

Efficient Revenue Cycle Processes Project Participant Agreement

Facility Name: _____

Project Contact: _____

Email Address: _____

City: _____

Phone: _____

***YES**, our facility would like to commit to participate in the Efficient Revenue Cycle Processes Project from Oct. 2018 through Feb. 2019. We agree to participate in all phases of this multi-hospital collaborative. Our facility understands this commitment requires the support of administrative leadership to meet the expectations outlined below.*

		/ /2018
<i>CEO/Administrator Signature</i>	<i>Facility Project Contact/Lead</i>	<i>Date</i>

Facility expectations:

- Payment of **\$250 project participation fee**. Make checks payable to KHERF.
- Commit to and participate in a one-day face-to-face working session on Oct. 30, 2018, in Wichita.
- Provision of staff time and resources necessary for commitment to the project. This includes project work within your facility, which will be ongoing throughout the duration of the project.
- Participation in the development of and commitment to an ongoing, sustainable monitoring program.
- Maintain and submit a provided progress report to KHERF project staff on the 7th of each month.
- Commit to and participate in a partial day face-to-face wrap up meeting at the conclusion of the project on Feb. 12, 2019.

KRHOP will provide:

- A one day face-to-face working session at the onset of the project to provide a foundation and assist each facility with establishing internal goals.
- Basic Lean and quality improvement training for revenue cycle management.
- Facilitation of peer networking.
- Assistance on using Lean tools and techniques for improvement.
- Administration and analysis of organizational culture related to revenue cycle management.
- Access to Lean expertise and project management assistance.
- A partial day face-to-face wrap up meeting at the conclusion of the project to celebrate successes and build the plan for sustainability within your organization.

Please return the agreement no later than Oct. 5, 2018.
Attn: Susan Cunningham (scunningham@kha-net.org)
Fax: 785-233-6955