The Challenge

Conferences
THE CHALLENGE

To use the energy and organization of local hospitals for better health care and better health.

After relative stability in the hospital field, what is happening now in some places—and sometimes quietly—could have far-reaching, lasting implications.

Some changes will not have any effect, some a small effect, and some may be monumental. Some expected changes may not ultimately occur—and some will be positive—but all, including those yet unknown, can affect stability and require planning, and most will increase the cost of care. THE CHALLENGE will be how to deal with these changes and more going forward ...

- Hospital inpatient revenue is going down while outpatient care and revenue are going up
- More surgeries can be done in a day and the patient goes home
- Greater use of telemedicine allows care in the home, and more extensive care in the small town and the small hospital
- Less use of physicians for certain care—greater use of allied health professionals
- Industry changes are outpacing payment reform
- A major entry into health care of non-medical players and companies, both large and small
- Skilled nursing and other care has expanded outside of hospitals, with major payment but little monitoring
- The cost of pharmaceuticals is increasing beyond the ability of individuals to pay
- Experimental new payment systems—global budgets, ACO’s, value-based payments, bundled payments
- Coordinating post-acute care could save money and improve health—but the savings goes to government and insurance companies, not employees, hospitals, or people
- Lack of care coordination in behavioral health
- Burnout and shortages of physicians, nurses, and other health professionals
- Chronic disease and its cost increases in an aging population
- Electronic medical records are being used without interoperability
- Difficulties of population health
- And then there are opioids ...
- And what next ...

Prepare your leaders for THE CHALLENGE at 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:

**The New Challenges**
These Sunday afternoon sessions will start the conversation and set the tone for the conference:

**Challenges Facing Trustees:** The rapidly changing role of the board in the hospital and community

**Challenges Facing Physician Leaders:** The disruptive practitioner’s impact on the culture of safety

**Challenges Facing CEOs (Invitational):** An opportunity to network, share information, and explore the issues

**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.

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<th>...by Hospital Type</th>
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<td>■ Health Care Systems and Their Hospitals</td>
<td>■ Board Members</td>
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<td>■ Rural Hospitals and Critical Access Hospitals</td>
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<td>■ What Boards and Medical Staffs Need to Know About Each Other</td>
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**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.
Time Schedule at a glance

Sunday
1:00 PM - 5:00 PM .......... CONFERENCE REGISTRATION
3:00 PM - 5:00 PM .......... CHALLENGES FACING TRUSTEES
   CHALLENGES FACING PHYSICIAN LEADERS
   CHALLENGES FACING CEOS (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 .......... BREAKFAST
7:00 AM - 7:45 AM .......... SPONSOR PRESENTATION BY BLUE ZONES PROJECT®
(bring your breakfast)
8:00 AM - 9:00 AM .......... GENERAL SESSION (all registrants together)
9:00 AM - 9:15 AM .......... 15-MINUTE BREAK
9:15 AM - 11:00 AM .......... BREAKOUT BY ESSENTIAL ISSUE
11:00 AM - 11:15 AM ....... 15-MINUTE BREAK
11:15 AM - 12:30 PM ...... BREAKOUT BY LEADERSHIP ROLE

Tuesday
6:30 AM - 8:00 AM .......... BREAKFAST
8:00 AM - 9:45 AM .......... GENERAL SESSION (all registrants together)
9:45 AM - 10:15 AM .......... 30-MINUTE BREAK
10:15 AM - 11:30 AM ....... BREAKOUT BY HOSPITAL TYPE
11:30 AM - 12:45 PM ...... LUNCH (on own)
12:45 PM - 4:15 PM .......... WORKSHOPS (Sessions 1-3)

Wednesday
6:30 AM - 8:00 AM .......... BREAKFAST
8:00 AM - 9:00 AM .......... WORKSHOPS (Session 4)
9:00 AM - 9:10 AM .......... 10-MINUTE BREAK
9:10 AM - 11:00 AM .......... GENERAL SESSION (all registrants together)
11:00 AM ........................... CONFERENCE ADJOURNS
Preliminary Conference Program

**THE CHALLENGE: From Better Health Care to Better Health**

**Sunday**

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

**Challenges Facing Trustees** | John Horty, LLB; Jennifer Bell; Barry Bittman, MD; Joseph Schberger, MD & Fraser Seitel

For the past century, beginning after World War I, trustees have had responsibility for the growth of community hospitals (almost all were independent community hospitals) and of health care in hospitals. That responsibility is changing, and now, changing rapidly. Systems are replacing independent hospitals and the new responsibility of hospital trustees is rapidly increasing into the community. This requires looking at payment to the hospital for these increased responsibilities, and at the same time, cutting the cost of care with the financial risk that entails. For being part of a system does not automatically decrease financial risk to the community hospital. We will discuss the challenges and give ideas to meet them.

**Challenges Facing Physician Leaders: The Disruptive Practitioner's Impact on the Culture of Safety** | Linda Haddad, JD & Anthony Pinevich, MD, MBA

A most excellent clinician, sometimes charming, but too often a terror to staff and colleagues, poses a painful dilemma to medical staff leadership. This workshop addresses policies and techniques to give this physician the best chance to modify behavior and so to be successful—but also provides guidance in terminating the relationship, without litigation, if that intervention fails. Qualifications for medical staff privileges include an ability to work well with others, respecting a culture of safety. Participants will learn the policies, the interventions, and the course of action to address this most unpleasant task of leadership.

**Challenges Facing CEOs (Invitational)** | Steven Tringale & John Tiscornia, MBA, CPA

An opportunity to network, share information, and explore the issues.

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

**KEYNOTE SPEECH — The ABCs of All-Payer Hospital Global Budgets** | Joshua Sharfstein, MD

Dr. Joshua Sharfstein, former health Secretary in Maryland and Professor of the Practice in Health Policy and Management at Johns Hopkins, will discuss all-payer hospital global budgeting—an alternative payment approach that sets hospital revenues at the start of the fiscal year. Considered by some to be the “opposite of fee-for-service reimbursement,” all-payer global budgets incentivize care coordination, prevention, reductions in unnecessary care, and greater community health. There are also important questions about unintended consequences of these arrangements. Ten Maryland rural hospitals have received all-payer global budgets since 2011, and the rest of the state’s hospitals since 2014. Pennsylvania is establishing a pilot for rural hospitals, and ten states recently attended a policy academy at Johns Hopkins on the subject. Dr. Sharfstein will speak from his experience establishing Maryland’s program, writing about global budgeting, and engaging with federal officials, state leaders, and hospital executives around the country.

6:30 pm to 7:30 pm  CONFERENCE RECEPTION
Monday

6:30 am to 8:00 am  BREAKFAST

7:00 am to 7:45 am  SPONSOR PRESENTATION BY BLUE ZONES PROJECT® (bring your breakfast)

The Blueprint for Improved Well-Being
Come discover Blue Zones Project’s® unique, systemic approach to improving well-being by focusing on the “life radius.” By optimizing the settings where we routinely spend our time—worksites, schools, restaurants, grocery stores, faith-based communities, and neighborhoods—we make healthy choices easier and naturally adopt healthier behaviors together as a community. We will provide insight into how Blue Zones Project works with sponsors and participating organizations to build strong local coalitions that transform the health trajectories of their communities for generations to come.

8:00 am to 9:00 am  GENERAL SESSION

Hospital Innovation Video

What is Happening in Washington that Impacts the Health System | Jennifer Bell
With divided government firmly in place, Washington is actively debating the future of health care. What are the conversations about? What will happen with the Affordable Care Act? Is “Medicare for All” on the horizon? What about the Administration—where are they heading? In this session we will explore these conversations and the latest ideas coming out of the federal government.

9:00 am to 9:15 am  BREAK

9:15 am to 11:00 am  BREAKOUT BY ESSENTIAL ISSUE

Leadership Imperative: Taking Aim Beneath the Surface to Improve Patient Safety, Quality, and the Well-Being of Our Care Teams | Della Lin, MD & Gary Kaplan, MD
We should not tolerate that “these things happen,” allowing the same mistakes to repeat. Although Patient Safety and Quality has been a mantra for over two decades, most improvement has been incremental. Transformative culture requires committed leadership, engaged governance, and steadfast role-modeling. We must focus beyond traditional external metrics and look beneath the surface for preventable harm—harm experienced by both our patients AND our staff/clinicians who care for patients. We must unsurface critical foundational behaviors as ALWAYS EVENTS, confronting our own blind spots and unrecognized biases. This session will offer new approaches to move organizations and communities towards zero harm.

Post-Acute Care Coordination: The Essential Elements—A “How To” Mini Symposium (continued in first session of workshops) | Barry Bittman, MD; John Hory, LLB & AnnElise Keene, RN
In this challenging era of rapid health care transformation, with hospitals and health systems bearing both quality and financial responsibility for at-risk and chronically ill patients, the need for care coordination should not be underestimated. Faced with rising costs and progressively-limited outcomes-based reimbursement, hospitals are searching for cost-effective strategies that ensure a high quality continuum of care for the 5-10% of their patients who are associated with the majority of health care expenditures and financial penalties. Rather than presenting a general topic overview, this 3-hour interactive mini-symposium focuses on the heart of the matter—the “essential elements” required to achieve successful hospital-based community care coordination. This program is intended
to provide a practical perspective for CEOs, CFOs, managers, and front line clinicians who are dedicated to building a robust care coordination strategy for their community.

**What Boards Need to Know About Medical Staffs…and What Medical Staffs Need to Know About Boards** | Linda Haddad, JD
Of course both seek excellent care of the community and their patients, but appreciation of each other’s perspectives, commitments, and dedication contributes greatly—both to success of the organization and to joy in the journey. “Walking a mile in another’s shoes” is a metaphor for developing empathy. Understanding the depth and breadth of the other’s expertise and caring may deepen respect as well as progress toward shared goals.

**Value-Driven Growth—An Overview** | John Tiscornia, MBA, CPA & Steven Tringale
Margin pressure getting worse: Health systems are experiencing sustained and often unprecedented margin pressure which we think will likely get worse. While there are several reasons for it, two key drivers are the continued shift towards outpatient care models and a set of ominous disruptions of the inpatient care model.

Value-based care is a key strategic lever: Health systems recognize value-based care is coming, but we believe they are making two key mistakes. First, they underestimate how much risk they are already taking and continue to operate as if FFS is and will always dominate. Second, they overestimate their preparedness to take risk and win under value-driven care.

Increasing urgency and executive alignment: The best health systems are mobilizing to get their executive teams aligned on a financial model that demonstrates the true pace of shift in the market and dimensionalizes needed value-based investments and return. We believe the key is to develop a practical roadmap that lowers risk while you play ambidextrously in both FFS and value-driven care and that leverages best practices.

11:00 am to 11:15 am  BREAK

11:15 am to 12:30 pm  BREAKOUT BY LEADERSHIP ROLE

**Future Governance by Trustees: Governance in a Disruptive Environment** | John Tiscornia, MBA, CPA & Gary Kaplan, MD
This session discusses the unique challenges boards face during this time of disruption in the health care industry. It will help to prepare trustees to deal with the ever changing health care environmental issues that impact their roles and responsibilities, such as leadership and communication within the community—health inside and outside of the four walls of the organization, staying on top of the ever changing and disruptive environment, helping the organization adapt to the new environment, and developing a culture to success in the future. There will be opportunities for discussion and planning around critical success factors and actions to consider.

**Physician & Medical Staff Leadership: Tools of the Trade—Bylaws, Policies, and Techniques** | Linda Haddad, JD
This session will present clinical privileges case studies with possible resolutions to the issues, and policies that might have averted them in the first place. Medical technological advances could outpace Medical Staffs’ abilities to assess their appropriateness and acquire the skill set and experience required. We will discuss how to stay on the cutting edge while protecting patients. Participants will spot the risks of haste and the potential for conflicts at the earliest time and learn the policies/processes to deal with them while averting litigation.

**Financial Threats Confronting Executive Leadership** | Barry Bittman, MD & Steven Tringale
This session is designed to be an interactive discussion on the specific financial challenges confronting
participants’ hospitals and health systems. We will stimulate the discussion by outlining some of the trends in payment model evolution, by payer type, as well as changes in insurance products design, benefit structures, and provider networks. We will also summarize key federal and state initiatives regarding financing models. The session will also look at the cross-cutting issue of risk transfer from the traditional financing system to the delivery system, resulting in new vertical integration models.

Tuesday

6:30 am to 8:00 am  BREAKFAST

8:00 am to 9:45 am  GENERAL SESSION

Hospital Innovation Video

Transforming Health Care Delivery from Volume to Value | Barry Ronan, MPA
In 2010, as part of an eventual Centers for Medicare and Medicaid demonstration project, Western Maryland Health System transitioned their health care delivery model from volume focused to one that is value based. The model has proven to be successful in that all Maryland hospitals now function under an all-payer global budget. Since the new model’s inception eight years ago, Western Maryland has evolved to be the safety net for the region through their extensive work in population health with a focus on addressing the social determinants of health. Simultaneously, they have been successful in reducing preventable admissions, readmissions, ED visits, and ancillary utilization. Their value-based model has received numerous national awards, been touted by the NY Times, and has received millions of dollars in grant funding to further their efforts in reducing the overall total cost of care while improving the health status of the region.

9:45 am to 10:15 am  BREAK

10:15 am to 11:30 am  BREAKOUT BY HOSPITAL TYPE

Health Systems & Community Hospitals: Responding to Governmental, Employer and Competitive Challenges | Steven Tringale
Hospital and health systems are confronted with a series of complex, and in some cases conflicting, demands as we look at the emerging trends in health care delivery for 2019. This session will catalog those challenges, as well as suggest strategic responses to these trends. The session will look at specific issues within an overriding backdrop of the pressure every hospital and health system is under to transition to a value-driven financing system, and take lead responsibility for improving the health status of its community.

Rural Hospitals & Critical Access Hospitals | Michael Topchik & John Horty, LLB
Although some rural and critical access hospitals are strong and financially stable, many are struggling. Many have difficulty recruiting physicians, and their revenues are constrained by their reliance on Medicare and Medicaid. Many serve communities struggling with poverty, addiction, and other social factors that adversely affect health. As economic anchors of their communities, cost cutting in response to revenue shortfalls has negative impacts on local residents and businesses. In May 2018, CMS announced a new rural health strategy but has offered few specific policy proposals. Given this uncertain environment, rural hospitals must develop concrete strategies to maintain fiscal stability while continuing to effectively serve their communities. This session will discuss the environment facing rural providers and potential strategies for improving financial stability and
enhancing services through participation in alternative payment models, deploying telehealth, and developing more holistic models that deploy non-medical workers to engage patients in their homes and communities.

11:30 am to 12:45 pm LUNCH (on your own)

12:45 pm to 1:45 pm WORKSHOPS – FIRST SESSION (choose one)

**Post-Acute Care Coordination: Making It Work** *(continued from Essential Issue breakout)*  | Barry Bittman, MD; Leanne Kaiser Carlson, MSHA; John Horty, LLB & Steven Tringale

**Promoting Health: A Program to Prevent and Reverse Obesity and Type 2 Diabetes**  | Joseph Scherger, MD
A new understanding of Obesity and Type 2 Diabetes has clarified these problems as diseases of excess insulin and insulin resistance. Programs have been started at hospitals to both prevent and reverse these conditions through lifestyle change. The key components of these programs include intermittent fasting with nutrition change toward low carbohydrates and healthy fats. Exercise is included but is not as necessary as previously thought. This presentation will go over the protocols for successfully preventing and reversing Obesity and Type 2 Diabetes so that you will be able to implement such a program at your hospital.

**Board Responsibility for Integrating Strategic and Financial Planning**  | John Tiscornia, MBA, CPA
In these challenging times of intense competition, increasing expenses, decreasing revenue, and changing medical technology, it is critical that the organization has a strategic plan and a financial plan. However, these two plans must be integrated in the organization to be successful. A strategic plan without the financial implementation will not be achievable. It is the board’s responsibility to ensure that these two plans are integrated. This workshop will provide the board with key questions and monitoring criteria to ensure that the strategic plan and financial plan are integrated.

**Ten Considerations for Rural Health**  | Michael Topchik
This workshop will describe ten key forces that should drive the development of future strategic planning and operational change for rural health care leaders. These include the changing health care workforce, opportunities to expand access to care and broaden clinical services through virtual care, the growth of alternative payment models in Medicare and Medicaid, and the increasing importance on addressing social determinants of health. After a brief introduction, this workshop will break out into small groups where you will engage with peers from across the country to discuss how common challenges are being addressed across a range of community contexts. We will then reconvene for a group discussion of future strategic options for financial stability and effectively addressing the needs of your communities.

**CMO Roundtable (Invitational)**  | Anthony Pinevich, MD, MBA

1:45 pm to 2:00 pm BREAK

2:00 pm to 3:00 pm WORKSHOPS – SECOND SESSION (choose one)

**Happy Long-Lived Physicians: Let’s Make it Happen**  | Leanne Kaiser Carlson, MSHA
Happy, long-lived physicians—let’s make it our priority in health systems. We can design for physicians to attain more meaning, vibrancy, and longevity than any other population. It’s not just an interesting idea; it’s an imperative. Healthy physicians talk to patients differently and are more able to coach patients about health behaviors. And they contribute more effectively professionally in other ways. In this workshop, we look at what we have going both for and against us. And we consider how to innovate ambitiously.
Enhanced Recovery After Surgery: Patient-Centered High Reliability Care | Della Lin, MD
ERAS has been embraced in many hospitals across the country, with complementary efforts such as the “Perioperative Surgical Home” (American Society of Anesthesiologists), “Improving Surgical Care and Recovery” (American College of Surgeons and AHRQ), and even bundled payments. Hospitals and ACOs have enjoyed a ROI, primarily with lower lengths of stay, without an increase in complication rates. However, the true intent of ERAS does not begin and end with hospital LOS. It is centered with the patient. This workshop will look at ERAS through the lens of patients—with four patient stories.

Alliances, Affiliations & Joint Ventures | Dan Mulholland, Esq. & Steven Tringale
The shift to value-based financing systems and the resultant transfer of risk to the delivery systems has hospitals and health systems of all sizes scrambling to find both actuarial and business scale, as well as the clinical and business expertise to succeed in this new environment. This workshop will focus on the numerous governance and contract based models that have emerged, as an alternative to an asset merger and loss of local governance control, to assist hospital leadership in successfully navigating the transition to value-based care.

Promoting Health: A Program to Prevent and Reverse Cognitive Decline | Joseph Scherger, MD
New research has shown that cognitive decline, such as with Alzheimer’s disease, can be prevented and even reversed through intensive lifestyle change. The interventions include healthy nutrition, regular exercise, quality sleep, stress reduction, and executive cognitive function. The evaluation of cognitive function includes laboratory testing, genetic testing, a volumetric MRI, and testing cognitive function. This presentation will show you the latest protocols for doing this work so that you could implement such a program at your hospital.

Board Chair Roundtable (Invitational) | John Horty, LLB & Anthony Pinevich, MD, MBA

3:00 pm to 3:15 pm  BREAK

3:15 pm to 4:15 pm  WORKSHOPS – THIRD SESSION (choose one)

What Happens to Medical Staffs That Become Part of a “System” | Linda Haddad, JD; Dan Mulholland, Esq. & Anthony Pinevich, MD, MBA
This workshop addresses the issues medical staff leaders face when their hospital becomes part of a system. Depending upon system size and proximity, many of the following issues must be addressed:
- Unified or separate medical staffs?
- “Standardized” bylaws/policies
- Centralized credentialing or hospital specific?
- “Portable” clinical privileges
- Sharing information
- Distribution of resources
- Demands on the larger entity to cover gaps in the smaller entity
- Assignment of service lines to exclusive hospitals (with potential impact on professional fees, hospital reputation)

Do You Know Your Health Care Partner? Basic Steps the Board Should Follow in Assessing New Partnerships, Mergers, or Acquisitions Before It Is Too Late | Jim Kopf
The hospital was the all-encompassing center of the community’s health care universe. That health care universe is expanding. While hospitals still play a critical role, other ancillary services working in conjunction with the hospital have become an integral component of a total health care system. From preventative health clinics to
post-acute care centers, the new health care system is a continuum from the hospital to the home. The new health care system identifies the correct setting—be it Skilled Nursing Facilities, Home Health Care, Adult Day Care, or physical therapy that is based on the patients need—in order to ascertain patient risk and reduce readmissions. The new health care system has also expanded hospital mergers and acquisitions to meet growing community needs and financial self-preservation. Whenever health care changes, oversight is soon to follow. It is important that, as a new community of caregivers emerge and integrate, the new health care system needs to ensure appropriate utilization, including thorough specialized analytics are in place to reduce possible fraud, waste, and abuse. This workshop will discuss new oversight initiatives and audits which are being utilized to meet the changing health care landscape. Topics for discussion: Hospital sponsored caregiver centers; home hospital; due diligence procedure; HIPAA and HER; preventative internal audits and oversight; adverse outcomes measurements.

**Glimpsing into Design Thinking in Health Care** | Della Lin, MD & Leanne Kaiser Carlson, MSHA
“Design Thinking” is a provocative and powerful tool that has been applied worldwide. The tool is often credited for inventions such as the computer mouse (IDEO). However, the process is not limited to tangible inventions and its application within health care has not reached its compelling potential. This workshop will provide a brief glimpse into why and how design thinking has been applied to health care.

**A No Burnout & Thriving Physician Network** | Joseph Scherger, MD
The quadruple aim includes better health, better care, lower cost, and a physician network that has work vitality. Physician burnout has become common as a result of repeated frustrations, lack of a sense of control over the work environment, and a disconnect between the nature of the work and patient needs. These factors cause an erosion of meaning for physicians in the care of patients. This workshop will cover methods for bringing vitality into the work of physicians so that they are thriving in their work and helping the hospital achieve its mission.

### Wednesday

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<td>6:30 am to 8:00 am</td>
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<td>8:00 am to 9:00 am</td>
<td>WORKSHOPS – FOURTH SESSION (choose one)</td>
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**Busting Burnout and Leading Engagement... With a Smile** | Della Lin, MD
The well-being of our care teams is paramount. Burnout has been described as a public health crisis by hospital CEOs. Focusing on engagement—physicians, staff, and our community partners—is foundational. This workshop will continue discussion from the Essential Issue session on Quality and Safety, with particular aim at these two critical issues.

**Don’t Talk with Your Thumbs! The Legal Pitfalls and Perils of Texting, Emails, and Social Media** | Dan Mulholland, Esq.
For better or worse, technology has forever changed the way we relate to one another, but for all the convenience text messaging and other electronic communications provide, they also give rise to new and potentially ruinous legal problems. Concerns about HIPAA privacy and security are of course front and center in this regard, but document production in lawsuits or government investigations have become far more complicated and expensive as a result of these new developments. On top of that, the use (or rather misuse) of social media can result in reputational damage and possible legal liability if not carefully monitored. Aside from going back to old-fashioned notions like picking up the phone or walking down the hall to talk to people rather than using text or e-
mails, and leaving Twitter and other social media for the twits that use it, some basic common sense can go a long way in terms of keeping you out of legal hot water or becoming a laughingstock or punching bag in the internet. This workshop will give examples of how new communication technologies can get you into trouble, and some simple tips on how to avoid it.

Moving the Hospital Into the Community | Barry Ronan, MPA
Western Maryland Health System has had a great deal of experience in addressing value-based care delivery, population health and the social determinants of health. During this workshop, you will gain an understanding of how they got their board to support such a dramatic change in care delivery. You will learn how they got the medical staff and employed staff to understand and support their initiatives, as well as how they got the elected officials on board, along with the community. You will see what went well and what didn’t go so well. You heard what global budgeting and value-based care delivery are in the keynote; this workshop will focus on how to bring the concept of truly caring for the community to fruition.

9:00 am to 9:10 am  BREAK

9:10 am to 11:00 am  GENERAL SESSION

Hospital Innovation Video

What to Do When a Crisis Strikes the Hospital | Fraser Seitel
Every hospital, regardless of size or location, is susceptible to the occasional “crisis.” Hospital crises come in many forms, from surgical mishaps to workplace violence, from financial losses to “no confidence” votes. This workshop will equip you to deal with the internal and external pressures that crisis will surely bring. It will provide: An explanation of the difference between a "problem" and a "crisis"; typical crises with which administrators/trustees/doctors are faced; effective public relations philosophy to confront crisis; and, tactical "battlefield" steps to take in the crucible...in order to beat back the Philistines and live to fight another day.

The Beginning of a Beautiful Friendship | Jim Kopf
We will discuss putting what we learned into action through alliances, partnerships, and collaborations—creating a total health care system.

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.
Take-Home — Build Your Own Post-Acute Care Coordination Program

Post-Acute Care Coordination: The Essential Elements
A “How To” Mini Symposium

In this challenging era of rapid health care transformation, with hospitals and health systems bearing both quality and financial responsibility for at-risk and chronically ill patients, the need for exemplary care coordination should not be underestimated. Faced with rising costs and progressively-limited outcomes-based reimbursement, hospitals are searching for cost-effective strategies that ensure a high quality continuum of care for the 5-10% of their patients who are associated with the majority of health care expenditures and financial penalties. Rather than presenting a general topic overview, this 3-hour, in-depth, interactive mini-symposium led by a dedicated interdisciplinary team, focuses on the heart of the matter—the “essential elements” required to achieve successful hospital-based community care coordination. This program is intended to provide a practical multidimensional perspective for CEOs, CFOs, managers, and front line clinicians who are dedicated to designing, building, or optimizing a robust care coordination strategy for their community. The discussion will include:

- Rationale and the WHY: How to best support your providers
- Historical Considerations: A focus on what actually works
- Financial Applicability: Risk-based contracts, ACOs, Bundled Payments, and Capitation
- Initial Investment and Economic Impact: How not to break the bank with a focus on improving the bottom line
- Redeployment Rather than Recruitment: Assembling your care coordination team from within
- The Care Coordination Team: Staff selection, roles, and responsibilities
- Operational Principles: Never losing sight of your objectives
- Engaging and Caring for Challenging Patients: Successful strategies that drive outcomes
- Enlisting Additional Resources: A community-based approach
- Appropriate Patient Selection: A novel data-driven strategy for the care coordination team
- Working With and Training Volunteer Health Coaches: Intergenerational impact in a “no discharge” environment
- Philanthropy: Beyond the confines of bricks and mortar
- Tracking Meaningful Outcomes: Fostering positive relationships with payors
Estes Park Guest Faculty

Jennifer Bell ■ Washington Insider, Policy Specialist
A true Washington power player, Ms. Bell is ranked as a “Top Lobbyist” for her work influencing health policy and legislation. If you want to know what’s coming next from Washington, there’s no more informed source than Ms. Bell. At the Estes Park Institute conference, Ms. Bell shares the latest news from the corridors of power, including insights into the minds of policymakers.

AnnElise Keene, RN ■ Specialist in Nursing & Coordinated Care
Ms. Keene’s 21 years of bedside experience includes medical-surgical, pediatrics, oncology, and case management. She helped develop the ACCN care coordination strategy—which has reduced ER visits, admissions, and PMPM, while increasing patient healthy day measures. At the Estes Park Institute conference, Ms. Keene enlightens hospital leadership on best practices in care coordination.

Anthony Pinevich, MD, MBA, FACP ■ Medical Affairs Advisor
An award-winning VPMA, Dr. Pinevich is an expert on both the medical and business sides of the hospital. He highlights the critical role that all physician leaders must play in assuring hospital success. At the Estes Park Institute conference, Dr. Pinevich engages with medical staff leaders to use new developments to the advantage of the hospital, its medical staff, and most importantly, its patients.

Barry Ronan, MPA, FACHE ■ Community Health Visionary
What Mr. Ronan has been doing to improve the hospital and community health will both astound and inspire you. His creative thinking brought to life a program that has turned fee-for-service on its head. At the Estes Park Institute conference, Mr. Ronan will share the details of how his health system and the state of Maryland reimagined community health.

Joshua Sharfstein, MD ■ Authority in Health Leadership & Management
Dr. Sharfstein’s revolutionary realignment of Maryland’s health care system brought notoriety and success. Not only has his program seen improved health outcomes, it stands as one of the most successful, large-scale realignments in the country. At the Estes Park Institute conference, you simply can’t miss Dr. Sharfstein’s rundown of the Maryland health care turnaround.

Michael Topchik ■ Rural Health Performance Leader
Mr. Topchik is a rural health network consultant and visionary. He has developed new funding streams through partnerships with private payers, grant writing, and building a rural-focused response to the CMMI Innovation Challenge Grant. At the Estes Park Institute, Mr. Topchik will guide rural hospitals in developing a plan for long-term fiscal stability.
Estes Park Faculty

Stuart Altman, PhD ■ National Economist, Clinton and Obama Health Policy Advisor
Dr. Altman has spent five decades driving the nation’s health care policy narrative—including advising both Presidents Clinton and Obama. He is recognized as the preeminent expert on the evolution of the American health care system. At the Estes Park Institute conference, Dr. Altman advises hospitals and systems on the best way to adapt care for an aging population.

Barry Bittman, MD ■ Neurologist, Inventor
Dr. Bittman is a voice of creativity and innovation in the industry. As evidence of his expertise in population health management, he established a first-of-its-kind community care network that blends multiple disciplines to coordinate care. At the Estes Park Institute conference, Dr. Bittman sheds light on the latest best practices in population health, risk-based contracting, and care coordination throughout the industry.

Linda Haddad, JD ■ Health Law Expert
Her groundbreaking work in governance and medical staff issues led to Ms. Haddad’s recognition as one of the “Best Lawyers in America.” But it’s her counsel to hospital executives and physician leaders on combating tough issues, credentialing, and system integration that makes her truly indispensable. At the Estes Park Institute conference, Ms. Haddad presents must-have fundamentals for new physician leaders and shares a vision of the medical staff of the future.

John Horty, LLB ■ Preeminent Health Policy & Governance Leader
He founded the nation’s first firm dedicated to hospital law. But for Mr. Horty, that was just a start. Throughout his career, he has chaired several hospital boards and advised presidents and members of Congress on health policy matters—including guiding several recent health reform policies into law. At the Estes Park Institute conference, Mr. Horty leads hospital trustees toward understanding their critical role in pursuing the transformation of the hospital’s long-term future. He serves as Board Chair of Estes Park Institute.

Leanne Kaiser Carlson, MSHA ■ Health Futurist
Ms. Kaiser Carlson transforms how we think, inspiring us to reach for what’s possible and attract philanthropic partners to make it so. She is all about shaping the future. She’s done it in hundreds of health systems—developing more than 50 tools to implement essential innovations. She also encourages us to live an innovative life and change ourselves so we can change our organizations. At the Estes Park Institute conference, Ms. Kaiser Carlson presents on generosity, medical staff futures, trustee leadership, and personal growth.

Gary Kaplan, MD, FACP, FACMPE, FACPE ■ Influential Physician Executive
Recognized by Modern Healthcare as one of the “50 Most Influential Physician Executives,” Dr. Kaplan’s skills as an innovator have literally established a new industry standard. He’s led the charge with the kind of out-of-the-box thinking that includes adapting Toyota’s production process for the health care industry. At the Estes Park Institute conference, Dr. Kaplan helps physicians prepare for leadership roles and discusses how everyone can make patient safety a core value.

Jim Kopf ■ Health Care Fraud & Compliance Specialist
His experience at both the FBI and OIG at Health and Human Services make Mr. Kopf the top authority on regulatory and compliance issues in health care. Keeping his finger on the pulse of new federal directives, he’s built an unparalleled reputation for guiding hospitals through compliance programs that actually work. At the Estes Park Institute conference, Mr. Kopf goes inside the minds of today’s regulators to show hospital leaders how to ensure compliance program success.
Estes Park Faculty

Della Lin, MD ■ Patient Safety Trailblazer
A nationally acclaimed anesthesiologist, Dr. Lin has promoted new thinking on patient safety and quality issues. Her experience and her uncanny ability to inspire leaders to take bold action have cemented her reputation as a go-to patient safety expert. At the Estes Park Institute conference, Dr. Lin explores important safety science principles and critical habits for success—even beyond the walls of the traditional hospital.

Robert Mechanic, MBA ■ Hospital Finance Advisor
Mr. Mechanic is an expert in the design and evaluation of new payment models. He advises hospitals and integrated delivery networks on preparing for episode-based payment and accountable care models. His insights help hospitals thrive in the move to value-based payment. At the Estes Park Institute conference, Mr. Mechanic provides assessment of the risks and opportunities of participating in alternative payment models and offers key strategies developed by successful organizations.

Dan Mulholland, Esq. ■ Health Care Attorney
Mr. Mulholland routinely advises hospitals and health systems and represents them in litigation involving a wide variety of matters including medical staff issues, joint ventures, mergers and acquisitions, antitrust fraud and abuse, and compliance. At the Estes Park Institute conference, Mr. Mulholland combines his legal expertise with 40 years of experience in the industry to help boards and executives navigate today's treacherous legal and regulatory environment.

Joseph Scherger, MD, MPH ■ Nutrition & Wellness and Practice Redesign Expert
Dr. Scherger has recently focused his considerable talents on reimagining the office practice using information technology, data, and quality improvement tools. He also has a major interest and experience with wellness and healthy nutrition. A gifted instructor, he’s been recognized as a “Top Doc” and an outstanding clinical instructor. At the Estes Park Institute conference, Dr. Scherger helps physician leaders grasp the essential elements for success in delivering primary and specialty care.

Fraser Seitel ■ Authority on Health Care Communications
Mr. Seitel has counseled hundreds of senior executives on how to better communicate with audiences, stakeholders, and the news media. PR Week even listed him as one of the “100 Most Distinguished Public Relations Professionals.” At the Estes Park Institute conference, Mr. Seitel moderates the program and shares insights to improve communication and team building.

John Tiscornia, MBA, CPA ■ Financial Planning Authority
A governance guru, Mr. Tiscornia has built a career on governance, strategy, operations, and financial successes in the health care industry. He’s known for his valuable insights, as well as for leading national health care consulting practices. At the Estes Park Institute conference, Mr. Tiscornia offers a cutting-edge strategy to help trustees and executives prepare for industry disruption.

Steven Tringale ■ Hospital/Physician Alignment Strategist
Mr. Tringale brings a unique blend of experience to Estes Park based on his work as a senior officer of a large health insurer, as a state regulator, and as a senior strategic advisor to hospitals, health systems, and hospital associations for over 20 years. At the Estes Park Institute conference, Mr. Tringale speaks about the strategies and tactics being employed by health systems to facilitate the transition from volume to value, and how health systems are using this work to position themselves as market leaders.

Most faculty members will present at each conference.
Arizona Biltmore ♦ Phoenix, Arizona
March 17-20, 2019

Discover this Arizona landmark hotel, recognized as one of the world’s best. With its iconic architecture and a rich, colorful history, the Arizona Biltmore retains its timeless quality while offering a modern, sophisticated experience.

Future 2019-2020 Conference Season Dates

The Ritz-Carlton, Half Moon Bay
Half Moon Bay, California
October 27-30, 2019

The Ritz-Carlton, Naples
Naples, Florida
January 12-15, 2020

Grand Wailea
Maui, Hawaii
February 9-14, 2020

Fairmont Grand Del Mar
San Diego, California
March 1-4, 2020

The Ritz-Carlton, Amelia Island
Amelia Island, Florida
March 29 – April 1, 2020
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 sponsor:

Blue Zones Project®

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

— Hospital Physician Leader
Registration Information

Each Registration Includes:

- Attendance at one Estes Park Institute conference and complimentary attendance for a community representative
- Welcome reception and breakfast each morning for registrant and guest
- 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.
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.

Conference Registration

Select Conference:

<table>
<thead>
<tr>
<th>Phoenix, AZ</th>
<th>Half Moon Bay, CA</th>
<th>Naples, FL</th>
<th>Maui, HI*</th>
<th>San Diego, CA</th>
<th>Amelia Island, FL</th>
</tr>
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<tbody>
<tr>
<td>Arizona Biltmore</td>
<td>The Ritz-Carlton, Half Moon Bay</td>
<td>The Ritz-Carlton, Naples</td>
<td>Grand Wailea</td>
<td>Fairmont Grand Del Mar</td>
<td>The Ritz-Carlton, Amelia Island</td>
</tr>
</tbody>
</table>

Method of Payment

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

Tuition

- $6,700/each team of four
- $1,895/person

Total Number of Registrants: _____

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.)