

## 2019 NAHRI Advisory Board Candidates

### Candidate 1



Tracy Cahoon, MBA, CHRI

Director of Revenue Integrity, Southwest General Health Center, Brecksville, Ohio

### Background

Cahoon is the director of revenue integrity for Southwest General Health Center, a non-profit, 350-bed community hospital serving the greater Cleveland area.

She joined Southwest General in 2003 and has over 15 years of experience in healthcare finance and revenue cycle. During her time at Southwest, Cahoon has held various positions in the finance and revenue integrity departments, including accounting coordinator, financial and senior financial analyst (with responsibilities over the hospital annual budgeting system, service line reporting and the cost accounting systems), and revenue integrity project manager, supervisor, and manager. She has proven success in price setting, chargemaster optimization, and charge capture projects, resulting in millions of dollars of additional net revenue over the years. In her current role, Cahoon oversees the revenue integrity department which consists of the revenue integrity supervisor, charge capture specialists, billing analysts, and hospital cashier.

Cahoon is an active member of HFMA and currently serves as a director of the board. She earned a Bachelor of Science in business administration/finance from Baldwin Wallace University and a Master of Business Administration at Cleveland State University.

### Reason(s) for board interest

- This organization fills a void that other healthcare professional organizations leave.
- Revenue integrity is near and dear to my heart. I started out as a one-man show in my facility and have grown to an eight-person team.
- Our industry is so dynamic and changing so quickly, I want to network and brainstorm and work with some of the brightest in our field to help others in our profession be successful and efficient.
- I think in the past, at least for my hospital, revenue integrity was seen as a place to find extra money for the organization through various charge capture/pricing optimization projects. I think we are moving away from that in some respects and revenue integrity has become more about protecting and preserving our net income by ensuring compliant charging practices, implementing effective policies, and providing education to our clinical staff.

## Candidate 2



Carole Hokeah, MS, RN, CCS, CPC, CSSGB

Director of Value Analysis, Hardin Memorial Hospital, Elizabethtown, Kentucky

### Background

Hokeah has been a registered nurse for 33 years and her clinical experience includes the intensive care unit and surgical services. For the past 22 years she has had progressive management experience, including management of a denials management program, reimbursement programs, revenue optimization, and cost management. She obtained her CPC coding certification in 2005 and her CCS coding certification in 2006. Additionally, she is a Certified Six Sigma Green Belt. She is a member of the Provider Round Table.

Currently, she is the director of value analysis for Hardin Memorial Hospital in Elizabethtown, Kentucky. In that role she is responsible for chargemaster maintenance, charge capture, revenue observation, and payer denials.

### Reason(s) for board interest

- To contribute my knowledge in helping develop NAHRI into a well-known and respected organization.
- For professional growth opportunities and networking.
- To stay up to date on the latest revenue Integrity related topics.
- I believe that revenue integrity will evolve to be a position that has more broad scope and will include denials management, charge capture, and even billing and coding activities. I would leverage my board position to bring recognition of the NAHRI educational offerings and get the message out to more facilities.

### **Candidate 3**



Steven Greenspan, JD, LLM

Vice President of Regulatory Affairs, Optum360, Newtown Square, Pennsylvania

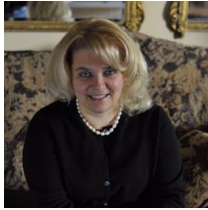
#### **Background**

Greenspan is vice president of regulatory affairs at Optum Executive Health Resources (EHR) in Newtown Square, Pennsylvania. He is responsible for overseeing regulatory research and hospital advocacy efforts and collaborates closely with EHR's appeals management teams to offer support on complex Medicare, Medicaid, and commercial appeals matters. During his 18-year career, Greenspan has overseen the adjudication of more than 200,000 appeals and personally authored more than 10,000 appeal decisions. Prior to joining EHR, he served as vice president and project director for MAXIMUS Federal Services, Inc., overseeing the company's Part A East QIC project.

#### **Reason(s) for board interest**

- Wish to collaborate with other professionals.
- Provide expertise to the organization.
- Help grow the organization.
- Hopefully we move toward a system where there are less inappropriate denials, where a provider can rely on the revenue they have billed after having expended resources to provide necessary services. From the standpoint of professional development, NAHRI must continue to provide excellent educational materials and perhaps can offer some advance certifications.

#### **Candidate 4**



Lisa Kanivetsky, BA, CPC, CHRI

Revenue Integrity Manager, Hennepin Healthcare, Minneapolis, Minnesota

#### **Background**

Kanivetsky is Hennepin Healthcare's (HHC) revenue integrity manager. After graduating from the University of Minnesota she spent a few years trying out different opportunities until the revenue cycle and IT bug caught her. Prior to coming to HHC, Lisa worked at Allina for 13 years.

Last year at HHC, she found \$124M in lost revenue, implemented Revenue Guardian and charge automation from ED NoteWriter, developed workflow for non-covered services and implemented pricing transparency. Kanivetsky holds certifications in both Revenue Integrity (Epic) and CPC (AAPC).

#### **Reason(s) for board interest**

- I would like to see the revenue integrity profession grow and gain much deserved recognition for the amount of information one has to know.
- I would like to be able to mentor and help my fellow members grow in the profession.
- I think it would be fun to be able to shape the future of the revenue integrity profession.
- I see the revenue integrity role growing and becoming more recognized in the next five years. I would work on developing tools which could assist revenue integrity specialists/analysts in not only performing their jobs but also growing their skill sets.

## Candidate 5



Jon Menard, CPC, COC

Principal, Integrated Revenue Integrity, Marlborough, Massachusetts

### **Background**

Prior to forming Integrated Revenue Integrity (IRI), Menard spent 10 years with Bolder Healthcare/The ROI Companies managing consulting across all areas of the revenue cycle. His areas of expertise include chargemaster reviews, charge capture methodologies, revenue integrity audits, and process improvement. Menard's previous management experience in patient accounting focused on all third-party insurance issues, including billing, coding, and denial management. He has extensive knowledge of Medicare regulations and continually participates in provider education efforts that include billing and reimbursement workshops.

Menard is a certified hospital and professional coder. On numerous occasions he has presented, both regionally and nationally, to groups including the Healthcare Financial Management Association (HFMA) and the American Association of Healthcare Administrative Management (AAHAM). He is currently on the Board of Directors for the Massachusetts chapter of AAHAM.

### **Reason(s) for board interest**

- I am passionate about revenue integrity.
- I am excited about the future of revenue integrity and want to be a part of its evolution.
- I very much enjoy working with other revenue integrity professionals to fine tune my knowledge and share what I have learned.
- I see revenue integrity as a fairly new area which seems poised to grow rapidly over the coming years. More and more facilities are realizing the importance and the value of incorporating a revenue integrity department or team in their facilities. I foresee the NAHRI Board being an opportunity to continue to promote and assist the development of this field.

## Candidate 6



Kathryn J. Noorbakhsh RN, BSN, CPC, CPC-H

Director, Corporate Compliance and Revenue Analysis, University of Pittsburgh Medical Center, Pittsburgh, Pennsylvania

### Background

Director, Corporate Compliance and Revenue Integrity (2017 to present)

- Lead on coordination of Regulatory Rule Comment
- All previous duties of Revenue Analysis position

Director, Revenue Analysis (2013 to 2017)

- Coordinate team of six focusing on revenue optimization
- Coordinate new programming
- Liaison between clinical operations and finance

Project Manager, Finance Administration and Compliance Officer for UPMC Mercy and Magee Women's Hospital of UPMC (2009 to 2013)

- Oversee the development and implementation of new technologies, programming, denial management, and the revenue cycle to ensure compliance and financial sustainability
- Develop and manage various financial and operational trend reports outlining key indicators for achievement of organization's financial performance goals
- Assist with establishing policies and procedures in support of compliance and ethics activities
- Keep abreast of and implement all healthcare changes including federal and third-party payer regulations
- Primary financial lead for implementation of an electronic health record
- Optimization of charge capture

### Reason(s) for board interest

- I feel this is an area of need. Facilities need to have staff that understand changing regulations.
- In order to continue to provide care, facilities must be aware of charges and optimize reimbursement.
- I feel I have experience from a large health system with broad service lines

## **Candidate 7**



Jeff Pilato, MHA, RTR, CPC-H

Revenue Integrity Leader, Piedmont Health System, Woodstock, Georgia

### **Background**

Pilato is a revenue integrity charge capture leader with broad knowledge of third-party payment policies, reimbursement and Medicare compliance rules. He has extensive experience redesigning revenue integrity departments to optimize revenue. Additionally, over the past 20 years, he has developed over 350 chargemasters. He began his career in healthcare as a radiologic technologist serving multiple modalities and worked as the materials manager for a large surgery center before pursuing his Master of Health Administration at the University of Saint Francis in Joliet, Illinois. Pilato has also served as a speaker and questions advisor for AHIMA and has several published articles.

### **Reason(s) for board interest**

- To help develop a revenue integrity network.
- To assist other revenue integrity professionals.
- To help develop the future of revenue integrity.
- I see revenue integrity gaining more respect with regard to preventing revenue leakage. I would leverage my position and experience to assist in the development of new tools and report that improve charge capture and reduce revenue leakage.