMITTEES

REGIONAL MEMBERSHIP AND DEVELOPMENT COMMITTEE

The Regional Development and Membership Committee is committed to ensuring membership value is received within the six HBMA geographic regions and promotes programs that will attract new members to HBMA. The committee is comprised of both at-large members as well as our six Regional Chairs. In addition, each Regional Chair is charged with engaging new members within HBMA and being available to answer questions regarding HBMA's valuable service offerings for all members within their respective region.

Goals for 2009: Increase HBMA membership at the rate of 10% per year. Generate an 80% renewal rate for existing members. Develop and involve state representatives within the outreach initiatives of HBMA. Assist with the development and maintenance of meaningful state and local information on the HBMA website.



Chair Patrick F. Lukacs, CHBME Medinomics, LLC



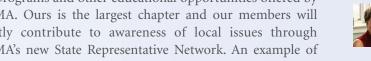
At-Large Committee Member Todd Gillis Medical Business Bureau, LLC



GREAT LAKES REGION Kathryn J. Canny, CHBME Physicians' Service Center, Inc.



"The Great Lakes Region actively supports the distance learning programs and other educational opportunities offered by HBMA. Ours is the largest chapter and our members will greatly contribute to awareness of local issues through HBMA's new State Representative Network. An example of how HBMA members can make a difference in their region: Illinois members worked with the Illinois State Medical Society to change a long standing rule that essentially had made all billing company contracts in Illinois non-compliant. It just proves that with an organized effort and active, focused members, we can get 'er done!"





PACIFIC REGION Sara K. Nofziger, CHBME

American Billing Services, Inc.



"The Pacific region has several concerns that will impact our members both nationally and locally. We will be monitoring the new administration's healthcare reform as well as the upcoming changes to EHR, 5010, and ICD-10. In the Pacific Northwest we are closely monitoring the announcement of the new MAC carrier for the J2 area. The outcome may cause severe impact to many of our billing companies. We will continue to strive to increase the voices of our state representatives."



NORTHEAST REGION

Barry Haitoff, CHBME Medical Management Corp. of America



"We will strive to enhance the outreach of the national office and strengthen HBMA as a whole by reaching out to our regional membership. While increasing regional awareness, we will work toward emphasizing the ongoing benefits of HBMA.



We will work closely with the national office to conduct evalu-

ations and make recommendations on what is working well, what can be done better, and how we can assist in developing new strategies and offerings to better serve our constituents."



SOUTHEAST REGION

Emily M. Osetek, CHBME SourceNet Medical Billing Associates, LLC



"As our members are faced with even greater challenges over the coming year, we will work on developing state representatives to help us identify issues and communicate resources that can be utilized for the whole organization. We hope to advance the tools we already have in place within HBMA to allow more interaction and create a user-friendly knowledge base for all members."



MIDWEST REGION

Kyle Shupe, CHBME Medical Billing, Inc.



"2009 has been particularly challenging for our industry. Here in the Midwest Region, we continue to explore various ways to solve our individual and state-specific issues, using the educational opportunities provided to HBMA members. Our goal is to ensure that all our members have access to the best information available to meet the challenges and succeed in their businesses."



SOUTHWEST REGION

Dennis Kasper, CHBME Kasper Management Service



"In all likelihood Congress will unveil legislation to dramatically change the healthcare system. My goal is to prepare the Southwest Region state representatives to serve as effective conduits of reliable information to their elected officials at both the state and national levels in order to protect the interests of the medical billing industry."

HBMA 2009 ANNUAL REPORT



SURVEY COMMITTEE

The Survey Committee promotes the exchange of meaningful industry information among HBMA members through the analysis and dissemination of surveys throughout the year.

The Survey Committee has identified the three most important recipient groups with whom such information will be shared: 1) government relations committee, 2) members, and 3) affiliate industries.

In 2007 and 2008, the committee responded to CMS's request to provide a parallel survey to its MCPSS (Medicare Contractor Provider Satisfaction Survey) that CMS sent to providers. Other surveys launched in 2008 included the Days in A/R Survey (results recently published in Billing) and a Member Survey (for new HBMA members and existing members upon membership renewal).

Goals for 2009: To provide a means of recording valuable data from our members to enhance benchmarking statistics, education, lobbying, and the vendor community's product and service development. The committee has acquired a new tool to assist in the development of future surveys and looks forward to providing continued dissemination of the data that will be useful for HBMA members.

Chair

Shawn Keough-Hartz, CHBME Provider Resources, Inc.

Robert B. Burleigh, CHBME Brandywine Healthcare Services.

Patrick F. Lukacs, CHBME Medinomics, LLC

Karen L. Olson, CHBME KLO Professional Billing, Inc.

Daniel Patrick Stech Pinnacle Medical Billing

Julie Urda, CPC, CHBME PROActive Billing and Managment Solutions

Jackie Willett, CHBME TERM Billing, Inc.

ORGANIZATIONAL EFFECTIVENESS COMMITTEE

The Organizational Effectiveness Committee maintains the HBMA Strategic Plan. The Committee reviews and updates the Strategic Plan annually.

Chair

Chair/President Elect Scott H. Everson, CHBME ArborMed Corporation

Past President Kenneth Goodin, CHBME Intermedix

President Randal Roat, CHBME CBIZ MMP Secretary

Patrick F. Lukacs, CHBME Medinomics, LLC

Treasurer

Jackie Willett, CHBME TERM Billing, Inc.

COMMERCIAL PAYOR RELATIONS COMMITTEE

Much of the work and focus of HBMA over the last several years has resulted in significant progress in developing a strong rapport and cooperative working relationship with CMS. HBMA has gained a new level of credibility within the CMS environment which has been nurtured through the Government Relations Committee. There have been many positive outcomes as a result of these relationships, including advanced knowledge on new initiatives and an opportunity to participate proactively in change initiatives. HBMA has benefited from a solid network of contacts to help address ongoing issues, a good understanding of the CMS infrastructure, and an ability to navigate the system. Interacting with CMS has also created a resource of credible speakers for the HBMA educational sessions.

The Commercial Payor Relations Committee was formed in 2009 with the purpose of building those same types of deliverables with the commercial payor industry.

Goals for 2009: The committee will explore ays to be involved in regulatory implementation, gaining a greater awareness of the commercial insurance operating environment, achieving solutions for managing the inconsistencies in the use of denial codes, establishing a network reliable contacts within the commercial community, and ensuring that HBMA is the recognized authority on billing.

Chair

Sherri Dumford, CHBME Three Bridges Consulting, LLC

Jeanne Gilreath, CHBME Advantage Healthcare Solutions Bing Herald, CHBME Medical Business Service, Inc.

Jon Neal InstaMed

Mick Polo, CHBME NCDS Medical Billing

HBMA STANDING COMMITTEES

PUBLIC RELATIONS COMMITTEE

The HBMA Public Relations Committee targets efforts that will increase influence, visibility, and credibility within the association's own membership and throughout the healthcare community.

Goals for 2009: A public relations initiative will include kicking off a very important relationship with Dodge Communications, which is the professional PR firm hired to assist HBMA in communicating the great things it does for its membership. It is our job to educate our members on the benefits we provide to our membership and how to take advantage of those benefits.

Dodge Communications will also assist the PR Committee in communicating who HBMA is to the healthcare community. HBMA has made great strides in areas of government relations and education and has earned the respect of other organizations within the healthcare industry. We need a continued presence within the health care industry. Branding and creating name recognition for HBMA is part of the process.

Chair

Andrew P. Kokosa, CHBME Medi-Data Services, Ltd.

Susan Chandler, CHBME Twin Physician Services, Inc.

Curt L. Cvikota, CHBME Cvikota Company, Inc.

Kris Cvikota Webteam Inc.

Marla Harmon MEGAS - Alpha II

Lisa Janis

Advanced Billing Services, Inc.

Karen B. Linsteadt, CHBME Med Group Billings & Collections

David C. Purvis, CHBME HealthOne

Peggy Wagner Coderyte, Inc.

PUBLICATIONS COMMITTEE

The Publications Committee is responsible for providing relevant and timely articles in the HBMA newsletter, *Billing*, that provide value to HBMA members. Committee members brainstorm topic ideas, recruit potential authors, and proofread each issue. The committee also provides assistance with the publication of the Annual Report and any other publications as requested by the Board.

Goals for 2009: Continue to provide relevant and meaningful topics in Billing that bring value to members. Recruit additional writers within HBMA and outside of HBMA for articles.

Chair

Chair

Don Rodden, CHBME

HealthPro Medical Billing, Inc.

Rene K. DePuy

Medical Managment, LLC

Manish Jain

Perot Systems, Corp.

Keri Jennings, CHBME

Tenzing

Mark Lieberthal

Medical Billing Professionals, Inc.

Jon Neal InstaMed Ginger Ryder, CHBME

EMEDEX

Bob Svendsen

CHMB

Lorraine Terrero

Perioperative Services, LLC

Nitin Thakor

GeBBS Healthcare Solutions, Inc.

Randy Wall

GeBBS Healthcare Solutions, Inc.

EDITOR

KT Anders

TECHNOLOGY COMMITTEE

The technology committee began in 2007 as a "taskforce" and was made an HBMA standing committee in 2008, rolling the responsibilities of the former Website and Information Services committee functions under its control. The committee completed work on a White Paper covering key issues of the emerging Electronic Health Record technology. The committee has deployed tools to assist with employee recruitment and project management.

Goals for 2009: Disseminate information regarding current technology available to members. Develop benchmarks on a number of emerging technologies that will be useful to the members of HBMA.

Chair

Bill Carns, CHBME PracticeMax

Curt L. Cvikota, CHBME Cvikota Company, Inc. Patrick F. Lukacs, CHBME Medinomics, LLC

Joe Schendel, CHBME Provider Support Services

SUPPORT STAFF





James Wieland, Esq. Legal Counsel



Bill FinerfrockLegislative Consultant

ADMINISTRATIVE SUPPORT

HBMA NATIONAL OFFICE



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Bradley J. LundExecutive Director



Fran CashenConference Logistics and Site Selection



Gail Sunshine, CMPConference Director/
Meeting Manager



Kris CvikotaWebsite and Database Management



Paul MyersDirector of Education



K.T. AndersBilling Editor



Cindy RoundsAssociate Director for Finance,
Certification and Membership



John DavidsonGraphic Design



Michelle BotanaAssociate Director for Administration and Governance

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FINANCIALS

B A L A N C E S H E E T AS OF DECEMBER 31, 2008



	ASSETS	Healt BILLING & MA Associ
	Current Assets	2155061
	Checking/Savings	
	1001 · Cash	
	1010 · Current Bank Accounts	
	1010-01 · HBMA Wells Fargo Bank Chking	
	1010-13 · TCD Home Federal due 05/28/09	
	1010-14 · TCD Wash Mutual due 05/29/09	
	1010-19 · TCD Beal Bank due 05/27/09	
	1010-20 · TCD Capital One due 05/28/09	
	1010-21 · TCD Capital One due 10/15/09	
	1010-22 * TCD Molgan statiley due 10/13/07	
	Total 1010 · Current Bank Accounts	
⊢	Total 1001 · Cash	
0.4	Total Checking/Savings	
\simeq	Accounts Receivable	0 1 1,0 10
\bigcirc	1200 · Accounts Receivable	. \$8,037
0	Total Accounts Receivable	. \$8,037
<u>_</u>	Other Current Assets	
	1510 · Prepaid Expense	\$47,950
ш	Total Other Current Assets	\$47,950
∝	TOTAL ASSETS\$	870,533
	LIABILITIES & EQUITY	
	Liabilities Current Limbilities	
	Current Liabilities Accounts Payable	
\triangleleft	2000 · Accounts Payable	\$31.040
_	Total Accounts Payable	
	Other Current Liabilities	φοτ,υ -ι υ
7	2050 · Accrued Expenses	. \$5.713
	2100 · Deferred Membership Revenue	. 4-//
Z	2110 · Deferred Membership Renewals	\$25,125
	Total 2100 · Deferred Membership Revenue	
⋖	2200 · Deferred Inc. Mtgs. & Seminar	\$40,329
	2400 · Def Contributions/Advertising	
	2420 · Advertising	
0	2420-02 · Website Advertising	
	Total 2420 · Advertising	
0	Total 2400 · Def Contributions/Advertising	
	Total Other Current Liabilities	
0	Total Current Liabilities\$	
N	Total Liabilities\$	129,708
	Equity	
	3900 · General Fund\$	497,039
\triangleleft	Net Income\$	
	Total Equity\$	740,825
Σ	Total Equity	740,825
	TOTAL LIABILITIES & EQUITY	970 F22
Ω	TOTAL LIABILITIES & EQUIT	0/0,533

2008

FINANCIALS

STATEMENT OF REVENUE AND EXPENSE



JANUARY 2008 - DECEMBER 2008

EA

	Ordinary Income/Expense	<u>TOTAL</u>
	INCOME	
	4100 · Membership Revenue	\$557,946
	4200 · Meetings & Seminars	\$930,639
	4310 · Certification	\$28,350
	4400 · Contributions/Advertising	\$82,710
	4500 · Publications	\$528
	4900 · Other Income	\$79,265
	Total Income	\$1,679,438
	EXPENSE	
Z	6100 · General & Administrative Exp	\$644 N49
0	6140 · Meetings & Seminars Exp	
_	6300 · Certification Expense	
⊢	6400 · Publications Expense	
()	6500 · Committees	·
O	6600 · Annual Auctions	
\triangleleft	6602 · Related Association Expense	·
	6610-42 · Advertising	
Z	6800 · User Group Marketing	
_	Total Expense	
<u>_</u>		
_	Net Ordinary Income	\$243,791
工	NET INCOME	\$243,791
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HBMA PARTNERS



AFFILIATE MEMBERS provide special services to the company of a principal HBMA member, such as, but not limited to, attorneys, accountants, and billing and business consultants who possess particular knowledge and experience in areas of third party billing and healthcare management.

Brandywine Healthcare Services

Larsen Consulting

Brenda Jackson Consulting

Seminars & Consulting www.DaveSpeaks.com

Falcon Capital Partners www.falconllc.com

VENDOR AFFILIATES are companies that supply products and services to the companies principal HBMA members that are, or could be, used in the normal course of business. They also include companies that have developed advanced products and services to enhance the productivity and efficiency of third party medical billing companies.

Acurus Solutions Inc. www.acurussolutions.com

AdvancedMD Software, Inc www.advancedmd.com

Ajuba International www.ajubanet.net

AllZone Management Solutions www.allzonems.com

AmeriFinancial Solutions, LLC www.amerifinsol.com

AMICAS, Inc. www.amicas.com

Aquarius Imaging, LLC www.aquariusimaging.net

Caliber Point Business Solutions LTD www.caliberpoint.com

Capario www.capario.com

Centron Data Services, Inc www.centrondata.com

Clinix Medical Information Services, LLC www.clinixmis.com

Coderyte, Inc. www.coderyte.com

Coding Network, The www.codingnetwork.com

Coding Strategies, Inc. www.codingstrategies.com

CollaborateMD
www.collaborateMD.com

Collection Service Bureau www.csbcollections.com

CPU Medical Management Systems www.cpumms.com

dashboardMD www.dashboardmd.com

Divdat www.dividat.com

Donnell Systems, Inc. www.ocie.net/OCIEerm.htm

e4e Healthcare Business Services www.e4ehealthcare.com

eBridge Solutions, Inc. www.ebridge-solutions.com

Elico Ltd www.elicobpo.com

Emdeon www.emdeon.com

Gateway EDI, Inc. www.gatewayedi.com

GeBBS Healthcare Solutions, Inc. www.gebbs.com

Global Healthcare Resource www.globalhealthcareresource.com

Grant & Weber www.grantweber.com



HBMA PARTNERS

VENDOR AFFILIATES (continued)

Hayes Management Consulting www.hayesmanagement.com

Health Data Services www.healthdataservices.com

Healthpac Computer Systems, Inc. www.healthpac.net

Hooper Cornell, PLLC www.hoopercornell.com

Inga Ellzey Practice Group, Inc. www.iepg.com

Ingenix www.ingenix.com

InstaMed www.instamed.com

IntelliSoft Group www.intellisoftgroup.com

International Banking Technology https://vericheckonlne.com

iTech US, Inc. www.itechus.com

JPI Data Resource www.jpidr.com

Kareo, Inc. www.kareo.com

LetterLogic www.letterlogic.com

MedEnEx, LLC www.medenex.com

Medical Business Bureau, LLC www.mbb.net

Medusind Solutions, Inc. www.medusind.com

MEGAS - Alpha II www.megas.net

Moneris Solutions www.monerisusa.com

NAPLIA www.naplia.com

NetDeposit www.netdeposit.com

Noteworthy Medical System www.noteworthymedical.com

Nuesoft Technologies www.nuemd.com

Office Ally www.officeally.com

One Source Document Solutions,Inc. www.osdsinc.com

PDM Productive Data Management www.pdmsoftware.com

Perot Systems Corp. www.perotsystems.com/healthcare

PPM Information Solutions www.ppminfo.com

PSC Info Group www.pscinfogroup.com

Rash Curtis & Associates www.rashcurtis.com

RealMed Corporation www.realmed.com

RelayHealth www.relayhealth.com

Sequel Systems, Inc. www.sequelmed.com

SNB Bank www.banksnb.com

Sy.Med Development, Inc. www.symed.com

Technosoft Corporation www.technosoftcorp.com/hbma

TekHealth Services, Inc. www.tekhealthservices.com

The SSI Group, Inc. www.thessigroup.com

TransEngen, Inc. www.transengen.com

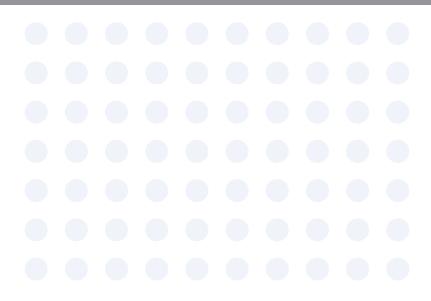
Truworth Infotech Pvt. Ltd. www.truworth.net

U.S. Bank www.usbank.com

Webteam Inc. www.webteam.net

Xena-Health www.xena-health.com

ZirMed, Inc. www.zirmed.com





MEETING CHALLENGES IN A CHANGING WORLD



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