

# Fourteenth National Value-Based Payment and Pay for Performance Summit



HYATT REGENCY LAX • LOS ANGELES, CA  
FEBRUARY 25 – 27, 2019

## Preparing for the Launch of CMMI's New Mandatory Downside Risk-Payment Models

[www.PFPSummit.com](http://www.PFPSummit.com)

### CO-CHAIRS:

**Donald H. Crane, JD**, President and Chief Executive Officer, America's Physician Groups

**Jeffrey A. Rideout, MD**, President and Chief Executive Officer, Integrated Healthcare Association

### FEATURED FACULTY:

**Jeffrey Bailet, MD, EVP**, Blue Shield of California; Chair, PTAC

**Molly Coye, MPH, MD**, Executive in Residence, AVIA

**Tom Curtis, PMA**, Manager of Quality Improvement Medicaid, Michigan DHHS

**Susanne Dade, MPA**, Deputy Director, Washington Health Alliance

**Anas Daghestani, MD**, Chief Executive Officer, Austin Regional Clinic

**C. Duane Dauner, MA**, Special Adviser and Former President/CEO, California Hospital Association

**Sanjay Doddamani, MD**, Senior Director, Pop Health, Geisinger, CMO, Keystone ACO

**Jean Drouin, MD, MBA**, CEO, Clarify Health Solutions; Former Head, McKinsey Health Systems Institute

**John Gorman**, Founder & Former Executive Chairman, Gorman Health Group

**Eric D. Hargan**, Deputy Secretary, US Department of Health and Human Services

**Joshua Hollander**, Manager, Enterprise Practice Consulting, CareFirst Blue Cross Blue Shield

**Sachin H. Jain, MD, MBA**, Chief Executive Officer, CareMore Health System

**Pauline Lapin, MHS**, Director, CMMI Seamless Care Models Group

**Michael Leavitt**, Chair, Leavitt Partners, Former HHS Secretary, Former Governor of Utah

**Joshua M. Liao, MD, MSc, FACP**, Associate MD of Value-Based Care, U of Washington

**Melanie Matthews, MA**, CEO, NW Momentum Health Partners ACO

**Barbara L. McAneny, MD, FASCO, MACP**, President, American Medical Association

**Mark McClellan, MD, PhD**, Director, Margolis Center, Duke; Former CMS Administrator & FDA Commissioner

**Jessica Moschella, MPH**, Executive Director, Emerson Physician-Hospital Organization

**Kavita Patel, MD**, Senior Fellow Brookings Institution Member, PTAC

**Hoangmai H. (Mai) Pham, MD**, Provider Alignment, Anthem; Former CMMI Chief Innovation Officer

**Terry Platchek, MD**, Fellowship Dir, Stanford Clinical Excellence Research Cntr; VP, Perf Imp, Stanford Children's

**Thomas M. Priselac**, President and CEO, Cedars-Sinai Health System

**Christina S. Ritter, PhD**, Director, CMS Patient Care Models Group

**Kelly Robison, MPA**, CEO, Brown & Toland Physicians

**Valinda Rutledge, MBA**, VP Fed Affairs, APG; Former Group Dir, Patient Care Model Group & BPCI Lead, CMMI

**Richard M. Scheffler, PhD**, Professor & Director, Nicholas C. Petris Center, University of California Berkeley

**Julie A. Simer, JD, MPH**, Senior Counsel, Managed Care, Dignity Health

**Grace Emerson Terrell, MD, MMM, FACP, FACPE**, CEO, Envision Genomics; Member, PTAC

### FEATURING PLENARY SESSIONS

Keynote Address: HHS/CMS/CMMI Value-based Payment Initiatives Update

Thinking Strategically about Value-based Payment Models

Lessons Learned, Current Challenges and Moving to Mandatory Risk-bearing Models Making Downside Risk Work

Debating the most Efficient Delivery and Payment Models

Consolidation vs. Clinical Integration; Hospital vs. Physician Control; Capitation vs. Shared Risk MACRA/APMs/MIPS Roundtable

Annual Medicare Advantage Update

The Role of Analytics, Big Data, Artificial Intelligence and Machine Learning in Value-based Care Transforming the Organization in Anticipation of Value-Based Payment Reform

The Role of Hospitals and Health Systems in a Value-based World

The Physician Perspective on Value-based Care

### AND MINI SUMMITS

The Model Matters: Providers Assume Risk, Value of Care Increases

Supporting the Clinical Community's Participation in APMs

A Financial Incentive Model for Pop Health Management

Value-based Care Case Studies: CareMore HIT for Care Delivery Innovation

The Role of Pop Health in Value-based Care Consolidation Trends in CA's Health Care System

CMS/CMMI Q&A on AC and Direct Provider Contracting

Case Studies in Reference Pricing Manage Complex Patients in Medicare & Medicaid Managed Care

Investing in Clinical Integration: Who Pays, Who Benefits?

Synchronizing Payment Programs, including ACO & Bundles

The CA Competitive Model: How has it Fared, & What's Next?

CMS/CMMI Q&A on Bundled Payments

Alternative Payment Models in Medicaid

Value-Based Payment for Medicaid Behavioral Health Services

Optimizing Value-Based Care Opportunities through Strategic Bundles

Bundled Payments Dissemination at the Provider Level

Narrow, Tiered and High Performance Networks

Successful Pay-for-Success Program for Asthma

Next Generation Pay for Success

CA's Past Efforts to Cover the Uninsured & Beyond the ACA

CMS/CMMI Q&A on MACRA/MIPS/APMs

Alignment: Physician Comp in Value Based Care

Changing Market Forces Using Specialist Cost Tiering

Addressing Waste to Improve Value in Healthcare

Applying the Lessons of FFS to Streamline Value-based Payments

Expanded Payment Methodologies: Incorporating and Scaling Prospective Bundled Payments Contracts

### CONTINUING EDUCATION CREDITS:

**Accounting Professionals:** Approved for up to 15.0 NASBA CPE credits.

**Physicians:** Approved for up to 15.25 AMA PRA Category 1 Credits™.

**TUITION SCHOLARSHIP PROGRAM:** The Summit is pleased to offer full and partial tuition scholarships supported by:



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Perhaps the most dramatic recent development in value-based care is the announcement by HHS Secretary Alex Azar that the Center for Medicare and Medicaid Innovation will soon launch “new, bold” models for value-based care. Azar suggests the return of mandatory models and an emphasis on providers taking downside risk. This includes a recent HHS regulatory proposal to overhaul the Medicare Shared Savings Program and push ACOs into two-sided risk sooner. “Without real accountability, we’re just offering bonuses



HHS Secretary  
Alex Azar

on top of payments that may be too high already. That’s why we have now proposed to simplify the ACO system into two tracks, requiring them to take on risk sooner,” Mr. Azar said. Azar has also said that the administration would “revisit” mandatory models that it had previously scrapped in cardiac care and said the time had come for “exploring new and improved episode-based models in other areas, including radiation oncology.”

These initiatives are in sharp contrast with the actions of Tom Price, MD, the previous HHS secretary who canceled and scaled back major mandatory bundled payment programs. And more often than not the private sector follows Medicare and Medicaid’s directions in payment reform.

Accordingly the 14th National Value-based Payment & Pay for Performance Summit will begin by addressing the crucial strategic issues of “Thinking Strategically about Value-based Payment Models: Lessons Learned, Current Challenges and Moving to Mandatory Risk-bearing Models” and “Making Downside Risk Work”. Other plenary sessions cover topics like an “Annual Medicare Advantage Update”, “The Role of Analytics, Big Data, Artificial Intelligence and Machine Learning in Value-based Care”, a “MACRA/APMs/MIPS Roundtable”, and the perspectives of physicians and hospitals on their respective roles in the move to value-based care.



IHA President  
Jeff Rideout, MD

As plans and providers seek to position themselves for success in value-based care, fundamental issues are being raised and debated regarding “the most Efficient Delivery and Payment Models: Consolidation vs. Clinical Integration; Hospital vs. Physician Control; Capitation vs. Shared Risk”, issues raised in the recent September 2018 issue of *Health Affairs* and the topic of one of our opening plenary session panels. Jeffrey A. Rideout, MD, President Integrated Healthcare Association, will further address these issues in his session on “The Model Matters: As Providers Assume Risk, the Value of Care Increases.”

But the heart of the Summit is found in the over 40 sessions with a faculty of over 100 which address detailed operational and clinical sessions addressing practical ways to improve quality and efficiency and provide a pathway to success in the nation’s newly aggressive move to value-based care. The Summit seeks to provide participants a tool kit for success in value-based care. Examples of sessions include “Supporting the Clinical Community’s Participation in APMs”, “Developing a Financial Incentive Model for Population Health Management”, “Applications of HIT for Care Delivery Innovation”, “Case Studies in Reference Pricing”, “Innovations in Value-Based Oncology Practice Reimbursement”, “How to Manage Complex Patients in Medicare and Medicaid Managed Care”, and “Synchronizing Medicare Payment Programs, including Accountable Care and Bundled Payment Programs, into a Unified Strategy to Deliver People-centered Care” and many, many more.

So join us in Los Angeles to learn and debate strategies for success in the nation’s newly-invigorated move to value-based care and in conjunction therewith how we can improve the quality and efficiency of care that is rendered to our patients.

— Peter N. Grant, JD, PhD  
CEO, Global Health Care, LLC  
November 2018



## WHO SHOULD ATTEND

- Executives and Board Members of ACOs, Health Plans, Health Systems, Hospitals and Physician Organizations
- Medical Directors
- Physicians
- Nurses, Nurse Practitioners and Other Allied Health Professionals
- Pharmacists and Pharmacy Benefit Managers
- Representatives of Purchasers, including Private Employers and Public Purchasers
- Consumer Organization Representatives
- Federal and State Government Officials
- Health Care Regulators and Policy Makers
- Health Benefits Consultants
- Medical Analytic Specialists
- Quality Improvement Executives
- Managed Care Executives
- Managed Care Contracting Experts
- Health Policy Makers
- Academics

## HOTEL INFORMATION/RESERVATIONS

**The National Value-based Payment and Pay for Performance Summit does not contract with any third party organization to make hotel reservations for attendees of the Summit. All attendees should make their hotel reservations directly with the hotel and not with a third party vendor.**

The Hyatt Regency LAX is the official hotel for the Fourteenth National Value-Based Payment and Pay for Performance Summit. The Summit has negotiated a group rate for our attendees of **\$189/night plus tax**. The hotel will honor this rate **until Friday, February 1, 2019** OR until the block is filled, whichever occurs first. Overnight self-parking is available for \$25.

To BOOK YOUR ROOM, please go to the travel/hotel tab at [www.pfpsummit.com](http://www.pfpsummit.com), or call 877.803.7534 and mention the National Value-Based Payment and Pay for Performance Summit.

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## EXHIBIT AND SPONSORSHIP OPPORTUNITIES

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](mailto:exhibits@hcconferences.com).

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## AGENDA AT A GLANCE

### MONDAY, FEBRUARY 25

- 11:00 am **Summit Registration**
- 1:00 pm **Preconference I: CMMI's New Mandatory Downside Risk Payment Models & Applications of Health Information Technology that Lower Healthcare Costs and Improve Quality**
- 5:15 pm **Adjournment**

### TUESDAY, FEBRUARY 26

7:00 am **Registration Opens: Continental Breakfast in Exhibit Hall**

#### OPENING PLENARY SESSION

- 8:00 am **Welcome and Introductions to Day I Morning Plenary Session**
- 8:15 am **Keynote Address: HHS Value-based Payment Initiatives Update**
- 8:45 am **Keynote Health Policy Dialogue on the State of Value-based Care**
- 9:30 am **Thinking Strategically about Value-based Payment Models: Lessons Learned, Current Challenges and Moving to Mandatory Risk-bearing Models**
- 10:30 am **Break**
- 11:00 am **Making Downside Risk Work**
- 11:45 am **Debating the Most Efficient Delivery and Payment Models: Consolidation vs. Clinical Integration; Hospital vs. Physician Control; Capitation vs. Shared Risk**
- 12:30 pm **LUNCHEON AND IHA EXCELLENCE IN HEALTHCARE AWARDS (TRIPLE AIM) PRESENTATION CEREMONY**
- 1:30 pm **AFTERNOON MINI SUMMITS GROUP I**

I: The Model Matters: As Providers Assume Risk, the Value of Care Increases

II: Supporting the Clinical Community's Participation in APMs & Developing a Financial Incentive Model for Population Health Management

III: Value-based Care Case Studies: CareMore Health System & Stanford Clinical Excellence Research Center: Applications of Health Information Technology for Care Delivery Innovation

IV: The Role of Population Health in Value-based Care

V: California's Past Efforts to Cover the Uninsured and Beyond the ACA: Paths to Universal Coverage in California

VI: CMS/CMMI Payment Reform: Elements of a Successful Accountable Care and Direct Provider Contracting Programs with CMS/CMMI Q&A

2:30 pm **Transition Break**

#### MINI SUMMITS GROUP II

VII: Alternative Payment Models in Medicaid & Value-based Payment for Medicaid Behavioral Health Services

VIII: Brilliant Basics: How to Manage Complex Patients in Medicare and Medicaid Managed Care

IX: Investing in Clinical Integration: Who Pays, Who Benefits?

X: Synchronizing Medicare Payment Programs, including Accountable Care and Bundled Payment Programs, into a Unified Strategy to Deliver People-centered Care

XI: Consolidation Trends in California's Health Care System

XII: CMS/CMMI Payment Reform: Elements of a Successful Bundled Payment Program with CMS/CMMI Q&A

XIII: Technology in Healthcare: Are you Ready?

3:45 pm **Transition Break**

#### MINI SUMMITS GROUP III

XIV: Expanded Payment Methodologies: Incorporating and Scaling Prospective Bundled Payments Contracts

XV: Optimizing Value-based Care Opportunities through Strategic Bundles & Bundled Payments Only Work if You Disseminate at the Provider Level

XVI: Advanced Strategies in Creating and Managing Narrow, Tiered and High Performance Networks

XVII: Bold Improvements to Enhance a Successful Pay-for-Success Program for Asthma & Next Generation Pay for Success — Optimizing Value Creation for Communities, not Investors

XVIII: The California Competitive Model: How has it Fared, and What's Next?

XIX: CMS/CMMI Payment Reform Q&A Session: Elements of a Successful MACRA/MIPS/APMs Participation Strategy with CMS/CMMI

5:00 pm **Transition Break**

#### CLOSING MINI/MINI SUMMITS GROUP IV

XX: Alignment: Physician Comp in Value-based Care

XXI: Changing Market Forces Using Specialist Cost Tiering

XXII: Waste Not: Finding and Addressing Waste to Improve Value in Healthcare

XXIII: Applying the Lessons of FFS to Streamline Adoption of Value-based Payments

XXIV: Case Studies in Reference Pricing

XXV: How a Delivery System ACO ... Insurance Program Sold Directly to Hi-tech Employers ...

5:45 pm **ADJOURNMENT AND NETWORKING RECEPTION**

### WEDNESDAY, FEBRUARY 27

#### CLOSING PLENARY SESSION

- 8:00 am **Welcome and Introductions**
- 8:15 am **Keynote Dialogue on the Role of Venture Capital and Private Equity in Value-based Care**
- 9:00 am **The Role of Hospitals and Health Systems in a Value-based World**
- 9:30 am **The Physician Perspective on Value-based Care**
- 10:00 am **Transition Break**
- 10:15 am **Transforming the Organization in Anticipation of Value-based Payment Reform**
- 10:45 am **The Role of Analytics, Big Data, Artificial Intelligence and Machine Learning in Value-based Care**
- 11:15 am **Annual Medicare Advantage Update**
- 11:45 am **MACRA/APMs/MIPS Roundtable**
- 12:30 pm **ADJOURNMENT**



## MONDAY, FEBRUARY 25, 2019

11:00 am **Summit Registration**

### PRECONFERENCE SYMPOSIUM

#### Preconference I: CMMI's New Mandatory Downside Risk Payment Models & Applications of Health Information Technology that Lower Healthcare Costs and Improve Quality

1:00 pm **CMMI's New Mandatory Downside-Risk Payment Models**

*Presented by ECG*

**Ken Steele, MHA**, Associate Principal, ECG Management Consultants; Former Vice President Managed Care, Catholic Healthcare West (now Dignity Health); Former President, St. Mary's Medical Center, San Francisco, CA

3:00 pm **Transition Break**

#### 3:15 pm **Applications of Health Information Technology that Lower Healthcare Costs and Improve Quality**

*Presented by Stanford Clinical Excellence Research Center*

**Nick Bott, PsyD**, 2016-17 Design Fellow, Associate Fellowship Director, Stanford Clinical Excellence Research Center, Palo Alto, CA

**Natalia Leva, MD**, Design Fellow, Stanford Clinical Excellence Research Center, Palo Alto, CA

**Dr. Clare Purvis, PsyD**, Design Fellow, Stanford Clinical Excellence Research Center, Palo Alto, CA

**Francesca Rinaldo, MD, PhD**, Associate Director, Healthcare Design Fellowship, Stanford Clinical Excellence Research Center, Palo Alto, CA

**Anoop Rao, MD**, Design Fellow, Stanford Clinical Excellence Research Center, Palo Alto, CA

**Courtenay Stewart, MD**, Design Fellow, Stanford Clinical Excellence Research Center, Palo Alto, CA

**Terry Platckek, MD**, Fellowship Director, Stanford Clinical Excellence Research Center, Vice President, Performance Improvement, Stanford Children's Health, Palo Alto, CA (Moderator)

5:15 pm **Adjournment**

## TUESDAY, FEBRUARY 26, 2019

### NATIONAL VALUE-BASED PAYMENT AND PAY FOR PERFORMANCE SUMMIT OPENING PLENARY SESSION

7:00 am **Registration Opens: Continental Breakfast in Exhibit Hall**

#### OPENING PLENARY SESSION

8:00 am **Welcome and Introductions**



**Jeffrey A. Rideout, MD**, President and Chief Executive Officer, Integrated Healthcare Association, Oakland, CA (Co chair)

8:15 am **Keynote Health Policy Dialogue on the State of Value-based Care**



**Michael Leavitt**, Founder and Chairman, Leavitt Partners; Former Secretary, US Department of Health and Human Services; Former Governor of Utah, Salt Lake City, UT



**Mark McClellan, MD, PhD**, Director, Robert J Margolis Center for Health Policy and Margolis, Professor of Business, Medicine and Health Policy, Duke University; Former CMS Administrator and FDA Commissioner, Washington, DC



**Kavita Patel, MD**, Nonresident Senior Fellow Brookings Institution; Member, Physician-Focused Payment; Model Technical Advisory Committee (PTAC); Former Director of Policy, The White House (Obama), Former Senior Advisor, Senator Edward Kennedy, Washington, DC



**Donald H. Crane, JD**, President and Chief Executive Officer, APG, Los Angeles, CA (Moderator)

9:00 am **Keynote Address: HHS Value-based Payment Initiatives Update**



**Eric D. Hargan**, Deputy Secretary, US Department of Health and Human Services; Former HHS Principal Associate Deputy Secretary and Acting Deputy Secretary (Bush), Washington, DC

10:00 am **Thinking Strategically about Value-based Payment Models: Lessons Learned, Current Challenges and Moving to Mandatory Risk-bearing Models**



**Francois de Brantes, MBA**, Senior Vice President, Commercial Business Lines, Remedy Partners; Former Vice President and Director, Center for Value in Health Care, Altarum; Former Program Leader, Health Care Initiatives, GE Corporate Health Care, Newtown, CT



**Melanie Matthews, MA**, Chief Executive Officer, NW Momentum Health Partners ACO, LLC; Chief Executive Officer, Physicians of Southwest Washington; Former Vice President of Operations, Prestige Care, Inc.; Former Regional Vice President of Operations, Avalon Health Care Group, Olympia, WA



**Hoangmai H. (Mai) Pham, MD**, Vice President, Provider Alignment Solutions, Anthem; Former Chief Innovation Officer, Center for Medicare and Medicaid Innovation, Centers for Medicare and Medicaid Services, Washington, DC



**David B. Muhlestein, PhD, JD**, Chief Research Officer, Leavitt Partners, LLC; Adjunct Assistant Professor, The Dartmouth Institute, Geisel School of Medicine, Dartmouth College; Visiting Policy Fellow, Margolis Center for Health Policy, Duke University; Visiting Fellow, Accountable Care Learning Collaborative, Washington, DC (Moderator)

10:30 am **Break**

11:00 am **Making Downside Risk Work**



**Sanjay Doddamani, MD**, Chief Medical Officer, Geisinger at Home, Geisinger Health System; Chief Medical Officer Keystone ACO, Danville, PA



**Matthew Mazdyasni, MSc**, Strategic Advisor and Board Member, COPE Health Solutions; Former Executive Vice-President, Chief Administrative and Chief Financial Officer, HealthCare Partners Holding, LLC; Former Chair, CAPG, Los Angeles, CA



**Vincent L. McVittie**, Executive Director, Signature Care Management; Former Chief Administrative Officer, Highmark Health/Allegheny Clinic; Former Interim Administrator and Chief Operating Officer, Texas General Hospital, Pittsburgh, PA



**Pamela M. Pelizzari, MPH**, Principal, Milliman; Former Senior Technical Advisor and Program Lead, Centers for Medicare & Medicaid Services, New York, NY



**Jay Sultan**, Vice President, Healthcare Strategy, Cognizant, Watkinsville, GA (Moderator)



**11:45 am Debating the Most Efficient Delivery and Payment Models: Consolidation vs. Clinical Integration; Hospital vs. Physician Control; Capitation vs. Shared Risk**

**Thomas M. Priselac**, *President and Chief Executive Officer and Warschaw Law Chair in Health Care Leadership, Cedars-Sinai Health System; Adjunct Professor, UCLA Fielding School of Public Health, Los Angeles, CA*



**Kelly Robison, MPA**, *Chief Executive Officer, Brown & Toland Physicians; Former Chief Development Officer, OptumCare, Oakland, CA*



**Richard M. Scheffler, PhD**, *Professor of the Graduate School, Director, Nicholas C. Petris Center; Director, Global Center for Health Economics and Policy Research, University of California Berkeley, Berkeley, CA*



**Stephen M. Shortell, PhD, MBA, MPH**, *Blue Cross of California Distinguished Professor of Health Policy and Management, Dean Emeritus, School of Public Health, University of California Berkeley, Berkeley, CA*



**Jeffrey A. Rideout, MD**, *President and Chief Executive Officer, Integrated Healthcare Association, Oakland, CA (Moderator)*

**12:30 pm**

## LUNCHEON

## AFTERNOON MINI SUMMITS GROUP I

### Mini Summit I: The Model Matters: As Providers Assume Risk, the Value of Care Increases

**1:30 pm Welcome, Presentation, Q&A**

**Bill Barcellona, MHA, JD**, *Senior Vice President, Government Affairs, America's Physician Groups; Adjunct-Associate Professor, School of Planning, Policy & Development, University of Southern California; Former Deputy Director, California Dept. Managed Health Care, Sacramento, CA*

**Jeffrey A. Rideout, MD**, *President and Chief Executive Officer, Integrated Healthcare Association, Oakland, CA (Moderator)*

### Mini Summit II: Supporting the Clinical Community's Participation in APMs & Developing a Financial Incentive Model for Population Health Management

**1:30 pm Supporting the Clinical Community's Participation in APMs**

**Amy Nguyen Howell, MD, MBA, FAAFP**, *Chief Medical Officer, APG; Adjunct Faculty, University of Southern California, Los Angeles, CA*

**2:00 pm Developing a Financial Incentive Model for Population Health Management**

**Neeharika Mehta, MBA**, *Director of Population Health Management, Emerson Physician-Hospital Organization, Inc.; Former Project Manager, Integrated Care Management Program, Partners HealthCare, Concord, MA*

**Jessica Moschella, MPH**, *Executive Director, Emerson Physician-Hospital Organization, Inc.; Former Program Director, Population Health Management, Partners HealthCare System; Former Administrative Director, Massachusetts Health Care Quality and Cost Council, Concord, MA*

### Mini Summit III: Value-based Care Case Studies: CareMore Health System & Stanford Clinical Excellence Research Center: Applications of Health Information Technology for Care Delivery Innovation

**1:30 pm Welcome, Presentation, Q&A**

**Zachary Myers**, *General Manager, CareMore Health, Los Angeles, CA (Moderator)*

**2:00 pm Case Study from the Stanford Clinical Excellence Research Center: Applications of Health Information Technology for Care Delivery Innovation**

**Terry Platchek, MD**, *Fellowship Director, Stanford Clinical Excellence Research Center; Vice President, Performance Improvement, Stanford Children's Health, Palo Alto, CA*

### Mini Summit IV: The Role of Population Health in Value-based Care

**1:30 pm Welcome, Introductions, Panel Discussions, Q&A**

**John Houghton MD, MS**, *Chief Clinical Improvement Officer, Independent Health; Medical Innovation Officer, Chautauqua ACO (AMP); Chief Innovation Officer, Dx-ID, Buffalo, NY*

**David K. Nace, MD**, *Chief Medical Officer, Innovaccer; Former Board Member, Delaware Valley ACO; Former Senior Vice President, UnitedHealth Group; Former Vice President and Chief Medical Officer, Aetna, San Francisco, CA*

**Joshua Sclar, MD, MPH**, *Chief Medical Officer, BioIQ; Former Chief Medical Officer, Ingenios Health; Former Lead Designer, Johns Hopkins Sibley Innovation Hub, Santa Barbara, CA*

**Rose Maljanian**, *Chairman and Chief Executive Officer, HealthCAWS, Inc.; Board Chair, Population Health Alliance, Hartford, CT (Moderator)*

### Mini Summit V: California's Past Efforts to Cover the Uninsured and Beyond the ACA: Paths to Universal Coverage in California

**1:30 pm Welcome, Introductions, Panel Discussions, Q&A**

**Richard Kronick, PhD** (Invited), *Professor, Family Medicine and Public Health, University of California San Diego; Former Director, Agency for Healthcare Research and Quality; Former Senior Health Policy Adviser, Clinton Administration; Former Director of Policy and Reimbursement, MA Medicaid Program, La Jolla, CA*

**Lucien Wulsin Jr., JD**, *Founder, Insure the Uninsured Project; Former Chief Consultant, Special Committee on MediCal Oversight, California State Assembly, Los Angeles, CA*

**Walter Zelman, PhD**, *Department of Public Health, California State University Los Angeles; Co-author, The Managed Care Blues and How to Cure Them; Former Senior Healthcare Adviser, President Clinton; Former Chief Executive Officer, California Association of Health Plans; Former Director, California Common Cause, Los Angeles, CA*

### Mini Summit VI: CMS/CMMI Payment Reform: Elements of a Successful Accountable Care and Direct Provider Contracting Programs with CMS/CMMI Q&A

**1:30 pm Welcome, Introductions, Panel Discussions, Q&A**

**Sanjay Doddamani, MD**, *Chief Medical Officer, Geisinger at Home, Geisinger Health System; Chief Medical Officer Keystone ACO, Danville, PA*

**Pauline Lapin, MHS**, *Director, Seamless Care Models Group; Center for Medicare and Medicaid Innovation, Centers for Medicare & Medicaid Services, Baltimore, MD*

**Melanie Matthews, MA**, *Chief Executive Officer, NW Momentum Health Partners ACO, LLC; Chief Executive Officer, Physicians of Southwest Washington; Former Vice President of Operations, Prestige Care, Inc.; Former Regional Vice President of Operations, Avalon Health Care Group, Olympia, WA*

**Valinda Rutledge, MBA**, *Vice President of Federal Affairs, APG; Vice President, Public Payor Health Strategy, Care Coordination Institute, Prisma Health; Former Group Director of Patient Care Model Group and BPCI Lead, Centers for Medicare and Medicaid Services, Washington, DC (Moderator)*

**2:30 pm**

### Transition Break

## MINI SUMMITS GROUP II

### Mini Summit VII: Alternative Payment Models in Medicaid & Value-based Payment for Medicaid Behavioral Health Services

**2:45 pm**     **Alternative Payment Models in Medicaid**  
**Tom Curtis, PMA**, Manager of Quality Improvement Medicaid, Michigan Department of Health and Human Services, Lansing, MI  
**Sandra Greyerbiehl, MSW**, Quality Payment Specialist, Michigan Department of Health and Human Services, Lansing, MI

**3:15 pm**     **Value-based Payment for Medicaid Behavioral Health Services**  
**Mary F. Temm, DSc, MHSA, FACHE**, President and Chief Executive Officer/President, Temm & Associates, Inc.; Former Vice President and Chief Executive Officer, Lifemark Health Plans; Former Vice President Plan Operations, Health Management Associates, Inc., Phoenix, AZ

### Mini Summit VIII: Brilliant Basics: How to Manage Complex Patients in Medicare and Medicaid Managed Care

**2:45 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Anas Daghestani, MD**, President and Chief Executive Officer, Austin Regional Clinic, Austin, TX  
**Donald P. Deep, MD**, Medical Director, Central Ohio Primary Care Physicians, Westerville, OH  
**Stuart Levine, MD**, President and Chief Executive Officer Medical Innovations, Agilon Health; Former Physician Chief Advisor, Google Brain; Former Vice President, Chief Innovation & Clinical Care Officer, Blue Shield of California; Former Executive Vice President and Executive Medical Director, Heritage, Los Angeles, CA  
**Ronald J. Kuerbitz, JD**, Chief Executive Officer, Agilon Health; Former Chief Executive Officer, Fresenius Medical Care North America, Boston, MA (Moderator)

### Mini Summit IX: Investing in Clinical Integration: Who Pays, Who Benefits?

**2:45 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Leonard Fromer, MD, FAAFP**, President, Healthcare Initiatives, Turner Impact Capital LLC; Former Executive Medical Director, Group Practice Forum, Santa Monica, CA  
**Martin Serota, MD**, National Chief Medical Officer, Prospect Medical Systems; Former Chief Medical Officer and Senior Vice President, AltaMed Health Services, Indian Wells, CA  
**Walter Kopp, MSHA**, President, Medical Management Services, Inc.; Former Chief Operating Officer, California Pacific Medical Center Physicians Foundation; Former Chief Operating Officer, Sutter Pacific Medical Foundation; Former Interim Executive Director, Alta Bates Medical Group, San Francisco, CA (Moderator)

### Mini Summit X: Synchronizing Medicare Payment Programs, including Accountable Care and Bundled Payment Programs, into a Unified Strategy to Deliver People-centered Care

**2:45 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Tricia Nguyen, MD, MBA**, Industry Best Practices Advisor, National Coordination Center (NCC); Former Chief Executive Officer, Commonwealth Health Network; Former Chief Medical Officer, Inova, Banner Health Network and Blue Cross Blue Shield of Kansas City, Washington, DC  
**Jordan Reigel, MBA**, Vice President of Payment Strategy & Innovation, United Healthcare; Former Network Management, Kaiser Permanente, Parker, CO  
**Deirdre Baggot, PhD, MBA, RN**, Healthcare Strategist and Payment Innovation Expert; Former Expert Reviewer, BPCI Program, Former Lead, ACE Program, Centers for Medicare and Medicaid Services, Washington, DC (Moderator)

### Mini Summit XI: Consolidation Trends in California's Health Care System

**2:45 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Richard M. Scheffler, PhD**, Professor of the Graduate School, Director, Nicholas C. Petris Center; Director, Global Center for Health Economics and Policy Research, University of California Berkeley, Berkeley, CA  
**Christopher Whaley, PhD**, Associate Policy Researcher, RAND Corporation, Los Angeles, CA

### Mini Summit XII: CMS/CMMI Payment Reform: Elements of a Successful Bundled Payment Program with CMS/CMMI Q&A

**2:45 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Francois de Brantes, MBA**, Senior Vice President, Commercial Business Lines, Remedy Partners; Former Vice President and Director, Center for Value in Health Care, Altarum; Former Program Leader, Health Care Initiatives, GE Corporate Health Care, Newtown, CT  
**Vincent L. McVittie**, Executive Director, Signature Care Management, Former Chief Administrative Officer, Highmark Health/Allegheny Clinic; Former Interim Administrator and Chief Operating Officer, Texas General Hospital, Pittsburgh, PA  
**Christina S. Ritter, PhD**, Director, Patient Care Models Group; Former Deputy Director, Hospital and Ambulatory Policy Group, Centers for Medicare and Medicaid Services, Baltimore, MD  
**Valinda Rutledge, MBA**, Vice President of Federal Affairs, APG; Vice President, Public Payor Health Strategy, Care Coordination Institute, Prisma Health; Former Group Director of Patient Care Model Group and BPCI Lead, Centers for Medicare and Medicaid Services, Washington, DC (Moderator)

### Mini Summit XIII: Technology in Healthcare: Are you Ready? — Learn How the Technology that powers JPMorgan's Analytics and Amazon's Logistics and Customer Experience is Being Applied by Leading Organizations such as John Muir Health, Hoag Orthopedic Institute, and Orthopedic Centers of Colorado to Optimize Care and Drive Success

**2:45 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Jean Drouin, MD, MBA**, Chief Executive Officer, Clarify Health Solutions; Former Senior Partner, McKinsey & Company, and Founding Head, McKinsey Advanced Healthcare Analytics (MAHA), San Francisco, CA

**3:45 pm**     **Transition Break**

## MINI SUMMITS GROUP III

### Mini Summit XIV: Expanded Payment Methodologies: Incorporating and Scaling Prospective Bundled Payments Contracts

**4:00 pm**     **Welcome, Introduction, Discussion and Q&A**  
**Jake Yount, MBA**, Director, Network Pricing & Expense Analysis, Blue Cross of North Carolina, Durham, NC  
**Jay Sultan**, Vice President, Healthcare Strategy, Cognizant, Watkinsville, GA (Moderator)



## Mini Summit XV: Optimizing Value-based Care Opportunities through Strategic Bundles & Bundled Payments Only Work if You Disseminate at the Provider Level

- 4:00 pm**     **Optimizing Value-based Care Opportunities through Strategic Bundles**  
**Lisa Wagamon**, System Vice President, Managed Care, SSM Healthcare, St. Louis, MO  
**Vincent McVittie**, Executive Director, Signature Care Management; Former Chief Administrative Officer, Highmark Health/Allegheny Clinic; Former Interim Administrator and Chief Operating Officer, Texas General Hospital, Pittsburgh, PA (Moderator)
- 4:30 pm**     **Bundled Payments Only Work If You Disseminate at the Provider Level**  
**Dan Tasset**, Vice Chairman, Co-Founder, ValueHealth; Chairman, Nueterria Capital, Leawood, KS

## Mini Summit XVI: Advanced Strategies in Creating and Managing Narrow, Tiered and High Performance Networks

- 4:00 pm**     **Welcome, Introduction, Discussion and Q&A**  
**Adam R. Singleton**, FSA, MAAA, Consulting Actuary, United Health Actuarial Services, Inc.; Former Director of Provider Network Development at Humana, Louisville, KY  
**Julie A. Simer**, JD, MPH, Senior Counsel, Managed Care, Dignity Health  
**Jennifer (Ricards) Stockey**, MS, Senior Project Manager, Cynosure Health; Chief Executive Officer, Ri Management, LLC, Saint Paul, MN  
**Caroline (Fisher) Pearson**, Senior Fellow, NORC, University of Chicago; Former Senior Vice President, Policy and Strategy, Avalere Health, Chicago, IL (Moderator)

## Mini Summit XVII: Bold Improvements to Enhance a Successful Pay-for-Success Program for Asthma & Next Generation Pay for Success — Optimizing Value Creation for Communities, not Investors

- 4:00 pm**     **Bold Improvements to Enhance a Successful Pay-for-Success Program for Asthma**  
**Bill Barberg**, President and Founder, InsightFormation, Inc., Golden Valley, MN

**Maria Hernandez, PhD**, President and Chief Operating Officer, Impact4Health; Practice Leader, Global Consulting Services, InclusionINC; Member Board, Alameda Health System, Oakland, CA

- 4:30 pm**     **Next Generation Pay for Success — Optimizing Value Creation for Communities, not Investors**  
**Bill Barberg**, President and Founder, InsightFormation, Inc., Golden Valley, MN

## Mini Summit XVIII: The California Competitive Model: How has it Fared, and What's Next?

- 4:00 pm**     **Welcome, Introductions, Panel Discussions, Q&A**  
**Glenn Melnick, PhD**, Professor, Blue Cross of California Chair in Health Care Finance, Sol Price School of Public Health, University of Southern California; Co-author, "The California Competitive Model: How Has It Fared, And What's Next?", Health Affairs (September 2018), Los Angeles, CA

## Mini Summit XIX: CMS/CMMI Payment Reform Q&A Session: Elements of a Successful MACRA/MIPS/APMs Participation Strategy

- 4:00 pm**     **Welcome, Presentation and Q&A**  
**Kavita Patel, MD**, Nonresident Senior Fellow Brookings Institution; Member, Physician-Focused Payment; Model Technical Advisory Committee (PTAC); Former Director of Policy, The White House (Obama); Former Senior Advisor, Senator Edward Kennedy, Washington, DC  
**Grace Emerson Terrell, MD, MMM, FACP, FACPE**, Chief Executive Officer, Envision Genomics; Member, Physician-Focused Payment, Model Technical Advisory Committee (PTAC); Former President and Chief Executive Officer, Cornerstone Health Care, Huntsville, AL  
**Valinda Rutledge, MBA**, Vice President of Federal Affairs, APG; Vice President, Public Payor Health Strategy, Care Coordination Institute, Prisma Health; Former Group Director of Patient Care Model Group and BPCI Lead, Centers for Medicare and Medicaid Services, Washington, DC (Moderator)

- 5:00 pm**     **Transition Break**

## CLOSING MINI/MINI SUMMITS GROUP IV

### Mini Summit XX: Alignment: Physician Comp in Value Based Care

- 5:15 pm**     **Welcome, Presentation and Q&A**  
**Bill Gil, MBA**, Independent Consultant, Member, America's Physician Groups Consulting; Vice President and Chief Executive Officer, Providence, Southern California Medical Foundations; Former Chief Executive Officer, Facey Medical Foundation, Los Angeles, CA

### Mini Summit XXI: Changing Market Forces Using Specialist Cost Tiering

- 5:15 pm**     **Welcome, Presentation and Q&A**  
**Joshua Hollander, MBA, DC**, Manager, Enterprise Practice Consulting, CareFirst Blue Cross Blue Shield, Baltimore, MD

### Mini Summit XXII: Waste Not: Finding and Addressing Waste to Improve Value in Healthcare

- 5:15 pm**     **Welcome, Presentation and Q&A**  
**Susanne Dade, MPA**, Deputy Director, Washington Health Alliance; Former Project Director, Robert Wood Johnson Foundation, AF4Q Initiative, Seattle, WA

### Mini Summit XXIII: Applying the Lessons of FFS to Streamline Adoption of Value-based Payments

- 5:15 pm**     **Welcome, Presentation and Q&A**  
**April Todd, MPH**, Senior Vice President of CAQH CORE and Explorations; Former Minnesota's State Health Economist; Former President of Strategic Analysis and Communications for Government Affairs, UnitedHealth Group, Washington, DC

### Mini Summit XXIV: Case Studies in Reference Pricing

- 5:15 pm**     **Welcome, Presentation and Q&A**  
**Christopher Whaley, PhD**, Associate Policy Researcher, RAND Corporation, Los Angeles, CA

### Mini Summit XXV: How a Delivery System ACO (Stanford Health Care) Insurance Program Sold Directly to Hi-tech Employers (Google, Cisco and Intel)

- 5:15 pm**     **Welcome, Presentation and Q&A**  
**Tom Williams, DrPH**, Vice President & General Manager, SHC Health Plan Operations, Stanford Health Care, Oakland, CA

- 5:45 pm**     **ADJOURNMENT AND NETWORKING RECEPTION**

## NATIONAL PAY FOR PERFORMANCE SUMMIT CLOSING PLENARY SESSION

### 8:00 am Welcome and Introductions



**Donald H. Crane, JD**, President and Chief Executive Officer, APG, Los Angeles, CA (Co chair)

### 8:15 am



### Keynote Dialogue on the Role of Venture Capital and Private Equity in Value-based Care

**Robbert Vorhoff**, Managing Director and Global Head of Healthcare Group, General Atlantic, LLC; Member Board Of Directors, OneOncology, Landmark Health, Alternate Solutions Health Network and A Place for Mom; Core Member, HHS Innovation and Investment Summit, New York, NY



**Krishna Yeshwant, MBA, MD**, General Partner, Google Ventures; Attending Physician, Partners HealthCare, Boston, MA



**Donald H. Crane, JD**, President and Chief Executive Officer, APG, Los Angeles, CA (Moderator)

### 9:00 am



### The Role of Hospitals and Health Systems in a Value-based World

**C. Duane Dauner, MA**, Special Adviser and Former President/Chief Executive Officer, California Hospital Association, Sacramento, CA

### 9:30 am



### The Physician Perspective on Value-based Care

**Barbara L. McAneny, MD, FASCO, MACP**, Board-Certified Medical Oncologist/Hematologist; President, American Medical Association; Co-founder and Managing Partner, New Mexico Oncology Hematology Consultants Ltd., Albuquerque, NM

### 10:00 am

### Transition Break

### 10:15 am



### Transforming the Organization in Anticipation of Value-based Payment Reform

**Erik Johnson, MBA**, Vice President, Value-based Care, Optum, Washington, DC



**Helen Macfie, Pharm.D., FABC**, Chief Transformation Officer, MemorialCare Health System, Fountain Valley, CA

### 10:45 am



### The Role of Analytics, Big Data, Artificial Intelligence and Machine Learning in Value-based Care

**Molly Coye, MPH, MD**, Executive in Residence, AVIA; Former Chief Innovation Officer, Institute for Innovation in Health, UCLA Health; Former Founder and Chief Executive Officer, Health Technology Center (HealthTech), San Francisco, CA

### 11:15 am



### Annual Medicare Advantage Update

**John Gorman**, Founder & Former Executive Chairman, Gorman Health Group; Former Assistant to the Director, Office of Managed Care, HCFA, Former Press Secretary and Staff Director, US Representative John Conyers, Jr. (D-MI), Washington, DC

### 11:45 am



### MACRA/APMs/MIPS Roundtable

**Jeffrey Baillet, MD**, Executive Vice President, Health Care Quality and Affordability, Blue Shield of California; Chair, Physician-Focused Payment Model Technical Advisory Committee (PTAC); Former Executive Vice President, Aurora Health Care; Former President, Aurora Health Medical Group, San Francisco, CA



**Bruce Swartz**, Senior Vice President Physician Integration, Dignity Health; Former Executive Vice President, MED3000; Former Vice President Network Contracting, WellPoint; Former Chief Operating Officer, Premier Practice Management; Former Senior Vice President, MedPartners, Los Angeles, CA



**Grace Emerson Terrell, MD, MMM, FACP, FACPE**, Chief Executive Officer, Envision Genomics; Member, Physician-Focused Payment, Model Technical Advisory Committee (PTAC); Former President and Chief Executive Officer, Cornerstone Health Care, Huntsville, AL



**Kavita Patel, MD**, Nonresident Senior Fellow Brookings Institution; Member, Physician-Focused Payment; Model Technical Advisory Committee (PTAC); Former Director of Policy, The White House (Obama), Former Senior Advisor, Senator Edward Kennedy, Washington, DC (Moderator)

### 12:30 pm

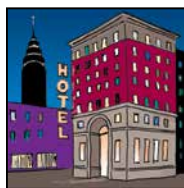
### ADJOURNMENT

## 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.



Onsite

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

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### NINETEENTH POPULATION HEALTH COLLOQUIUM

March 18 – 20, 2019 • Philadelphia, PA

The Leading Forum on Innovations in Population Health & Care Coordination

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COSPONSOR: Population Health Alliance

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[www.PopulationHealthColloquium.com](http://www.PopulationHealthColloquium.com)

### HEALTH DATAPALOOZA 2019

March 26 – 28, 2019 • Washington, DC

HOSTED BY AcademyHealth

MEDIA PARTNERS: *Harvard Health Policy Review* and *Health Affairs*

[www.HealthDatapalooza.org](http://www.HealthDatapalooza.org)

### SECOND ACO, BUNDLED PAYMENT & MACRA SUMMIT

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[www.ACOSummit.com](http://www.ACOSummit.com) • [www.BundledPaymentSummit.com](http://www.BundledPaymentSummit.com) • [www.MACRASummit.com](http://www.MACRASummit.com)

## THE FOLLOWING REGISTRATION TERMS AND CONDITIONS APPLY

### REGARDING WEBCAST REGISTRATIONS

1. Individuals or groups may register for Internet access. Organizations may register for group access without presenting specific registrant names. In such instances the registering organization will be presented a series of user names and passwords to distribute to participants.
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.
3. Internet registrants will enjoy six (6) months of access from the date of issuance of a user name and password.
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.
5. User name and password use will be monitored to assure compliance.
6. Each Internet registration is subject to a "bandwidth" or capacity use cap of 5 gb per user per month. When this capacity use cap is hit, the registration lapses. Said registration will be again made available at the start of the next month so long as the registration period has not lapsed and is subject to the same capacity cap.
7. For webcast registrants there will be no refunds for cancellations. Please call the Conference Office at 800-503-7382 or 206-452-5499 for further information.

### REGARDING ONSITE REGISTRATION, CANCELLATIONS AND SUBSTITUTIONS

1. For onsite group registrations, full registration and credit card information is required for each registrant. List all members of groups registering concurrently on fax or scanned cover sheet.
2. For onsite registrants there will be no refunds for "no-shows" or for cancellations. You may send a substitute or switch to the webcast option. Please call the Conference Office at 800-503-7382 or 206-452-5499 for further information.

### METHOD OF PAYMENT FOR TUITION

Make payment to Health Care Conference Administrators LLC by check, MasterCard, Visa or American Express. Credit card charges will be listed on your statement as payment to HealthCare (HC) Conf LLC. Checks or money orders should be made payable to Health Care Conference Administrators LLC. A \$30 fee will be charged on any returned checks.

### FOURTEENTH NATIONAL VALUE-BASED PAYMENT AND PAY FOR PERFORMANCE SUMMIT — CONTINUING EDUCATION CREDITS

#### NASBA

Health Care Conference Administrators, LLC (dba GHC, LLC Healthcare) is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit.

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This program addresses topics that are of a current concern in the healthcare quality and patient safety environment. Credits are available to onsite attendees. This is an update, group-live activity. For more information regarding administrative policies such as complaints or refunds, call 206-757-8053 or email [petergrant@ehcca.com](mailto:petergrant@ehcca.com).

#### AMA PRA CATEGORY 1 CREDITS

##### Accreditation Statement

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of Amedco and Health Care Conference Administrators (HCCA). Amedco is accredited by the ACCME to provide continuing medical education for physicians.

##### Satisfactory Completion

Learners must complete an evaluation form to receive a certificate of completion. Your chosen sessions must be attended in their entirety. Partial credit of individual sessions is not available.

##### Physicians

In support of improving patient care, this activity has been planned and implemented by Amedco LLC and Health Care Conference Administrators. Amedco LLC is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.



##### Credit Designation Statement

Amedco LLC designates this live activity for a maximum of 15.25 AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

##### CERTIFICATE OF ATTENDANCE

Onsite attendees can also request a Certificate of Attendance which they can file with appropriate entities for credit, and webcast attendees can request a Webcast Certificate of Attendance on which they can certify the number of hours they watched and can file with appropriate entities for credit.

**HOW TO REGISTER:** Fully complete the form on page 11 (one form per registrant, photocopies acceptable). Payment must accompany each registration (U.S. funds, payable to Health Care Conference Administrators, LLC).

ONLINE: Secure online registration at [www.PFPSummit.com](http://www.PFPSummit.com).

FAX: 206-319-5303 (include credit card information with registration)

MAIL: P4P Conference Office, 12330 N.E. 8th Street, Suite 101, Bellevue, WA 98005-3187

FOR REGISTRATION QUESTIONS:

PHONE: 800-503-7382 (Continental US, Alaska and Hawaii only) or

206-452-5499, Monday-Friday, 7 AM - 5 PM PST

E-MAIL: [registration@hcconferences.com](mailto:registration@hcconferences.com)

### REGISTRATION OPTIONS

Registration may be made online or via mail, fax or scan.

You may register through either of the following:

• Online at [www.PFPSummit.com](http://www.PFPSummit.com).

• Fax/Mail/Email using this printed registration form. Mail the completed form with payment to the Conference registrar at 12330 N.E. 8th Street, Suite 101, Bellevue, WA 98005-3187, or fax the completed form to 206-319-5303, or scan and email the completed form to [registration@hcconferences.com](mailto: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.

### TAX DEDUCTIBILITY

Expenses of training including tuition, travel, lodging and meals, incurred to maintain or improve skills in your profession may be tax deductible. Consult your tax advisor. Federal Tax ID: 91-1892021.

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No refunds will be given for "no-shows" or for cancellations of either webcast or onsite registrations. You may send a substitute or transfer your onsite registration to a webcast registration. For more information, please call the Conference Office at 800-503-7382 or 206-452-5499.

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Unauthorized sharing of Summit content via Internet access through the sharing of user names and passwords or via alternative media (Flash Drive) through the sharing of said media is restricted by law and may subject the copyright infringer to substantial civil damages. The Summit aggressively pursues copyright infringers. If a registrant needs the ability to share Summit content within his or her organization, multiple Summit registrations are available at discounted rates.

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### GENERAL TERMS AND CONDITIONS

Program subject to cancellation or change. If the program is cancelled the only liability of the Summit will be to refund the registration fee paid. The Summit shall have no liability regarding travel or other costs. Registration form submitted via fax, mail, email or online constitutes binding agreement between the parties.

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### TUITION SCHOLARSHIPS

The Value-Based Payment and Pay for Performance Summit is now offering partial and full 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 apply for a tuition scholarship go to the Summit website, [www.PFPSummit.com](http://www.PFPSummit.com), click on "Tuition Scholarship" link in navigation bar. There you can download and complete the tuition scholarship application.

# VALUE-BASED PAYMENT AND PAY FOR PERFORMANCE SUMMIT

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<input type="checkbox"/> Special Needs (Dietary or Physical)

## ONSITE CONFERENCE ATTENDANCE

### PRECONFERENCE

- ☐ CMMI's New Mandatory Downside Risk Payment Models & Applications of Health Information Technology that Lower Healthcare Costs and Improve Quality \$ 495

### CONFERENCE – STANDARD REGISTRATION (Does not include Preconference):

- ☐ Through Friday, January 11, 2019\* \$1,195  
☐ Through Friday, February 1, 2019\*\* \$1,595  
☐ After Friday, February 1, 2019 \$1,995

### CONFERENCE – SPECIAL PROVIDER RATE\*\*\* (Does not include Preconference):

- ☐ Through Friday, January 11, 2019\* \$ 995  
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- ☐ Through Friday, January 11, 2019\* \$ 595  
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### GROUP REGISTRATION DISCOUNT FOR CONFERENCE ONLY

(Does not include Preconference; Rates are per person):

Three or more registrations submitted from the same organization at the same time receive the following discounted rates for conference registration only. To qualify, all registrations must be submitted simultaneously:

- Conference:  
☐ Through Friday, January 11, 2019\* \$ 895  
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☐ After Friday, February 1, 2019 \$1,295

### SELECT YOUR MINI SUMMITS (One from each group) — Tuesday, February 26:

#### GROUP I — 1:30 pm

- ☐ MS I: The Model Matters ...  
☐ MS II: Supporting the Clinical Community's Participation ...  
☐ MS III: Value-based Care Case Studies ...  
☐ MS IV: The Role of Population Health in Value-based Care  
☐ MS V: California's Past Efforts to Cover the Uninsured ...  
☐ MS VI: CMS/CMMI Payment Reform ... Successful Accountable Care and Direct Provider ...

#### GROUP II — 2:45 pm

- ☐ MS VII: Alternative Payment Models in Medicaid & Value-Based Payment for Medicaid Behavioral Health Services  
☐ MS VIII: Brilliant Basics: How to Manage Complex Patients ...  
☐ MS IX: Investing in Clinical Integration: Who Pays, Who Benefits?  
☐ MS X: Synchronizing Medicare Payment Programs ...  
☐ MS XI: Consolidation Trends ...  
☐ MS XII: CMS/CMMI Payment Reform ... Successful Bundled Payment Program ...  
☐ MS XIII: Technology in Healthcare: Are you Ready? ...

#### GROUP III — 4:00 pm

- ☐ MS XIV: Expanded Payment Methodologies: Incorporating and Scaling ...  
☐ MS XV: Optimizing Value-Based Care Opportunities ...  
☐ MS XVI: Advanced Strategies ...  
☐ MS XVII: Bold Improvements to Enhance a Successful Pay-for-Success Program ...  
☐ MS XVIII: The California Competitive Model ...  
☐ MS XIX: CMS/CMMI Payment Reform ... MACRA/MIPS/APMs

#### GROUP IV — 5:15 pm

- ☐ MS XX: Alignment: Physician Comp in Value Based Care  
☐ MS XXI: Changing Market Forces Using Specialist Cost Tiering  
☐ MS XXII: Waste Not: Finding and Addressing Waste to Improve Value in Healthcare  
☐ MS XXIII: Applying the Lessons of FFS to Streamline Adoption of Value-based Payments  
☐ MS XXIV: Case Studies in Reference Pricing  
☐ MS XXV: How a Delivery System ACO ... Insurance Program Sold Directly ...

**CONFERENCE ELECTRONIC MEDIA:** Onsite Attendees — Following the Summit, the video and presentations are made available in the following formats. To take advantage of the discounted prices below, you must reserve media WITH your Summit registration:

- ☐ Flash Drive (\$129 + \$15 shipping) \$ 144 ☐ 6 months' access on Web \$129

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You can purchase an annual subscription to *Accountable Care News*, *Medical Home News*, *Population Health News*, *Predictive Modeling News* or *Readmissions News* for only \$295 (regular rate \$468), or *Value Based Payment News* for only \$195 (regular rate \$295) when ordered with your conference registration.

- |  |        |  |        |
|--|--------|--|--------|
| <input type="checkbox"/> <i>Accountable Care News</i>  | \$ 295 | <input type="checkbox"/> <i>Predictive Modeling News</i> | \$ 295 |
| <input type="checkbox"/> <i>Medical Home News</i>      | \$ 295 | <input type="checkbox"/> <i>Readmissions News</i>        | \$ 295 |
| <input type="checkbox"/> <i>Population Health News</i> | \$ 295 | <input type="checkbox"/> <i>Value Based Payment News</i> | \$ 195 |

## WEBCAST CONFERENCE ATTENDANCE

All webcast registrants are automatically registered for the preconference and conference (does not include the optional dinner program). Webcast conference registration includes the live Internet feed from the Summit, plus six months of continued archived Internet access, available 24/7.

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☐ After Friday, February 1, 2019 \$1,395

### CONFERENCE – SPECIAL ACADEMIC/GOVERNMENT/CLINIC RATE\*\*\*\*

(Includes Pre-Conference):

- ☐ Through Friday, January 11, 2019\* \$ 595  
☐ Through Friday, February 1, 2019\*\* \$ 695  
☐ After Friday, February 1, 2019 \$ 795

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Group registration offers the substantial volume discounts set forth below.

Group registration permits the organizational knowledge coordinator either to share conference access with colleagues or to assign and track employee conference participation.

- Conference Access: ☐ 5 or more \$595 each ☐ 20 or more \$395 each  
☐ 10 or more \$495 each ☐ 40 or more \$295 each

See INTELLECTUAL PROPERTY POLICY, page 10.

### CONFERENCE ELECTRONIC MEDIA:

Webcast attendees — Following the Summit, the video and presentations are made available on a flash drive. To take advantage of the discounted price below, you must reserve media WITH your Summit registration: ☐ Flash Drive (\$129 + \$15 shipping) \$ 144 (All Webcast attendees automatically receive 6 months access on web.)

\* This price reflects a discount for registration and payment received through Friday, January 11, 2019.

\*\* This price reflects a discount for registration and payment received through Friday, February 1, 2019.

\*\*\* Provider is a hospital, long term care, home health, physician, or hospice organization or its association.

\*\*\*\* For the purpose of qualifying for a discounted rate: (1) "academic" shall apply to individuals who teach full time or are full time students at an academic institution (i.e., a faculty member at a medical school or hospital residency program who also sees patients is a provider, not an academic); (2) "government" shall apply to individuals who are full time employees of federal, state or local regulatory agencies (i.e., a State university health system or local public hospital is a provider, not government); and (3) "clinic" shall apply to individuals who are full time employees of a Federally Qualified Health Center or safety net clinic. This rate does not include the Preconference for onsite attendees.

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