

9TH ANNUAL MDS Healthcare Leadership and Executive Conference



TRANSFORMING HEALTHCARE: Partnerships, Innovations and Population Health SEPTEMBER 14-16TH, 2014 | ENCORE LAS VEGAS

TOPICS AT A GLANCE:

- Affiliations, Partnerships and Mergers
- Population Health Management
- Innovation for the Risk Continuum
- Clinical Integration
- Industry Trends and Case Studies
- Managing Financial Risk (e.g., Capitation)
- Evolving Care Models
- Customized Network Development
- Hospital/Physician Alignment Models
- Telemedicine and Other Innovations

Register by
July 30th & Save

Healthcare reform has shaken the traditional model of healthcare delivery to its roots. The move to value-based reimbursement and population health management is causing radical organizational turmoil and change.



Healthcare executives and Board members are looking for the right transitional models to succeed within new paradigms of care.

Leaders from a variety of healthcare organizations will share their future vision and best practice models for partnerships and collaborations, innovations, clinical integration, population health management and new strategies for hospital,

physician, health plan and employer alignment. Learn from the change agents about the models that may be right for your organization.

9th Annual
MDS Healthcare
Leadership and
Executive Conference

Who Should Attend?

The program is designed to benefit executives of hospitals, health systems, physician organizations, health plans and healthcare related businesses interested in learning the best strategic and operational business models for enhancing physician, hospital and health plan relationships during this time of healthcare reform. In addition to hearing from our distinguished faculty, the intensive two-day conference provides an unparalleled opportunity for attendees to interact with their colleagues from across the country to share best practices and establish ongoing connections.

PRE-CONFERENCE WORKSHOP

Sunday, September 14th from 1-4 p.m.

Developing and Managing Bundled Payments (Value-Based Reimbursement), Capitation and Tailored Networks

CMS, commercial insurers, and employers are driving the development of population health models and Accountable Care Organizations. Payers are redesigning reimbursement models to match. Providers are trying to move from episodic to value-based reimbursement with the payments derived from bundling services, capitation and other at-risk arrangements. This session will explore the models and methodologies necessary for providers to make the transition in a thoughtful manner. Topics will include:

- The future predictions about the prevalence of risk-based models
- Factors to consider for successful risk contracting
- Medicare, Commercial and Medicaid risk contracting models
- The necessary building blocks and supportive infrastructures
- Constructing the network
- Key financial and contractual terms
- Developing a population health/risk contracting strategic business plan



2014 CONFERENCE SCHEDULE



MONDAY, SEPTEMBER 15th

7:30 a.m.

REGISTRATION AND BREAKFAST
Beethoven 1 & 2

8:30 a.m.

WELCOME AND INTRODUCTION
Phil Dalton, *President & CEO, MDS Consulting*

8:45 a.m.

Transactions and Market Change

Eric Klein, *Partner, Sheppard Mullin*

Governmental and market pressures are causing mergers, acquisitions, partnerships and collaborations between hospitals, medical groups, health plans, venture capitalists and others. Hear about what is succeeding, what to expect next and which models will be sustainable.

9:30 a.m.

Population Health Starts with Consumers, Not Patients

Jeff Margolis, *Chairman & CEO, Welltok Inc.*

Hear how population health managers need to focus on optimizing consumer health to drive greater healthcare value. Learn how to differentiate between consumers and patients, define health optimization and healthcare value, and discuss groundbreaking strategies and approaches that compliment best-in-class clinical practices to influence and engage today's health consumers.

10:15 a.m.

NETWORKING BREAK

10:30 a.m.

Leading the Journey to Population Health

Richard Fish, *CEO, Brown & Toland Physicians*

Dan Frank, *COO, Regal and Lakeside Medical Groups*

Jeff Koury, *CEO, Western Region, Tenet Healthcare Corporation*

Ernie Schwefler, *Regional Vice President, California Provider Engagement & Contracting, Anthem Blue Cross*

Bill Gil, *Vice President & CEO, Providence Southern California Medical Foundations, Moderator*

Health systems and physician organizations are commonly embarking on strategies to become population health managers. Learn from experienced leaders about critical organizational approaches necessary for this transition and about the future of relationships between hospitals, physician groups and health plans.

12:00 p.m.

LUNCH

1:00 p.m.

ACOs, Clinical Integration, and Narrow Networks

Juan Davila, *Executive Vice President, Healthcare Quality & Affordability, Blue Shield of California*

Blue Shield of California has led the market in the development of joint ventured ACOs with physicians, hospitals and employers. Learn the business and clinical models necessary to succeed and the issues that need to be overcome to achieve sustainable financial and quality performance.

2:00 p.m.

Transforming from a Retail Pharmacy to a Healthcare Provider

Craig Fischer, *Vice President of Business Development, Walgreens Enterprise Specialty*

Recognized nationally for their pharmacy and retail clinics, Walgreens, the nation's largest pharmacy chain, is partnering with health systems across the country to advance new innovative models of care including Medicare ACOs. Hear how their collaborative efforts with providers go beyond retail clinics and foster clinical and financial value for the patient.

2:45 p.m.

Telemedicine & The New Care Delivery Landscape: Opportunities in Deploying Disruptive Technology

Jill Gordon, *Partner, Nixon Peabody*

Yafa Minazad, *DO, MMM, COO of Sage Neurohospitalist Management Group; Medical Director of Neurophysiology Laboratory at Huntington Hospital*

Dave Skibinski, *President & CEO, SnapMD*

The advancement of telehealth technologies creates new opportunities to bring care to communities in a more timely and efficient manner, and reimbursement is rapidly becoming more accessible. The law has not kept pace with this sector, but providers and others are continuing to push the frontier. Hear some of the challenges and opportunities telemedicine is creating in the market.

5:00 – 7:00 p.m.

HOSTED NETWORKING RECEPTION

Beethoven 1

TUESDAY, SEPTEMBER 16th

7:30 a.m.

BREAKFAST
Beethoven 1 & 2

8:30 a.m.

Following the Money: Developing a Strategy for Managing Seniors & Chronic Disease

Catherine Anderson, *National Vice President, Health Care Policy, United Healthcare, Community and State*

Eve Gelb, *Senior Vice President, SCAN Health Plan*

Frank Bird, *Vice President, MDS Consulting, Moderator*

Healthcare resources and costs are disproportionately related to the care of complex cases and the chronic diseases of patients covered by Medicare, Medicare Advantage and individuals dually eligible for Medicare and Medicaid. Hear what to expect and how to be successful with these high need and high cost patients that will be, in effect, the highest users and biggest markets for healthcare services.

9:30 a.m.

Practical Realities of ACA Implementation

Mary Ann Bauman, *MD, Medical Director for Women's Health and Community Relations, INTEGRIS Health Inc.*

Teresa Conk, *Chief Strategy Officer, UC Irvine Health*

Amy Dirks Stevens, *System Transitional VP, Strategy, Presence Health*

Craig Beam, *Managing Director, CBRE Healthcare Services Moderator*

Hear about the real strategies and practical responses to the ACA from divergent perspectives: an Academic Medical Center, a large regional health system and a large primary care group, as well as their plans to implement and manage financial risk for populations.

10:30 a.m.

Managing the Continuum: Acute & Post-Acute

Leslie Vajner, *Senior Director, Clinical Integration & Care Management, Kindred Healthcare, Inc.*

Jason Zachariah, *Senior Vice President, Hospital Rehabilitation Services, RehabCare, Inc., A Division of Kindred Healthcare, Inc.*

Successful population health models will require special attention to post-acute care and coordinated delivery models with acute care providers. Learn from the nation's largest post-acute care provider about forming and implementing new post-acute partnerships with hospitals, payers, physicians and ACOs to improve patient outcomes and lower costs. The session will discuss a case study regarding steps that the Cleveland Clinic and Kindred Healthcare have taken together in the advancement of post-acute care and payment integration.

12:00 p.m. Conference Adjourns

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GUEST SPEAKERS



CATHERINE ANDERSON
*National Vice President,
Health Care Policy
United Healthcare
Community and State*



MARY ANN BAUMAN, MD
*Medical Director for Women's
Health and Community Relations
INTEGRIS Health Inc.*



CRAIG BEAM
*Managing Director
CBRE Healthcare
Services*



FRANK BIRD
*Vice President
MDS Consulting*



DIWEN CHEN
*Executive Director of
Payment Innovation and
Accountable Care
Dignity Health*



TERESA CONK
*Chief Strategy Officer
UC Irvine Health*



JEFFREY CONKLIN
*Vice President
Payer & Network Strategies
President
Adventist Health Managed Care*



PHIL DALTON
*President & CEO
MDS Consulting*



JUAN DAVILA
*Executive Vice President
Healthcare Quality
& Affordability
Blue Shield of California*



RICHARD FISH
*CEO
Brown & Toland Physicians*



CRAIG FISCHER
*Vice President of
Business Development
Walgreens Enterprise
Specialty*



EVE GELB
*Senior Vice President
Health Care Services
SCAN Health Plan*



DAN FRANK
*COO
Regal and Lakeside
Medical Groups*



BILL GIL
*Vice President & CEO
Providence Southern
California Medical
Foundations*



JONATHAN GLUCK
*Senior Executive &
Corporate Counsel
Heritage Provider
Network*



JILL H. GORDON
*Partner
Nixon Peabody*



ERIC KLEIN
*Partner
Sheppard Mullin*



JEFF KOURY
*CEO, Western Region
Tenet Healthcare
Corporation*



JEFF MARGOLIS
*Chairman & CEO
Welltok, Inc.*



Yafa Minazad, DO, MMM
*COO
Sage Neurohospitalist Mgmt. Group
Medical Director
Neurophysiology Laboratory
at Huntington Hospital*



ERNIE SCHWEFLER
*Regional Vice President – California
Provider Engagement & Contracting
Anthem Blue Cross*



DAVE SKIBINSKI
*President & CEO
SnapMD*



AMY DIRKS STEVENS
*System Transitional VP,
Strategy
Presence Health*



LESLIE VAJNER
*Senior Director, Clinical
Integration & Care Management
Kindred Healthcare, Inc.*



JASON ZACHARIAH
*Senior Vice President
Hospital Rehabilitation Services
RehabCare, Inc.
A Division of Kindred Healthcare, Inc.*

SEPTEMBER 14-16TH, 2014

Register by
 July 30th & Save

Please return your completed registration form and payment to:

Medical Development Specialists
 24596 Hawthorne Blvd.
 Torrance, CA 90505

Or fax your registration information to: **424.247.8248**

Questions?
 Call **424.237.2525** or email conference@mdsconsulting.com

TRANSFORMING HEALTHCARE: Partnerships, Innovations and Population Health

REGISTRATION FORM

Name		
Title	Company	
Address	Suite #	
City	State	ZIP
Telephone	Fax	Email (required to receive confirmation)

How did you hear about the conference?

Hotel rooms have been reserved for September 14–16TH at the Encore Las Vegas for the MDS reduced group rate of \$219 per night plus tax. Call 866.770.7555 to reserve your room now.

Healthcare Provider Organizations

- Early Registration \$695 (register by July 30th)
- Registration \$795 (after July 30th)
 - Additional Registrants: _____ @ \$695 each

Non-Healthcare Providers

- Early Registration \$1095 (register by July 30th)
- Registration \$1195 (after July 30th)
 - Additional Registrants: _____ @ \$1095 each
- Pre-Conference Workshop Registration Sunday, September 14th, \$295**
- Check enclosed (make payable to Medical Development Specialists)
- Visa MasterCard American Express

Exact name as it appears on credit card

Credit card billing address (if different from company)

City	State	ZIP
Card Number	Exp. Date	Signature

- Sorry, I cannot attend but please add me to your mailing list for future conferences.

Cancellation Policy

A written notification is required for a refund (minus \$150 for administrative fees) no later than August 14, 2014. After that date all fees are forfeited; however, you are encouraged to send a substitute if you cannot attend.