

HEALTH CARE

AT A HISTORIC CROSSROAD



San Francisco, California
October 29 – November 1, 2017



THE ESTES PARK INSTITUTE
ESTESPARK.ORG

Health Care at a Historic Crossroad

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

Conference Sessions

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.



San Francisco, California

The Ritz-Carlton, San Francisco | October 29 – November 1, 2017

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
- 8:00 AM - 9:00 AM.....GENERAL SESSION (all registrants together)
- 9:00 AM - 9:20 AM.....20-MINUTE BREAK
- 9:20 AM - 10:35 AM.....BREAKOUT BY HOSPITAL TYPE
- 10:35 AM - 10:50 AM.....15-MINUTE BREAK
- 10:50 AM - 12:20 PM.....BREAKOUT BY ROLE

Tuesday

- 6:30 AM - 8:00 AM.....CONTINENTAL BREAKFAST
- 8:00 AM - 9:40 AM.....GENERAL SESSION (all registrants together)
- 9:40 AM - 10:00 AM.....20-MINUTE BREAK
- 10:00 AM - 12:00 PM.....BREAKOUT BY ESSENTIAL ISSUE
- 12:00 PM - 1:15 PM.....LUNCH (*on own*)
- 1:15 PM - 4:45 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

Time Schedule



THE
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Health Care at a Historic Crossroad

Conference Program



THE
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Sunday

3:00 pm to 5:00 pm

SPECIAL AFTERNOON SESSIONS

Fundamentals for New Board Members | John Horthy, 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 – Will Health Care Reach Digital Nirvana? | Robert Wachter, MD

In less than a decade, health care has gone from a largely paper-based industry to a mostly digital one. While everyone had great hopes that this transition would lead to improved quality, safety, and efficiency, the road to digital nirvana has been rocky at best. Dr. Robert Wachter, chair of UCSF's Department of Medicine and the bestselling author of *The Digital Doctor: Hope, Hype, and Harm at the Dawn of Medicine's Computer Age*, will explore why medicine's digital journey has been so bumpy and what the opportunities are for health IT to reach its full potential to improve, and perhaps even transform, the system.

6:30 pm to 7:30 pm

CONFERENCE RECEPTION

Monday

6:30 am to 8:00 am

CONTINENTAL BREAKFAST

8:00 am to 9:00 am

GENERAL SESSION

Keynote Speech – 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 addresses 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.

9:00 am to 9:20 am **BREAK**

9:20 am to 10:35 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.

10:35 am to 10:50 am **BREAK**

10:50 am to 12:20 pm **BREAKOUT BY ROLE**

Rishi Manchanda, MD, MPH, author of *The Upstream Doctors*, will speak at each breakout.

Dr. Manchanda will deliver his important “upstream medicine” message which aims to reinvigorate primary care by teaching doctors to think about—and treat—the social and environmental conditions that often underlie sickness. As a health care leader serving in a variety of settings, Dr. Manchanda has led transformation efforts and built cross-sector clinical and community programs that have improved health outcomes.

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?

Physician Talent Development | Linda Haddad, JD; Gary Kaplan, MD & Anthony Pinevich, MD, MBA

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.

Tuesday

6:30 am to 8:00 am **CONTINENTAL BREAKFAST**

8:00 am to 9:40 am **GENERAL SESSION**

Point-Counterpoint | 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.

9:40 am to 10:00 am **BREAK**

10:00 am to 12:00 pm **BREAKOUT BY ESSENTIAL ISSUE**

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

Essential elements for success with primary and specialty care: Physician leadership; practice redesign; health and disease orientation; telehealth; how FQHCs can effectively deal with Medicaid expansion.

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; Leanne Kaiser Carlson, MSHA & Anthony Pinevich, MD, MBA

Who better to “design” the Medical Staff than its 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.

12:00 pm to 1:15 pm

LUNCH – on your own

1:15 pm to 2:15 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.

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.

Physician Leadership for Optimal Organizational Performance | Della Lin, MD & Stephen Swensen, MD, MMM

Effective physician leaders are necessary for the best patient experience and outcomes, and optimal organizational performance. Learn how the best organizations select, develop, and promote physician leaders who can grow social capital and deliver the Triple Aim for patients and communities (better experience with improved outcomes at lower cost). A framework will be presented that is a strategic and validated approach to leader value creation. It entails discipline to Create Vision and Build Will, Develop Capability, Engage across Boundaries, Shape Culture and Deliver Triple Aim Results. The strategy of physicians leading improvement and innovation is a game-changing and market-differentiating approach for leaders to create high value health care. The framework will address the relationship between effective physician leadership and improved patient experience and safety. It will demonstrate the necessity to establish an interdependent, balanced approach to leader value creation built on the foundation of Systems and Behavioral Competencies.

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.

2:15 pm to 2:30 pm **BREAK**

2:30 pm to 3:30 pm **WORKSHOPS – SECOND SESSION** (*choose one*)

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 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 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.

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.

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.

Physician Leader Roundtable (Invitational) | Linda Haddad, JD

Chief Medical Officers and other physician leaders share their expertise, their insights, and their conundrums. We will address common, but baffling, issues, such as:

- a. How do the CMO and Medical Staff President relate to one another? Where does one responsibility end and the other pick up?
- b. Resolving inherent conflicts in the employment/independent medical staff member dichotomy
- c. Engaging physicians to enhance their experience and contribute to their success

3:30 pm to 3:45 pm **BREAK**

3:45 pm to 4:45 pm

WORKSHOPS – THIRD SESSION (*choose one*)

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.

Seven Habits for Highly Safe People & Organizations in Ambulatory Health 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.

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.

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 Harty, LLB

Wednesday

6:30 am to 8:00 am

CONTINENTAL BREAKFAST

8:00 am to 9:00 am

WORKSHOPS – FOURTH SESSION (*choose one*)

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.

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 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.

Leading a Culture of Safety | Gary Kaplan, MD

This workshop will provide strategic guidance and practical tools for CEOs, senior leaders, and board members to lead the implementation of cultures focused on patient and workforce safety in their organizations. We will summarize and build on the recommendations of the Lucian Leape Institute/ACHE collaboration resulting in the "Blueprint for Success" released in early 2017 and applicable across the continuum of care and at all points on an organization's cultural journey. The workshop will involve both presentation and opportunities for robust open dialogue focused on the opportunities and challenges for leaders implementing this important work.

9:00 am to 9:10 am **BREAK**

9:10 am to 10:10 am **GENERAL SESSION**

Keynote Speech – Esprit de Corps—Taking Care of Each Other for Our Patients | Stephen Swensen, MD, MMM

Esprit de Corps is the single most impactful leading indicator of patient experience, outcomes, and cost as well as organizational performance. A framework will be presented that strengthens esprit de corps (optimized engagement, satisfaction, and wellbeing with negligible burnout). We will identify six management and leadership actions that nurture esprit de corps; describe the human and organizational cost of disengagement and burnout; define five leadership behaviors that raise staff engagement and restore joy; identify key system changes to promote esprit de corps; and understand interventions that promote meaning, choice, camaraderie, and equity.

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.

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.

Rishi Manchanda, MD, MPH

Rishi Manchanda, MD, MPH, a physician and public health innovator, presents his important "upstream medicine" message which aims to reinvigorate primary care by teaching doctors to think about—and treat—the social and environmental conditions that often underlie sickness.

Dr. Manchanda is a physician leader, health system innovator, and author. He is President of HealthBegins, a social enterprise that provides health care professionals with tools and support to improve care and the social factors that make people sick in the first place. His 2013 TEDbook, *The Upstream Doctors*, introduced a new model of the health care workforce that includes "upstreamists" who improve social determinants of health.

Stephen Swensen, MD, MMM, FACR

Stephen Swensen, MD, MMM, FACR, an expert in leadership and professional burnout, shares methods for developing thoughtful leaders who create joy for the colleagues they lead.

Dr. Swensen is dedicated to the development of thoughtful leaders and teams that have the capability to nurture camaraderie, purpose, wellbeing, and trust in order to create joy in work for the colleagues they lead. He is a recognized, well-published expert in leadership and professional burnout. Dr. Swensen serves as a Senior Fellow of the Institute for Healthcare Improvement and is the Medical Director for Professionalism and Peer Support at Intermountain Healthcare.

Guest Presenters

Robert Wachter, MD

Robert Wachter, MD, Chair, UCSF Department of Medicine, will share his expertise for moving physicians and technology forward to effectively advance patient care.

Dr. Wachter is a recognized thought leader in health care quality, safety, and organization of care. A practicing physician, he is intimately familiar with and involved in both the promises and challenges related to the computerization of health care. His latest book offers an unvarnished view of the early days of health care's transformation and an insightful and provocative exploration of what it will take, from all of us, to successfully shift from "disruption" to "disruptive innovation."

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. Given her extensive experience and her 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. Jennifer has nearly 20 years of experience working on and around Capitol Hill.

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 Horthy, 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 Horthy, LLB ■ Health Policy & Governance

John Horthy serves as Chair of the Estes Park Institute and is managing partner of the law firm Horthy, Springer & Mattern, PC. Mr. Horthy 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 Harty, 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 HartySpringer 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.

San Francisco, California



The Ritz-Carlton, San Francisco October 29 – November 1, 2017

\$439 Deluxe Rooms are sold out. *Various specialty rooms are available. Call 1-800-727-8225 for current room information.*



The Estes Park Institute begins a new conference year at a San Francisco historic landmark. Located in the heart of downtown, The Ritz-Carlton, San Francisco is one of the finest hotels to call Nob Hill home. This 1909 Neoclassical building has been transformed into a beautiful retreat of modern classic design. With commanding views of the city, timeless elegance, and impeccable service, this award-winning AAA Five-Diamond hotel is the perfect downtown location. And it's easy to explore the "City by the Bay's" spirited atmosphere and diverse cultural experiences as the historic cable car stops right outside the hotel doors.



THE
**ESTES
PARK**
INSTITUTE

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.

Continuing Education

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:



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

— Physician Leader

Registration Information

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

Conference Registration



THE ESTES PARK INSTITUTE

1 ONLINE:
EstesPark.org

2 CALL:
800-727-8225

3 FAX THIS FORM TO:
724-548-1383

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

Select Conference:

_____ **San Francisco, CA**
The Ritz-Carlton, San Francisco
October 29 - November 1, 2017

_____ **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

*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.

_____ Contact Name		_____ Contact Title	
_____ Contact Email		_____ Contact Phone	_____ Fax
_____ Health Care Organization			_____ Number of Beds
_____ Street Address			
_____ City	_____ State	_____ Zip	
_____ CEO Name		_____ CEO Title	
_____ CEO Email		_____ Name of System (if applicable)	

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: \$ _____

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.

REGISTRANT NAMES

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

_____ Registrant Name	_____ Registrant Name
_____ Registrant Title	_____ Registrant Title
_____ Registrant Email	_____ Registrant Email
_____ Community Representative	_____ Community Representative
_____ Registrant Name	_____ Registrant Name
_____ Registrant Title	_____ Registrant Title
_____ Registrant Email	_____ Registrant Email
_____ Community Representative	_____ Community Representative