

# FACTS & FEATURES



A for-profit subsidiary of the Arkansas Hospital Association

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## Missed Opportunities to Collect Revenue (Right Under Your Nose)?



Are you collecting everything that's due to your hospital from your commercial payers? Are you able to compare your actual payments to what's expected?

With revenues declining, it's critical to capture every dollar owed to you. iVantage now offers a contract modeling service which will assess your current contract performance, identify missed opportunities to collect revenue and better prepare you to negotiate with payers. This unique service involves taking a deep dive into your claims, contract terms and rates, and delivering powerful data analysis, extensive modeling reports and executive level summaries. The results will help you gain negotiating power and enable you to optimize revenue by making internal changes. Knowing which payers or service lines are underpaying is a powerful first step toward addressing the root cause and initiating changes.

Currently working with several hospitals in Arkansas and Oklahoma, iVantage's sophisticated contract modeling service has already identified new revenue opportunities and an ROI of at least 30:1. Among the impressive results the contract modeling service has generated are:

- Identifying **\$3.3 million** in underpayments (100-150 bed facility)
- Locating **\$760,000** of revenue forfeited due to "lesser of" language (100-bed facility)
- Finding a **\$130K opportunity** by comparing outlier revenue to potential revenue (100-150 bed facility)

"The BCBS Oklahoma reimbursement methodology is quite complicated. Utilizing iVantage analytics to model contract proposals has been invaluable in our negotiations of new rates and contract terms," comments Doug Volinski, CFO of Duncan Regional Hospital in Duncan, OK.

The contract modeling analyses conducted by iVantage's managed care experts yields important information and enables you to:

- Assess actual vs. expected payments for current contracts
- Identify payment variances at the service line level (can drill down to the claim level if needed)
- Note differences between current vs. proposed contracts - with drilldown by service line and outlier type, thus enabling you to develop a targeted negotiation strategy
- Quantify impact of lesser-of language and model the impact of an across-the-board chargemaster increase
- Summarize and model proposal changes



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### Expertise You Can Trust

iVantage's expertise can augment your in-house managed care team as they face the challenging – yet critical – task of negotiating contracts with payers. They will deliver powerful data analysis, modeling reports and executive level summaries which will assess existing payer contracts and model various reimbursement combinations to help you understand and anticipate the impact of proposed payer contract terms to the bottom line. Leverage deep industry experience, sophisticated analytic tools and a proven track record of aggressive negotiations. This powerful solution is built to help hospitals – from rural and Critical

Access Hospitals to independent providers and national health systems – improve rates, terms and other conditions to achieve a more balanced contract with payers. iVantage would welcome the opportunity to introduce you to this service, and to learn more about how you are assessing contract performance and modeling market 'what if' scenarios.

To learn more, contact Hunter Clark at [hclark@ivantagehealth.com](mailto:hclark@ivantagehealth.com) or Andy Emery at [aemery@ivantagehealth.com](mailto:aemery@ivantagehealth.com).

## Health Care Hiring Continues in a Job Seeker's Market



According to data from the Bureau of Labor Statistics, the healthcare and social assistance sector added 434,600 jobs in 2016 and the first half of 2017. However, since January, healthcare has averaged 24,000 new jobs per month, down from 32,000 new roles per month in 2016.

Despite this slight downtick in demand, job seekers continue to have the upper hand. As more Baby Boomers age out of the workforce and the demographics, in general, continue to gray, health care providers must replace retiring workers and scale up to serve growing patient needs. Job seekers know this! When Health eCareers recently conducted a survey of 19,712 healthcare professionals, 46% of the respondents said they are very confident they can find a new position in their health care field. Another 41% stated they are somewhat confident they can do so.

### Physicians Are Split on Job and Salary Satisfaction

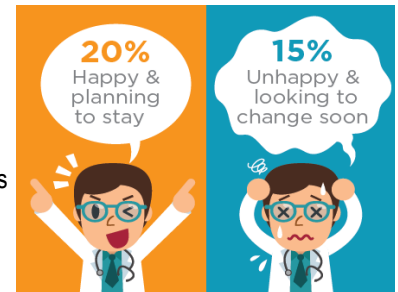
The Health eCareers salary survey found the average physician/surgeon salary across all specialties to be \$258,039. Slightly more than half (52%) are very or somewhat satisfied with the compensation they receive. Those who are not satisfied complained that their salaries were below average for similar jobs in the region and that they were required to work extra hours for which they were not compensated. This is reflected in their biggest career concerns for next year, which are increased workload/patient load and lower or no salary increases along with company stability/performance.

### Nurses Are Concerned about Increased Workloads

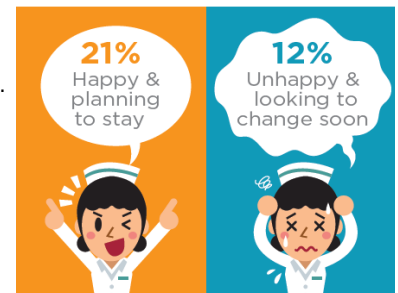
The average nurse salary as identified by the Health eCareers salary survey is \$63,753. Slightly less than half (45%) of nurses were very or somewhat satisfied with the compensation they receive. Salaries not recognizing years of experience was the most commonly cited reason for dissatisfaction. The biggest career concerns for next year among nurses were increased workload/patient load, lower or no salary increase and staff morale.

### PAs and NPs Were Among the Most Satisfied Professionals

According to the Health eCareers salary survey, Physician Assistants earn, on average, slightly more (\$108,311) than do Nurse Practitioners (\$102,523). PAs and NPs were among the most satisfied professions when it came to salary. Sixty-one percent and 59% of PAs and NPs, respectively, said they are very or somewhat satisfied with the compensation they receive. Among those who are not satisfied, salaries below the average for similar jobs in the region and extra hours for which they are not compensated were the biggest complaints. Career concerns for next year include increased workload/patient load and low or no salary increases.



Physician Job Satisfaction



Nurse Job Satisfaction



PA Job Satisfaction



NP Job Satisfaction

For more information regarding Health eCareers, contact Tyler Barkmeier, 720.606.1172.

# Come meet our AHA Services, Inc. Endorsed Companies

AHA Trade Show (Governor's Halls I - II)  
Thursday, October 5, 1:00 p.m. - 4:00 p.m.

## Gallagher Benefit Services

[Booth 25](#)

**Vizient**

[Booth 4](#)

## BancorpSouth Insurance Services

[Booth 23](#)

**Liberty Mutual**

[Booth 56](#)

## Morgan Hunter HealthSearch

[Booth 54](#)

## Merritt Hawkins

[Booth 30](#)

## Health eCareers

[Booth 52](#)

## AHA Services, Inc.

[Booth 22](#)

## careLearning

[Booths 35](#)



## iVantage

[Booth 57](#)

**VSP**

[Booth 33](#)

**Remi**

[Booth 36](#)

**HSS**

[Booth 51](#)

## Healthcare Staffing Services

[Booth 5](#)

## Commerce Bank

[Booth 34](#)

## AHA Workers' Comp Self-Insured Trust

[Booth 32](#)

**SUNRx**

[Booth 55](#)

# AHA Services Welcomes Morgan Hunter HealthSearch

*Expertise for Positions at the Manager Level and Above*



AHA Services is proud to announce a new partnership with Morgan Hunter HealthSearch (MHHS). MHHS began in 1986 as Morgan Hunter Corporate Search, which was formed to service organizations throughout the Kansas City area. Over time, the company was expanded nationally through the creation of Morgan Hunter Healthcare Consulting and MHHS. Today, the combined Morgan Hunter Companies are one of the largest recruitment firms based in the Midwest.



MHHS provides leadership recruitment services for both interim and permanent positions, beginning at the manager level and continuing throughout the “C” suite. MHHS offers an innovative, performance-based retainer process for permanent positions, which combines the best intrinsic features of both contingency-based search and retained-based search into one.

MHHS offers client organizations the following differentiating benefits:

- Performance-based search process in which MHHS offers the level of service and expertise of a retained firm, while only being guaranteed one-third of its fee with the final two-thirds on a contingent basis.
- One-year guarantee for VP and C-suite and six months for director or manager.
- Search expenses are limited to a flat \$500.
- All search activity is handled by MHHS consultants (no research assistants), who average over 30 years experience.

MHHS Interim Management services are offered on a contingent basis, meaning you are free to interview its candidates with no obligation, unless you engage one.

- No minimum length of engagement.
- You are able to convert the interim to a permanent employee by only paying the difference between a permanent placement fee and the interim fees already paid.
- Turnaround time to present candidates of three to five business days.
- Lower cost versus traditional interim/consulting firms.

For additional information, contact Barry Jackson, President, Morgan Hunter HealthSearch at 800-917-6447 or [bjackson@mhhealthsearch.com](mailto:bjackson@mhhealthsearch.com).

## **CLASS ACTION Capital**

Class Action Capital (CAC) helps clients monitor and identify class action settlements for which they are eligible and perform the necessary work to recover their pro rata financial shares. CAC

services allows corporate clients the ability to meet fiduciary duties to shareholders, public and private, as well as manage class action claim assets. The CAC fee is simply a percentage of the money recovered for its clients.

Contact Andrew Mirabile, [Andrew@ClassActionCapital.com](mailto:Andrew@ClassActionCapital.com), today to learn more about Class Action Capital's turnkey class action claim management process, i.e., settlement monitoring, eligibility identification and claim preparation and filing, as well as

# Survey: Plurality of Physicians Strongly Supports Single-Payer Healthcare

A plurality of physicians strongly supports a single-payer healthcare system, according to a new survey by Merritt Hawkins.

The survey of 1,033 physicians indicates that 42% strongly support a single payer health care system, while 14% are somewhat supportive. Over one-third (35%) strongly oppose a single-payer system, while 6% are somewhat against it. The remaining 3% neither support nor oppose single payer.

The results contrast with a national survey of physicians Merritt Hawkins conducted in 2008, which indicated that 58% of physicians opposed single payer at that time, while 42% supported it.

“Physicians appear to have evolved on single payer,” said Travis Singleton, senior vice president for Merritt Hawkins. “Whether they are enthusiastic about it, are merely resigned to it or are just seeking clarity, single payer is a concept many physicians appear to be embracing.”

Phillip Miller, vice president of communications for Merritt Hawkins, said that in the thousands of conversations Merritt Hawkins’ employees have with doctors each year, physicians often say they are tired of dealing with billing and paperwork, which takes time away from patients.

“Physicians long for the relative clarity and simplicity of single-payer. In their minds, it would create fewer distractions, taking care of patients – not reimbursement,” Miller said.

The survey was sent by email to 70,000 physicians nationwide and has a margin of error of +/- 3.1 percent, according to experts in statistical response analysis at the University of Tennessee.

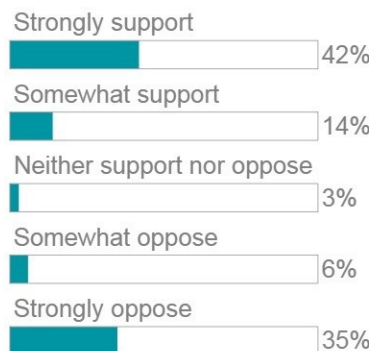
AHA members who would like additional information about the survey or would like to discuss their current physician recruiting needs may contact Rich Gehrke, regional vice president of marketing for Merritt Hawkins, at [rich.gehrke@merrithawkins.com](mailto:rich.gehrke@merrithawkins.com) or at 469.524.1657 or visit [www.merrithawkins.com](http://www.merrithawkins.com).



“What is your position on single payer healthcare?”

Merritt Hawkins, the nation’s leading physician search firm, conducted a survey of physicians to learn where they stand on a single payer healthcare system. The survey was sent by email to 70,000 physicians on August 3, 2017 and 1,033 responses were received. The survey has an error rate of +/- 3.1% as determined by experts in statistical response at the University of Tennessee.

Responses break out as follows:



## HFMA’s Upcoming Live Webinars

Learn about timely healthcare finance topics and earn CPEs. Most live webinars are free for HFMA members and \$99 for non-members, unless otherwise noted.

[View all upcoming live webinars](#)  
(hold the control key and click link)



## HFMA’s On-Demand Webinars

HFMA provides webinars available one calendar year following the live webinar date and year. Most on-demand webinars are free for HFMA members and \$99 for non-members, unless otherwise noted.

[View all On-Demand webinars](#)  
(hold the control key and click link)

# SUNRx Acquires eAudit Solutions to Create Comprehensive, Compliance-Focused 340B Solution for Covered Entities



SUNRx, a compliance-focused 340B contract pharmacy administrator, announced that it acquired eAudit Solutions, which provides 340B software and services to hospitals, to offer covered entities an end-to-end solution by adding split-billing capabilities to 340B contract pharmacy management.

SUNRx and eAudit Solutions have partnered since 2013 to deliver comprehensive 340B administration to hospitals, health systems and federally qualified health centers. SUNRx leads in its hands-on approach to compliant 340B contract pharmacy management, and eAudit Solutions' split-billing and invoice analysis solutions have delivered more than \$203 million in savings.

"We have brought to market both compliance and value for covered entities, and together we are even better positioned to drive enhanced value to our clients," said Jill Simoes, General Manager of SUNRx. "This acquisition gives covered entities access to two industry-leading 340B management solutions through one customer-centric organization – and a roadmap of continuing innovation to accelerate savings."

"We have always admired how SUNRx delivers convenience and value to its customers," said Chris Giese, CEO, eAudit Solutions. "Like eAudit Solutions, SUNRx is focused on compliance and high-touch customer service, which aligns the two organizations well both in our shared mission and operational priorities."

eAudit Solutions provides 340B software and services for disproportionate share hospitals, sole community hospitals, Critical Access Hospitals and children's hospitals. Its split-billing solution manages 340B and non-340B transactions in mixed-use settings to help ensure covered entities' compliance, allowing hospitals to manage inventories in a virtual environment. The eAS Invoice Analysis and Reconciliation System is a real-time web-based tool that identifies, reports and recovers contract pricing discrepancies, delivering a unique value proposition to 340B-covered entities.

SUNRx has extensive experience implementing and managing 340B programs (since 2006), and provides industry-leading audit support as evidenced by its positive audit findings. SUNRx offers access to a market-leading 340B-contracted pharmacy network to provide patients with convenient access to 340B medications in support of its clients' 340B programs. Clients have access to comprehensive 340B services and fully automated systems that reduce regulatory risks, safeguard against drug diversion and duplicate discounts, and use lower-of-pricing logic to deliver the lowest-cost option available.

The 340B Drug Discount Program is a federal program that requires manufacturers to provide significant discounts for outpatient drugs to eligible healthcare organizations, known as "covered entities." The program is designed to provide financial benefits to covered entities that serve low-income and uninsured patients, enabling them to expand healthcare services and improve access to more affordable medications.

## About eAudit Solutions

Founded in 2005, eAudit Solutions delivers innovative 340B software and services enabling institutional pharmacies to achieve greater savings, efficiency and compliance. With more than 12 years of experience, eAudit Solutions is an industry leader in pharmaceutical supply chain, 340B software and perpetual auditing. eAudit Solutions' Invoice Analysis and Reconciliation System is a real-time web-based tool that identifies, reports and recovers wholesaler contract pricing discrepancies. eAudit Solutions' 340B Replenishment Software is a subscription-based web tool that enables virtual inventory management and replenishment. eAudit Solutions' technology works with every pharmacy information system, drug wholesaler and group purchasing organization. For more information, go to [www.eauditsolutions.com](http://www.eauditsolutions.com).

## About SUNRx

SUNRx is a compliance-focused 340B administrator that helps covered entities, such as hospitals and federally qualified health centers, maximize their 340B programs so they can expand access to affordable medications for low-income and uninsured patients. SUNRx provides comprehensive, auditable technology solutions and high-touch customer service with a hands-on approach to program implementation, contract pharmacy setup and ongoing, compliant 340B program management. SUNRx also offers integrated pharmacy benefit management (PBM) through its parent company, MedImpact Healthcare Systems, Inc., an independent, trend-focused PBM. For more information, go to [www.sunrx.com](http://www.sunrx.com).

For more information contact Matt Bobo, 210.646.1885, [mbobo@sunrx.com](mailto:mbobo@sunrx.com).

AHA SERVICES, INC.

# ENDORSED COMPANIES



## AHA Workers' Compensation Self-Insured Trust

Tina Creel, 501.224.7878

Workers' compensation coverage for AHA



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Nicole DeVries, 813.523.5451

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Maureen Barrie, 609.275.4108

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## Compdata Consulting

[www.compdataconsulting.com](http://www.compdataconsulting.com)

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Compensation consulting.



## BancorpSouth

Insurance Services, Inc.

## BancorpSouth Insurance Services, Inc.

[www.bxsi.com](http://www.bxsi.com)

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Sherman Moore, 501.614.1183

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Liz Carder, 501.224.7878

Laura Register, 866.617.3904

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## Health eCareers

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Liz Carder, 501.224.7878

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## Healthcare Staffing Services

[www.healthcare-staffingservices.org](http://www.healthcare-staffingservices.org)

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## Class Action Capital

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# AHA Services Endorsed Companies (Continued)



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**inControl** (formerly PDS)  
[www.ivantagehealth.com](http://www.ivantagehealth.com)  
**Leslie Gold, 310.991.5340**  
**Michael Topchik, 207.939.4618**  
 Analytics for health care performance benchmarking, strategic planning and payment optimization.



**Remi**  
[www.theremigroup.com](http://www.theremigroup.com)  
**Michael Marquette, 262.565.5746**  
 Replaces multiple service agreements and extended warranties with one agreement that costs less and is more flexible than the OEM or Independent Service Organization agreement.



**Liberty Mutual Insurance**  
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**Staff Care, Inc.**  
[www.staffcare.com](http://www.staffcare.com)  
**Stephanie Hawkins, 469.524.7445**  
**Kurt Mosley, 214.392.3936**  
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**Med Travelers**  
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**Melissa Pirrami, 877.435.2132**  
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**SUNRx**  
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**Merritt Hawkins**  
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- To add someone to this list, please send an email with "subscribe" in the subject line, making sure that you include the individual's name, title and email address.
- To unsubscribe, please send an email with "unsubscribe" in the subject line.
- To change your subscribed email address, please send an email with the new information.