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

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

FEATURING FACULTY:
Jeffrey Bailey, MD, EVP, Blue Shield of California; Chair, PTAC
Molly Coyle, MPH, MD, Executive in Residence, AVA
Tom Curtis, PMA, Manager of Quality Improvement Medicaid, Michigan DHSS
Susanne Dade, MPA, Deputy Director, Washington Health Alliance
Anas Daghdestani, 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, Population Health, Geisinger, CMD, 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 Holland, 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 Mattheus, MA, CEO, NW Momentum Health Partners ACO
Barbara L. McNemey, 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 Ctr; 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 & BPC Lead, CMMI
Richard M. Scheller, 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

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?

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:

SILVER GRANTOR:

BRONZE GRANTORS:

SPONSORS:

www.PFPSummit.com
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 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.”

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 payment reform.

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

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, or call 877.803.7534 and mention the National Value-Based Payment and Pay for Performance Summit.

Hyatt Regency Los Angeles International Airport
6225 West Century Blvd - Los Angeles, CA 90045

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.
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 Medical 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
2:45 pm  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
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 Accountable Care and Direct Provider Contracting Programs with CMS/CMMI Q&A
XIII: Technology in Healthcare: Are you Ready?

3:45 pm  Transition Break
4:00 pm  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?
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 …

5:00 pm  Transition Break
5:15 pm  CLOSING MINI/MINI SUMMITS GROUP IV

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

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

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/Alethys 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

12:30 pm  

LUNCHEON

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

1:30 pm  

Welcome, Introductions, Panel Discussions, Q&A  

John Haughton MD, MS, Chief Clinical Improvement Officer, Independent Health; Medical Innovation Officer, Chautauqua ACO (AMP); Chief Innovation Officer, Dr. ID, Buffalo, NY  

David K. Nace, MD, Chief Medical Officer, InnovaCare; 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 Sidney Innovation Hub, Santa Barbara, CA  

Rose Maljaniann, 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 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 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)  

Terry Platchek, MD, 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
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
Sandrea 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)


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 Group Director of Patient Care Model Group and BPCI Lead, Centers for Medicare and Medicaid Services, Boulder, CO
Christopher Whaley, PhD, Associate Policy Researcher, RAND Corporation, Los Angeles, 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, Nuetera 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

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

5:15 pm Welcome, Introduction, Discussion and 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

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**

<table>
<thead>
<tr>
<th>Time</th>
<th>Event</th>
<th>Speakers</th>
</tr>
</thead>
<tbody>
<tr>
<td>8:00 am</td>
<td>Welcome and Introductions</td>
<td>Donald H. Crane, JD, President and Chief Executive Officer, APG, Los Angeles, CA (Co chair)</td>
</tr>
<tr>
<td>8:15 am</td>
<td>Keynote Dialogue on the Role of Venture Capital and Private Equity in Value-based Care</td>
<td>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)</td>
</tr>
<tr>
<td>9:00 am</td>
<td>The Role of Hospitals and Health Systems in a Value-based World</td>
<td>C. Duane Dauner, MA, Special Adviser and Former President/Chief Executive Officer, California Hospital Association, Sacramento, CA</td>
</tr>
<tr>
<td>9:30 am</td>
<td>The Physician Perspective on Value-based Care</td>
<td>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</td>
</tr>
<tr>
<td>10:00 am</td>
<td>Transition Break</td>
<td></td>
</tr>
<tr>
<td>10:15 am</td>
<td>Transforming the Organization in Anticipation of Value-based Payment Reform</td>
<td>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</td>
</tr>
<tr>
<td>10:45 am</td>
<td>The Role of Analytics, Big Data, Artificial Intelligence and Machine Learning in Value-based Care</td>
<td>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</td>
</tr>
<tr>
<td>11:15 am</td>
<td>Annual Medicare Advantage Update</td>
<td>John Gorman, Founder &amp; 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</td>
</tr>
<tr>
<td>11:45 am</td>
<td>MACRA/APMs/MIPS Roundtable</td>
<td>Jeffrey Bailey, 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)</td>
</tr>
<tr>
<td>12:30 pm</td>
<td>ADJOURNMENT</td>
<td></td>
</tr>
</tbody>
</table>

**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 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.

At your office . . . or home
SAVE THE DATES!
HYBRID CONFERENCES AND INTERNET EVENTS

TWENTY EIGHTH NATIONAL HIPAA SUMMIT
March 4 – 6, 2019 • Washington, DC
The Leading Forum on Healthcare EDI, Privacy, Breach Notification, Confidentiality, Data Security and HIPAA Compliance
MEDIA PARTNERS: Harvard Health Policy Review and Health Affairs
www.HIPAASummit.com

NINETEENTH POPULATION HEALTH COLLOQUIUM
March 18 – 20, 2019 • Philadelphia, PA
The Leading Forum on Innovations in Population Health & Care Coordination
ACADEMIC PARTNER: Jefferson College of Population Health
COSPONSOR: Population Health Alliance
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

SECOND ACO, BUNDLED PAYMENT & MACRA SUMMIT
June 17 – 19, 2019 • Washington, DC
THREE PAYMENT/DELIVER REFORM CONFERENCES IN ONE: ACO SUMMIT X, BUNDLED PAYMENT SUMMIT IX & MACRA SUMMIT IV
With Dedicated Plenary Sessions and Tracks for Each — One Registration for All Three Events
www.ACOSummit.com • www.BundledPaymentSummit.com • www.MACRASummit.com

ANNUAL CONFERENCE 2019
Quality and Efficiency: How to Succeed in Risk-Based Models
April 11–13, 2019
Manchester Grand Hyatt, San Diego, CA
Conference2019.apg.org | @AmerPhysGrps
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 on site 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 on site 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. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: www.learningmarket.org. A recommended maximum of 15.0 credits based on a 50-minute hour will be granted for the entire learning activity. 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@hcca.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).

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

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.
• 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@hcca.com. Checks or money orders should be made payable to Health Care Conference Administrators LLC.

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.

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.

GENERAL TERMS AND CONDITIONS
Registration (whether online or by this form) constitutes a contract and all of these terms and conditions are binding on the parties. In particular, these terms and conditions shall apply in the case of any credit/debit card dispute.

INTELLECTUAL PROPERTY POLICY
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.

The Summit will pay a reward for information regarding unauthorized sharing of Summit content. The reward will be one quarter (25%) of any recovery resulting from a copyright infringement (less legal fees and other expenses related to the recovery) up to a maximum reward payment of $25,000. The payment will be made to the individual or individuals who in the opinion of our legal counsel first provided the factual information, which was necessary for the recovery. If you have knowledge regarding the unauthorized Summit content sharing, contact the Summit registration office.

REGISTRATION BINDING AGREEMENT
Registration (whether online or by this form) constitutes a contract and all of these terms and conditions are binding on the parties. In particular, these terms and conditions shall apply in the case of any credit/debit card dispute.

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.

FOR FURTHER INFORMATION
Call 800-503-7382 (Continental US, Alaska and Hawaii only) or 206-452-5499, send e-mail to registration@hcca.com, or visit our website at www.PFPSummit.com.

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, click on “Tuition Scholarship” link in navigation bar. There you can download and complete the tuition scholarship application.
ONLINE CONFERENCE ATTENDANCE

PRECONFERENCE
- CMS'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
- Through Friday, February 1, 2019** $1,295
- After Friday, February 1, 2019 $1,595

CONFERENCE – SPECIAL ACADEMIC/GOVERNMENT/CLINIC RATE***** (Does not include Preconference):
- Through Friday, January 11, 2019* $ 995
- Through Friday, February 1, 2019** $ 995

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
  - Through Friday, February 1, 2019** $1,095
  - After Friday, February 1, 2019 $1,295

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 . . .

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 Registrants — 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
- E-mail (All Webcast attendees automatically receive 6 months access on web.)

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.

CONFERENCE – STANDARD REGISTRATION (Includes Pre-Conference):
- Through Friday, January 11, 2019* $ 795
- Through Friday, February 1, 2019** $1,095
- After Friday, February 1, 2019 $1,395

CONFERENCE – SPECIAL ACADEMIC/GOVERNMENT/CLINIC RATE***** (Includes Pre-Conference):
- Through Friday, January 11, 2019* $ 995
- Through Friday, February 1, 2019** $ 995
- After Friday, February 1, 2019 $ 995

GROUP REGISTRATION (Includes Pre-Conference):
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
- 10 or more $495 each
- 40 or more $295 each
See INTELLECTUAL PROPERTY POLICY, page 10.

CONFERENCE ELECTRONIC MEDIA:
Through Friday, January 11, 2019.
- 5 or more $595 each
- 10 or more $495 each
- 40 or more $295 each

PAYMENT
The use of a registration discount code cannot be the basis of requesting a partial refund of fees already paid.

TOTAL FOR ALL OPTIONS, ONSITE OR WEBCAST:
Please enclose payment with your registration and return it to the Registrar at Pay for Performance Summit, 12330 N.E. 8th Street, Suite 101, Bellevue, WA 98005-3187, or fax your credit card payment to 206-319-5303. You may also register online at www.FPSSummit.com.
- Check/money order enclosed (payable to Health Care Conference Administrators LLC)
- Payment by credit card: American Express Visa Mastercard

If a credit card number is being given to hold registration only until such time as a check is received it must be so noted. If payment is not received by seven days prior to the Summit, the credit card payment will be processed. Credit card charges will be listed on your state-ment as payment to HealthCare (HCC) Conf LLC.

REGISTRATION BINDING AGREEMENT
Registration (whether online or by this form) constitutes a contract and all of these terms and conditions are binding on the parties. In particular, these terms and conditions shall apply in the case of any credit/debit card dispute. For webcast and onsite registrants there will be no refunds for “no-shows” or cancellations.

ACCOUNT #
EXPIRATION DATE
SECURITY CODE
NAME OF CARDHOLDER
SIGNATURE OF CARDHOLDER
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