HEALTH CARE
AT A HISTORIC CROSSROAD

Phoenix, Arizona
March 18-21, 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.
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 Roundtable (Invitational)

**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.

**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 CEOs, board chairs, and CMOs/physician leaders. Each session is limited to 14 participants and facilitated by an Estes Park faculty member.
Phoenix, Arizona  
Arizona Biltmore | March 18-21, 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 ROUNDTABLE (Invitational)  
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 - 9:15 AM ............................... GENERAL SESSION (all registrants together)  
9:15 AM - 9:30 AM ............................... 15-MINUTE BREAK  
9:30 AM - 10:45 AM ............................. BREAKOUT BY HOSPITAL TYPE  
10:45 AM - 11:00 AM ............................ 15-MINUTE BREAK  
11:00 AM - 12:30 PM ............................ BREAKOUT BY ROLE

### Tuesday

6:30 AM - 8:00 AM ............................... CONTINENTAL BREAKFAST  
7:00 AM - 7:45 AM ............................... SPONSOR PRESENTATION BY HEALTH DIMENSIONS GROUP  
(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 - 10:30 AM ............................ GENERAL SESSION (all registrants together)  
10:30 AM - 11:00 AM ............................ TAKE-HOME THOUGHTS AND IDEAS  
11:00 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 Roundtable (Invitational)** | Stuart Altman, PhD; Gary Kaplan, MD; & Steven Tringale
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 — 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.

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 how Blue Zones Project® is helping communities across the U.S. bend the curve of well-being. Learn how the Avedis Foundation’s visionary leadership launched the first Blue Zones Project in the state of Oklahoma. Using Blue Zones
Project’s systemic approach to improving well-being by optimizing the settings where we routinely spend our time—worksites, schools, restaurants, grocery stores, faith-based communities, and neighborhoods—Pottawatomie County, Oklahoma, is making healthy choices easier and naturally adopting healthier behaviors together as a community. Be inspired by our innovative partnership with Avedis Foundation and gain personal insight from its President & CEO, Michelle Briggs, into what Blue Zones Project has meant for the organization and community.

8:00 am to 9:15 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.

9:15 am to 9:30 am  BREAK

9:30 am to 10:45 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 are becoming absorbed into larger systems, selling to for-profit chains, or closing 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 cannot 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.

10:45 am to 11:00 am  BREAK

11:00 am to 12:30 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.

Tuesday

6:30 am to 8:00 am CONTINENTAL BREAKFAST

7:00 am to 7:45 am SPONSOR PRESENTATION BY HEALTH DIMENSIONS GROUP (bring your breakfast)

Post-Acute and Senior Care Facing Historic Changes — Top Trends for 2018
Like never before, acute and post-acute have to align, operationally, financially, and clinically. This alignment is critical to the operational health of all organizations in the care continuum, and most importantly, the care of patient. This session will outline the top trends in post-acute and senior care and their impact on hospitals and health systems, both those who own post-acute and senior care assets, and those who partner along the continuum. Top trends to be discussed include: continued investment and ownership changes, a renewed focus on rewarding value over volume, rural health challenges, rapid development of senior living properties, declines in occupancy and length of stay, increase in government oversight, increases in managed care, medicalization of housing models, and the expansion of acute and post-acute partnerships.

8:00 am to 9:15 am GENERAL SESSION

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.

9:15 am to 9:30 am BREAK

9:30 am to 11:30 am BREAKOUT BY ESSENTIAL ISSUE

The Future of Medical Staffs | Linda Haddad, JD & 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.*

**Seeing Long-Term Care from a New Perspective: Creating Tomorrow’s Complete Care Continuum** | Barry Bittman, MD & Ray Washburn

Hospitals and providers are progressively assuming more and more responsibility for the overall cost of care beyond their four walls. Continuing to maintain a wall between acute and long-term care services is likely to result in a losing strategy for acute care systems. There’s never been a better time to build collaborative relationships with current and emerging post-acute providers. Yet for most of us, this is truly uncharted territory. Join Barry Bittman, MD and Ray Washburn, former CEO and Skilled Nursing Facility expert, for a new perspective of tomorrow’s complete continuum of care. Join us on a journey that extends into an exciting realm that every hospital must discover. With a practical and humanistic focus, Washburn and Bittman explore the prospect of integrating and optimizing care coordination for the aging population you serve in ways you have never imagined. This unique presentation fills the void in our knowledge of today’s post-acute care system that has become an essential element of risk-based contracting for senior populations.

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.

**Population Health Decision Support** | Barry Bittman, MD & Jeff Pratt, MBA

How can we expect to improve outcomes and reduce costs within a complex $3 trillion health care system without the right tools? Join Barry Bittman, MD and Jeff Pratt, CEO of SpeedTrack, for a real-time interactive exploration of a radically unique and agile Guided Information Access (GIA) software system that follows your line of reasoning in accordance with your choices. Bittman and Pratt will show you how to analyze complex multidimensional healthcare data—Big Data—from a host of perspectives in an unprecedented manner without the need for costly IT expenditures. In addition to following your lead, this...
unique program guides you with an underlying intelligence—presenting options you may not have previously considered, yet are critical to your final decision-making and ultimate success. If you are contemplating or in the midst of a risk-based contract, ACO, Bundled Payment or capitation model, this presentation will show you how to efficiently get the answers you need when you need them—now!

**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.

**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)

**Improve Patient Outcomes, Provider Satisfaction, Quality Scores, and Profits with Population Health Nurses | 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.

**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.
Post-Acute Care: Cornerstone to Success in a World of Value Based Transformation | Erin Shvetzoff Hennessey, MA, LNHA, CPG

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 declining patient satisfaction and loyalty. Even when payment is not episodic, patient experience is. Post-acute care performance provides opportunities to drive revenue, minimize risk, and increase patient loyalty. This workshop will provide attendees with a summary of the drivers of post-acute care optimization in light of value-based transformation, examples of success, partnership challenges and opportunities, innovative models, and actionable steps for hospitals and health systems to drive post-acute care success in their organizations.

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.

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

3:15 pm to 3:30 pm  BREAK
3:30 pm to 4:30 pm  WORKSHOPS – THIRD 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 tips on how to have an effective meeting and key dos and don’ts for a tour of your facility. You will learn the best methods to communicate with your Member of Congress, including navigating the variety of staff in a Member’s office.

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.

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.
A Successful Ambulatory Physician Network | 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.

Addressing Burnout: An Essential Strategic Imperative | Della Lin, MD & Stephen Swensen, 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—but as a strategic imperative? This workshop will provide an opportunity to take a deeper look into burnout with an understanding around the importance of leveraging multiple strategies to mitigate burnout. Participants will have the opportunity to interact in a small group setting.

Wednesday

6:30 am to 8:00 am    CONTINENTAL BREAKFAST

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

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.

The Future of Health Care is Coming to Your Home | Robert Mechanic, MBA
As baby boomers retire, there will be growing demand for clinical models that allow older Americans with complex chronic conditions and physical impairments to receive care in their homes. Health care providers are deploying a range of initiatives that provide primary care, emergency care, and even hospital-level care in patients’ homes in order to reduce potentially avoidable hospitalizations and emergency department visits. These models have not been financially viable in fee-for-services but they are likely to be a cornerstone of population health management under alternative payment models. In this workshop, we will review a diverse range of home-based health care initiatives and technologies that are reducing total health care spending while generating high patient satisfaction. And we will discuss how hospitals should participate in this emerging sector.

Accountable Care Workshop: Taking Clinical Integration 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.

9:00 am to 9:10 am    BREAK
9:10 am to 10:30 am  GENERAL SESSION

Thinking Differently | Leanne Kaiser Carlson, MSHA
Health in our community is the way it is because of how we think. We’ve long thought mostly about institutions, medical care, and reimbursement from payers. All these will be a part of our future. But to create health, we need more. It’s time to think differently about what’s possible, the full range of resources, and what we must do in the places where people live and work—which is where most of health happens. Look at what’s possible when we begin to think differently.

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.

10:30 am to 11:00 am  TAKE HOME THOUGHTS & IDEAS | Jim Kopf

11:00 am  CONFERENCE ADJOURNS

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

Erin Shvetzoff Hennessey, MA, LNHA, CPG
Erin Shvetzoff Hennessey, MA, LNHA, CPG, brings her passion for seniors to Estes Park as she discusses post-acute care issues and explores historic changes and top trends.

Ms. Hennessey is Executive Vice President of Consulting for the Health Dimensions Group consulting practice. She is a member of the Executive Leadership Team, and a certified gerontologist with 20 years’ experience in senior care. Ms. Hennessey has considerable experience advising post-acute care providers in the areas of operational performance and financial improvement and is active in acute, post-acute, and senior services organizations.

Anna Lembke, MD (Video Presentation)
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.

Jeff Pratt, MBA
Jeff Pratt, MBA, joins Estes Park’s Barry Bittman, MD, for a real-time interactive exploration of a radically unique and agile Guided Information Access software system.

Mr. Pratt is the President and Chief Executive Officer of SpeedTrack, Inc., a California based Software Company that delivers innovative solutions for the health care, law enforcement, and automotive industries based on its patented Guided Information Access (GIA) software. Jeff and his team have worked closely with Dr. Bittman on the development and refinement of the Population Health Decision Support (PHDS) analytics software.
Guest Presenters

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.

Ray Washburn

Ray Washburn discusses building collaborative relationships with post-acute providers to optimize care coordination for an aging population.

Mr. Washburn’s experiences in long term care spanned skilled nursing facilities, long term acute care hospital (LTACH) services, personal care facilities, assisted living facilities, independent living communities, short-term rehabilitation centers, and non-profit foundations. He has a strong business background with extensive management experience in strategic planning, finance, operation, marketing, and information technology.

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 HortySpringer 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.
Phoenix, Arizona

Arizona Biltmore
March 18-21, 2018

$399 Classic/Deluxe

Discover this Arizona landmark hotel, recognized as one of the world’s best. With its iconic architecture and rich, colorful history, the Arizona Biltmore retains its timeless quality while offering a modern, sophisticated experience. Take some time to explore this expansive property’s 39 acres of pristine gardens. Enjoy two 18-hole championship golf courses, six cushioned tennis courts, sparkling pools, exceptional dining options, and soothing organic treatments at Spa Biltmore. Less than 20 minutes from Sky Harbor International Airport, this convenient location has it all!
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.

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.
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
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

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:

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

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

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

- Naples, FL
  The Ritz-Carlton, Naples
  January 13-16, 2019

- 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 Email
Health Care Organization
Street Address
City
CEO Name
CEO Email
Contact Title
Contact Phone
Fax
Number of Beds
State
Zip
CEO Title
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
Title 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 for 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 Title
Registrant Email
Community Representative

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13/20/17