Tuesday, May 8, 2018
5 – 7 p.m.
Exhibit Hall Welcome Reception
Bissonet/Carondelet (3rd Floor)

Wednesday, May 9, 2018
7 – 8 a.m.
Breakfast
Exhibit Hall: Bissonet/Carondelet (3rd Floor)

8 - 9:15 a.m.
Opening Session / Keynote
Acadia (3rd Floor)
Rebekah Gee, MD, Louisiana Department of Health, Secretary

9:15-9:30 a.m.
All of Us Research Program
Room: Acadia (3rd Floor)
Lydia Kuykendal, HCM Strategists, Senior Associate

Learn more about the All of Us Research Program, including beta efforts and experiences in enrolling participants

9:30 – 10:45 a.m.
Break
Exhibit Hall: Bissonet/Carondelet (3rd Floor)

9:30 – 10:15 a.m.
Partner Featured Session: Lemons to Lemonade
Acadia (3rd Floor)
Mike Milligan, Legato Healthcare Marketing, CEO and Founder
Chris Wyatt, Cavalier County Memorial Hospital, CEO
Learn how this CAH made a remarkable recovery from a looming OIG penalty, to record profits and a clear roadmap for a long-term ACO strategy.

10:45 a.m. – 12:00 p.m.
Concurrent Sessions

1A: Innovative Designs for Value-Based Care Networks: Without the Brute Force of M&A
APM/DSR Track
Studio 8 (2nd Floor)
Joseph Lupica, Newpoint Healthcare Advisors, LLC, Chairman
A. Clinton MacKinney, MD, MS, College of Public Health, University of Iowa, Clinical Associate Professor and Deputy Director, RUPRI Center for Rural Health Policy Analysis, Department of Health Management and Policy

Finally, a disruptor recognizes the value proposition of rural health: The industry’s shift toward shared risk for population health. It’s changing behavior in rural hospitals and major medical centers alike. This session explores innovative health network designs that evade the brute force of merger while boosting collaboration and network performance.

1B: Is your physician compensation (money) where your mouth is (focused on quality)?
Community/Hospital Operations Innovation Track
Studio 9 (2nd Floor)
MaryEllen Pratt, St James Parish Hospital, CEO

Tying physicians compensation to value based performance is the way to create alignment within your medical staff towards quality outcomes. At St. James Parish Hospital contract medical groups and now individual employed physicians have transitioned to a value-based compensation model. I will present our model and how we developed it.

12 – 1:30 p.m.
Lunch
Exhibit Hall: Bissonet/Carondelet (3rd Floor)

1:30 – 2:45 p.m.
Concurrent Sessions

APM/DSR Track
Studio 8 (2nd Floor)
Eric Shell, Stroudwater Associates, Director
Warren West, North Country Healthcare, CEO

This session will use the case study of a successful rural hospital network to explore the future of rural care as the healthcare industry transitions from a fee-for-service model to compensation based on value and quality.

2B: Implementing the Frontier Community Health Integration Project (FHCIP)
Community/Hospital Operations Innovation Track
Studio 9 (2nd Floor)
The FCHIP Demonstration supports the integration of telehealth, hospital-based ambulance, and expanded swing bed services in 10 small, frontier Critical Access Hospitals. We explore the experience of the hospitals in developing these services and the impact on access to care and the ability to better serve patients in the community.

2:45 – 3 p.m
Break
Studio Foyer (2nd Floor)

3 – 4:15 p.m.
Concurrent Sessions

3A: Designing a Parent-Engaged Developmentally-Oriented Rural Hospital
APM/DSR Track
Studio 8 (2nd Floor)
Rex Brown, Hillsboro Area Hospital, Chief Executive Officer
Sameer Vohra, SIU School of Medicine, Office of Population Science and Policy, Executive Director
Heather Westrick, SIU School of Medicine, Office of Population Science and Policy, Administrative Director

The session describes the partnership of a rural hospital, a community based medical school, and a hospital based day care center to improve the developmental outcomes of children in their town. The program aims to engage parents, create child-centered practices, and establish hospitals’ role in building children’s futures.

3B: Operationalizing Hierarchical Condition Categories - Lessons From the Fields
Community/Hospital Operations Innovation Track
Studio 9 (2nd Floor)
Ralph Llewellyn, Eide Bailly LLP, Partner
Joy Krush, Eide Bailly LLP, Health Care Consult Manager

The ability to accurately report patients’ complex needs to account for their resource utilization is becoming increasingly important. Multiple Medicare programs utilize Hierarchical Condition Category coding as a means of communication of diagnosis history, current health status, and projected resource utilization. This session will address lessons learned in the field.

4:15 – 6:00 p.m.
Networking & Cocktails
Acadia (3rd Floor)

Join your hospital colleagues and industry experts for cocktails and discussion on today’s topics.

Thursday, May 10, 2018
6 - 7 am
Sunrise Yoga
Galerie 4-5 (2nd floor)
Join NRHA’s Vice President of Program Services and Registered Yoga Teacher, Amy Elizondo, for a Sunrise Yoga session to help get the day started! Amy has been practicing yoga for over 17 years and has been teaching for 6. All levels are welcome for this session. Expect to experience the health benefits of yoga and start the day off on a healthy note. See you on the mat!

8 - 9 a.m.
**Hospital Constituency Group meeting and breakfast**
*Studio 8 (2nd Floor)*

9 – 10:15 a.m.
**Concurrent Sessions**

**4A: Influential Innovators: Strategies Helping Rural Hospitals Thrive**
*APM/DSR Track*
*Studio 8 (2nd Floor)*
*Steve Parde, BKD, Managing Director*

Innovation is the commonality linking hospital leaders nationwide, and it’s the characteristic helping their hospitals thrive. With more than 300 rural health clients across the country, BKD sees myriad applied strategies and successes. Join us as we share strategies helping hospitals thrive and the questions innovative leaders are asking.

**4B: Innovations in Care Coordination and More**
*Community/Hospital Operations Innovation Track*
*Studio 9 (2nd Floor)*
*John Supplitt, American Hospital Association, Senior Director*

Proposing to review case examples on rural innovation for coordinated care, hospital/health center innovation and social determinants. May be combined with another session or it can be separate. If separate, then if you have another similar session, then I would defer to that rather than be redundant or in competition.

10:15 – 10:45 a.m.
**Break**
*Studio Foyer (2nd Floor)*

10:45 a.m. – 12:00 p.m.
**Concurrent Sessions**

**5A: Demonstrating Hospital Population Health Outcomes**
*Studio 8 (2nd Floor)*
*Sally Buck, National Rural Health Resource Center, CEO*
*DeAnn Flanders, RN, Bacon County Hospital and Health System, Director of Quality Management*
*Tracy Morton, National Rural Health Resource Center, Senior Program Manager*
*Kyle Southerland, Bacon County Hospital and Health System, Community Health Coordinator*
With value models, providers must assess needs and design programs based on health status and community health data to address care coordination, prevention and quality. Building an evaluation to assess and communicate outcomes is an important step to demonstrate the value of population health to partners, payers and the community.

5B: What is Your Impact? Capturing Your 340B Impact  
Community/Hospital Operations Innovation Track  
Studio 9 (2nd Floor)  
*Molly Pliszka, Verity Solutions, Inc., Strategic Accounts Director*

The purpose of this presentation is to heighten awareness of the 340B program to eligible rural health care providers. Key learning objectives will be to understand the value the program brings to the facilities and the communities they serve and articulate and continually update this value or impact.

12 – 1:45 p.m  
Rural Health Awards Luncheon  
Room: Bissonet/Caroldelet (3rd Floor)  
Join NRHA for a tribute to the 2018 Rural Health Award winners.

1:45 – 3:15 p.m.  
Terry Reilly Lecture  
Room: Acadia (3rd Floor)  
*Karen DeSalvo, MD, Leavitt Partners, Senior Advisor; former Acting Assistant Secretary for Health at the U.S. Department of Health and Human Services*

3:15 – 3:45 p.m.  
Break  
Studio Foyer (2nd Floor)

3:45 – 5 p.m.  
Concurrent Sessions

6A: Payment Innovation for Small CAHs: Washington’s Medicaid Pilot  
APM/DSR Track  
Studio 8 (2nd Floor)  
*Jacqueline Barton True, MSW, MPH, Washington State Hospital Association, Director, Rural Health Programs*

In January of 2018, Washington State launched the Washington Rural Health Access Preservation (WRHAP) pilot. Supported by the legislature, this pilot will give vulnerable critical access hospitals the opportunity to test a new payment methodology aimed at sustaining access to essential services, including primary, emergency and long term care.

6B: Paving the Way: Rural Transportation Challenges and Opportunities  
Community/Hospital Operations Innovation Track  
Studio 9 (2nd Floor)
Alex Evenson, PhD, University of Minnesota Rural Health Research Center, Research Project Specialist
Alana Knudson, PhD, NORC Walsh Center for Rural Health Analysis, Program Area Director and Co-Director, NORC at the University of Chicago

Transportation is critical to access to care, community participation, and quality of life. This session will present empirical evidence of rural-urban differences in transportation use, results from a survey of key informants from all fifty states on key rural transportation challenges and opportunities, and examples of model rural transportation programs.

Friday, May 11, 2018

8 – 8:40 a.m.
CMS Rural Council Update
Room: Acadia (3rd Floor)
Cara James, Centers for Medicare and Medicaid Services, Director of the Office of Minority Health

8:40 – 9:30 a.m.
Washington Update
Room: Acadia (3rd Floor)
Maggie Elehwany, JD, NRHA Government Affairs and Policy vice president

Join rural health’s top federal lobbyist for an insider’s update about what’s going on in Washington, and what to expect in the next year.

9:45 – 11 a.m.
Concurrent Sessions

7A: Better Care and $ with Track 1 ACOs
APM/DSR Track
Studio 8 (2nd Floor)
Lisa Kilawee, MPA, Caravan Health, VP Alliance Partnerships
Lee McCal, Neshoba Community Hospital, CEO
Tim Putnam, DHA, MBA, FACHE, Margaret Mary Health, CEO
Timothy Thomas, Neshoba County General Hospital, Finance Consultant, ACO Champion

A fear with accountable care payment models is that quality will decline, and finances negatively impacted with fewer heads in beds. Data from ACOs will be highlighted and show Track 1 ACO participation has positively impacted hospitals. Two rural hospital administrators and a Finance Consultant will share their experiences.

7B: The Diamond in the Rough- 340B
Community/Hospital Operations Innovation Track
Studio 9 (2nd Floor)
Lisa Scholz, Sentry Data Systems, Chief Customer Engagement Officer
Like the four “C’s” of a diamond, 340B clarity will be a fight in 2018. As hospitals face financial challenges, Medicare Part B has also been targeted as a secondary cut to those hospitals participating in the 340B program. As 2017 closed out, a major law suit was filed by the American Hospital Association and America’s Essential Hospitals along with other plaintiffs. While AHA, et.al. have filed a notice of appeal, a legislative battle continues to add more color to the conversation around the value 340B brings to the communities it serves. As we head into the new year, hospitals participating in the 340B program will face new challenges to make certain their programs meet new requirements being introduced by both Congress and regulatory agencies. We will first drill down into the history of the 340B program leading to major areas impacting participating hospitals in 2018, compliance and utilizing your data for eligibility. It’s time for hospitals to demonstrate the strength of their 340B program and this session will provide key considerations to ask your 340B team.

11 a.m.
End of Conference