FULL DAY REGISTRATION:
AHIA Member $150
Non-AHIA Member $195
See registration form for a group discount!

HALF DAY REGISTRATION:
AHIA Member $85
Non-AHIA Member $110

Purpose: The AHIA Regional Seminars provide a forum for Healthcare internal auditors and finance professionals to network and interact with their peers, to share best practices, and to strengthen the profession of Healthcare internal auditing.


Education Objectives: Sessions are designed to be highly interactive to promote attendee participation and sharing of internal audit best practices. Attendees will learn about current healthcare issues, internal audit topics, audit approaches, techniques and best practices. This event will feature presentations from local healthcare-based professionals that cover a variety of current healthcare hot topics.
Examples of possible benefits and value that key projects can provide an organization.

Field of Study: Specialized Knowledge and Applications
CPE: 1 Level: All

2:20 - 2:35 pm BREAK

2:35 - 4:15 pm Chief Audit Executive Roundtable Discussion

Field of Study: Auditing
CPE: 2 Level: All

Managers and Staff Roundtable Discussion

Field of Study: Auditing
CPE: 2 Level: All

4:15 pm Closing Remarks

Ben Johnson - VP Sales, The Audit Group

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One registration form per attendee. Copy this form as needed.

Name: ____________________________________________

Name of Organization: ____________________________________________

Title: __________________________________________________________

Mailing Address: __________________________________________________

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Vegetarian Meals? Yes ☐ No ☐

Special Assistance Required: ________________________________________

Regional Seminar Fees
AHIA Members
☐ First Registrant $150
☐ Additional Registrants $125
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☐ First Registrant $195
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Cancellations & Substitutions
No refunds will be given for “no shows” or cancellations. You may send a substitute; please call AHIA at 888-275-2442.

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Register Online at www.ahia.org
Chris Pritchard has practiced public accounting since 1991, serving integrated health systems, federally qualified health centers, managed care organizations, ambulatory surgery centers, Knox-Keene licensed health plans, rural and regionally integrated hospitals, rural and community-based primary care facilities, outpatient care facilities, outpatient surgery centers, large medical groups, independent physician associations, and third-party payers. In addition to his experience auditing and supervising audit engagements of health care entities, he has managed numerous consulting engagements, including internal audits. He has also assisted numerous organizations with strategic management decision engagements, cash flow projections, budgeting projects, and other operational engagements.

Paul Dur has a 25-year history with Sharp HealthCare, working primarily with Sharp Community Medical Group and currently serving as its Chief Executive Officer. Paul joined Sharp Community Medical Group in 1992. He served as Chief Financial Officer for 12 years and helped lead the medical group to become one of the most successful independent practice associations in the country. In 1995, Paul established the Sharp HealthCare Managed Care Finance Department responsible for the accounting and financial analysis of capitation contracts for the Sharp HealthCare system. Prior to joining Sharp HealthCare, Paul spent three years with Ernst and Young and in 1991 began working at Sharp HealthCare.

As Senior Vice President, General Manager, California, Sherry Stainslaw is responsible for SCAN Health Plan's overall performance, including the core counties where SCAN had its founding nearly 40 years ago. In this capacity, Sherry works closely with provider relations, sales, benefit design, member services and all other key departments within SCAN to help assure that the health plan stays attuned to member needs, offers quality-oriented products and services that members want and remains true to its mission to keep seniors healthy and independent. Sherry is an industry veteran with more than 30 years of experience in healthcare operations and marketing. She joined SCAN in 1998 and previously served as senior vice president of marketing for the health plan, overseeing marketing, product development and implementation, market expansion, community outreach and public relations. Prior to working at SCAN, Sherry held a broad range of management positions with Talbert Medical Group and FHP Health Care.

Michael Overly is one of the few practicing lawyers who has satisfied the rigorous requirements necessary to obtain the Certified Information System Auditor (CISA), Certified Information Systems Security Professional (CISSP), Information Systems Security Management Professional (ISSMP), Certified in Risk and Information Systems Controls (CRISC), Certified Outsourcing Professional (COP), and Certified Information Privacy Professional (CIPP) certifications. He writes and speaks frequently regarding negotiating and drafting technology transactions and addressing information security from an integrated perspective. He has written numerous articles and books on these subjects and is a frequent commentator in the national press (e.g., the New York Times, Chicago Tribune, Los Angeles Times, Wall Street Journal, ABCNEWS.com, CNN, and MSNBC) and has testified before the U.S. Congress regarding online issues.

Caroline Wanke is Vice President of Post-Acute Patient Financial Services and Managed Care Operations for Sharp HealthCare. She joined Sharp HealthCare in 1991 and has since held the positions of manager of skilled nursing services and the director of patient financial services for receivable management for physician, skilled nursing, hospice, health, hospice and home infusion services prior to her current position. Ms. Wanke serves on numerous boards and committees, including California Hospital Association Payer Relations, ICE Team Chair for Encounter and Division of Responsibility Standardization, and the Coalition for Compassionate Care in California.

Dr. Emmerson has spent the majority of his professional career in the oral health field as a practicing orthodontist. After attaining a D.D.S. degree from Loma Linda University, followed by a M.S. in orthodontics, Dr. Emmerson was invited to participate in advanced orthodontic research with world-renown orthodontist and dean of the prestigious Karolinska Institute in Stockholm, Sweden, after which he presented their findings to the European Orthodontic Society and the Foundation for Orthodontic Research. Their work was published in peer-reviewed publications, including the American Journal of Orthodontics and Dentofacial Orthopedics, Italy's University of Padova's Opus Honorarium Benito Miotto, and the Foundation for Orthodontic Research. During his 26 years of private orthodontic practice, Dr. Emmerson actively participated in organized dentistry at the state and local levels.

Kristin Preites is a Senior Auditor – Analytics Specialist at Sharp HealthCare in San Diego, CA. Since joining Sharp HealthCare in 2006, Kristin has implemented a continuous auditing program with approximately 10 different projects. Kristin is a Certified Public Accountant (CPA), Certified Internal Auditor (CIA), HFMA Credentialed Revenue Cycle Representative (CRCR), and an AIC Certified Data Analyst (ACDA). Past positions include three (3) years of public accounting experience with KPMG, LLP. Kristin currently serves as a Board Member and a co-chair for Analytics User Group for the San Diego Chapter of the Institute of Internal Auditors (IIA).

Robert Lund has been the CAE for Banner Health for 28 years, assisting the organization in assessing risks and evaluating the effectiveness of risk mitigation efforts. Prior to Banner, I had been a consultant with E&Y (that dates me) and had previously had responsibility for budgeting and reimbursement at a 300 bed hospital. Our approach to auditing has always involved a consultative approach to dealing with significant enterprise risks and being a trusted advisor. Jordan Perkins has more than seven years of experience developing advanced analytics models across the healthcare provider, pharmaceutical and life sciences, and technology industries. He has managed and led numerous engagement teams in delivering large scale analytics solutions focused on helping companies achieve and maintain compliance, as well as increasing audit coverage, efficiency and relevance.

Eric Mok is an experienced internal audit and governance, risk and compliance professional in the healthcare industry. He planned, managed and led audits including Medicare Advantage Plan related matters, provider enrollment, oversight of pharmacy benefit manager, first tier downstream and related entities (FDR), premium billing, claims, encounters, appeals and grievances and HIPAA. He also conducted advisory projects such as Medicare Part D appeals process redesign, system implementation and identity access management. He also has experience in healthcare payors, healthcare providers, not-for-profit organizations and others; such as public utilities, real estate information and financial services, manufacturing, government, and higher education. Prior to his private industry experience, he spent years in audit and advisory projects that cover financial statements, operational, compliance, IT general controls and automatic controls. In addition, he has served as system analyst, application coordinator, accountant and cost accountant outside of audit and advisory capacity.

Shirley Komoto is a director with Moss Adams LLP with over 20 years of experience in health care compliance and internal audit. At PricewaterhouseCoopers and then Moss Adams, Shirley has evaluated enterprise risks and designed and implemented internal audit work plans for hospitals, health plans, physician groups and long term care facilities. Work plans have addressed strategic, financial, compliance and operating risk areas. A formally-trained group facilitator, Shirley has led process improvement and lean teams and is a six sigma green belt. As part of her work with Moss Adams, she has served in the role of interim compliance officer and/or interim privacy officer for a number of hospitals since 2012. Shirley is a Forum W leader, focusing on retaining and advancing women within both the profession and the firm. She received the firm’s 2014 Technical Excellence Award. Shirley is certified in Healthcare Compliance and is a Certified Internal Auditor.

Stacy Stetzriede is a partner with Moss Adams LLP with over 27 years of experience providing accounting and consulting services to health care systems, hospitals, acute care and specialty hospitals, physician groups, senior living organizations, and health plans. She also has extensive experience in internal control risk management, revenue cycle, regulatory compliance, tax-exempt bond offerings and debt covenant filings, and educating clients on technical accounting issues and board governance. Stacy leads our Los Angeles Health Care Practice, leader of the firm’s Health Care Audit Practice and serves on the firm’s Assurance Services Committee. She previously served a four-year term on the firm’s Forum W Advisory Board, which focuses on retaining and advancing women within both the profession and the firm. Stacy’s accolades include receiving the American Woman’s Society of Certified Public Accountants “2014 Woman CPA of the Year” award, and was the recipient of the Firm’s 2016 Partner Technical Excellence Award.