



Dear CAHAM Member,

Each year CAHAM bestows the prestigious **Carl Satterfield Award** to one deserving individual at the Annual Educational Conference. The award is named in honor of the co-founder of CAHAM, Carl Satterfield, who helped pave the road for the careers and opportunities we all enjoy today. In the spirit of Carl's dedication and enthusiasm for his profession, nominees for this award possess the qualities and characteristics below:

- Mentorship of potential leaders to promote leadership and growth within the Patient Access field.
- Mentorship of department personnel to develop critical thinking skills that will result in an admission process that is focused on accuracy, efficiency and patient-centered care
- Professionalism in his/her interaction with patients, visitors, staff, peers, colleagues, and members of leadership
- Special and collaborative service, generously contributing time and talent to the promotion of Patient Access
- Innovative and strategic thinking in resolving problems and establishing new and/or improved programs
- Commitment to industry and community benefit organizations and initiatives
- Outstanding career accomplishments; serves as a role model

The award presentation will take place during lunch on Thursday, September 4, 2025, at the 56th Annual Educational Conference in Newport Beach, CA.

We would like to encourage you to nominate an individual whom you believe exhibits the characteristics listed above and deserves the recognition that comes with this honor. All nominees must be a current CAHAM member and active in the healthcare access or patient financial services industry.

Please complete the form and submit to CAHAM prior to **August 1, 2025**.

Thank you in advance for assisting us in recognizing an exceptional person.

Warm Regards,

Terry Closson, CAHAM President

Carl Satterfield Award

Nomination Form

NOMINEE INFORMATION

Name: _____

Title: _____ Employer: _____

Professional Background and Accomplishments

Unique Characteristics, Traits, and Qualities

Personal Information

NOMINATOR INFORMATION

Name: _____ Title: _____

Employer Name: _____

Telephone Number: _____ E-Mail: _____

E-mail to: Lena.Watts@kp.org

Deadline: August 1, 2025