HEALTH CARE
AT A HISTORIC CROSSROAD

Naples, Florida
January 21-24, 2018
Every hospital serves a COMMUNITY. Whether the hospital is large or small; rural or urban; independent or system affiliated, the leaders and staff of a hospital care for the health and well-being of the people in their community.

How you do this depends on you. The strength of a leadership team, the culture that is created, the relationships that are built, technology, quality and safety, health reform—these all impact your patients and the community.

This is in addition to simultaneously dealing with the operational side of running a hospital or health system.

This year, Estes Park Institute focuses on helping you meet the changes caused by both of these challenges while maintaining a strong bottom line.

Estes Park Institute
An Estes Park Institute conference is designed to be able to meet each individual health care organization and leader’s educational goals. We offer a variety of session types and topics, including:

**Getting Prepared**

These special sessions are held before the first general session to prepare hospital leaders and help them get the most from the conference:

- Fundamentals for New Board Members
- Fundamentals for New Physician Leaders
- CEO Issues and Networking

**General Sessions**

All conference participants come together to hear the latest information from the health care front and are inspired by experts that have been testing and implementing innovative strategies and finding solutions to solve complex problems and challenges affecting health care delivery as a whole.

**Breakouts**

Registrants self-divide for each of three sets of breakouts—by hospital size and type, by role, and by essential issue. This provides an opportunity to learn and share ideas with other hospitals that understand their particular challenges, exchange information and solutions with those who share their role, and explore the topics that concern them most.

- **...by Hospital**
  - Health Care Systems and Their Hospitals
  - Independent Hospitals
  - Rural Hospitals and Critical Access Hospitals

- **...by Role**
  - Board Members
  - Physicians/Providers
  - CEOs and Executive Team

- **...by Essential Issue**
  - Ambulatory Issues
  - Medical Staff Future
  - Energizing the Workforce
  - Quality, Safety, Patient Experience, and Excellence
  - ACOs, Bundles, and MACRA

**Workshops**

In these small groups, the Estes Park Institute faculty and registrants “roll up their sleeves” and dive into the nuts and bolts of specific issues. Using case studies and success stories, the facilitator engages participants in discussion, enabling them to ask questions that relate to their own organization and leave with a plan to tackle the specific challenge of each workshop.

**Invitational Roundtables**

Our Invitational Roundtables are small, focused sessions that give participants the opportunity to brainstorm and share ideas with their peers from across the country. Roundtables are held for board chairs and CMOs/physician leaders. Each session is limited to 14 participants and facilitated by an Estes Park faculty member.
Naples, Florida
The Ritz-Carlton, Naples | January 21-24, 2018

**Time Schedule**

**Sunday**

1:00 PM - 5:00 PM ................... CONFERENCE REGISTRATION
3:00 PM - 5:00 PM ................. FUNDAMENTALS FOR NEW BOARD MEMBERS
                                    FUNDAMENTALS FOR NEW PHYSICIAN LEADERS
                                    CEO ISSUES AND NETWORKING
5:30 PM - 6:30 PM ................... OPENING GENERAL SESSION (all registrants together)
6:30 PM - 7:30 PM ................... CONFERENCE RECEPTION

**Monday**

6:30 AM - 8:00 AM ................. CONTINENTAL BREAKFAST
7:00 AM - 7:45 AM ................... SPONSOR PRESENTATION BY BLUE ZONES PROJECT® (bring your breakfast)
8:00 AM - 9:00 AM ................... GENERAL SESSION (all registrants together)
9:00 AM - 9:15 AM ................. 15-MINUTE BREAK
9:15 AM - 10:30 AM ................. BREAKOUT BY HOSPITAL TYPE
10:30 AM - 10:45 AM ............... 15-MINUTE BREAK
10:45 AM - 12:15 PM ............... BREAKOUT BY ROLE

**Tuesday**

6:30 AM - 8:00 AM ................. CONTINENTAL BREAKFAST
7:00 AM - 7:45 AM ................... SPONSOR PRESENTATION BY HEALTH DIMENSIONS (bring your breakfast)
8:00 AM - 9:15 AM ................... GENERAL SESSION (all registrants together)
9:15 AM - 9:30 AM ................. 15-MINUTE BREAK
9:30 AM - 11:30 AM ................. BREAKOUT BY ESSENTIAL ISSUE
11:30 AM - 1:00 PM ................. LUNCH (on own)
1:00 PM - 4:30 PM ................. WORKSHOPS (Sessions 1-3)

**Wednesday**

6:30 AM - 8:00 AM ................. CONTINENTAL BREAKFAST
8:00 AM - 9:00 AM ................... WORKSHOPS (Session 4)
9:00 AM - 9:10 AM ................... 10-MINUTE BREAK
9:10 AM - 10:10 AM ................. GENERAL SESSION (all registrants together)
10:10 AM - 10:45 AM ............... TAKE-HOME THOUGHTS AND IDEAS
10:45 AM .............................. CONFERENCE ADJOURNS
Estes Park Institute Conference Program

Health Care at a Historic Crossroad

Conference Program

Sunday

3:00 pm to 5:00 pm  SPECIAL AFTERNOON SESSIONS

Fundamentals for New Board Members  John Horty, LLB; Jim Kopf; Leanne Kaiser Carlson, MSHA; Della Lin, MD; & Aryana Khalid, MHA
Are you a new board member or just feel like you missed out on establishing a firm foundation for serving your hospital? Don't miss our new Board Member Fundamentals, a special session that will bring you up to speed and prepare you to delve into more complex topics covered throughout the conference. This session will cover some of the areas that will be new to recent hospital board appointees—the responsibility for the safety of patients and quality of care, board responsibility to the community it serves, and how a hospital board operates. We will also explore the confusing hospital relationship with local, state, and federal government and the strange system for paying for care.

Fundamentals for New Physician Leaders  Linda Haddad, JD & Anthony Pinevich, MD, MBA
Credentialing, Peer Review, Bylaws, as well as Health, Conduct, and Competence of Colleagues, are issues on the agenda of any medical staff leaders. This session will provide guidance on each of these, designed to prepare leaders for the adventures that are surely ahead.

CEO Issues and Networking  Steven Tringale & Stuart Altman, PhD
Do you wonder how other leaders are dealing with the challenges facing hospitals today? Do you have an innovative idea or strategy you've implemented at your organization? This is an opportunity to network, share information, and explore the issues facing hospital CEOs across the country.

5:30 pm to 6:30 pm  OPENING GENERAL SESSION

Keynote Speech — When Do We Get a Smarter Planet? The Pragmatic Potential of Artificial Intelligence (AI) Augmented Clinical Practice  Joe Kimura, MD, MPH
Gartner identified Artificial Intelligence (AI) as one of three emerging technology megatrends in 2017. As AI climbs the hype curve to the “peak of inflated expectations,” the pragmatic potential of these technologies are often drowned out by the overwhelming marketing blitz. These technologies, when applied appropriately, can open the door to novel care delivery models with disruptive value—particularly enabling care to safely move out of traditional care settings.

6:30 pm to 7:30 pm  CONFERENCE RECEPTION

Monday

6:30 am to 8:00 am  CONTINENTAL BREAKFAST
7:00 am to 7:45 am  SPONSOR PRESENTATION BY BLUE ZONES PROJECT® (bring your breakfast)

The Blueprint for Improved Well-Being
Come discover Blue Zones Project’s® unique, systemic approach to improving well-being by focusing on the “life radius.” By optimizing the settings where we routinely spend our time—worksites, schools, restaurants, grocery stores, faith-based communities, and neighborhoods—we make healthy choices easier and naturally adopt healthier behaviors together as a community. We will be joined by one of our many innovative partners who will provide personal insight into what Blue Zones Project has meant for the sponsor organization and their community.
8:00 am to 9:00 am  GENERAL SESSION

Keynote Speech — Pathways to a Healthier Community | John Benz
John Benz advocates for a more comprehensive, multifaceted approach to health. This presentation will inspire participants to broaden their role and address the health of the community, not just the hospital aspect of the health care delivery system. The pathways will depict how the current health care system, supplemented by a healthier communities approach and a strong managed care infrastructure, can make a difference in the health of our communities, be cost effective, and be medically appropriate.

9:00 am to 9:15 am  BREAK

9:15 am to 10:30 am  BREAKOUT BY HOSPITAL TYPE

Systems & System Hospitals | Stuart Altman, PhD & Steven Tringale
Health systems evolve as they go through various stages of development. Typically systems accumulate the system's assets, then work to strategically align these assets, and as systems move into maturity they fully integrate these assets into a cohesive unified system. The questions and challenges confronting system executives are driven by their systems' unique circumstances and where the system resides on the journey to full clinical integration. This session is designed to spotlight the challenges and outline responses and solutions to those challenges by highlighting deductions of successful system executives and clinical leadership. This session is also relevant for hospital executives, clinical leaders, and trustees investigating system affiliation options.

Independent Hospitals | Dan Mulholland, JD & Barry Bittman, MD

Physician Practice Longevity: The good, the bad and the utterly ridiculous
Surviving the shift to quality payments requires a fundamentally new mindset. No longer can we depend on slowly progressive practice improvement strategies that seemed to work in the past. In contrast to the gentle toe in the water approach that previously allowed us to safely inch forward, a radical approach is now required to improve patient outcomes, boost efficiency, reduce physician burnout, and keep your institution afloat.

When Dollars Alone No Longer Make Sense: Creating a new data-driven health care model for your community
Begin by asking yourself... Are we really (and I mean really) looking at our numbers? And if we are... do we have an effective data-driven transformation strategy in place? The unfortunate reality is that despite the fact that we thumb through countless spreadsheets and payor data, rarely, if ever, do our latest results generate the action plans required to enable us to succeed. In the dense jungle of big data, the path our board, hospital executives, and doctors ultimately choose really matters!

When Our Patients Fail To Cooperate: And we get penalized
One of the most common physician complaints heard repeatedly centers on the fact that quality outcomes driving reimbursement is to great extent dependent upon patient behavior, choices, and adherence to prescribed treatment regimens. "If they are unwilling to cooperate, why should I be penalized?" While they set the ground rules, CMS, Medicaid, and commercial payors do not provide us with a formulaic response or guidance for overcoming what has quickly evolved into a seemingly invisible gorilla in the room. Perhaps it's time to embark upon a radically different journey that extends beyond traditional health care delivery into uncharted unfamiliar community territory.

How to Evaluate Your Options for the Future
There are fewer and fewer independent hospitals left. Each year, scores of hospitals either become absorbed into larger systems, sell to for-profit chains, or close altogether. Boards, management, and physician leaders of independent hospitals need to take a cold-eyed view of the future. The unfortunate fact is that unless your hospital is geographically isolated, very well-endowed, or operated by a governmental entity like a hospital district, it won't be independent or even open five years from now. This session will review the key steps you need to take to evaluate your options and select the one that will serve your community the best, while maintaining as much local input into the future operations of the hospital and protecting the community from being taken advantage of by the new owners.

Stupid Things That Desperate Hospitals Do
When independent hospitals begin to experience financial distress, they may make stupid decisions that will only lead to a death spiral. These include paying doctors too much, not minding what happens in physician offices, grasping at risky revenue sources like suboxone clinics or lab joint ventures, and pushing the limits of billing and coding rules. These things can not only hasten the demise of the hospital, but also risk ruinous liability for the institution and the
people running it. This session will review these bonehead schemes and tell you the consequences for engaging in such folly.

**Rural Hospitals & Critical Access Hospitals** | Robert Mechanic, MBA & Lynn Barr, MPH
Although some rural and critical access hospitals are strong and financially stable, many are struggling. These hospitals frequently struggle to recruit physicians and rely heavily on Medicare and Medicaid, which face future funding constraints. Many serve communities struggling with poverty, addiction, and social ills. Rural hospitals are frequently economic anchors of their communities so that cost cutting may have broad impacts on local residents and businesses. Some rural hospitals may find fiscal stability through joining a larger system. But hospitals should consider other strategic options that include joining or establishing clinically integrated networks and accountable care organizations. We will discuss recent successes by rural hospitals that have shifted to a population health model. We will also discuss how rural hospitals have begun responding to the opioid crisis by integrating behavioral health in primary care clinics, using new, billable services. Finally, we will discuss the future of rural health clinics and potential vulnerabilities of cost-based reimbursement in 2020 and beyond.

10:30 am to 10:45 am       BREAK

10:45 am to 12:15 pm       BREAKOUT BY ROLE

**Hospital Leadership – Board Members** | John Tiscornia, MBA, CPA; Barry Bittman, MD & Jim Kopf
This session is for all board members. The theme of the session is to prepare board members for governing new types of services and organizations that will improve health. It will also include discussions of future risks to health care organizations. This will be a discussion at the board level. The session will address such questions as:

- How will environmental factors impact health care and health?
- What will the board be governing?
- How will the board address current and future risks?
- What will successful governance look like?
- What new responsibilities will the board have in the future?

**Attracting and Developing Physician Leadership** | Linda Haddad, JD & Gary Kaplan, MD
One of the most important roles of physician leaders is to ensure a robust pipeline of up-and-coming physician leaders, preparing the next generation of leadership. It involves identifying candidates (who often self-select in ways not even obvious to them) and creating roles and challenges for their growth in expertise and confidence. Developing a “pool” of potential successors is a hallmark of great leaders and a vital legacy.

**Executive Leadership: External Threats to Hospital Financial Stability** | Stuart Altman, PhD; Robert Mechanic, MBA & Steven Tringale

**The Impact of Future Federal and State Policies on Hospital Revenue**
Never has the health care system been under more pressure to reduce costs than in the current environment. Government payers, Medicare and Medicaid, have been cutting back their payment rates or reducing their growth. Employers and insurers are pushing back on their high rates and individuals are being asked to pay higher deductibles and co-insurance. These trends will be discussed in this segment as well as expectations for the future.

**New Competition for the Hospital Dollar**
Hospitals are “where the money” is—making them a target for ambulatory surgery centers, retail clinics and virtual care companies that want to take away market share. These groups are increasingly allied with payers and competing health systems giving them capital and clout. Large employers are also taking a more active role, directing patients to centers of excellence and creating stronger financial incentives for employees to select low cost options. At risk provider groups and ACOs are working harder to direct patients to alternative care settings. This session will discuss these emerging threats to the hospital and help you prepare to address them.

**The Changing Face of Commercial Insurance**
Commercial health plans, under increasing pressure from their customers to contain costs, will grow more aggressive in their efforts to hold down provider rates, shift costs to consumers, and develop tiered and limited network products that reduce member access to high cost providers. We will discuss strategies and tactics for negotiating effectively with health plans and ensuring your hospitals remain in the position of preferred provider.
Post-Acute Care: Cornerstone to Success in a World of Value Based Transformation

Post-acute care can be subject to significant variation in spending, integration, and quality. Achieving sustained, superior performance from post-acute care is critical for hospitals and health systems—both for those who own post-acute assets and those that must partner with post-acute providers. In addition to new financial risks associated with post-acute care spending and quality, there is risk in patient satisfaction and brand loyalty. Even when payment is not episodic, patient experience is. Post-acute care performance provides opportunities to drive revenue, minimize risk, and increase patient brand loyalty. This session will provide attendees with a summary of the drivers of post-acute care optimization in light of value based transformation, examples of success, and actionable steps for hospitals and health systems to drive post-acute care success in their organizations.

Whither Washington? Two Insiders Discuss the Direction of Health Care | Aryana Khalid, MHA & Jennifer Bell

Washington insiders present different views on how and how much government should pay and regulate health care—and how much government can pay, given its available funds and responsibilities.

Essential Elements of Hospital Owned Ambulatory Care Networks | Joseph Scherger, MD, MPH

Essential elements for success with primary and specialty care: Physician leadership; practice redesign; health and disease orientation; telehealth; advanced access.

Care Coordination Across the Continuum: Patient selection – utilizing resources efficiently; aligning services within the community; patient-centric team-based care; what patients need and how that is changing – psychosocial challenges.

The Future of Medical Staffs | Linda Haddad, JD and Leanne Kaiser Carlson, MSHA

Who better to “design” the Medical Staff than it members? Lawyers will guide you in understanding its legal and structural obligations and create policies and processes for you to accomplish the organization’s stated objectives... provide excellent care, credential members to assure their qualifications, and oversee that care to continually improve it. That work is sometimes described as “giving each physician the best chance to be successful.” But that is what the Medical Staff does, not what it is. That can be up to you, to create this organization that matters to its members; to design the energetic space of a Medical Staff meeting, for personal growth as well as professional engagement and competency; and to design the physician’s role in innovation across the organization. The result of both is the picture of the Medical Staff of the Future. Participants will be shaken from the status quo and prepared to design the organization that will best serve those who have accepted the challenge of leadership.

Health Care Finance and Alternative Payment Models: What Does Your Organization Need to Succeed? | Stuart Altman, PhD; Robert Mechanic, MBA; Steven Tringale & Lynn Barr, MPH

The Fiscal Outlook for Hospitals and Health Systems

The long-term federal and state fiscal outlook ensures continued decline in Medicare and Medicaid spending growth, and spending could drop precipitously if ACA repeal and replace efforts are ultimately successful. Private payers will not take up the fiscal slack. Health systems must become more efficient or face fiscal peril.

How to Turn MACRA’s Lemons into Lemonade

MACRA is the law of the land with its administrative burdens and declining physician reimbursement. But health systems taking a proactive approach to MACRA can generate substantially higher fees, improve clinician reputations, reduce reporting burdens, and use it as a platform for clinical integration. We’ll tell you how.
Alternative Payment Models: Where Are We Today and Where Are We Going?
The new Administration and Congress will not affect the growing push to control health care spending. Doing so requires new care models that are not financially sustainable under fee-for-service. This means the move to alternative payment models will continue. We will begin by reviewing the current state of APMs in Medicare, Medicaid, and commercial markets followed by our prognosis of what to expect in the next five years.

Building Your Clinically Integrated Network
The foundation for success under APMs is a well-functioning integrated network. This requires dedicated skillful physician leaders, a recruitment strategy, compensation (funds flow) model, performance improvement program, payer strategy, and supporting information technology. This session will detail how and why you should proceed.

What’s Next for Bundled Payments?
Mandatory Medicare bundled payment is out (for now). But Medicare will open a new voluntary bundle initiative to all comers next year. Should you stay on the sidelines or jump in? We will review the risks and opportunities of bundle participation, how to select the right bundles, and what you need to have in place to be successful.

Why Your Hospital Should Start an ACO and What It Must Do to Be Successful
Primary care providers are the coin of the realm in delivery system reform. For-profit companies and your competitors may be approaching your clinicians to organize them to serve their purposes, promising free participation and shared savings. Learn why you should organize your own ACO as a defensive strategy and how this can result in better patient care, improved alignment with your clinicians, better performance under MACRA, increased patient loyalty, and higher market share and profits.

Bedside to the Boardroom: Experiencing a Culture of Safety | Della Lin, MD & Gary Kaplan, MD
Experience (def.): “Conscious events that make up an individual’s life. Practical contact and knowledge gained through direct observation and participation.” How do we experience a culture of safety? How does the elusive concept move from rhetoric to reality? The journey toward patient and workforce safety never ends. The physical and psychological safety of our patients and staff is paramount. Safety is not just a strategic priority, it is a core value involving the commitment and unrelenting focus of EVERYONE in our health care organizations. This program will take the framework of “Leading a Culture of Safety Blueprint” (LLI/ACHE 2017), focusing on behaviors that will help to create and sustain a Culture of Safety. Attendees will dive deeply into stories, tools, best practices, and provocative new perspectives that bring a “culture of safety” into tangible experiences—from the bedside to the boardroom.

11:30 am to 1:00 pm LUNCH – on your own

1:00 pm to 2:00 pm WORKSHOPS – FIRST SESSION (choose one)

The Future of Medicare and Medicaid: Impact on Providers and Patients | Stuart Altman, PhD
In this workshop we will review what has been happening with these two government health care financing programs, the political climate today and in the future, and how these programs are likely to change. In particular, we will discuss the relationship between the payment levels of Medicare and Medicaid and how they compare with private insurance and the actual cost of care. We will also review what government publications are saying about the adequacy of government payments, how providers are responding to the limited growth in payments, and what actions patients are taking.

Putting the Patient First: Population Health is the New Business Model for Hospitals | Lynn Barr, MPH
Prevention, wellness, and great primary care improve patient outcomes and save lives. They also increase patient loyalty, reduce hospital penalties, and enhance the health of the community. The surprising secret is this work increases hospital revenue and profits. This workshop will help you construct a great population health program using nurses and other team members to manage the health of the population. New billing codes that support this effort will be discussed, and participants will construct a staffing model for their community.

A True Story—The Creation, Development, and Operations of a Community-Based Health Plan | John Benz
John Benz promotes the development of a community-based managed care plan(s). He will describe how Community Care Plan, which serves over 100k members, was created and effectively competes with the national health plans. The session will provide a high level blueprint of how to develop and operate a quality-based, cost-effective managed care plan with the goal of being the plan of choice in your community.

Essential Habits and Systems for Safe Care: Translating Beyond Inpatient to Ambulatory Care | Della Lin, MD
"We are what we repeatedly do. Excellence then, is not an act, but a habit." Aristotle
Hospitals have been immersed in a patient safety journey for 20 years, primarily focused on the inpatient areas. The journey
continues as preventable harm and suffering still occurs. This workshop—designed to benefit both the novice and experienced safety science enthusiast alike—will continue to look at important safety science principles and habits that are critical for safe care, focusing not only in hospitals, but also more strikingly in the outpatient environment, and the intersection between outpatient and inpatient care.

**Healthy Nutrition and a Successful Wellness Program | Joseph Scherger, MD, MPH**
This workshop will cover the latest scientific information about what constitutes healthy nutrition. A hospital system would want to feed its patients and employees to promote health. The recommendations have changed dramatically this decade away from low fat foods to avoiding sugars and refined carbohydrates. The workshop will also cover the essential elements of a successful wellness program for healthy employees and for the promotion of a healthy community. These include: avoiding and treating substance abuse (including tobacco), physical activity, healthy nutrition, stress management, restful sleep, and social vitality.

**Board Chair Roundtable (Invitational) | John Horty, LLB**

2:00 pm to 2:15 pm  BREAK

2:15 pm to 3:15 pm  WORKSHOPS – SECOND SESSION (choose one)

**Physician Practice Redesign—Are You Serious? | Barry Bittman, MD**
This workshop is designed for physicians, physician leaders, and executives who acquire and manage physician practices. Physicians are overwhelmed. Most are unprepared for what is expected. Incentives are misaligned, and regulatory disarray is unnerving. According to a *Doctors Company* survey of 5,000 physicians, 9 out of 10 physician respondents indicated an unwillingness to recommend health care as a profession. A recent *LinkedIn* survey reported that clinical training did not prepare physicians for the business side of medicine. Deficits related to the operation of physician practices can no longer be justified solely by the revenues hospitals receive. Join Barry Bittman, MD for a practical discussion of key strategies that can avert the clear-cut path to physician burnout.

**Bundled Payments: Making it Real | Gary Kaplan, MD**
As payment models evolve, there is no single model that will be the result of the transition from volume to value. Bundled payments may be an end point or a transition on the way from fee-for-service to full-risk. This workshop will review best practices in successful bundle payment programs and provide a roadmap for employers, providers, and patients coming together around common objectives. There will be ample time for ideas sharing and open discussion.

**Creating and Capturing Value from Advanced Analytics & Artificial Intelligence | Joe Kimura, MD, MPH**
Dr. Kimura will define the core elements of the data value chain and discuss analyzing an organization’s readiness to create and capture value from the adoption of a novel analytic technology.

**Compliance Investigations Potentially Go Criminal | Jim Kopf**
In 2017, The Department of Justice issued two directives specifically aimed at corporate compliance and hospitals. The Office of Inspector General, in conjunction with the DOJ directives, issued guidance that measures compliance program effectiveness. The directives and guidance have one purpose: to aggressively investigate and audit corporate compliance both civilly and criminally for violations of law by their companies. Compliance has been moved to the forefront of DOJ and OIG. Now is the time for hospital and health system boards and senior managers to not only take ownership over the compliance program, but also take it to the next level.

**Clinically Integrated Network (CIN) Workshop: Going from Concept to Reality | Lynn Barr, MPH & Steven Tringale**
Clinically Integrated Networks are a great strategy for hospitals to prepare for the future, tightening their referral network, supporting independent clinicians, reducing readmission penalties, and setting the stage for risk-bearing contracts. This workshop will discuss the essential elements of Physician Leadership, Participation Criteria, Performance Improvement, Information Technology, Payor Contracting, Legal Considerations, and Flow of Funds. Participants will engage in assessing their strengths and weaknesses related to Clinical Integration and better understand the opportunities and threats to their future success.

**Physician Leader Roundtable (Invitational) | Anthony Pinevich, MD, MBA**

3:15 pm to 3:30 pm  BREAK
MIPS Workshop: Preparing for the 2019 Performance Year | Lynn Barr, MPH
Confusion reigns regarding the new Quality Payment Program, exacerbated by two transition years that sent mixed messages to providers. One thing is for sure, 2019 will look nothing like the transition years for MIPS, and most hospitals have millions in Part B payments at risk through 2021 payment adjustments. This workshop will provide tools and guidance for participants to estimate their MIPS Performance Score and the impact on the reputation and financial performance of the health system.

How to Find Funds From the Federal Government | Jennifer Bell
In the days of tight budgets and ongoing pressure to cut costs at home, there are a slew of federal programs in Washington set up to help provide funding to hospitals and health systems. These often overlooked opportunities aren’t just in health care but span the federal government. Whether it’s the Innovation Center, grant programs, or loan assistance, dollars are going out the door whether you’re capturing them or not. This workshop will provide you with the tools to evaluate these programs and explore the best ways to approach the agencies and Congress to unlock these resources. Participants will understand the variety of available funding programs from the federal government and learn where to find and track current and future programs. Participants also will gain an understanding of how best to communicate with federal agencies who oversee these programs. This workshop will be interactive as we explore real world needs and learn how to shape those needs to fit current funding programs.

The Innovative Life: What it Takes to Thrive | Leanne Kaiser Carlson, MSHA
The organizations we lead will be no more imaginative, bold, and powerful than we are as leaders. Think about your life as a designed space—one that can be optimized for growth, contribution, and exhilaration. And look at ways to evolve yourself for the future. Burnout is an increasing challenge across our professions. But it’s not enough to adapt. We want to thrive and move into our highest potential.

5 Interventions to Immunize from Burnout | Della Lin, MD
Physician Burnout has been described a Public Health Crisis. High levels of burnout are correlated with more medical errors, poorer patient adherence, poorer patient satisfaction, and more organizational turnover. Recent surveys report physician burnout at 54%. What and how might we address this top health care concern beyond lip service? This session will take a deeper look into burnout and provide an understanding around the importance of leveraging multiple strategies to mitigate burnout.

How Leading Organizations Are Changing Post-Acute Care | Robert Mechanic, MBA
High quality post-acute care is essential for elderly patients with complex needs in order to support effective recovery from an acute event. But skilled nursing facilities and home health providers often fall short, leading to excess costs for preventable events like readmissions. Health systems that contemplate participating in bundled payment or accountable care are responsible for post-acute care spending and need to make sure patients get the right post-acute services in the right settings with effective coordination across care providers. Learn how eight leading organizations in three markets are working to transform post-acute care.

FUTURE Board Responsibilities—DUAL Transformation | John Tiscornia, MBA, CPA
The health care industry is being disrupted. To thrive in the new health care “norm,” organizations must learn how to think, plan, and act differently to own their future. A leading strategy for creating the right conditions for improved organizational performance and success is “dual transformation.” Dual Transformation is a new cutting-edge strategy approach for boards and leadership to meet the challenges of the future. This workshop will cover the fundamental forces and common patterns that lead to disruptive change. It will also provide board members and leaders with a new approach to strategic planning and provide certain tools for them to utilize.

Wednesday

6:30 am to 8:00 am  CONTINENTAL BREAKFAST

8:00 am to 9:00 am  WORKSHOPS – FOURTH SESSION (choose one)

How to Lobby at Home | Jennifer Bell
In Washington, they say, “if you’re not at the table, you’re on the menu.” Having a working relationship with your Member of
Congress is critical to making sure the priorities of your organization are protected when it comes to policymaking. Regardless of whether you agree with your Member’s politics or if he or she is in the majority or minority, this workshop will help you discover the best ways to engage with your federal official, from hosting an event at your facility and communicating with the local office, to impacting policy positions in Washington, DC. Participants will learn the best methods to communicate with their Member of Congress, including navigating the variety of staff in a Member’s office. You will learn tips on how to have an effective meeting and key dos and don’ts for a tour of your facility. This workshop will involve role playing and audience feedback.

Dealing with the Problem Physician | Linda Haddad, JD
Sometimes excellent clinical skills come in a very disruptive package. Behavior that would get an employee fired, or a less highly regarded physician removed from the medical staff, is tolerated beyond reason when the physician is a big contributor in terms of patient volume and clinical skills. Leaders often resort to requiring him or her to get a psychiatric evaluation or to go to charm school. Such direction is more wishful than practical or justified. This workshop shares the tools and processes to resolve this dilemma that stymies medical staff leaders while the environment of care deteriorates. Participants will learn how to head off strife by: Developing policies to guide behavior and practice; learning to intervene at the earliest indications of failure; and, designing a Performance Improvement Plan to create the best chance for success.

Philanthropy for Population Health and Innovation | Leanne Kaiser Carlson, MSHA
Philanthropy can create a bridge from the present to the future. It enables us to create new health models ahead of the marketplace—and launch innovative pilots that are later funded operationally. We’re leaving the era where philanthropy was about buildings. Now it’s about impact and the experience we create for our donor investors. There is extraordinary untapped philanthropic potential for health. To release it, we need to think differently.

Excise Tax on Excess Compensation by Exempt Organizations: The Triple X Section of the New Tax Reform Law | Dan Mulholland, JD
Just in time for Christmas, Congress gave us the gift of a comprehensive overhaul of the Tax Code. But there may be a package under the tree of some nonprofit hospitals and health systems that contains a lump of coal. Tucked away in this 1100-page bill is a new provision that will impose a 21% excise tax on compensation in excess of $1,000,000 paid by exempt organizations to their five highest compensated employees. A last-minute amendment exempts compensation paid to physicians, but it only applies to compensation for medical services. Like anything dealing with taxes, the devil is in the details. Hospitals and health systems would be well advised to review their executive compensation arrangements and policies as soon as possible to determine how this will impact them going forward. There may also be opportunities to establish deferred compensation plans that will reduce the compensation subject to the tax or even bring it below the $1,000,000 threshold. In addition, even though compensation for medical services is not covered, it would be wise to review all existing physician compensation arrangements to make sure that medical and administrative compensation is separately accounted for, to avoid arguments later on as to whether the medical services exception applies. And the decision by Congress to categorically exempt physician compensation from the excess compensation rules raises interesting questions as to how fair market value and commercial reasonableness should be analyzed for the purposes of the Stark Law.

9:00 am to 9:10 am  BREAK

9:10 am to 10:10 am  GENERAL SESSION

Keynote Video Address w/Panel Discussion — The Opioid Crisis: What the Hospital and Medical Staff Should Do | Anna Lembke, MD
The opioid crisis, now not just a community problem or a problem for the doctor's office or the hospital emergency room, is becoming a major problem and responsibility for hospitals and medical staffs. And it must be dealt with. Dr. Anna Lembke describes the systemic factors driving opioid overprescribing, the root cause of the current opioid epidemic; describes the psychodynamic factors (narcissism, primitive defense mechanisms) driving opioid overprescribing; and, identifies what hospitals can do to address the problem of opioid overprescribing and curb the opioid epidemic.

10:10 am to 10:45 am  TAKE HOME THOUGHTS & IDEAS | Jim Kopf

10:45 am  CONFERENCE ADJOURNS

Conference program and presenters are subject to change. Conference registrants will receive an updated program with final session order and times.
Guest Presenters

An outstanding lineup of new guest speakers will join the Estes Park Institute faculty to present important and timely topics. These fresh voices represent the best in their individual fields and will share their expertise generously in our breakouts and workshops.

**Lynn Barr, MPH**

Lynn Barr, MPH, organizer of the National Rural Accountable Care Consortium, addresses the specific challenges facing our rural hospital and critical access hospital participants.

Ms. Barr is a recognized leader in the movement to transform and improve our nation’s health care systems. While working at a rural hospital as Chief Information Officer, Lynn organized the National Rural Accountable Care Consortium to overcome barriers for rural health providers so they could participate in innovative payment models under health care reform. Ms. Barr currently serves as the Chief Executive Officer of Caravan Health.

**John Benz**

John Benz, President and CEO of Community Care Plan, brings his wealth of experience to the healthy communities discussion, advocating for a more comprehensive, multifaceted approach to health.

Mr. Benz has been a leader in the health care industry for many years, working adamantly to strengthen the community by focusing on accelerated performance in service, quality, finance, people, and growth. He has a proven track record of developing and implementing transformational strategies and fostering collaboration by establishing clinical alliances and securing strategic partnerships in order to create highly integrated models of care.

**Joe Kimura, MD, MPH**

Joe Kimura, MD, MPH, discusses the potential of artificial intelligence technologies to open the door to novel care delivery models and enable care to safely move out of traditional settings.

Dr. Kimura is Chief Medical Officer of Atrius Health and an internist at Harvard Vanguard Medical Associates, a medical practice of Atrius Health. He has broad experience leading ambulatory care delivery system improvements with specialty expertise in clinical informatics and health care data analytics. Since 2014, he has served as co-chair of the ONC HIT federal advisory workgroup on Advanced Health Models and Meaningful Use.

**Anna Lembke, MD**

Anna Lembke, MD, author of *Drug Dealer, MD: How Doctors Were Duped, Patients Got Hooked, and Why It’s So Hard to Stop*, shares her insight into the cause and effect of the opioid epidemic in America.

Dr. Lembke, a practicing psychiatrist, professor, and researcher, is the Program Director for the Stanford University Addiction Medicine Fellowship and Chief of the Stanford Addiction Medicine Dual Diagnosis Clinic. Her key areas of interest include treating patients who have become addicted to prescription drugs. She takes a holistic, harm-reduction approach to each patient, and encourages spiritual and alternative therapies in the process of healing.
Returning guest presenters and Washington insiders, Jennifer Bell and Aryana Khalid, MHA, will debate the most current health care issues from both sides of the aisle.

Jennifer Bell
Jennifer Bell, founding partner of Chamber Hill Strategies, has a proven track record of success in Washington. One of The Hill’s “Top Lobbyists,” she has many years of experience in advocacy and policy development. With extensive experience and deep business knowledge, she has worked effectively with companies, coalitions, and associations to create policy solutions and legislative opportunities, respond to investigations, and mitigate the effects of harmful legislation and regulations.

Aryana Khalid, MHA
Aryana Khalid manages the health and wellness government affairs practice at The Glover Park Group (GPG). In this role, she provides strategic political and legislative counsel on a broad range of issues. Before joining GPG,ARYana was as an Executive Vice President at America's Health Insurance Plans. She also previously served as Chief of Staff at the Centers for Medicare & Medicaid Services (CMS) for CMS Administrator Marilyn Tavenner.

Additional guest presenters are being confirmed. Watch EstesPark.org for updates.
Estes Park Faculty

Stuart Altman, PhD ■ Health Financing & Policy
Dr. Stuart Altman, Sol C. Chaikin Professor of National Health Policy at The Heller School for Social Policy and Management, Brandeis University, is an economist with five decades of experience working closely with issues of federal and state health policy within government, the private sector, and academia. He has served on numerous government advisory boards on both the federal and state levels, is a published author of many books and journal articles, and is recognized as a leader in the health care field.

Barry Bittman, MD ■ Health Care Innovations & Management
Dr. Barry Bittman is a neurologist, author, international speaker, inventor, and researcher. As CEO of the Institute for Innovative Healthcare, he serves as a consultant for health systems, hospitals, and physician organizations engaged in transforming health care delivery. Based upon his commitment to shaping the future of health care, Dr. Bittman focuses on population health management, risk-based contracting, shared savings, care coordination across the continuum, and physician alignment.

Linda Haddad, JD ■ Health Law & Physician-Hospital Relationships
Linda Haddad is a Senior Partner in the law firm of Horty, Springer & Mattern in Pittsburgh, Pennsylvania and a Fellow in the Allegheny County Bar Foundation. She has served as an Adjunct Instructor at the Heinz College at Carnegie Mellon University Masters of Medical Management Program and has presented in hundreds of educational conferences, including programs conducted by the American Health Lawyers Association, medical societies, hospital associations, and hospital and health care systems.

John Horty, LLB ■ Health Policy & Governance
John Horty serves as Chair of the Estes Park Institute and is managing partner of the law firm Horty, Springer & Mattern, PC. Mr. Horty has educated board and medical staff leaders for decades, and his reputation for promoting leadership and supporting community hospitals is well established in the health care industry. He is an Honorary Fellow of the American College of Healthcare Executives, a recipient of the Award of Honor of the American Hospital Association, and holds an Honorary Life Membership in the American Hospital Association.

Leanne Kaiser Carlson, MSHA ■ Health Futures, Innovation & Wisdom Cultures
Leanne Kaiser Carlson is a futurist and organizational alchemist. Through the Kaiser Institute, Leanne enables CEOs to transmute what is limited or undesirable in themselves and their organization. Leanne also brings unique insight around the power of generosity to shape the future of health systems. She believes generosity heals and creates tools and curriculums for health care, unleashing immense new resources and enabling hospital foundations to grow.

Gary Kaplan, MD, FACP, FACMPE, FACPE ■ Innovation Medicine
Dr. Gary Kaplan has served as chairman and CEO of the Virginia Mason Health System in Seattle, Washington since 2000, where he is also a practicing internal medicine physician. Dr. Kaplan is widely recognized as one of the most influential physician executives in health care and has been honored nationally for his leadership. He is a founding member of Health CEOs for Health Reform and has held leadership positions with numerous organizations.

James Kopf ■ Health Care Regulations, Integrity & Compliance
Jim Kopf is an executive health care consultant and an expert on health care fraud and compliance. His prior experience includes 26 years as a federal law enforcement officer with the Office of Inspector General, U.S. Department of Health and Human Services, and the Federal Bureau of Investigation. Mr. Kopf co-authored and was the director of Operation Restore Trust, a presidential initiative which set the current standard for health care fraud investigations.
Estes Park Faculty

Della Lin, MD ■ Patient Safety Leadership

As a physician with leadership experience for over 25 years, Dr. Lin brings clarity, inspiration, and provocative challenges to her audiences by integrating practical clinical experience with systems thinking around organizational resilience, leadership, culture, and new thinking in the patient safety and quality landscape. She is an author focused on successful patient safety strategies and culture and also works with organizations and hospitals in their board, MEC, joint leadership, and patient safety seminars.

Robert Mechanic, MBA ■ Public Policy, Strategy & Health Care Finance

Robert Mechanic is senior fellow at the Heller School of Social Policy and Management at Brandeis University and Executive Director of the Health Industry Forum, a program devoted to improving the quality and effectiveness of the U.S. health care system. His research focuses on health care payment systems and the adaptation of organizations to new payment models. He is an expert in episode-based payment systems.

Dan Mulholland, JD ■ Health, Legal & Regulatory Affairs

Dan Mulholland is a senior partner in the law firm of Hortry, Springer & Mattern, PC. He has spoken and written extensively concerning a wide variety of health law topics. Mr. Mulholland regularly advises clients on hospital medical staff, corporate tax fraud and abuse, and compliance matters and frequently provides strategic counseling to hospital and health system boards. He is also editor of a number of HortrySpringer publications, including Health Law Express.

Anthony Pinevich, MD, MBA, FACP ■ Medical Staff Issues

Dr. Anthony Pinevich serves at UPMC Mercy in Pittsburgh, Pennsylvania, as Vice President of Medical Affairs, Chief of Nephrology, Director of Apheresis, and Director of the Internal Medicine residency. His hospital/health system oversight areas have included hospitalist services, risk management, infection control, medical staff services, case management, utilization review, social services, and safety/quality, including pay-for-performance activities.

Joseph Scherger, MD, MPH ■ Information Technology & Quality Improvement

Dr. Joseph Scherger is Vice President for Primary Care at Eisenhower Medical Center in Rancho Mirage, California. He is Clinical Professor of Family Medicine at the Keck School of Medicine at the University of Southern California (USC). Dr. Scherger's main focus is on the redesign of office practice using the tools of information technology and quality improvement. He has served in an editorial capacity and as a medical expert for several publications and has authored over 400 medical publications.

John Tiscornia, MBA, CPA ■ Health Care Financial Planning & Governance

John Tiscornia is Managing Director at Huron Healthcare. He is the past chairperson of the finance committee of a major health care system and a former partner and director of Arthur Andersen’s National Health Care Practice. Mr. Tiscornia is a clinical professor in the Graduate School of Public Health and Community Medicine at the University of Washington. Throughout his career, he has been involved in strategic, financial, business, and regulatory challenges of the health care industry and has had extensive experience with governance.

Steven Tringale ■ Strategic Planning, Public Policy & Health Care Reform

Steven Tringale is President and CEO of Tringale Health Strategies LLC (THS), a Boston-based consultancy that delivers strategic planning, network and contract development, product development, and hospital/physician alignment strategies to clients in the health care industry. He has held a number of senior executive positions in large health care companies, presented to numerous groups, and testified in front of many state legislatures and congressional committees.

Most faculty members will present at each conference.
The Ritz-Carlton, Naples
January 21-24, 2018

$459 Coastal View  $515 Gulf Front
$489 Gulf View    $565 Beach Front

The beauty and warmth of the Gulf of Mexico will surround you at The Ritz-Carlton, Naples. Experience the tropical atmosphere and white sand beaches of Naples and the impeccable service that only The Ritz-Carlton can provide. Indulge in a luxurious spa treatment, try a wide variety of water sports, or enjoy a round of championship golf at nearby Tiburón. Escape the winter weather at a long-time Estes Park favorite!
Conference Objective

The objective of an Estes Park Institute conference is for health care leaders to learn and explore—with our health care experts—the current trends, changes, innovations, and solutions to help navigate the challenges presented by health reform and a rapidly changing health care environment.

Target Audience

The Estes Park Institute conference experience is for the entire leadership team—executives, physicians, and trustees. With the future of the community hospital so dependent on cooperation among governance, administration, and physician leaders—especially employed physicians—the Estes Park Institute is committed to the development of these teams.

Community Representatives

Community involvement is another important aspect of health care. When you work together with community leaders and organizations to implement programs that promote health and well-being, everyone benefits.

Tackling the opioid crisis with your local police force, promoting health and wellness through the school district, engaging with government officials to impact legislation—initiatives like these require a more advanced level of understanding for all involved. That’s why, for each conference registrant, we offer complimentary registration for a community representative.

Community representatives will learn more about the challenges you face as a health care leader and hear innovative ideas for improving public health. This insight and knowledge will lead to improved cooperation and spark ideas for additional collaborative efforts.

Mission

The Estes Park Institute believes health care must have a moral center, and that health care leaders and professionals have the highest duty and responsibility in our society. The mission of Estes Park Institute is to educate teams of health care executives, physicians, and trustees so that they can better serve their patients and all of the people in their local communities, and can exercise leadership in this field. We fulfill that mission by presenting up-to-the-minute information, analysis, and insight into the problems, opportunities, and changes that shape health care in the United States.
CME/ACCME: This activity has been planned and implemented in accordance with the Essential Areas and Policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint sponsorship of the University of Pittsburgh School of Medicine and the Estes Park Institute. The University of Pittsburgh School of Medicine is accredited by the ACCME to provide continuing medical education for physicians.

ACHE: The Estes Park Institute is authorized to award 16 hours of pre-approved ACHE Qualified Education credit for this program toward advancement, or recertification, in the American College of Healthcare Executives. Participants in this program who wish to have the continuing education hours applied toward ACHE Qualified Education credit must self-report their participation. To self-report, participants must log into their MyACHE account and select “My Education Credit” to log hours earned.

NAMSS: This program has been approved by the National Association of Medical Staff Services for 7 hours of continuing education units. Medical staff services and credentialing professionals are responsible for verifying attendance at continuing education activities relative to their recertification. For your convenience, we will provide a certificate as proof of attendance.

Thank you to our sponsors:

Blue Zones Project®

Health Dimensions Group

“This conference session provided me with a much better understanding of MACRA... will be able to explain to others.”

— Physician Leader
Each Registration Includes:

- Attendance at one Estes Park Institute conference and complimentary attendance for a community representative
- Continental breakfast each morning for registrants and guests
- Opportunities to network with the Estes Park Institute faculty and registrants
- Online access to all presentation, reference, and resource materials
- CME/ACCME, ACHE, and NAMSS credit

Tuition

$6,700 (each team of four)
$1,895 (single)

Upon registration, instructions for making hotel reservations will be provided. Tuition for a physician, health care executive, or board member includes attendance at one Estes Park Institute conference and complimentary admittance for a community representative who is not directly affiliated with the health care organization, but who may be involved in community health initiatives.

Faculty Disclosure

In accordance with the Accreditation Council for Continuing Medical Education requirements on disclosure, information about relationships of presenters with commercial interests (if any) will be included in materials distributed at the time of the conference.

Americans With Disabilities Act Statement

We encourage participation by all individuals. If you have a disability, advance notification of any special needs will help us to better serve you. Please notify us of your needs at least two weeks in advance of the program.

"All relates to my current position as a medical staff leader. I will soon lead both employed and non-employed providers and must work to bridge the working relationship between providers and the hospital."

— Employed Physician Leader
Upon registration, you will be sent accommodation information.

COMMUNITY REPRESENTATIVE
Tuition for a physician, health care executive, or board member includes attendance at one Estes Park Institute conference and complimentary admittance for a community representative who is not directly affiliated with the health care organization, but who may be involved in community health initiatives.

CANCELLATION POLICY
All cancellations must be confirmed in writing. Written cancellations received by the Estes Park Institute 30 or more days prior to the opening of the conference are eligible to receive a refund, less a processing fee of $150 per person. Cancellations received within 15–29 days of the opening of the conference are not eligible for a refund, but money will be held on account up to 12 months for transfer to another Estes Park Institute conference. Cancellations within 14 days of the opening of the conference and “no show” registrants are not eligible for refund or transfer.

Method of Payment
- Bill hospital/health system
- Check enclosed (payable to: Estes Park Institute)

Total Paid Registrants:
- $6,700 (each team of four)
- $1,895 (single)

Total Amount Due: $

Registrant Names
(Space may be reserved and names submitted at a later date. Additional names may be attached on a separate sheet.)

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ONLINE:
EstesPark.org

CALL:
800-727-8225

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724-548-1383

MAIL THIS FORM TO:
Estes Park Institute
P.O. Box 400
Englewood, CO 80151

Select Conference:

- Naples, FL
  The Ritz-Carlton, Naples
  January 21-24, 2018

- Maui, HI*
  Grand Wailea
  February 11-16, 2018

- Phoenix, AZ
  Arizona Biltmore
  March 18-21, 2018

- San Antonio, TX
  Hilton Palacio del Rio
  April 22-25, 2018

- San Francisco, CA
  The Ritz-Carlton, San Francisco
  November 4-7, 2018

*At the Hawaii conference, Wednesday is an open day for hospital group activities. An additional day of sessions will take place on Thursday, and Wednesday sessions will take place on Friday.