

The Leading Forum on Pay for Performance, Transparency and Value Driven Healthcare

February 19 – 21, 2013 **Hyatt Regency, San Francisco**

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Giovanni Colella, MD, CEO and Co-Founder, Castlight Health

Juan Davila, Senior Vice President, Network Management, Blue Shield of California

Francois de Brantes, Executive Director, Health Care Incentives Improvement Institute

Susan Dentzer, Editor-in-Chief, Health Affairs; Health Policy Analyst, The News Hour with Jim Lehrer

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John Hernandez, PhD, Vice President, Health Economics and Outcomes Research, Abbott Vascular

Scott Howell, MD, Vice President, Access Solutions, Genentech

Brent James, MD, M.Stat, Executive Director, Intermountain Healthcare - Institute for Health Care Delivery Research

Ashish K. Jha, MD, MPH, C. Boyden Gray Associate Professor of Health Policy and Management, Harvard School of Public Health

Shari M. Ling, MD, Deputy Chief Medical Officer, Office of Clinical Standards and Quality, Centers for Medicare and Medicaid Services (CMS)

Harold Miller, Executive Director, Center for Healthcare Quality and Payment Reform; President and Chief Executive Officer, Network for Regional Healthcare Improvement

Arnold Milstein, MD, MPH, Professor of Medicine and Director of the Clinical Excellence Research Center, Stanford University **Peggy O'Kane,** President, National Committee for Quality Assurance

James C. Robinson, PhD, Leonard D. Schaeffer Professor of Health Economics, University of California at Berkeley; Director, Berkeley Center for Health Technology

David Sayen, Regional Administrator, Centers for Medicare and Medicaid Services (CMS) — Region IX

Paul Wallace, MD, Senior Vice President and Director, Center for Comparative Effectiveness Research, The Lewin Group; Fellow, Optum Labs

Alan Weil, Executive Director, National Academy for State Health Policy

Dolores Yanagihara, MPH, Director, Pay for Performance Program, Integrated Healthcare Association

AND FEATURING THE FOLLOWING PRE-CONFERENCE SESSIONS:

- Pre-Conference I: Physician Value Based Pay for Performance Sponsored by the Integrated Healthcare Association
- **Pre-Conference II: Hospital Value Based Payment** Sponsored by Premier healthcare alliance
- Pre-Conference III: Achieving the Triple Aim Through Payment and Delivery Reform Sponsored by the Network for Regional Healthcare Improvement



s we prepare for the 2013 National Pay for Performance Summit, healthcare delivery in the US is undergoing unprecedented change. With the presidential election behind us, implementation of the Affordable Care Act continues with renewed momentum. Numerous payment reform pilots and demonstration projects are well underway in both the public and private sectors; and while political leaders continue to debate resolution of the federal deficit and other challenges, both sides of the aisle agree that moving from volume to value based payment is part of any



This year's Summit will continue to track the evolution of value based performance and payment, which focuses on the integration of cost and quality in performance payment initiatives. The Summit will include presentations, panel discussions and case studies from leading policy experts and administrators. Participants will hear from leaders in the field working to implement innovative reforms that focus on both lowering costs and increasing quality. Technical experts in performance measurement, data col-

lection, public reporting, incentive design, and new payment methods will also lend their experience and perspectives to the Summit proceedings.

Senior executive leaders and national policy makers will provide keynote presentations on the most current healthcare reform landscape, implications for CMS, and payment reform case studies highlighting the use of new payment methods and incentives to improve quality and efficiency in the next generation of value based pay for performance. There will be ample opportunity for audience participation, questions and answers.

The preconference symposia and mini-summits will provide in-depth perspectives on a variety of topics related to pay for performance, payment innovations, performance measurement, and data collection and analytics. Concurrent sessions offer best practices and case studies from experienced executives and experts.

Please join us for this exciting agenda.

PARTICIPATION OPTIONS

TRADITIONAL ONSITE ATTENDANCE

Simply register, travel to the conference city and attend in person.

PROS: subject matter immersion; professional networking opportunities; faculty interaction.

LIVE AND ARCHIVED INTERNET ATTENDANCE

Watch the conference in live streaming video over the Internet and at your convenience at any time 24/7 for six months immediately following the event.

The archived conference includes speaker videos and coordinated PowerPoint presentations.

PROS: Live digital feed and 24/7 Internet access for the next six months; accessible in the office, at home or anywhere worldwide with Internet access; avoid travel expense and hassle; no time away from the office.



Onsite



At your office . . .



TUESDAY, FEBRUARY 19, 2013

8:00 am Registration

9:00 am

PRE-CONFERENCE SESSIONS

Pre-Conference I: Physician Value Based Pay for Performance

Sponsored by the Integrated Healthcare Association

IHA has invested considerable time working with its stakeholders and industry experts to develop a new value based physician incentive program. It incorporates measurement of clinical quality, HIT use, patient experience, appropriate resource use, and total cost of care into a shared savings model. In this session, leaders of this work will share the technical and administrative details.

Dolores Yanagihara, MPH, Director, Pay for Performance Program, Integrated Healthcare Association, Oakland, CA

Juan Davila, Senior Vice President, Network Management, Blue Shield of California, Woodland Hills, CA

Bart Wald, MD, MBA, Regional Medical Director, HealthCare Partners, Arcadia, CA

Pre-Conference II: Hospital Value Based Payment

Sponsored by Premier healthcare alliance

CMS is committed to transforming the quality of hospital care by realigning hospital financial incentives. One strategy is to promote higher quality care through the Hospital Value Based Purchasing (VBP) Program and another is through payment cuts associated with HACs and excessive readmissions. Under VBP, hospitals, clinicians, and other stakeholders are paid for care that rewards value and patient outcomes, instead of just volume of services. This session will offer insight into the specific tactics Premier alliance healthcare members are using, including strategies to prevent payment cuts, methods to improve patient experience results, and approaches to eliminate costs by addressing waste.

Monica Barrington, Vice President, Engagement and Delivery, Premier Performance Partners, Premier healthcare alliance, Charlotte, NC

Wes Champion. Senior Vice President, Premier Performance Partners. Premier healthcare alliance, Charlotte, NC

Carolyn Scott, Vice President, Premier Performance Partners. Premier healthcare alliance, Charlotte, NC

Pre-Conference III: Achieving the Triple Aim Through Payment and Delivery Reform

Sponsored by the Network for Regional Healthcare Improvement

This session will describe comprehensive strategies for controlling the total cost of healthcare through data analysis, payment reform, and delivery system redesign. Speakers will discuss successful approaches to engaging employers, physicians, hospitals, and citizens in payment and delivery reform efforts, ways to design win-win-win solutions to healthcare reform, and strategies for overcoming common barriers to change. Examples from a range of states and regions from across the country will be presented.

Sanne Magnan, President and CEO, Institute for Clinical Systems Improvement, Bloomington, MN

Harold Miller, Executive Director, Center for Healthcare Quality and Payment Reform; President and Chief Executive Officer, Network for Regional Healthcare Improvement, Pittsburgh, PA

Elizabeth Mitchell, Chief Executive Officer, Maine Health Management Coalition, Portland, ME

12:00 pm Pre-Conference Sessions Adjourn (Lunch on Own)

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Take advantage of this unique opportunity to expand your reach! The Summit is attended by highly influential and experienced professionals. Sponsorship offers you strategic positioning as an industry leader. For more information call 206-673-4815 or email exhibits@hcconferences.com.

DAY I: TUESDAY, FEBRUARY 19, 2013

12:00 pm **Exhibit Hall Opens with Welcome Coffee and Tea**

OPENING PLENARY SESSION

1:00 pm

Welcome & Overview



Elaine Batchlor, MD, MPH, Chief Executive Officer, MLK Jr. Community Hospital; Chair, Integrated Healthcare Association, Los Angeles, CA

Keynote Address: Pay for Performance in Context



Tom Williams, DrPH, President and Chief Executive Officer, Integrated Healthcare Association, Oakland, CA (Co chair)



Comparative Effectiveness Research, The Lewin Group; Fellow, Optum Labs, Falls Church, VA

2:00 pm

Keynote Address



Brent James, MD, M.Stat, Executive Director, Intermountain Healthcare - Institute for Health Care Delivery Research, Salt Lake City, UT

3:00 pm

Refreshment Break in the Exhibit Hall

3:30 pm

Keynote Address: The Evidence Against Pay for Performance

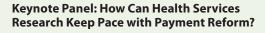


Ashish K. Jha, MD, MPH, C. Boyden Gray Associate Professor of Health Policy and Management, Harvard School of Public Health, Cambridge, MA

Keynote Address: The Evidence For Pay for Performance



François de Brantes, Executive Director, Health Care Incentives Improvement Institute, Newtown, CT





Francois de Brantes, Executive Director, Health Care Incentives Improvement Institute, Newtown, CT



Irene Fraser, PhD, Director, Center for Delivery, Organization, and Markets, Agency for Healthcare Research and Quality, Rockville, MD



Ashish K. Jha, MD, MPH, C. Boyden Gray Associate Professor of Health Policy and Management, Harvard School of Public Health, Cambridge, MA



Arnold Milstein, MD, MPH, Professor of Medicine and Director of the Clinical Excellence Research Center, Stanford University, Stanford, CA (Moderator)

5:30 pm

Day 1 Adjourns followed by Welcome Networking Reception in the Exhibit Hall

DAY II: WEDNESDAY, FEBRUARY 20, 2013

7:00 am **Continental Breakfast in the Exhibit Hall**

MORNING PLENARY SESSION

8:00 am

Welcome & Overview



Harold Miller, Executive Director, Center for Healthcare Quality and Payment Reform; President and Chief Executive Officer, Network for Regional Healthcare Improvement, Pittsburgh, PA

8:15 am

Keynote Address: Updates from CMS — **Value Based Payment Programs**



Shari M. Ling, MD, Deputy Chief Medical Officer, Office of Clinical Standards and Quality, Centers for Medicare and Medicaid Services (CMS),

Keynote Panel: Case Studies in Payment Reform: Health Plan and Provider Perspectives



Dolores Yanagihara, MPH, Director, Pay for Performance Program, Integrated Healthcare Association, Oakland, CA



Juan Davila, Senior Vice President, Network Management, Blue Shield of California, Woodland Hills, CA



Jane Dillon, MD, Senior Medical Director, Advocate Physician Partners, Chicago, IL



Harold Miller, Executive Director, Center for Healthcare Quality and Payment Reform; President and Chief Executive Officer, Network for Regional Healthcare Improvement, Pittsburgh, PA (Moderator)

10:00 am

Refreshment Break in the Exhibit Hall

10:30 am Mini-Summits (Choose One)

Mini-Summit I: Bridges to Excellence: Results, Lessons and Success from Ten Years of Implementations in the Field

This session will update attendees on the national Bridges to Excellence results to date. highlight the background and specific results from organizations who have implemented the program, and feature case studies on program expansion and incorporating utilization and quality metrics to create a new level of clinician recognition. It will also offer examples of leveraging clinical data for assessment, dashboards, and tools available for benchmarking and continuous quality improvement.

> Eduardo J. Sanchez, MD (Invited), Chief Medical Officer, Blue Cross Blue Shield of Texas, Dallas, TX

Donna Marshall, MBA, Executive Director, Colorado Business Group on Health, Lakewood, CO

Elizabeth Mitchell, *Chief Executive Officer, Maine Health Management* Coalition, Portland, ME

Simone F. Karp, RPh, Chief Business Officer, CECity.com, Inc., Pittsburgh, PA

Mini-Summit II: Performance Measurement for ACOs and **Health Benefits Exchanges**

NCQA Accountable Care Organization (ACO) Accreditation helps health care organizations demonstrate their ability to improve quality, reduce costs and coordinate patient care. Topics include how HEDIS performance measures can be used to guide data collection and reporting to demonstrate outcomes, eligibility requirements to becoming an accredited ACO and the survey process. This session will include an early adopter of NCQA's ACO program who will share their perspective on their experience and the value of participation.

> Patricia Barrett, Vice President, Product Development, National Committee for Quality Assurance (NCQA), Washington, DC

Karen Onstad, Director, Quality Solutions Group, National Committee for Quality Assurance (NCQA), Washington, DC

Mini-Summit III: P4P and Payment Design in Europe

This session will focus on how best to reform healthcare payment mechanisms to achieve high-value, sustainable care. The session is aimed at providing the latest information and evidence on payment design & assessment in Western Europe; drawing cross-country learning around financial performance management; identifying the most promising next steps in payment & organizational reform; and discovering trends and presenting successful cases.

Jo Caris, PhD, MBA (Invited), *Professor of Organizational Change in Healthcare, Tilburg University, The Netherlands*

Katharina Janus, PhD, MBA, Professor of Healthcare Management, Ulm University; Director, Center for Healthcare Management, Ulm, Germany

Federico Lega, PhD, MBA, Professor of Healthcare Management, Bocconi University, Italy; Director Master of Science in Public Management and International Organizations, Milan, Italy

Mini-Summit IV: State Payment Reform Efforts

A handful of states have enacted legislation and implemented comprehensive reforms that provide greater access to health coverage, improve the quality of care, and moderate costs. This session will feature state-level Medicaid reform programs underway around the country and value based purchasing within insurance exchanges. These reforms have required tremendous local leadership and hold great promise.

Alan Weil, Executive Director, National Academy for State Health Policy, Washington, DC

Additional Speakers to be Announced

12:15 pm Lunch in the Exhibit Hall

AFTERNOON PLENARY SESSION

1:15 pm

Keynote Panel: Pay for Performance for High-Cost and Innovative Drugs and Devices



John Hernandez, PhD, Vice President, Health Economics and Outcomes Research, Abbott Vascular, Santa Clara, CA



Scott Howell, MD, Vice President, Access Solutions, Genentech, South San Francisco, CA



James C. Robinson, PhD, Leonard D. Schaeffer Professor of Health Economics, University of California at Berkeley; Director, Berkeley Center for Health Technology, Berkeley, CA (Moderator)

2:00 pm

Healthca Giovanni Co

Keynote Address: Revolutionizing Consumer Healthcare Transparency

Giovanni Colella, MD, CEO and Co-Founder, Castlight Health, San Francisco, CA

2:30 pm

Refreshment Break in the Exhibit Hall

2:45 pm Concurrent Sessions: Group 1 (Choose One)

Session 1.1: National Quality Forum: National Consensus Standards for Cost/Resource Use

Taroon Amin, MPH, PhD (c), Senior Director, National Quality Forum (NQF), Washington, DC

Helen Burstin, MD, MPH, Senior Vice President, National Quality Forum (NQF), Washington, DC

Ashlie Wilbon, RN, MPH, Senior Project Director, National Quality Forum (NQF), Washington, DC

Session 1.2: Bundled Payment and Performance Measurement for Cancer Care

James C. Robinson, PhD, Leonard D. Schaeffer Professor of Health Economics, University of California at Berkeley; Director, Berkeley Center for Health Technology, Berkeley, CA

Ann Woo, PharmD, Director of Pharmacy, Hill Physicians Medical Group, San Ramon, CA

Session 1.3: Data-Guided Hot Spotting: Characterizing Frequently-Admitted Patients

Susan Elster, PhD, Chief Research Officer, Pittsburgh Regional Health Initiative/Jewish Healthcare Foundation, Pittsburgh, PA

Session 1.4: Hospital Transparency and Performance Incentives: Will New CMS Initiatives Make State and Regional Programs Obsolete?

Bruce Spurlock, MD, Executive Director, Cynosure Health; Executive Director, California Hospital Assessment and Reporting Task Force (CHART). Roseville. CA

Helen Macfie, PharmD, Senior Vice President, Performance Improvement and Strategic Planning, MemorialCare Health System, Long Beach, CA

Session 1.5: A Care Coordination Model for Value Based Performance Programs

Richard S. Chung, MD, Chief Clinical Officer, APS Healthcare, Honolulu, HI

Session 1.6: Using Population Health Management to Optimize Care Delivery

Jeff Rideout, MD, Senior Vice President, Cost & Care Management and Chief Medical Officer, The TriZetto Group, Newport Beach, CA

Session 1.7: Pay for Performance Legal issues

Adam Romney, Esq, Associate, Davis Wright Tremaine, Seattle, WA

Session 1.8: Combining Practice and Payment Reform in a Medical Home Model

Bruce D. Nash, MD, MBA, Senior Vice President, Medical Affairs; Chief Medical Officer, Capital District Physician's Health Plan (CDPHP), Albany, NY

3:45 pm Transition Break

4:00 pm Concurrent Sessions: Group 2 (Choose One)

Session 2.1: On the Ground Insights into Payment Reform

Susie Dade, Deputy Director, Puget Sound Health Alliance, Seattle, WA **Lori Lambert,** Director of Measurement and Reporting, Oregon Health Care Quality Corporation, Portland, OR

Barbara Tobias, MD, Robert & Myfanwy Smith Endowed Professor, UC Department of Family and Community Medicine; Medical Director, The Health Collaborative, Cincinnati, OH

Session 2.2: Implementation Considerations and Automation of Three Bundled Payment Reimbursement Models

Andrei Gonzales, MD, Episodes of Care Client Relationship Director, McKesson Health Solutions, Malvern, PA

Douglas Moeller, Medical Director, McKesson Health Solutions, Malvern. PA

Session 2.3: Health Plan Pay for Performance: Strategies for Success in the CMS Medicare Advantage Star Quality Ratings

Theresa C. Carnegie , Esq., *Member, Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, PC, Washington, DC*

Session 2.4: Hospital Pay for Performance: Strategies for Success under the CMS Hospital Value Based Purchasing (VBP) Program

Carolyn Scott (Invited), *Vice President of Premier Performance Partners, Premier healthcare alliance, Charlotte, NC*

Session 2.5: The Next Generation of Health Plan-Medical Group Collaboration

Howard Beckman, MD, Chief Medical Officer, Focused Medical Analytics, Pittsford, NY

Session 2.6: Driving Health Improvement Through Community Population Measurement

Deryk Van Brunt, DrPH, President and CEO, Healthy Communities Institute, Berkeley, CA

Session 2.7: Technology and Care Delivery Strategies to Ensure Success in Value Based Care Models

Charles Kennedy, MD, Chief Executive Officer, Aetna Accountable Care Solutions, Hartford, CT

Session 2.8: Highmark's Physician Pay for Performance Program

Julie Hobson, RN, BSN, Manager, Provider Engagement, Performance, and Partnership, Highmark, Inc., Pittsburgh, PA

5:00 pm Day 2 Adjourns

5:15 pm Special Showing of "Escape Fire: The Fight to Rescue American Healthcare"

DAY III: THURSDAY, FEBRUARY 21, 2013

7:30 am Continental Breakfast

MORNING PLENARY SESSION

8:30 am Welcome & Overview



David Sayen, Regional Administrator, Centers for Medicare and Medicaid Services (CMS) – Region IX, San Francisco, CA

8:45 am



Keynote Address: Performance Based Elements of Healthcare Reform

Susan Dentzer, *Editor-in-Chief*, Health Affairs; *Health Policy Analyst*, The News Hour with Jim Lehrer, *Washington*, *DC*

9:30 am



Keynote Address: Performance Measurement Across the Spectrum: ACOs, Exchanges, Medical Homes, and Beyond

Peggy O'Kane, *President, National Committee for Quality Assurance, Washington, DC*

10:00 am

Refreshment Break

10:15 am Mini-Summits (Choose One)

Mini Summit V: Updates from CMS: Why Quality Matters — Using Innovation and Information to Drive Outcomes

Quality initiatives touch every aspect of the health care system, and quality measures help achieve the goals effective, safe, efficient, patient-centered, equitable, and timely care. CMS uses quality measures in its various initiatives that include quality improvement, pay for reporting, and public reporting. Recent efforts have resulted in significant savings and transparency. This session will explore how through collaboration, efficiencies are being achieved in both quality and cost.

Shari M. Ling, MD, Deputy Chief Medical Officer, Office of Clinical Standards and Quality, Centers for Medicare and Medicaid Services (CMS), Baltimore, MD

David Sayen, Regional Administrator, Centers for Medicare and Medicaid Services (CMS) – Region IX, San Francisco, CA

Betsy L. Thompson, MD, DrPH, Chief Medical Officer, Centers for Medicare and Medicaid Services (CMS) – Region IX, San Francisco, CA

DAY III Continued

Mini Summit VI: Price Transparency and Value Based Benefit Design

In this session, Catalyst for Payment Reform and Pacific Business Group on Health will explore price transparency and its role in implementing Value Based benefit design. Leading employers will share their latest efforts to create transparency and benefits strategies that utilize it, including reference pricing. Experts will discuss what information and shopping tools consumers need to make Value Based decisions, what needs to change in the health care system to support consumers fully, and examine the leading health plan and third party products in this space.

Ann Boynton (Invited), Deputy Executive Officer, Benefit Programs Policy and Planning, CalPERS, Sacramento, CA

Andrea Dilweg, Program Director, Catalyst for Payment Reform, San Francisco, CA

Ted von Glahn, Senior Program Director, Pacific Business Group on Health, San Francisco, CA

Sally Welborn (Invited), *Senior Vice President, Global Benefits, Wal-Mart Stores, Inc, Bentonville, AR*

Mini Summit VII: Intensive Outpatient Care Programs: Changing Payment and Changing Care for Medically Complex Patients

Managing the small number of patients who consume a significant proportion of resources is an essential part of an effective health system. Emerging models providing primary care-embedded care management show early results across the Triple Aim. Speakers from leading programs around the country serving commercial, Medicare and Medicaid patients will discuss their experience with identifying and supporting medically complex patients. Presentations will cover both the clinical and financial underpinnings of intensive outpatient care programs across diverse patient populations. The session will address common program features and challenges as well as lessons for organizations and regions undertaking similar efforts.

Diane Stewart, MBA, Senior Director, California Quality Collaborative, Pacific Business Group on Health, San Francisco, CA

Additional Speakers to be Announced

Mini Summit VIII: Fulfilling the Promise of Bundled Payment

Of the ten payment reform approaches piloted by Medicare (1991 - 2010), bundled payment was the only model to show cost savings, and estimates from other studies (RAND), suggest great promise from bundled payment. However, that promise has not been fulfilled. Experts working in this area will describe the latest bundled payment implementation activity in both the public and private sectors, and offer perspectives on its future.

Deirdre Baggott, PhD (c), MBA, Vice President, The Camden Group; Expert Panel Reviewer, CMMI Bundled Payment for Care Improvement Initiative; Former Executive, Denver St. Joseph Hospital ACE Bundled Payment Demonstration, El Segundo, CA

Kimberly Crow Hartsfield, Manager, Enterprise Business Intelligence -Medical Informatics, Arkansas Blue Cross Blue Shield, Little Rock, AR

Mark Hiller, Vice President, Innovation Solutions, Premier Inc., Charlotte. NC

Jett Stansbury, *Director*, *New Program Development*, *Integrated Healthcare Association*, *Oakland*, *CA (Moderator)*

12:00 pm National P4P Summit Adjourns

THE FOLLOWING REGISTRATION TERMS AND CONDITIONS APPLY

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- 2. Each registrant will receive a user name and password for access. Registrants will be able to change their user names and passwords and manage their accounts.
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- 4. Only one user (per user name and password) may access the archived conference. It is not permissible to share the user name and password with third parties. Should Internet registrants choose to access post conference content via alternative media (Flash Drive), this individual use limitation applies. It is not permissible to share alternative media with third parties.
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 $Registration \ may \ be \ made \ on line \ or \ via \ mail, fax \ or \ scan.$

You may register through either of the following:

- Online at www.PFPSummit.com.
- Fax/Mail/Email using this printed registration form. Mail the completed form with payment to the Conference registrar at 22529 39th Ave. SE, Bothell, WA 98021, or fax the completed form to 206-319-5303, or scan and email the completed form to registration@hcconferences.com. Checks or money orders should be made payable to Health Care Conference Administrators LLC.

The following credit cards are accepted: American Express, Visa or MasterCard. Credit card charges will be listed on your statement as payment to HealthCare (HC) Conf LLC.

For registrants awaiting company check or money order, a credit card number must be given to hold registration. If payment is not received by seven days prior to the Summit, credit card payment will be processed.

HOTEL INFORMATION/RESERVATIONS

The Hyatt Regency San Francisco is the official hotel for the Eighth National Pay for Performance Summit. A special group rate of \$249.00 single/double per night (plus tax) has been arranged for Summit Attendees. To make reservations online, please go to www.pfpsummit.com and click on the Travel/Hotel tab. You may also make a reservation by calling Hyatt Reservations toll free at (888) 421-1442 or (415) 788-1234 to reach the hotel directly. Please refer to the Pay for Performance Summit when making your reservation to receive the group rate. Reservations at the group rate will be accepted while rooms are available or until the cut-off date of Wednesday, January 30, 2013. After this, reservations will be accepted on a space-available basis at the prevailing rate.

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We are pleased to offer a limited number of full or partial Tuition Scholarships to qualifying representatives of local, state and federal government, consumer advocate organizations, safety net providers, academics, students and health services research organizations to attend the National Pay for Performance Summit.

A variety of factors will be considered in determining the issuance of a scholarship. These factors include financial need and the desirability of geographic and organizational representation at the event(s). Funding for scholarships is limited.

Tuition scholarships cover the cost of the registration fee of the event. Funds are not available to cover travel or lodging.

To apply for a full or partial tuition scholarship please complete and submit the Tuition Scholarship Application form found at www.PFPSummit.com.

For Questions, call 800-503-7382 (Continental US, Alaska and Hawaii only) - Mon.-Fri., 9 am - 5 pm pacific time or email:Scholarships@PfPSummit.com

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4:00 pm Concurrent Sessions – Group 2

□ 2.2 □ 2.3 □ 2.4 □ 2.5

□ 2.6

2.7

□ 2.8

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PRE-CONFERENCES Tuesday, February 19 (Choose one Pre-Conference only) \$ 495 ☐ Pre-Conference I: Physician Value Based Pay for Performance	Webcast conference registration includes the live Internet feed from the Summit, plus six months of continued archived Internet access, available 24/7.
Sponsored by the Integrated Healthcare Association ☐ Pre-Conference II: Hospital Value Based Payment	INDIVIDUAL REGISTRATION (Includes Pre-Conference):
Sponsored by Premier healthcare alliance	☐ Through Friday, December 21, 2012* \$ 795
☐ Pre-Conference III: Achieving the Triple Aim Through Payment and Delivery Reform Sponsored by the Network for Regional Healthcare Improvement	1 ☐ Through Friday, January 18, 2013** \$1,195 ☐ After Friday, January 18, 2013 \$1,495
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The Thady, January 10, 2013	ference access with colleagues or to assign and track employee conference participation.
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