

CURRICULUM VITAE

DENISHA M. LICH, MS, RHIA, HRM

ST. PETERSBURG, FLORIDA
(727) 515-2355

SUMMARY/ACCOMPLISHMENTS:

- *Motivated, energetic, self-starter* with twenty year record of achievement in management, quality improvement, and consulting in the health care industry.
- *In-depth knowledge* of ICD-9-CM, ICD-10, CPT and HCPCS Level 2 coding.
- *In-depth knowledge* of revenue cycle to include registration, chargemaster, order entry, billing and collection processes.
- *In-depth experience* with the implementation of a revenue cycle program for 22 hospital international health care system resulting in the successful first time billing to commercial insurance for both technical and professional components.
- *Expertise* as an expert witness in the area of medical record documentation, coding and billing resulting in court successes.
- *Creative Marketing skills* utilized to develop company marketing materials and website for coding, reimbursement and compliance product lines.
- *Developed and Implemented* product lines for coding, reimbursement and compliance products resulting in increased revenues.
- *Virtual management skills* used to direct outsourced coding team to meet customer needs and expectations.
- *Expertise* as a system consultant in HIM functions in development of an electronic patient record.
- *Implementation* of quality improvement systems in hospitals resulting in full TJC (JCAHO) Accreditation's.
- *Articulate and persuasive* in written and verbal communication with customers, staff and professional peers.
- *Experienced* national presenter in the areas of coding, reimbursement and compliance.
- *Proven ability* as an independent problem-solver, negotiator and in follow-through to meet deadlines.

EMPLOYMENT

March 2004 -
Present:

Torres-Lich & Associates, Inc, St. Petersburg, FL
President/CEO

- responsible for company's budget and strategic growth
- marketing and sales of company services
- create and develop all marketing materials for coding, consulting, and compliance product lines
- create and maintain organizational infrastructure for all HIM service lines
- develop and implement the corporate strategic plan
- oversee the daily operations of corporate activities
- expert witness services to include report/affidavit creation and testimony in the area of medical record documentation, coding and billing guidelines
- consultation services to insurance companies/payers in the area of ICD-9-CM, ICD-10-CM, CPT and HCPCS Level II coding protocols, CPT and HCPCS Level II Modifier guidelines, medical record documentation, billing guidelines, NCCI edits, facility and professional claims processing protocols, reimbursement guidelines, CMS Multiple Procedure Payment Rule, etc.
- consultation services to acute care facilities, physician practices and community health centers in the areas of: TJC (JCAHO) compliance, operational efficiencies, documentation and coding practices, staff and medical staff educational program, coding

compliance, reimbursement, auditing, Health Information Management operational efficiencies, HIS project management, etc.

- educate and train in coding, compliance, and auditing practices.
- presentations to professional organizations such as American Health Information Management Association (AHIMA), South West Florida Health Information Management Association (SWFHIMA), Sun Coast Health Information Management Association (SCHIMA), Gulf Coast Health Information Management Association (GCHIMA), Medical Claims Defense Network (MCDN), Florida Insurance Fraud Education Committee (FIFEC), etc.

January 2010 –
September 2010:

Shriners Hospitals for Children – International Corporate Headquarters, St. Petersburg FL, Corporate Director HIM & Revenue Cycle Compliance – Revenue Cycle Project

- implement Revenue Cycle Roll-Out for 22 hospital international health care system
- build and implement Cerner Millennium applications to include all aspects of revenue cycle such as patient access, HIM, patient accounting and collections, etc.
- integrate of Cerner Millennium applications with system eHR
- develop and implement centralized charge description master for 20 hospitals
- create and implement centralized physician coding and billing system for professional services provided within the 20 system-wide hospitals
- develop and implement charge capture tools for both technical and professional billing
- develop productivity and accuracy standards and implement a centralized coding model resulting decreasing FTEs from 25 to 14
- implement system-wide utilization review process
- develop and implement revenue integrity program for SHC
- present revenue cycle, HIM and revenue integrity solutions to committees of the Board
- actively participate in the following committees: Corporate Compliance; Organizational Transformation; Revenue Cycle Committee of the Board; Physician Practice Management; Information Systems Committee, etc.

January 2005 -
June 2006:

Bayfront Medical Center
Manager, Health Information Management

- manage and oversee 30+ employees within the Health Information Management department
- responsible for department budget to include management of DNFB
- re-implement concurrent coding processes resulting in decrease of DNFB
- implement Cerner electronic health record to include re-defining the electronic medical record and setting policy
- oversee operations to include medical record correspondence, medical staff compliance with TJC (JCAHO) requirements, coding, birth vital statistics, transcription, etc.
- responsible for TJC (JCAHO), AHCA and CMS compliance
- work with offices of Corporate Compliance, Risk Management, Medical Staff and Revenue Cycle Management

January 2003-
December 2005:

C3 Partners, LLC, St. Petersburg, FL.
Managing Partner/Chief Operating Officer

- responsible for company budget and strategic growth;
- develop corporate business plan and promote coding, compliance and HIM service lines
- create and maintain organizational infrastructure for all service lines
- develop and implement the corporate strategic plan
- create and develop all marketing materials for coding, consulting, and compliance product lines
- oversee the daily operations of corporate activities
- develop and administer the Corporate Compliance Plan in accordance with OIG
- maintain written standards of ethical conduct as well as policies and procedures which demonstrate the C3 Partners', LLC commitment to compliance and ethics
- consultation services to acute care facilities, physician practices and community health centers in the areas of: TJC (JCAHO) compliance, operational efficiencies, documentation and coding practices, staff and medical staff educational program, etc.

September 2000 -
December 2002:

CareMedic Systems, Inc., St. Petersburg, FL.
Vice President of Compliance and HIPAA Solutions:

- develop and administer the Corporate Compliance Plan in accordance with OIG;
- maintain written standards of ethical conduct as well as policies and procedures which demonstrate the CareMedic Systems, Inc.'s commitment to compliance and ethics;
- develop, implement and administer a HIPAA Readiness Plan to address the regulations as they pertain to CareMedic Systems product lines;
- direct the HIPAA Program Office and provide guidance to the HIPAA Team to ensure compliance;
- actively participate in Compliance and HIPAA focused organizations to include HCCA, WEDI-SNIP, AFECHT, FHA, FHCCA, etc.;
- administer an effective, documented training and education program which includes training for all employees on compliance topics to include business code of ethics, and pertinent HIPAA topics;
- participate in enforcing standards through well-publicized disciplinary guidelines;
- participate in Strategic Planning and contributes to overall success of organization;
- Product Executive of Local Medical Review Policy (LMRP) Product to include assisting with all development efforts, overseeing product operations, assisting with product support issues, product consultation services, keeping apprised of competition, supporting sales executives, and keeping abreast of Medicare regulations pertinent to product;
- oversee activities of Customer Support department;

July 1998 -
September 2000:

Sarasota Memorial Health Care System, Sarasota, FL.
Corporate Compliance Officer:

- develop, implement and administer the Corporate Compliance Plan in accordance with the OIG's "Corporate Compliance Program Guidance for Hospitals;"
- maintain written standards of conduct as well as policies and procedures which demonstrate the Sarasota County Public Hospital Board's commitment to compliance and ethics;
- administer an effective, documented training and education program which includes training for all employees on standards of conduct;
- participate in enforcing standards through well-publicized disciplinary guidelines;
- coordinate activities for enterprise wide legal audits established to investigate and monitor compliance;
- present a quarterly report of compliance activity to the Corporate Compliance Committee of the Board;
- maintain "hotline" and promotes open lines of communication with all employees;
- participate in system-wide Quality Improvement Teams;
- assist various departments with operational analyses to ensure compliance with Medicare regulations pertaining to coding, billing and charging practices.

August 1999 –
2004, 2014 - 2020

St. Petersburg Junior College, St. Petersburg, Florida
Adjunct Instructor:

- teach traditional and online coding courses for American Health Information Management Association approved RHIT and Coding Certificate (CCA, CCS & CCS-P) programs in CPT, ICD-9-CM/PCS, ICD-10 CM/PCS and Professional Practice II;
- clinical coordinator for coding internships;
- assist with advising students and provide clinical education.

September 1997 –
July 1998:

HMI Inc., Brentwood, Tennessee.
Executive Director:

- provide assistance in compliance in the areas of hospital chargemaster, coding, billing, and documentation, etc., within the various departments;
- assist with workflow and charge capture analyses for various client outpatient departments such as radiology, cardiology, physical therapy, laboratory, and emergency room, etc.;
- working knowledge of OIG work plan, regulatory and Medicare documentation, coding and billing requirements for various services and specialties within the hospital setting for Florida and South Carolina;
- working knowledge of correct coding initiatives, Medicare regulations including medical necessity;
- working knowledge of physician regulatory and compliance issues;
- perform physician practice analysis;

- perform educational training seminars to medical staff and other healthcare professionals in the numerous areas of compliance to include but not limited to laboratory medical necessity and “bad bundle”, appropriate documentation and billing practices and other pertinent issues;
- participant in Medicare Task Force;
- manage and maintain client relationships.

April 1995 –
September 1997:

Coopers & Lybrand, L.L.P., Tampa, FL.
Manager, Healthcare Regulatory Group:

- develop and market Health Information Management practice services (chargemaster reviews, coding and documentation education and training, coding review software, operational analyses, laboratory compliance reviews, etc.) throughout the country;
- perform inpatient and outpatient coding audits, compliance audits, IL372/ PATH II documentation reviews for large teaching facilities, 72-hour rule audits;
- perform practice analysis for multi-specialties and large faculty practice plans, review charge capture processes for physician practices resulting in redesigning of office operations and policies and procedures;
- provide consulting services to hospitals and physicians’ offices in the areas of coding, billing, charge capture processes, operational analyses, compliance, medical record documentation, health information management operations;
- develop and conduct client in-service training seminars to clients in the areas of Compliance Programs and the various areas of compliance to include but not limited to laboratory “Bad Bundle”, IL372/Path II, 72 hour rule, Inpatient Coding (DRG 79vs89), Chargemaster, teaching physician guidelines, and other fraud and abuse issues, etc. as well as topics in the outpatient and inpatient coding and prospective payment systems, chargemaster review, reimbursement, risk management, etc.;
- develop and coordinate educational programs to clinical and medical staff regarding documentation issues to assist with compliance and appropriate coding practices;
- initiate and coordinate student internships in the area of health information management.

August 1992 –
April 1995:

Quality Medical Consultants, Winter Park, FL.
Director of the Health Information Management and Reimbursement Division:

- market Division services (charge master reviews, medical record coding reviews, physician billing, physician support services, etc.) throughout the country;
- implement new physician billing department within Division;
- manage the Division, developing and maintaining Division budget, position descriptions and procedures for HIM&R personnel;
- coordinate and implement the consolidation of 22 hospitals’ chargemasters for national hospital chain which resulted in the development of a new corporate charge master;
- work with IT to automate Charge master maintenance;
- perform operational analysis for outpatient service departments and ambulatory surgery centers;
- perform coding and operational client in-services in the area of outpatient services such as cardiology, emergency room, radiology, etc.;
- consulting services to hospitals and physicians’ offices in the areas of chargemaster reviews and updates, ambulatory diagnostic and procedural coding, practice management, and the Resource Base Relative Value Scale payment system, etc.

January 1991 –
May 1992:

University of Central Florida, Orlando, FL.
Graduate Teaching Assistant/ Adjunct Instructor:

- teach medical terminology, health records and standards, CPT coding;
- assist in coding labs;
- counsel students and provide clinical education;
- update student manual for Health Information Management Administration Program;
- participate in Kuwait Project to teach students from College of Kuwait in the areas of health information management.

EDUCATION

Badge: AHIMA-Approved Revenue Cycle Trainer
Awarded: November 2019

Degree: Master of Science in Health Administration, University of Central Florida
Awarded: August 1992

License: Healthcare Risk Manager, Florida Department of Insurance
Awarded: December 1992

Certificate: Risk Management, University of Central Florida
Awarded: May 1992

Credential: Registered Health Information Administrator (RHIA)
Awarded: September 1987

Degree: Bachelor of Science in Medical Record Administration, University of Central Florida
Awarded: July 1987

PROFESSIONAL ACTIVITIES

AHIMA (American Health Information Management Association)

Member, 1985 – Present

Member, AHIMA Annual Convention Program Committee 1999 - 2000

Member, Corporate Compliance Taskforce 1998 -2000

Member, Credentials Committee 1996

FHIMA (Florida Health Information Management Association)

Member, 1985 – Present

Past President, 1999 - Present

President, 1998 - 1999

President – Elect, 1997-1998

Director, 1996-1997

Director, 1990-1993

Project Manager, Arrangements Committee 1995-1996

Project Manager, Mid-Year Symposium 1993-1994

Project Manager, “Coastlines” Editor 1990-1991

Project Manager, Scholarships 1992

Member, Nominating Committee 1990-1991

Member, Arrangements Committee 1989-1991

Member, Program Committee 1988-1989

SPC (St. Petersburg College)

Member, Health Information Technical Program Advisory Committee 1997 – 2006, Present

Gulf Coast HIMA (Gulf Coast Health Information Management Association)

Member, 1989-2006

Member, Membership Committee 1989-1990

Project Manager, Membership Raffle 1989-1990

FHA (Florida Hospital Association)

Member, 1995 – 2005

Member, Florida Healthcare Corporate Compliance Association 1999 – 2005

HCCA (Health Care Compliance Association)

Member, 1998 – 2006

HFMA (Healthcare Financial Management Association)

Member, 1995 – 2001

Member, Healthcare Industry Liaison Committee 1996 - 1998

WEDI (Workgroup for Electronic Data Interchange)

Member, 2002

AFEHCT (Association For Electronic Health Care Transactions)

Member, 2002

SHARP (Southern HIPAA Administrative Regional Process)

Member, 2002

CFHIMA (Central Florida Health Information Management Association)

Member 1985-1997

Past President, 1990-1991

President, 1989-1990

President – Elect, 1988-1989

Delegate, 1989

Chairperson, Bylaws Committee 1992-1993

Chairperson, Program Committee 1988-1989

Member, Bylaws Committee 1988-1989

Member, Nominating Committee 1988

UCF (University of Central Florida)

Member, Health Information Management Program Advisory Committee 1991-1992

Member, Health Information Management Program Advisory Committee 1997-1998

Leadership Orlando, Greater Orlando Chamber of Commerce

Graduate, 1996

Alumni, Present

ARTICLES/PUBLICATIONS

“Demystifying Non-physician Practitioner Billing”

Journal of AHIMA

February, 2000

PRESENTATIONS

“Elements of the Electronic Health Record...Charting the Road to Appropriate Reimbursement”

AIMSVAR 18 Annual Conference

San Antonio, TX, March 24, 2018

“CODING & DOCUMENTATION...Where the Rubber Meets the Road”

Medical Claims Defense Network - 2014 Fall Seminar

Orlando, FL, September 17, 2014

“Juggling the Outpatient Revenue Cycle: Use of Physician Extenders, Outpatient Edits, Payer Requirements”

2012 Florida Health Information Management Association Annual Convention

Orlando, FL, July 19, 2012

“CPT Coding – Is It An Art Or Science?”

2012 FIFEC Conference

Orlando, FL, June 14, 2012

“ICD-10 –CM and the Impact on Physician Practices”

1450 Winter VAR Conference

Palm Beach, FL, February 3, 2012

“PIP Fraud as a Business Practice - Finding and Proving It”

2011 FIFEC Conference – Panel Discussion

Orlando, FL, June 9, 2011

“HIPAA...EHR and the Evolution of HIM”

Educational Seminar – South West Florida Health Information Management Association

Naples, FL, March 19, 2011

“PIP Panel Discussion”

3rd Annual Liability & Property Claims Seminar – Haas Lewis DiFiore & Amos, P.A.

Tampa, FL, October 29, 2010

“National Correct Coding Initiative and Medically Unlikely Edits...Coding and Reimbursement Challenges Continued”

Educational Seminar – South West Florida Health Information Management Association
Sarasota, FL, November 7, 2009

“HIPAA...EHR and the Evolution of HIM”
Annual Symposium – Gulf Coast Health Information Management Association
Clearwater, FL May 20, 2009

“NCCI Edits: Don’t Let Them Manage You”
Strategies for Effective Revenue Cycle Management – AHIMA
Orlando, FL March 16, 2009

“PIP Law...The Impact to HIM and Your Practice”
South West Florida Health Information Management Association
Port Charlotte, FL September 2008

“Facility E&M Coding”
Optimizing the Revenue Cycle Through HIM Conference - *AHIMA*
Nashville, TN March 2008

“Ancillary Data Quality Monitoring Training Session” – One Day Auditing Boot Camp
Shriners International Headquarters
Tampa, FL January 2007

“Real World Tips to Help Implement and Audit an Effective Compliance Plan”
Healthcare Compliance Analyst Institute – AHIMA
Denver, CO October 2006

“Data Quality Monitoring Training Session” – Three Day Coding/Auditing Boot Camp
Shriners International Headquarters
Tampa, FL April 2006

“Real World Tips to Help Implement and Audit an Effective Compliance Plan”
Healthcare Compliance Analyst Institute – AHIMA
San Diego, CA October 2005

“CMS and the National Coverage Determinations (NCDs)”
American Health Information Management Association – Audio Conference
National, July 2005

“Evaluation & Management and Modifiers”
Physician Office Staff - Bayfront Medical Center
St. Petersburg, FL June 2005

“E/M Audits: Data Analysis & Reporting”
American Health Information Management Association – Audio Conference
National, June 2005

“Health Information Services Outpatient Coding Presentation”
Health Information Services Directors Meeting - Shriners International Headquarters
Tampa, FL June 2005

“2005 OIG Workplan & OIG Draft Supplemental Compliance Guidance for Hospitals”
Southwest Florida Health Information Management Association
November 2004

“Identifying Compliance Variances in Code Set Patterns/Compliance Issues Related to Coding Activities”
Healthcare Compliance Analyst Institute – AHIMA
Washington, DC October 2004

“Coding and Compliance Go Hand in Hand”
Florida Health Information Management Association Annual Meeting – Data Quality
Gaylord Palms Hotel, Orlando, FL July 2004

“Remote Coding – The Next Natural Phase in E-coding”
Meta Health Technology Users Group Meeting - Weston Hotel
Hilton Head, SC May 2004

“Compliance in Coding and HIM Practices”
Sun Coast Health Information Management Association - Good Samaritan Medical Center
West Palm Beach, FL May 2004

“Outpatient Coding Educational Presentation”
St. Joseph’s Baptist Health Care System
August 2004

“Health Insurance Portability and Accountability Act”
North East Florida Health Information Management Association - Radisson Hotel
Jacksonville, FL April 2004

“CPT/RBRVS – A Presentation of Introduction and Application”
Shriners Hospitals for Children
Corporate Headquarters
Tampa, FL March 2004

“Physician Evaluation and Management Service Reporting”
AHIMA Audio Seminar
National, November 2003

“Identifying Compliance Variances in Code Set Patterns”
Healthcare Compliance Analyst Institute – AHIMA
Minneapolis, MN 2003

“HIPAA & Optometry”
Optician Continuing Education – St. Petersburg College
St. Petersburg, FL 2003

“Compliance in a Physician Practice”
Office Managers’ Group – Sarasota County Chapter
Sarasota, FL. 2000

“Corporate Compliance and Internal Audit”
Medical Auditors’ Association – Sarasota County Chapter
Sarasota, FL. 1999

“Compliance Check-Up: Completing an Effective Coding Audit”
AHIMA Audio Seminar
National, 1999

“Corporate Compliance: OIG 1999 Workplan”
Southwest Florida Health Information Management Association
Sarasota, FL. 1999

“Corporate Compliance Guidance and Risk Management”
Risk Managers Association - Sarasota County Chapter
Sarasota, FL. 1999

“Compliance Panel: Compliance Elements”
Florida Health Information Management Association Annual Convention
Tampa, FL. 1999

“Evaluation & Management 1998 Update”
Tuomey Regional Medical Center
Sumter, SC. 1998

“Fraud & Abuse” (Co-Presenter)

Florida Health Information Management Association Mid-Year Symposium
St. Petersburg, FL. 1998

“OIG and Compliance”
St. Joseph’s Hospital
Atlanta, GA. 1997

“Outpatient Prospective Payment System”
Colegio de Administradores de Servicios de Salud (Healthcare Administrators) - Hotel El Conquistador, Fajardo, PR. 1996

“Medicare Fraud” (Co-Presenter)
Florida Health Information Management Association Annual Conference
Saddlebrook Resort – Tampa, Wesley Chapel, FL. 1996

“APGs”
Central Florida Health Information Management Association Monthly Educational Meeting -
Florida Hospital Altamonte, Altamonte Springs, FL. 1996

“APGs Issues in Admitting”
Michigan Alliance of Healthcare Access Professionals - The Hotel Baronette,
Novi, MI. 1995

“HIM & the Future of Coding & Data Quality ... A Look at APGs”
Quorum Health Resources, Inc. Quarterly Conference - Clearwater Beach Hotel
Clearwater, FL. 1995

“Office of Inspector General’s Impact on Medical Records”
American Association of Healthcare Internal Auditors - Tampa General Hospital,
Tampa, FL. 1995

“Cardiology – A Coding Seminar”
QMC, Inc. - Georgetown Memorial Hospital, GA

“Why Consider a Chargemaster Coding Review and Update?”
Quorum Health Resources, Inc. Quarterly Conference - Marriott Hotel
Miami, FL. 1993

“Medical Records and Risk Management”
Risk Management Class, University of Central Florida - University of Central Florida
Orlando, FL. 1993

“CPT-4, ICD-9-CM and Revenue Codes: A Chargemaster Review. Medical Record and Business Office are You Up to Snuff?”
South East Medical Record Association - Holiday Inn
Punta Gorda, FL. 1992

“CPT-4 Coding Procedures”
West Orange Hospital Monthly Physician Office Manager Seminar - West Orange Hospital
West Orange, FL. 1991

“Medical Records: A Challenge!”
Florida Health Information Management Association Mid-Year Symposium
Orlando, FL. 1990

“Setting Up a Medical Record Department”
University of Central Florida, Orlando, FL. 1989

CPT-4, The Future of Ambulatory Coding”
Florida Health Information Management Association Annual Conference
West Palm Beach, FL. 1988

PERSONAL

Bilingual: English/Spanish

HONORS AND AWARDS

Recipient of the University of Central Florida Alumni Association Professional Achievement Award, 1998
Recipient of the College of Health and Public Affairs, University of Central Florida, Alumni Professional Achievement Award, 1998
Recipient of FHIMA Outstanding New Professional Award, 1992
Recipient of AHIMA "Edna Huffman" Graduate Scholarship, 1991
Recipient of FHIMA Graduate Scholarship, 1991
President's List – Two consecutive semesters
Dean's List – Four consecutive semesters