What a great time of year. The leaves are changing, holidays are approaching, and fall has officially arrived. McMahon-Illini began fall with our educational event that took place at the Par-a-Dice Hotel in East Peoria, IL. The conference was filled with great topics starting with one of our favorites, Kim Byas Sr., Ph.D. Kim’s AHA update is always informational and educational. We can’t thank Kim and all of the other speakers enough for their continued support to HFMA. Last chapter year, our past president created a giving initiative by including local charities that honor our Veteran’s. This year we are going to keep the tradition of giving; however, we will switch gears to focus on our youth. We had the great privilege of having Sandy Garva from Crittenden Centers come and share their mission of helping local families and children. Through the participation of our fall meeting attendees, we were able to raise $522 for this great cause! What a joy it is to be able to help these local organizations and be able to share their mission with our McMahon-Illini members.

There were several new members at the fall event. As new members, the group participated in New Member Bingo where they were challenged to discuss what this year’s theme “Thrive” meant to

(Continued on page 2)
them. Congratulations to Jason Wright for winning the $50 new member bingo! It was great to meet and engage our new members and to see the many familiar faces of our current members. A special thank you goes out to Sara Palmer, co-chair of the September meeting. Without the work from our volunteers and sponsors these events would not be possible.

By now, you should have all received the Annual Membership Survey from National HFMA. The McMahon-Illini HFMA Officers and Directors truly hope you take the few short minutes to complete this important survey. We, as a Board, use the survey results as a tool to identify ways to improve and assist our members. We look forward to hearing your input and thank you for your participation and feedback. If you did not receive this survey or have questions, please reach out to a board member, we would be happy to answer any questions you have.

In addition to the Annual Membership Survey, a newsletter survey was sent out in October. The purpose of this survey is to obtain your thoughts and feedback regarding our content and mode of communication. Thank you to those of you who completed this survey. If you did not receive the survey or have additional questions or comments regarding communications, please contact our Newsletter Chair, Holly Henline or our Communications Chair, Tony Mascato. They would be happy to discuss your ideas or suggestions.

The Program and Communications Committees are working diligently to bring you a full agenda. We are very excited about our next educational event being held at the Par-a-Dice, located in East Peoria, on January 19-20, 2017. The format for this meeting will look different than previous winter educational events. This educational event will follow the life of a patient account. We will begin by setting the Healthcare Climate with AHA. We will then follow “the patient account” through educational sessions that focus on understanding and optimizing the entire cycle: Scheduling, Registration, Coding/CDI, Charge Capture/Revenue Integrity, Billing, Denials/Payments, and Accounting. For an even more interesting focus; we are also showing bird’s eye view of Population Health and Care Coordination.
Be on the lookout for the communications about this event coming your way soon!!

In addition to this fantastic winter seminar already scheduled, the Committees are planning student events, a first time Women’s event, and February 15, we are bringing back our very popular Payer Panel. We have commitments from over eight panelists and we have confirmed Illinois Medicaid and Medicare. After the February session comes our big Spring Educational event scheduled for April 26-27, 2017. Please mark your calendars now for these popular sessions!

We are excited about these informative sessions and are very much looking forward to seeing you and your co-workers at the events this year! Thank you again to our volunteers and sponsors for making these events happen! Our sponsors are important to the success of our McMahon Illini group. They are here to help, so please reach out to them and ask how they can help your organization “Thrive”.

Until next time, have a fantastic Veteran's Day, Happy Thanksgiving, Merry Christmas, and Happy New Year! We will see you January 19, 2017 in East Peoria!

Dawn Irion
2016/2017 Chapter President
McMahon-Illini Chapter of HFMA
Upcoming Events

Winter Meeting
January 19th - 20th, 2017 – Winter Meeting, East Peoria

Agenda
- Setting the Healthcare Climate with AHA
- Educational event following the life of a patient account
- Focus on understanding and optimizing the entire cycle:
  - Scheduling
  - Registration
  - Coding/CDI
  - Charge Capture/Revenue Integrity
  - Billing
  - Denials/Payments
  - Accounting

Mark Your Calendar!

Future meetings at the Par-A-Dice:

February 15, 2017—Payer Panel, East Peoria
April 26 & 27, 2017—Spring Meeting, East Peoria
Thanks to the hard work and dedication from our volunteer leaders Keith Bull, Lori Gutierrez, Nikki Harper, Dawn Irion, Rachelle Sauls, and Jennifer Vorreyer, the HFMA McMahon-Illini Chapter received four awards. These four awards were presented at the Annual Chapter Awards Dinner during HFMA’s Annual Institute in June.

First, the Hottum Award. The award was presented to our chapter for the outstanding work in Educational Performance Improvement. Our McMahon Illini Chapter exceeded its goal by 55% by providing quality educational programs and events. One of the events, the McMahon Illini Chapter Student Career Event was inspired by National’s Early Career Task Force to do our part to help guide and educate local students about opportunities and career paths in the healthcare profession. The event was wildly successful!

Two Yerger Awards were received for 2015-2016 and were presented to the McMahon Illini Chapter for efforts in retaining and recruiting members. The Chapter created a way to rekindle HFMA relationships and provide quality education, regardless of the many miles between providers and programs.

Lastly, the Bronze Award of Excellence was presented to the McMahon-Illini Chapter for meeting the number of Balanced Score Card Certifications expected.

About the Hottum Award

C. Henry Hottum Jr. was one of the founders of the Tennessee Chapter of the American Association of Hospital Accountants (which was renamed the Healthcare Financial Management Association in 1968). Hottum served as the chapter’s first President in 1952. He was appointed to the AAHA board as a director in 1953 and became national president from January 1, 1957 to May 31, 1958.

During his term as president of AAHA, Hottum set up the fellowship exam to promote professionalism, revised the Constitution and By-Laws, and developed hospital accounting correspondence courses and textbooks.

Each year, HFMA recognizes chapters who have shown a significant increase in educational performance over the year with the C. Henry Hottum Award for Educational Performance Improvement based on metrics set annually by the Regional Executive Council.

About the Yerger Award

Helen M. Yerger joined William G. Follmer and Robert H. Reeves in 1946 to help create the American Association of Hospital Accountants. She served the association as director of publicity and public relations and helped create the Rochester Regional Chapter. Yerger developed the membership certificate, helped design the association’s first seal, championed the formation of the first AAHA Institute, and wrote the lead article in the first issue of Hospital Accounting.

Each year, HFMA awards chapters who have demonstrated outstanding performance achieved by excellent results in programs, services, and administration in the categories of education, member communications, membership recruitment and retention, collaboration, innovation, member service, and improvement by an individual chapter or multiple chapters or regions.
Mini LTC Held in East Peoria

In August, a mini LTC was held in East Peoria. The volunteers from the McMahon-Illini Chapter gathered to review chapter goals and strategic initiatives.

Additional photos can be viewed at www.mcmahon-illini.org

Discussions regarding the need to change the way the Chapter communicates. A survey was created and sent out in order to help the Board understand what the readers want to hear!
What you missed at the Fall Meeting!

- Kim Byas, Ph.D. providing AHA update
- Dr. Kurt Hopfensperger provided valuable information on the evolving roles of physicians and engaging physicians for improved documentation
- Payor Panel Discussion
- Sara Badshman shared great information on HIPAA and Security
- Rachelle encouraging the group to complete the HFMA certification
- Julie Amen, improving practice options

Be sure to join us in January for the Winter Meeting!
Proud Volunteers displaying the $522 and goods collected for the Crittenden Centers. Thank you to all of the chapter members who contributed - you make a difference!

Pictured—Sara Palmer, Sanyd Garza, and Dawn Irion
ACHIEVEMENT:
A HEALTHIER BOTTOM LINE

AT PNC HEALTHCARE, our fully integrated suite of tools and solutions is built to help drive your bottom line. You’ll have access to our innovative capabilities tailored to your healthcare organization, as well as exceptional advisory services. Whether you need to access capital, mitigate risk or maximize efficiencies, our unique approach can help you stay ahead of change.
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Visit our Health Care Payment Reform Resource Center at bkd.com/payment-reform to learn more.
Extending a very warm welcome to our new McMahon-Illini Members!

**Gregg Davis**  
Physician  
IRCCO  
Princeton, IL

**Joshua A Johnson**  
Director, Patient Financial Services  
Gibson Area Hospital and Health Services  
Gibson, IL

**Matthew Ertel**  
Gibson Area Hospital and Health Services  
Gibson, IL

**Tammy Gorman**  
OSF Healthcare  
Peoria, IL

**Dennis Loy**  
Analyst II  
HSHS Medical Group  
Springfield, IL

**Robin L. Rose**  
Chief Operating Officer/Chief Financial Officer  
Gibson Area Hospital and Health Services  
Gibson City, IL

**Courtney M. Brickner**  
Assurance Manager  
RSM US LLP  
Davenport, IA

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**New Member Policy**

The McMahon-Illini Chapter offers a certificate for free attendance at any of our regular education sessions to all new members. This includes all new HFMA members as well as individuals who transfer from another chapter.

New members who do not receive their certificate within 60 days of joining the Chapter should contact John Zell (309) 665-5770.
Thinking about your business is a big part of ours.

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815-284-2285  |  CLAconnect.com
McMahon-Illini Chapter Congratulates former HFMA President Steve Tenhouse

Tenhouse named top hospital administrator

Wed, 08/24/2016 - 11:00pm | The Journal-Republican

Steve Tenhouse – with more than a decade of experience in healthcare administration in a rural health organization – is seeing his years of hard work and dedication pay off, with recognition by the Illinois Rural Health Association as the 2016 Administrator of the Year.

IRHA’s Rural Health Awards Program, honors outstanding achievement in rural health care service. The award was presented at the Annual Educational Conference at the Keller Convention Center in Effingham during a lunch on Tuesday, Aug. 11.

Steve Tenhouse, CEO of Kirby Medical Center, was nominated and awarded for the Rural Health Administrator of the Year award for his outstanding contribution of major significance to rural health in Illinois as an actively involved health administrator. The nominations included details of Tenhouse’s effort to go above and beyond what is normally expected and for his exemplary dedication to the advancement of the health of the public.

“I’m honored to be recognized by the IRHA, my peers, and all that work in healthcare. Sometimes work in healthcare goes unnoticed or unappreciated. So, to be recognized and appreciated is very humbling,” said Tenhouse.

The staff and administration of Kirby Medical Center, which is located at 1000 Medical Center Drive in Monticello, owe much of their recent success to Tenhouse’s leadership. Since stepping into the role of Chief Executive Officer in 2004, Tenhouse has spearheaded a number of improvements and wellness initiatives, including a replacement hospital, expansion of primary care in the county, and new wellness and healthcare services offered to Piatt County and surrounding communities.

More information on the Illinois Rural Health Association is available at at www.ilruralhealth.org or by calling 217-280-0206.

As printed in the Platt County Community Newspaper
Gibson Area Hospital & Health Services is pleased to be recognized as the top rated hospital in East Central for its overall summary of quality measures from the Center for Medicare and Medicaid Services (CMS). Included in the scoring is data from patient experience surveys, known as the HCAHPS (Hospital Consumer Assessment of Healthcare Providers and Systems) survey, which, according to cms.gov is “the first national, standardized, publicly reported survey of patients’ perspectives of hospital care”. Gibson Area Hospital consistently received higher scores from its patients than any other 4-star hospital in a 50 mile radius. The patient survey includes questions about communication with nurses and doctors, responsiveness of hospital staff, pain management, communication about medicines, discharge information, care transition, cleanliness and quietness of hospital environment, and opinion about hospital recommendation. For more information about Gibson Area Hospital’s survey results, visit www.medicare.gov/hospitalcompare or see the complete Illinois list here.

**Congratulations to Steve Tenhouse,**
**Gibson Area Hospital & Health Services, and OSF St. Joseph Medical Center.**

If you would like an individual or your organization recognized for outstanding achievement, please contact any of the HFMA McMahon-Illini Board members.

**OSF St. Joseph Medical Center | 100 Hospitals with Great Heart Programs 2016**

*Written by Staff | September 15, 2016 | Print | Email*

OSF St. Joseph Medical Center (Bloomington, Ill.)

OSF St. Joseph Medical Center Heart Center turned 25 this year and reports 90 percent of its coronary artery bypass surgery cases are done as beating heart surgery, so patients avoid the heart lung machine. The specialists take a team approach between the cardiovascular surgeons, hospitalists and staff to treat each patient. Truven Health Analytics named OSF St. Joseph Medical Center one of the nation’s 50 Top Cardiovascular Hospitals in 2016. The medical center also received Magnet accreditation from the American Nurses Credentialing Center. In August, OSF St. Joseph Medical Center earned a three-year certification from the American Association of Cardiovascular and Pulmonary Rehabilitation.
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Medical Reimbursements of America (MRA)
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Receivables Management Partners, LLC
State Collection Service, Inc.
Wakefield & Associates
Presidential Positions: Where the Candidates Stand on Health Care, Housing

In seemingly every presidential election, we are told by pundits and politicos that this particular contest represents the starkest choice between two vastly opposed ideologies that we’ve seen in decades. The future, your kid’s future and your grandchildren’s future, depends on its outcome.

Some may argue that such hyperbole is an understatement this year, and, whether that’s true or not, one thing is clear—this election gives voters the choice between the known and the unknown. If Secretary Hillary Clinton wins, the nation will likely stay on its current path—a pursuit of incremental change shaded by Democratic ideologies. If Donald Trump wins, no one is quite sure what will happen, although a look at his proposals and the GOP’s 2016 platform provides some insight.

Health Care

Clinton has made it clear she believes in upholding and improving the Affordable Care Act (ACA). Her website lists several other health care policies including:

- Expanding Medicare by lowering eligibility age from 65 to 55
- Lower prescription drug costs by requiring drug companies to invest in research and development in order to receive taxpayer support
- Incentivize states to expand Medicaid (no specifics given)
- Allow families to buy insurance on the health exchanges regardless of immigration status
- Identify ways to make providers eligible for telehealth reimbursement under Medicare
- Expand federally qualified health centers and rural health clinics
- Double funding for primary-care community health centers

All this amounts to what would be a hefty expansion of the ACA and would likely face stiff resistance from the GOP-controlled Congress.

On Trump’s website, the candidate lists seven policy points regarding health care, with the first being repealing the ACA. The other positions consist of:

- Eliminating laws limiting the sale of insurance across state lines
- Make health insurance premium payments tax deductible for individuals
- Use health savings accounts (HSAs) as the primary program to replace the ACA
- Mandate price transparency from all providers so consumers can compare by price
- Block-grant Medicaid to the states
- Increase competition in the pharmaceutical industry by allowing consumers to purchase drugs from overseas

The last point is one of the few areas where the two candidates agree, as Clinton has also called for allowing foreign drug providers to sell to American consumers.
A recent analysis done by the RAND Corporation, a non-partisan policy think tank, highlights the differences between the two candidates’ health care plans. The study used RAND’s computer microsimulation to analyze the portions of each candidate’s plans with enough detail to model. The analysis found that Clinton’s proposals would increase the amount of people with insurance by between 400,000 and 9.6 million in 2018, while Trump’s proposals would decrease the number of insured by between 15.6 million and 25.1 million.

Digging into each candidate’s specifics, the report found that Clinton’s tax credit proposals would cost approximately $94 billion. Her plan calls for offering refundable tax credits to individuals with private insurance whose premium out-of-pocket costs exceed 5% of income as well as lowering the maximum premium contribution on the marketplace to 8.5% of income. These would cost $90.4 billion and $3.5 billion respectively. Her call to fix the “family glitch,” offering marketplace premium tax credits to families with employer insurance if their contribution to a family plan would exceed 8.5% of income, would add another $10 billion to the deficit. Her proposal to add a public option, however, was projected to lower the deficit by $700 million.

Analyzing Trump’s plans, the study concluded that repealing the ACA would add $33.1 billion to the deficit. Further, implementing tax-deductible premiums would increase the deficit by $41
billion, allowing interstate insurance sales would add $33.7 billion and block-granting Medicaid would add another $500 million.

As for out-of-pocket costs, the RAND study projected Trump’s plan to increase them for ACA enrollees anywhere from $300 to $2,500 per year while Clinton’s tax credits would decrease costs for low- and moderate-income individuals (those making $16,243 to $29,425 for an individual, $33,465 to $60,625 for a family of four) by an average of 33%. For example, under current law an individual with an income of $41,580 would be required to pay $4,017, whereas under Clinton’s plan that individual’s contribution would be reduced to $3,534. It should be noted that there were elements of Trump’s plans which could not be modeled due to lack of detail. The authors stated that if either candidate was to release further details that would alter the figures, they would run a new simulation and release new numbers.

The Future of Obamacare

Once again, the ACA is approaching a defining moment. After surviving a presidential election and two U.S. Supreme Court decisions, Obamacare is again in the political crosshairs. If Trump wins, some sort of dismantling will at the very least be attempted. Of course, taking insurance away from 20 million people, even if you have a plan to get it back to them in a different form, won’t be easy. If Democrats take control of the Senate, it will be very difficult if not impossible for a President Trump to pass anything that harms Obama’s signature achievement. If Trump wins and Republicans keep the Senate, Democrats will still have the power of the filibuster at their disposal.

Likewise, if Clinton wins, regardless of what party controls the Senate, Republicans will likely remain fiercely opposed to the ACA and could use the filibuster to prevent most of her major proposals, such as instituting a public option. What might be possible under a President Clinton, according to reporting from Modern Healthcare, is an effort to increase exchange enrollment through system reforms and aggressive outreach, as well as increase subsidies for low-income patients. If Trump wins, most expect him to pass the issue to Speaker Paul Ryan, who would likely be unable to actually repeal the ACA but would try to chip away at it by attacking the individual and employer mandates, the Center for Medicaid and Medicare Services (CMS) Innovation Center, and the Medicare Independent Payment Advisory Board.

Of course, for the optimist, there is always a chance that the combination of a new president and national fatigue over fighting the ACA for seven years would inspire a compromise, regardless of who wins. A possible bargain might consist of using Section 1332 of the ACA, which allows the federal government to grant waivers to states to leave the ACA exchanges and use their own methods to reach coverage and cost control goals. This would please conservatives as it takes power away from the federal government and gives it to states. In exchange, Democrats would likely ask for more cost-sharing subsidies for low-income enrollees.
Housing

Affordable multifamily housing issues rarely surface during general election campaigns and this year is no different. There is no mention of housing on Trump’s website. The Republican platform for 2016 stops short of calling for the abolition of Fannie Mae and Freddie Mac, but it does describe both as “corrupt business models” whose usefulness should be reconsidered. The platform calls for the end of government mandates that required Fannie, Freddie and federally-insured banks to satisfy lending quotas to specific groups, calling such practices discriminatory. It opposes the Obama Administration’s Affirmatively Further Fair Housing (AFFH) rule which it says undermines local zoning laws and gives too much control to the federal government. The goal of AFFH is to “address significant disparities in access to community assets, to overcome segregated living patterns and support and promote integrated communities” which it aims to do by requiring a new assessment of fair housing by HUD program participants.

Clinton has a housing section on her website that promotes increasing incentives for new development and strengthening programs that give low-income renters more options outside of high-poverty areas. Although she doesn’t mention the U.S. Supreme Court disparate impact decision last summer that makes it easier for developers to build low-income housing in high-income neighborhoods, it’s clear she supports it. Further, she recently penned an op-ed in the New York Times on poverty that advocates for the expansion of the low-income housing tax credit (LIHTC).

Clearly, the outcome of this contentious presidential election will have substantial ramifications on the health care and housing industries. The good news is, after almost two years of discussion and campaigning, the finish line is in sight.

Steve Kennedy is a senior managing director with Lancaster Pollard in Columbus. He may be reached at skennedy@lancasterpollard.com.
Healthcare Consumerism Study Shows Patients Need Financing Options

Bruce Haupt
858-200-9200
baupt@clearbalance.org

Where patient satisfaction was once solely measured from a clinical standpoint, patients are increasingly judging and rating their satisfaction with healthcare organizations by the amount of repeat business and referrals they bring.

Since 1992, ClearBalance has partnered with health systems to provide consumer-centric affordable care while improving net recovery of patient pay and overall financial performance. We recently conducted a study to measure awareness, loyalty and satisfaction with that program.

The second annual Healthcare Consumerism Study was sent out in August, completed by nearly 2,700 patients. Of those survey respondents, healthcare cost was undeniably a concern: 79 percent stated that it was a factor when selecting a physician, and 81 percent stated the same when choosing a healthcare provider.

Relative to their cost concerns, one out of every three consumers stated they would delay care if a loan program wasn’t made available to them. So, while cost is a factor for patients when selecting a specific physician or healthcare provider, the availability of a loan program is still critical in the decision-making process.

One survey respondent said, “It’s helpful not to have to pay a large, unexpected medical bill all at once.” This seemed to be a common opinion amongst respondents, as an overwhelming 91 percent stated that healthcare was an expense that required financing of more than 12 months.

Of those who use the ClearBalance program, more than half reported their annual insurance deductible to be $3,000 or less. Seventy-two percent of respondents depended on their employer-provided insurance to help cover
medical costs. A loan helps to fill the gap for out-of-pocket expenses, regardless of the cost.

“A surprising amount of people with private insurance . . . simply do not have the resources to pay their deductibles,” said Drew Altman, president of the Kaiser Family Foundation.

Age groups among survey respondents were distributed fairly equally, with those between the ages of 35 and 50 (Generation X) making up 31 percent of respondents, those between the ages of 51 and 61 (Baby Boomers) making up 28 percent, and those between the ages of 22 and 34 (Millennials) making up 22 percent. Individuals between the ages of 62 and 72 totaled 16 percent; those over the age of 73 came in at 2 percent.

“The ClearBalance program is a great option to manage healthcare expenses in conjunction with my healthcare savings account,” said a survey respondent.

Loyalty is an important barometer of future business. According to The Advisory Board Company, patients who return to a healthcare organization within 18 months generate six times more revenue for that provider. Making care affordable through a loan program is a clear benefit that will enhance goodwill, loyalty and referrals within a healthcare provider’s consumer and community base.

Nearly all (97 percent) survey respondents stated that a healthcare provider offering the ClearBalance program was providing a community benefit. Ninety percent of respondents said they would likely return to a healthcare provider that offered the ClearBalance loan program, and 88 percent said they would likely recommend the healthcare provider to friends and family.

Many survey respondents were “repeat users” of the program, taking advantage of the revolving line of credit made available to them to cover additional medical expenses. Ninety-five percent of respondents said they would use the ClearBalance program to help cover their cost of future medical needs.
Our attention and focus to managing only healthcare-related credit accounts is evident in continued high performance and satisfaction scores, as noted in this year’s survey findings. Nearly half of the respondents have called our Patient Experience Center to ask questions about their ClearBalance account. Of that group, 95 percent were very satisfied with the representative they dealt with.

Our online patient portal allows patients to check their account balance, make a payment or update their information at their convenience. Eighty-five percent of respondents utilize this service to keep their healthcare financing in order.

There is a high degree of loyalty and satisfaction with our program and services, as reflected in the overwhelmingly positive ratings in this year’s responses. This goodwill extends to healthcare providers that offer ClearBalance as well.

“'I’m happy there’s a reasonable payment method to manage medical debt versus being turned over to a collection agency,” said a survey respondent.

Our program enables patients to easily pay their medical costs and engenders loyalty, positioning the health system as the care location of choice within the community. There is a rapidly growing need for healthcare financing. ClearBalance has been filling that need for patients and providers for over 20 years.
Important Links:

Visit the HFMA website:
http://mcmahon-illini.org/

Volunteer Opportunities:
http://mcmahon-illini.org/leadership/committees/volunteer-opportunities/

Upcoming Events:
http://mcmahon-illini.org/events/upcoming/

Editorial Policy

THE E-BEACON is published periodically for the members of the McMahon-Illini Chapter of the Healthcare Financial Management Association. Responsibility for the content of THE E-BEACON lies solely with the chapter’s Newsletter Committee. Opinions expressed in this publication are solely those of the authors, and do not necessarily reflect the views of the Newsletter Committee, the McMahon-Illini Chapter, or the Chapter’s leadership.

We welcome the submission of material for publication. Articles may be e-mailed to Holly Henline at: hhenline@grahamhospital.org

Material should be in WORD format. The Newsletter Committee reserves the right to edit any submission for length or clarity, and to accept or reject any submission.

Deadlines/Publication Dates/Addresses Changes

Deadline for submission of materials and advertisements for the next E-BEACON is January 15, 2017. The next E-BEACON is scheduled to be published by February 10, 2017. If your e-mail address changes, please notify Holly Henline at (309) 649-6894 or email to hhenline@grahamhospital.org

“Don’t forget each published article is worth 2 Founders Points.”