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# HFMA Today

*Official Newsletter of the North Dakota Chapter of the  
Healthcare Financial Management Association*

Volume 4, Issue 10 April 2002

## Presidents Message

by Don Schott



As the 2001-2002 HFMA fiscal year quickly ends I want to thank all of the Chapter's leadership staff for a very successful and rewarding year. Our leadership team met a year ago and identified three key initiatives to guide our Chapter's focus and energy. I am very pleased with the strides made in these three areas, namely, electronic communications, membership recruitment, and financial sponsorships. Electronic communication to our members was enhanced by promoting educational events during the year via email and the unveiling of our inaugural website in January. Our membership count is about where it was at the beginning of the year. At face value that does not look too impressive as far as recruitment

of new members is concerned. However, that does not illustrate the true picture. The North Dakota Chapter's current membership is 150. Shortly after the beginning of the fiscal year in May, our membership dropped by 18 members, a 12% decrease from our starting count. Much of this loss was due to the continuous turnover of healthcare personnel in the state and the closure of our top supporting organization membership wise, Banner Health System in Fargo. The recovery of our early loss in membership is an incredible accomplishment. The membership committee led by co-chairs, Becky Hansen and Mike Schumacher, did a fantastic job and are to be applauded for their efforts. They have worked very hard to ensure that our membership count stays strong. A few of our meetings this year were financially supplemented by sponsoring organizations. Although some progress was made this year, as a Chapter, we feel this is an area that possesses much opportunity. Accordingly, Steve Ilse, incoming-president, has identified this area as one of the key initiatives to further explore in the upcoming year.

The keynote speaker at the recent Concordia/HFMA conference in Fargo, Matthew Carnahan of the Advisory Board Company, outlined a new series of challenges facing the health care industry. Resurgence in demand for health care services will challenge our existing infrastructure. This resurgence, driven mainly by the "baby boomer" generation entering the age of increasing utilization of services, will severely test our system financially and demographically. A rapidly aging population creates dilemma in that utilization and available workforce trend in opposite directions. Ironically, when the demand for health care is at its apex the supply of health care workers will be near its lowest. This predicament, along with affordability issues, will put tremendous pressures on the current health care system. In order to avail, payers, providers, and health care consultants will have to work together to better understand the needs of all involved.

I can think of no better organization that brings all of the health care players together to educate, inform, and build an environment conducive for understanding than that of HFMA. HFMA presents each of us many opportunities. Those that seek them will benefit tremendously both on a professional and personal level. Again, I want to thank the officers and board members for all of their hard work to make this year a success. It has been a very rewarding year. Professionally, I have gained much knowledge via the educational conferences and peer networking opportunities. But, even more important, personally, I have developed many long-lasting friendships with Chapter members and leadership. That is something I will treasure.

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*Thank you very much.  
Don Schott, HFMA  
2001-2002 President*

## AHIMA Launches New Entry-Level Coding Certification

The American Health Information Management Association (AHIMA) has announced the development of a new entry-level coding credential, the Certified Coding Associate (CCA). New coders can earn the CCA credential by passing a computer-based exam demonstrating their competency in assigning diagnosis and reimbursement codes using ICD-9-CM and CPT/HCPCS codes. AHIMA will begin administering this new certification exam in September.

Linda Kloss, AHIMA CEO, stated that the creation of this certification "aims to increase the number of qualified new coders to meet unfilled workforce demands."

To qualify for the exam, candidates must have earned a U.S. high school diploma or have an equivalent education background. It is also strongly recommended that candidates have at least six months experience in a healthcare organization applying ICD-9-CM and CPT coding conventions and guidelines or have completed an AHIMA-approved coding certificate program or other formal coding training.

## UPL Battle Continues

*By Jim Alexander, HFMA Technical Director*

CMS agreed on March 13, 2002, to delay the effective date of the controversial Medicaid Upper Payment Limit (UPL) final rule, but the delay provides breathing room for only a month. The short delay comes on the heels of a lawsuit filed by several hospital groups and individual hospitals to block implementation of the final rule. The rule, which was originally scheduled to take effect March 19, 2002, will reduce the UPL on state Medicaid payments from 150 percent to 100 percent of Medicare payments for similar services. The rule's new effective date is April 15, 2002. The plaintiffs, meanwhile, continue to seek a permanent injunction against implementation of the UPL regulation. The U.S. District Court in Little Rock, Arkansas, is considering the case.



## HFMA names new Chairman

Phyllis A. Cowling, FHFMA, CPA, was elected to serve as HFMA's voluntary Chairman of the Board of Directors for 2002-03. Her term will begin June 1, 2002. Cowling will be inducted this June at HFMA's Annual National Institute in Seattle, Washington. Cowling's first act as National chairman will be to set the tone for the coming year. She has selected the theme Create the Future. Cowling says Create the Future is a theme of action and energy. "It centers on the creativity we must use to solve many of today's challenges," she says. "It also encourages us to actively prepare for the future – the future of HFMA, of our healthcare organizations, of ourselves. In today's ever-changing healthcare industry, it would be easy to sit back and take whatever comes our way. But we may not like the outcome. It's better to proactively participate in designing the future, rather than leaving everything up to fate." Cowling continues, "The challenges of health care – especially those of healthcare finance – are not going to disappear. As such, we must continually cultivate individual and collective creativity to develop solutions to those challenges. Although we, as humans, are often more comfortable with old problems than with new solutions, we must nevertheless seek new ideas. As healthcare financial managers and leaders, we must think – and act – with imagination and innovation. And doing so requires creativity." According to HFMA President and CEO Richard L. Clarke, FHFMA, Cowling is a model example of what many healthcare finance professionals strive to become. "Phyllis leads by example. She possesses personal and professional qualities that mirror the goals and standards of our organization." In addition to her duties as Chairman, Cowling is Vice President and Chief Financial Officer at Baptist St. Anthony's Health System, Amarillo, Texas. A member of HFMA since 1987, Cowling's involvement with the National Association includes serving as National Chairman-Elect (2001-02), National Secretary/Treasurer (2000-01), a member of the Board of Directors (1997-02), the Executive Committee (1999-01) and a Chapter Liaison Representative (1996-97). Cowling also was a member of the HFMA Board of Examiners (1994-98), including one year as chair. She is a recipient of the Follmer Bronze, Reeves Silver, Muncie Gold, and Founders Medal of Honor merit awards for outstanding service.

## CMS Updates NUBC on HIPAA Readiness

*By Scott Johnston*

The National Uniform Billing Committee (NUBC) met for its quarterly public meeting on February 14 and 15, 2002 in Baltimore, Maryland. The NUBC brings together provider and payer representatives to provide a national perspective to the data content and format standards that are routinely used for the reporting of institutional healthcare claims, including transactions enumerated within HIPAA. Here are a few of the highlights from the meeting.

**Transactions Extension Update:** Organizations that will not be filing for the transaction standards implementation extension under the Administrative Simplification Compliance Act need only to test the transactions outlined in the original standards, CMS explained at the meeting. Such entities don't need to test for anticipated modifications. This is because CMS was unable to formally publish the modifications in time to allow for statutorily required review and implementation periods to occur prior to the October 16, 2002, deadline.

Furthermore, even though some organizations may be sticking to the original October 16, 2002, implementation deadline, CMS has indicated to the NUBC that it will not be ready by then to implement several transactions standards, including the 837IB, 837COB, and the 4010a.

# 13th Annual Eide Bailly Health Care Symposium Fargo, June 13th, 14th

## Thursday, June 13th

9:00 - 10:30 • Assessing Your Organization ... The Road to Operational Efficiency

Speaker: Ralph Llewellyn

Today's shrinking reimbursement forces facilities to review their cost structure. Often this review results in "across the board" cuts or implementation of staffing benchmarks. Used alone, these methods of cost control are prone to fail. Effective change occurs when a review of facility processes is used along with benchmarks. This session addresses implementation strategies and the proper use of benchmarks as a tool for success.

10:45 - Noon • A Customer Sensitive Approach to Accounts Receivable Management

Speaker: Chuck Seviour

This session covers the accounts receivable process from initial patient contact through final payment using a customer-sensitive approach. Chuck will explore such topics as pre-admission patient contact, co-pay collections, billing and follow up for insurance and self-pay. He will also share when or if an account should be turned over to a third party for collection.

1:00 - 2:00 • Your Role in Customer Service

Speaker: Chuck Seviour

You have a vital role in your organization. You are a public relations representative, a valuable team member and an important part of your facility's successful delivery of quality health care. This session will help you recognize and reinforce your personal strengths and recognize your value to your team. Chuck will help teach you to reach out to and build bridges with coworkers and customers in a positive, effective way.

2:15 - 5:00 • Concurrent Sessions

Critical Access Hospital Reimbursement

Opportunities

Speaker: Ralph Llewellyn

The Critical Access Hospital program provides significant reimbursement opportunities for health care providers. But what does cost reimbursement actually mean and how does it work? What are the pitfalls and how do they impact your facility? This session focuses on the Medicare Cost Report and how it impacts decisions under the CAH program.

APCs: An Update

Speaker: Mark Hollan

This session will include an overview of Medicare's APC system. It will highlight the changes for 2002, review many common problem billing areas and demonstrate why many providers aren't receiving all of the reimbursement they are due under this complex payment system.

5:00 - 7:30 • Social

## Friday, June 14th

8:00 - 9:50 • The Law and You

Speaker: Health Care Attorney

A local attorney will address legal issues of importance that affect health care, including Stark Laws, HIPAA, fraud and abuse, compliance, exclusions, etc. Bring your questions.

10:00 - Noon • Provider-Based Woes

Speaker: Mark Hollan

It has been two years since Medicare issued the controversial final rules on provider-based entities. In addition, the "grandfathering" and "temporary treatment" clauses covered by BIPA expire on Oct. 1, 2002. This session reviews the provider-based criteria, the application process and the types of provider-based entities that are affected. There will also be a discussion on the changes providers must make to maintain provider-based status after Oct. 1, 2002.

**Ramada Plaza Suites Hotel (701) 277-9000**  
**For registration information email:**  
**[speterson@eidebailly.com](mailto:speterson@eidebailly.com)**

## Sec to Propose Improvements to Financial Reporting System

The Securities and Exchange Commission (SEC) announced February 13, 2002, that it will propose changes in corporate disclosure rules as the first in a series of steps designed to improve the financial reporting and disclosure system. The reform plan covers financial reporting and disclosure requirements, accounting standard setting, regulation of the auditing process, and profession and corporate governance.

## Ambulance Fee Schedule Final Rule Contains Major Changes

CMS has published the final rule establishing an ambulance provider fee schedule, under which ambulance providers will be paid based on a pre-established fee for each service they provide. The new fee schedule, which will replace the current method of payment based on costs or charges, will become effective on April 1, 2002. The final rule establishes seven categories of ground ambulance services, ranging from basic life support to specialty care transport, and two categories of air ambulance services. Payment for each category is based on the relative value assigned to the services, adjusted to reflect wage differences in the country.

## CMS Launches Second Attempt at Discount Drug Cards

CMS has published a proposed rule on the second rendition of its Medicare prescription drug card program. CMS' first effort was derailed when the National Association of Chain Drug Stores successfully sued for an injunction. This second proposal differs from its predecessor by requiring card sponsors to obtain substantial manufacturer rebates or discounts, requiring that these rebates or discounts be shared with beneficiaries through pharmacies, and by opening the possibility that the program's administrative consortium coordinate efforts with an advisory body. The new proposed rule also includes an advance notice of proposed rulemaking outlining steps that CMS may undertake to support state efforts at making affordable prescription drugs available to Medicare beneficiaries.

## Planning your career is not an option

If you don't plan your career, someone else will. To assist you in the career planning and transition process, HFMA offers a number of valuable services to its members.

### Look to the Web

Pepper Zenger, HFMA's director of career development, assists members who are unemployed or in search of career advancement. For those interested in ongoing career management, Zenger offers several HFMA services. These can be accessed quickly through the HFMAWeb site, [www.hfma.org](http://www.hfma.org). On the site, select careers, which will present several options, including CareerTips, Job Bank, and Exec-u-Trak. Career Tips. The CareerTips area is updated with career information as it becomes available. The area contains

information on important career considerations, such as salary surveys and job search suggestions. Job Bank. The Job Bank offers classified advertisers in Healthcare Financial Management magazine the opportunity to place their ad on the HFMA Web site. About 95 percent of all the magazine's classified ads are listed in this area, which is updated weekly. Each ad is dated, allowing users to quickly locate new additions. Exec-u-Trak. Exec-u-Trak is a free members-only service that lets members post their qualifications electronically on the HFMAWeb site. This resume referral service is completely confidential and serves both job seekers and employers. From this area, members can enroll, update their profiles, or review positions currently listed. Enrolling in Exec-u-Trak is easy, requiring only the completion of a confidential on-line questionnaire. Hiring organizations can then search the database and select potential candidates based upon very specific criteria pulled from the questionnaire, such as healthcare industry experience, certification, technical specialties, and compensation. Employers choose their candidate, notifying HFMA, which contacts them by the Exec-u-Trak staff for permission to release names and resumes. Members' names and personal information are never released to any employer without prior permission from the member.

### Chapter Job Contacts

Many chapters have job contacts listed under the Chapters button on HFMA's Web site. This can be an effective jobsearch tool, even if members are looking outside their chapter area. For example, if an employer has a position that does not require a national search, HFMA National directs the employer to the local chapter job contact. Search firms also are frequently directed to the chapter job contact.

### Career Counseling and Testing

To focus their efforts in the most appropriate direction, job seekers may opt to take advantage of professional career testing and counseling through an Association-contracted consultant. These services require a small fee—usually less than \$100—and career counseling is available via telephone to keep costs reasonable. For those seeking other career services, Zenger advises looking in the HFM Resource Guide, which lists more than 35 search firms. Another source of career information is the recruiting firm of Korn/Ferry International, which operates an electronic executive search service for management professionals at [www.futurestep.com](http://www.futurestep.com). Working through the registration at this site will take about two hours, but the job seeker will receive customized career feedback, including his or her salary market value.

## HFMA Submits Regulatory Reform Comments to HHS

HFMA submitted recommendations to HHS Secretary Tommy Thompson on March 4, 2002, concerning some of the regulatory reforms that HFMA members believe the agency should pursue. Results from a February 2002 survey of HFMA members were instrumental in forming HFMA's recommendations. HFMA encourages members to continue to send input on areas of opportunity to reduce regulatory burden. Please e-mail comments to HFMA Technical Director Jim Alexander at [jalexander@hfma.org](mailto:jalexander@hfma.org).

## HFMA Partners with Aon to Offer Innovative Web-Based Healthcare Solutions

The Aon Healthcare Alliance has formed a partnership with HFMA to offer innovative on-line management tools that help healthcare entities improve financial performance. These web-based business intelligence and human capital solutions—MedeFinance, Absence Cost Estimator and Turnover Cost Estimator—are designed to help healthcare executives achieve their goals by tackling industry challenges, such as revenue cycle management, human capital management, and strategic financial planning. The MedeFinance solution includes a suite of electronic tools that provide a standardized view of a healthcare provider's revenue cycle. By creating an enterprise-wide platform for information sharing, MedeFinance consolidates disparate data and organizes key information into useful business intelligence. Click here for more information.

HFMA Conferences and Seminars  
Annual National Institute  
June 16-20, 2002  
Washington State Convention & Trade Center  
Seattle, WA

Four days of focused, relevant, and real-world educational opportunities await the serious healthcare financial professional at the ANI 2002. More than 60 in-depth, interactive sessions will be held. The nation's top experts in healthcare finance will enlighten you with information and provide answers to the questions interesting you the most. Networking opportunities will allow you to exchange experiences and valuable knowledge with your peers. For more information and to register, go to <http://www.hfma.org/education/ani.htm>.

## HFMA CFO Exchange Provides Practical Advice on Achieving Excellence

*By Scott Johnston, HFMA Technical Director*

Lots of health system executives would like to make their organization among the best; attendees of the 2002 HFMA CFO Exchange got practical advice on how to do so. A general session entitled "Driving Results Through Operational Excellence" told the story of how Baptist Health Care undertook a series of cultural transformations to fuel its successful "Journey to Excellence."

The HFMA CFO Exchange, Healthcare Today and Tomorrow: Turning Challenges into Opportunities, was held at the Westin Innisbrook Resort Regent, Palm Harbor, Florida, March 3 through 5. The conference was planned in part by the CFO Forum. More than 300 senior financial executives attended, many of whom said they were impressed by the challenging programs, excellent speakers, and prime location. The case study on Baptist Health Care's drive for excellence was a particularly popular session.

## HFMA Member Information Available Online

Member information is available through the internet and the HFMA website. As a result of this access, the annual Founders Points worksheets were not mailed out this past year. In addition to this, you can also update your personal information while you are online.

To access the Founder's Points totals for 2000-2001 and the rest of the information that the National HFMA Organization has on you, go on line to:

<http://www.hfma.org/members/memdirect.htm>

To access the information that is available, you will need to have your 7 digit HFMA membership number available. If, after reviewing this information, you have a question on the makeup of your points, please feel free to contact me either by phone at (701) 265-6281 or via email at [les.wietstock@cavalierhospital.com](mailto:les.wietstock@cavalierhospital.com).

In addition to this, if you have not considered acquiring a certification, please take some time when you are on the HFMA Website to do some research on the matter and consider obtaining a certification today!!!!

Contact Person: Les Wietstock  
Founders Points Committee Chairperson  
Date: April 24, 2002



*CMS Updates continued from page 2*

To read the bill extending the transaction standards, "The Administrative Simplification Compliance Act," go to <http://thomas.loc.gov> and search on bill HR 3323.

**Alternate Medicine Codes:** Several new four-digit revenue codes were approved for alternate medicine. This marks the first time that four-digit codes were assigned. Providers, payers, and clearinghouses should be prepared to update their systems to be able to process the longer code. These new codes will also be a part of the forthcoming UB02.

**New Trauma Codes:** In August, the NUBC agreed to add a trauma "patient type" (FL 19, Code 5) to the four already in place (emergency, urgent, elective, newborn). These new codes will identify trauma patients for all types of data collection and quality evaluation. These codes indicate when an "activation" of a trauma unit has taken place. In addition, the NUBC approved separate revenue code (68X) for trauma patients with a modifier for the level of trauma center. A tentative November 2002 implementation date has been set. HFMA will provide additional guidance and education on these new codes over the next few months.

**Miscellaneous Items:** A petition to change a misleading definition for the patient status code for the discharge/transfer of a patient to another rehabilitation facility was approved. CMS will issue a new definition and clarifications shortly. Also, several national codes for sterilization and abortion were created to replace multiple state and local codes for Medicaid. For more NUBC information, go to <http://www.nubc.org>.

## Chapter presidents and presidents-elect participate in conference calls

On February 13, more than 45 HFMA chapter presidents-elect participated in an hour-long conference call facilitated by Jeff Walla, FHFMA, CPA, chairman of the Chapter Services Council and member of HFMA's Board of Directors. The call focused on a number of topics that are important to presidents-elect as they prepare to take office on June 1. Topics included a Task Force on Organization, Governance and Structure (TFOGS) overview by Rich Henley, FHFMA, FACHE, chairman of the task force. HFMA's chapter relations team provided information on what chapter leaders can expect at this year's Leadership

Training Conference (LTC) on April 21-23 in Puerto Rico. Members of HFMA's Chapter Advancement Team provided tips on strategic planning and an overview of just what is a CAT consultation and how chapters can take advantage of this service. A question and answer session completed the program. Bob Broadway, FHFMA, led the strategic planning discussion. Additional CAT members on the call included

J Evans, FHFMA, Gail Holt, FHFMA, Mike Johns, FHFMA, CPA, Libbie Loux, FHFMA, Debby Sieradzki, Dave Timpe, FHFMA, CPA, and Woody White, CPA. On March 6, 35 HFMA chapter presidents also participated in a conference call. They exchanged best practices in the areas of writing an annual report, succession planning, and the Yerger Award process. Past and present chapter presidents shared tips and best practices from their respective chapters. Annette Baker, FHFMA (Alabama) and Ken Kolb (Colorado), Region 10 CLR-elect, shared tips for writing an annual report. Benton Cash (Maine); Paul Graham, FHFMA, CPA (Alabama); Chip Hurley, FHFMA, CPA (Maryland); Ken Kolb; Bill Matheney, FHFMA, CPA (Tennessee); Jim Miller (Indiana Pressler), and Mike Monahan (New Jersey) shared innovative ways their chapters keep past presidents involved and how their chapters successfully

structure their officers and boards for succession planning. Sharing best practices on the Yerger Award process were Nancy Reiss, FHFMA (Rochester Regional); Bill Eaton (McMahon-Illinois); and Bill Matheney. In addition, chapter presidents heard

## JAMA STUDY SUPPORTS THE USE OF HOSPITALISTS

Hospitalists generally improve inpatient efficiency without harmful effects on quality or patient satisfaction, according to a study recently published in the Journal of the American Medical Association (JAMA). The hospitalist is an increasingly common new breed of physician who provides inpatient care in hospitals instead of primary care physicians.

## NDWC Changes

Changes will take place on May 1, 2002 to some of the medical service administrative rules for NDWC. Quick overview: requirement for dispensing of generic brands of medications; rules for PAs and NPs; bills must be submitted within one year; prescribing provider's name must appear on pharmacy bills; analyst must respond to a request for authorization within 14 days; DME costing less than \$500.00 does not require authorization; new OT window period; changes for trigger point injections; and extends chiropractic window to 90 days.

If you have any questions, please call me at the number listed below.

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from Yerger judges Amelia Bryant, FHFMA, (North Carolina) and Cheryl Yennie, FHFMA, CPA (Louisiana), both currently members of HFMA National's Board of Directors with significant experience serving as Yerger judges. The presidents and presidents-elect conference calls were audio taped with two tapes available for lending purposes. If you are interested in borrowing a tape, contact Angie Camarena at (800) 252-4362, ext. 357 or [acamarena@hfma.org](mailto:acamarena@hfma.org). Additional calls for presidents and presidents-elects with focused presentations are planned for the coming year. If you have suggestions for topics or have ideas you would like to share, please contact Eileen Crow, director, chapter relations, at ext. 382 or [ecrow@hfma.org](mailto:ecrow@hfma.org).

*Experience the Wild West in Historic  
Medora, North Dakota*

**2nd Annual Joint HFMA  
Montana, North Dakota, South Dakota and Wyoming  
July 25th & 26th 2002**

*🐉 Thursday, July 25th 🐉*

- 8:00-8:15 Welcome and Opening Remarks  
8:15-9:45 Patient Friendly Billing by Paul Maraco, AHA  
9:45-10:45 Benefits of HFMA by Region 8 CLR Chris Champ  
11:00-12:30 Is your Chargemaster In Compliance? by Ralph Llewelly  
from Eide Bailly LLP  
1:30-3:00 How to be Motivated in the Health Care Finance World?  
Dynamics for Excellence by Gloria Schaeffer  
3:15-4:45 In Search of Profits: "Revenue Returns to the Forefront"  
by Ryan Gish from Jennings Ryan & Kolb  
4:45-6:30 Vendors/Exhibits Displays  
6:30-8:00 Pitchfork Fondue Dinner  
8:00-10:00 The Greatest Show in the West: "The Medora Musical"

*🐉 Friday, July 26th 🐉*

- 7:30-9:00 Healthcare Finance: The Capital Crunch by Ryan Gish  
from Jennings, Ryan, & Kolb  
9:00-10:30 Fraud in the Health Care Industry by Thomas Buckoff  
from Fraudwise  
10:45-12:15 Operational Assessments: The Tool for Facility Management  
by Jennifer Van Berkum from Eide Bailly LLP

Meeting Location: Medora Community Center

Accommodations: American Inn (701) 623-4800  
Bad Lands Motel (800) 633-6721  
Dickinson is also a short drive away

# **2002 HFMA Meetings**

**June 13-14, 2002 • Fargo**

**EideBailly Healthcare Symposium**

**July 25-26, 2002 • Medora**

**Montana, North Dakota, South Dakota, Wyoming Joint Meeting**

## **HEALTHCARE FINANCIAL MANAGEMENT ASSOCIATION**

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**HFMA**

**North Dakota Chapter**