



Physicians and Physician Organizations Law Institute

February 9–10, 2011

Hospitals and Health Systems Law Institute

February 10–11, 2011



The Cosmopolitan of Las Vegas
Las Vegas, NV



Physicians Planning Committee:

Charlene L. McGinty, Esq. – Program Chair
Cynthia Y. Reisz, Esq.
David J. Hyman, Esq.

Hospitals Planning Committee:

S. Allan Adelman, Esq. – Program Chair
Almeta E. Cooper, Esq.
Lisa J. Gilden, Esq.
Louise M. Joy, Esq.
Robert A. Wade, Esq.
Cynthia F. Wisner, Esq.



HORNE LLP has provided sponsorship in support of both programs.

Make plans to join us in Las Vegas!

TABLE OF CONTENTS

Physicians Law Institute Agenda 3
Physicians Law Institute Faculty 8
Hospitals Law Institute Agenda 9
Hospitals Law Institute Faculty 14
Programs-at-a-Glance 16
Practice Group Luncheon Presentations 20
Registration Form 21
Program Information 23

The American Health Lawyers Association is pleased to once again offer the **Physicians and Physician Organizations Law Institute and the Hospitals and Health Systems Law Institute**. These programs provide in-house and outside counsel with the latest information needed to advise clients in these two segments of the healthcare industry. The programs have been scheduled so that you can attend either the Physicians program or the Hospitals program, if your practice focuses on a particular provider, or you can register for both programs for a more comprehensive curriculum that will prepare you to address legal issues facing both segments and gain a better understanding of their distinct legal challenges.

This brochure includes the agenda for each program as well as a grid on pages 16-19, which shows the full 3-days of programming with an indication of which sessions are on each program. In addition to the educational sessions, there are a number of networking opportunities including breakfasts held each day, receptions on Wednesday and Thursday evenings, and Practice Group luncheons held each day.

This year’s programs take place in the Las Vegas at the beautiful, brand new Cosmopolitan of Las Vegas hotel. We look forward to seeing you in February!

Program Materials

All materials will be available on a website prior to the program and handed out on CD at the program. For those who still do want the binders they will be available for an additional fee; please order on the registration form on pages 21-22.

EXHIBITORS/SPONSORS

AHLA would like to thank the following companies for their support of the Physicians and Hospitals Law Institutes and encourages attendees to visit their exhibit booths:

- * BNA
- * Carnahan Group
- * DGA Partners, Inc.
- * HealthCare Appraisers, Inc.
- * HORNE LLP, *sponsor of the Physicians and Hospitals Law Institutes and the Smart Phone Apps*
- * MDReview, *sponsor of the Labor and Employment and Medical Staff, Credentialing, and Peer Review Practice Group Joint Luncheon*
- * MediTract, Inc.
- * PYA, *sponsor of the Physician Organizations Practice Group Luncheon*
- * Quorum Health Resources LLC, *sponsor of the Hospitals and Health Systems and Health Information and Technology Practice Group Joint Luncheon*
- * The Pinnacle Group

HOTEL RESERVATIONS

Hotel accommodations are not included in the registration fee. AHLA has reserved a block of rooms at The Cosmopolitan of Las Vegas at a discounted rate of \$189 per night. To make reservations, please call the Cosmopolitan at (877) 551-7772. **The room block expires January 14, 2011.** Please make your reservations early. The room block may sell out prior to the hotel cutoff.

Announcing the Physicians and Hospitals Law Institutes Smart Phone Apps



Put all the conference details in the palm of your hand with AHLA mobile phone apps. Attendees at the Physicians and Hospitals Law Institutes will be able to access information about the programs on their mobile phones. The apps, sponsored by HORNE LLP, will include the program schedule, faculty list, access to course materials and more. The apps will be available to Blackberry, Android, Windows Mobile, Iphone and Ipad users.

Information on how to download the apps and the password necessary to access the information will be sent to attendees shortly before the programs.

Program Agenda

Wednesday, February 9, 2011

7:00 am–5:45 pm

Registration and Information

GENERAL SESSION

8:00–8:15 am

Welcome and Introduction

Gerald M. Griffith, AHLA President-Elect

Charlene L. McGinty, Physicians Program Chair

8:15–9:45 am

What Physician Counsel Need to Know about Healthcare Reform

Julie E. Kass

Vicki L. Robinson

CONCURRENT SESSIONS

10:00–11:00 am

A. Legal Issues in Physician-Owned Device Companies: What You Need to Know about Stark, Anti-Kickback and FDA (not repeated)

Charles B. Oppenheim

Jeffrey K. Shapiro

- * How the Stark Law and the Anti-kickback Statute apply to physician-owned device companies
- * Distinguish low-risk from high-risk physician-owned device companies
- * Essential FDA compliance tips for physician-owned device companies

B. How Early Dispute Resolution Beats Litigation for Improving Healthcare: Opening the Mediation Door Wider for Physicians

E. Haavi Morreim

- * Although litigation aims to improve quality by deterring tort-feasors from future similar conduct, errors in healthcare are often the product of complex system failures much more than individual poor performance
- * Early mediation can serve far better than litigation to facilitate the communication essential to fix system-level problems, preserve important relationships, and achieve better and fairer outcomes for all parties
- * These points will be illustrated via Root Cause Analysis of the death of a 16-year-old obstetric patient who was accidentally given epidural anesthesia through an intravenous line.
- * Although the mandate to report med-mal payments to the National Practitioner Data Bank often inhibits physicians from participating in early mediation, closer analysis suggests numerous avenues for lawfully avoiding NPDB reports of pre-suit settlements

C. Protecting PHI: The Legal Duties of Health Lawyers Post-HITECH

Cynthia Y. Reisz

Stacey A. Tovino

- * The direct application of the HIPAA Privacy Rule to business associates, including outside healthcare counsel; and the extension of business associate obligations to subcontractors
- * Required amendments to business associate agreements between covered entities and business associates and required amendments to (or execution of new) business associate agreements between business associates and subcontractors
- * The application of civil and criminal penalties to business associates who inappropriately use and disclose protected health information
- * Transition provisions, effective dates and compliance dates

11:15 am-12:15 pm

D. Healthcare Labor and Employment Law for Physician Practices, Hospitals and Health Systems (not repeated)

Bruce I. Petrie

- * Recent developments in healthcare labor and employment law
- * Employment discrimination law in a healthcare workforce
- * Unionization and labor issues impacting hospitals, physicians and residents (i.e., how a union gets in and items for employers to watch)
- * Recent employment law regulatory changes
- * Dealing with the “Facebook culture” in the healthcare workplace: Legal issues relating to email, internet and electronic media

E. To Par or Not to Par: Legal Issues for Physicians in Opting Out, Going Non-Par and Adding Cash Pay Lines of Service

Todd A. Rodriguez

- * Evaluating a practice’s managed care participation profile and assessing whether continued participation makes sense (including legal considerations in terminating participation)
- * Opting out of Medicare: How it’s done and its implications
- * Evaluating cash pay lines of service
- * Legal issues in establishing cash pay lines of service including corporate practice of medicine issues, franchising issues, scope of practice issues, fraud and abuse issues

F. Practice Mergers: Watch Out for the FTC

Christi J. Braun

John P. Wiegand

- * What triggers an investigation
- * Dangers of incomplete mergers
- * Effect of New Horizontal Merger Guidelines
- * Difficult market definition issues
- * Assessing competitive effects
- * Difficulties with remedies

Program Agenda

12:15–1:35 pm

Lunch on your own or attend the Physician Organizations Practice Group luncheon, sponsored by PYA (additional fee; limited attendance; pre-registration required; see page 20 for description and pages 21-22 to register)

CONCURRENT SESSIONS

1:45–2:45 pm

G. RAC, ZPIC and Other Audits: What to Do When They Knock on Your Door

Lori S. Baker

David T. Lewis

- * Real stories of physician audit experiences
- * Audit targets and methodologies used to support overpayment demands
- * Steps on preparing for and responding to audits
- * Appeal tips and common errors

H. How Does Health Information Exchange Actually Work?

Gerald E. DeLoss

Patricia A. Markus

- * Legal issues related to HIE: Compliance with federal and state laws, privacy and security issues, patient consent to HIE, permitted purposes for exchange and liability issues
- * HIE participation agreements (contractual provisions)
- * Practical issues, including HIE governance and sustainability

J. Physician Compensation: Trends, Approaches and Oversight

Kimberly A. Mobley

Claire M. Turcotte

- * Emerging physician compensation trends and approaches
- * Legal and regulatory concerns and implications of compensation approaches
- * Governance and oversight of physician compensation arrangements, including options and best practices

3:00–4:00 pm

K. Managing Conflicts of Interest in the Era of Physician/Hospital Integration (not repeated)

Timothy S. Belisle

David M. McMillan

John Moses

- * Why now? The rapid pace of integration is highlighting the inadequacy of most conflict of interest policies within the provider setting, and is likely exposing providers to untenable organizational risk
- * What can we do? Processes, policies and procedures that provide attorneys and executives with practical solutions to problems their clients or employers are facing
- * What is next? New and unique conflict of interest issues providers will face in the future as new delivery of care models continue to be implemented

B. How Early Dispute Resolution Beats Litigation for Improving Healthcare: Opening the Mediation Door Wider for Physicians (repeat)

F. Practice Mergers: Watch Out for the FTC (repeat)

4:15–5:45 pm Extended Sessions

L. Getting Organized to Provide Accountable Care: Physician and Hospital Perspectives in Structuring an ACO

Catherine T. Dunlay

Bryan L. Fredericks

Robert A. Gerberry

Michael F. Schaff

- * Accountable Care Organizations, their intended functions, the statutory and regulatory guidance addressing ACOs, and the status of ACO development efforts
- * Structures for physician collaboration
 - ◆ Physicians' viewpoint on ACO organization and operation
 - ◆ Physician governance, including board and committee structures
 - ◆ Evolution of a physician practice from independent silos of physicians to a true clinically integrated entity
 - ◆ Methodologies to ensure greater accountability, including use of performance based compensation based on RVU production, quality outcomes and achievement of goals
- * Integrating hospitals, physicians and other providers
 - ◆ Hospitals' viewpoint on ACO organization and operation
 - ◆ Structures for hospital-physician integration – clinic and employment models, joint venture/PHO models, governance, contractual relationships
 - ◆ Creating a culture of transparency and trust among the hospital and physicians
- * Effect of Stark Law, Anti-Kickback Statute, Civil Monetary Penalty provisions and comparable state laws on structure and operation of an ACO
- * Lessons learned from the process undertaken by Summa Health System to engage its employed and independent physicians as members of its ACO (with operations commencing on January 1, 2011) as part of the Premier Health Alliance Implementation Collaborative

M. Ramped Up Enforcement Risk for Physicians and Physician Groups Lacking Effective Compliance

Patrick S. Coffey

Sean R. McKenna

Chis J. Mollet

- * The enforcement climate confronting physicians and physician groups
- * Evolving focus of healthcare fraud enforcement and prosecution
- * Avoiding CIAs, IROs, monitors and DPAs
- * Intensifying enforcement focus on hospital and physician arrangements

Program Agenda

- * Compliance failures that elevate fraud enforcement risk
- * How not to respond to government investigations

N. It's a Small World after All – Physician and Hospital Employment Perspectives

Philip M. Bluestein

Hal McCard

Charlene L. McGinty

- * Differences between individual, small group and large group employment contracting
- * Managing the contract negotiations and expectations for private practices and physicians
- * Employment contracting considerations:
 - ♦ Contract language to assist when federal reimbursement undergoes material changes
 - ♦ Compensation and FMV
 - ♦ Term and Termination
 - ♦ “Guaranteed term” arrangements vs. the flexibility of without cause
 - ♦ Termination provisions
 - ♦ Non-Competes/Non-Solicitation/Liquidated Damages
 - ♦ Intellectual Property
- * “Part time” arrangements in light of recent Tuomey case
- * Operational issues when hospitals and health systems “acquire” a physicians practice

5:45–6:45 pm

Reception sponsored by HORNE LLP

(attendees, faculty and registered spouses and guests welcome)

Thursday, February 10, 2011

6:45 am–6:10 pm

Registration and Information

6:45–8:00 am

Continental Breakfast sponsored by HORNE LLP

(attendees, faculty and registered spouses and guests welcome)

7:00–7:50 am

Provider Obligations and Responsibilities on Access for Patients sponsored by AHHA's Advisory Council on Diversity

Vanessa Benavides

Tom Sullivan

- * Joint Commission's new standard on patient rights
- * New HHS Rule on visitation rights
- * Best practices on the provision of healthcare for the LGBT community
- * The business case for success

GENERAL SESSION

8:00–8:15 am

Welcome and Introduction

Gerald M. Griffith, AHHA President-Elect

S. Allan Adelman, Hospitals Program Chair

8:15–9:45 am

Top Legal Developments for Hospitals and Physicians

Jack S. Schroder, Jr.

Cynthia F. Wisner

CONCURRENT SESSIONS

10:00–11:30 am Extended Sessions

O. Government Investigations and False Claims Act Compliance: New Requirements and New Challenges for Providers

Gary W. Eiland

Robert T. Rhoad

- * Recent amendments to the False Claims Act and healthcare reform legislation provisions creating new enforcement risks and compliance challenges for providers
- * Current government enforcement priorities, initiatives, and settlements affecting providers
- * Effective responses to healthcare-based False Claims Act Litigation initiated by DOJ/whistleblowers
- * Protecting yourself from False Claims Act and other government investigations, litigation and prosecution

P. Finding Common Cause in Quality and Value

Alice G. Gosfield

- * How health reform created common bonds
- * Non-acquisition/employment financial strategies
- * PROMETHEUS Payment: the only new payment model
- * Compensating physicians for quality: from the hospital, within groups
- * Clinical integration: more than an antitrust notion

Q. Legal and Operational Compliance with the Stark and Anti-Kickback Laws – Physician and Vendor Relationship Compliance: What Your Organization Needs to Know, Needs to Do, and Needs to Communicate to Get This Right

Leah B. Guidry

Lisa M. Ohrin

- * Legal perspective – How do the provisions of PPACA change the landscape of compliance and reporting? What do they mean individually and in concert?
- * The new Stark Self Disclosure Protocol at CMS: Practical tips and pitfall avoidance
- * Who are the whistleblowers? They aren't who you might think
- * IRO Perspective – What can CIAs and IROs teach us about compliance?
- * Operational Perspective – You have the legal documents in place, what do you do now? Physician/vendor relationship compliance beyond the General Counsel's office

Program Agenda

L. Getting Organized to Provide Accountable Care: Physician and Hospital Perspectives in Structuring an ACO (repeat)

M. Ramped Up Enforcement Risk for Physicians and Physician Groups (repeat)

N. It's a Small World after All - Physician and Hospital Employment Perspectives (repeat)

11:45 am–12:45 pm

R. Privacy Compliance in the Crosshairs of Competing Policies (not repeated)

Marilyn Lamar

Kristen B. Rosati

- * Complying with the new amendments to the HIPAA Privacy Rule
- * Handling privacy in an integrated, community electronic health record
- * Protecting providers in “cloud computing”

S. Documentation of Medical Necessity: Avoiding Overpayments, Penalties and Fraud Allegations (not repeated)

Timothy P. Blanchard

Joan C. Ragsdale

- * Medical necessity documentation standards
- * Government review of medical necessity
- * Tips for audits, investigations and appeals
- * Proactive compliance program strategies

T. Hospital Acquisitions of Physician Practices: A Legal and Fair Market Value Analysis

Don Barbo

Cheryl S. Camin

- * Physician practice valuation methods and comparison of the valuation methods in moving from value to price
- * Fair market value definition as viewed by hospitals, medical groups/physicians, appraisers and the federal government
- * Legal restrictions in determining the value of physician practices
- * Current trends and factors in physician practice acquisitions as a physician-hospital integration strategy

U. Stark Self Disclosure

Troy Barsky

Robert A. Wade

- * Self-Disclosure requirements
- * Audit and review challenges when preparing self-report
- * Issues providers need to consider when preparing self-report
- * Factors CMS will use when negotiating settlement

V. Follow the Money: Accountable Care, Payment Reform and the Law

Thomas E. Bartrum

Peter A. Pavarini

- * Payment systems intended to move providers from productivity to accountability, including pay for coordinated care management, risk pools, withholds, and incentives, shared savings, episodic/bundled payments, payment penalties, pay for performance and capitation models
- * The risks and rewards of payment systems in transition and their influence on the restructuring of American healthcare
- * How ACOs (and others) might structure their own internal payment systems to transition physicians and other providers from productivity to accountability for quality, outcomes, resource management and patient centeredness
- * Potential federal and state legal issues created by the flow of funds through an ACO including self-referral issues, anti-kickback issues, civil money penalty issues, tax-exempt issues, ability to assume risk under state insurance laws, and state self-referral, kickback, corporate practice and fee splitting prohibitions

12:45–2:00 pm

Lunch on your own or attend one of the Practice Group Lunches: Antitrust and Business Law and Governance (joint luncheon); **Healthcare Liability and Litigation**; or **Labor and Employment and Medical Staff, Credentialing, and Peer Review** (joint luncheon), **sponsored by MDReview** (additional fee; limited attendance; pre-registration required; see page 20 for descriptions and pages 21-22 to register)

CONCURRENT SESSIONS

2:10-3:10 pm

W. What Are Federally Qualified Health Centers and How Can They Be Integrated into a Continuum of Care? (not repeated)

Carol K. Lucas

- * What are FQHC's and why should you be interested in them?
- * Benefits of FQHC designation
- * FQHC governance requirements
- * Issues raised by hospital sponsorship of FQHCs
- * FQHC application issues
- * Health reform effect on FQHCs

X. Accountable Care Organizations: The Cost of Performance – It's Not Your Mother's Fee-For-Service World (not repeated)

Paul R. DeMuro

Danielle L. Trostorff

- * The alignment strategies for patient care delivery utilizing the medical home, CPOE, ePrescribing, interdisciplinary patient care teams and bundled services

Program Agenda

- * The goal of transparency in healthcare delivery based on evidence-based medicine, best practices, clinical pathways, protocols and policies, care management reporting and tracking of patient care outcomes
- * The incentives to integrate achieving interoperable medical information highways through EHRs, and/or cloud computing to share patient information, provide dashboards of patient care decision trees and clinical decision support, provide timely alerts and reminders, account for care delivery and measure outcomes while avoiding costly work arounds

Y. My Score Is Better Than Your Score (and so Is My Reimbursement): “Inducing” Non-Employed Physicians to Assist with Hospital Quality Initiatives (not repeated)

Ann M. Bittinger

Marc D. Goldstone

- * CMS pay for quality initiatives-the 10,000 foot view
- * Pay for quality “results” models-risks and benefits
- * Pay for quality “assistance” models-risks and benefits
- * Leveraging existing relationships to include quality criteria-what’s it worth?
- * FMV and ways to demonstrate it

C. Protecting PHI: The Legal Duties of Health Lawyers Post-HITECH (repeat)

E. To Par or Not to Par: Legal Issues for Physicians in Opting Out, Going Non-Par and Adding Cash Pay Lines of Service (repeat)

3:25–4:25 pm

Z. National Practitioner Data Bank Reporting Issues (not repeated)

Cynthia Grubbs

- * What constitutes professional competence or conduct for reporting purposes?
- * What constitutes an “investigation” for reporting purposes?
- * When is a report required for resigning privileges while under or to avoid an investigation?
- * What constitutes a reportable “surrender” of privileges?
- * When is an action considered to be taken by a healthcare entity as opposed to an individual?
- * When does proctoring or supervision constitute a reportable restriction of privileges?

AA. Everything I Need to Know about Legal Ethics and Professional Responsibility I Learned from My Healthcare Clients (not repeated)

Kristin Miles

- * The impact of impaired lawyers and what we must learn from how healthcare addresses impaired professionals
- * How hot topics in healthcare quality and billing relate to legal ethics and what we can learn from them

- * Why legal competence is more than spotting issues or researching law, especially as reimbursement and fraud and abuse begins to encompass quality of care
- * Why your legal advice on HIPAA and HITECH may be as relevant to the non-health lawyers in your firm as your health law colleagues and your clients

BB. Strategic Decisions for ACOs and Their Antitrust Implications (not repeated)

Daniel M. Grauman

Toby G. Singer

- * The top line strategic and financial implications of the ACO movement for providers
- * How providers might integrate and consolidate for operational and financial success
- * How to reconcile antitrust principles with the goals of ACOs when developing an antitrust-compliant program
- * How to apply antitrust guidance from the federal enforcement agencies to multiprovider arrangements, including principles gleaned from the federal government’s ACO workshop

H. How Does Health Information Exchange Actually Work? (repeat)

T. Hospital Acquisitions of Physician Practices: A Legal and Fair Market Value Analysis (repeat)

U. Stark Self Disclosure (repeat)

4:40–5:40 pm

G. RAC, ZPIC and Other Audits: What to Do When They Knock on Your Door (repeat)

J. Physician Compensation: Trends, Approaches and Oversight (repeat)

V. Follow the Money: Accountable Care, Payment Reform and the Law (repeat)

4:40–6:10 pm Extended Sessions

O. Government Investigations and False Claims Act Compliance: New Requirements and New Challenges for Providers (repeat)

P. Finding Common Cause in Quality and Value (repeat)

Q. Legal and Operational Compliance with the Stark and Anti-Kickback Laws – Physician and Vendor Relationship Compliance: What Your Organization Needs to Know, Needs to Do, and Needs to Communicate to Get This Right (repeat)

Adjournment

Program Faculty

PLANNING COMMITTEE

Charlene L. McGinty, Esq.
Physicians Program Chair
McKenna Long & Aldridge LLP
Atlanta, GA

Cynthia Y. Reisz, Esq.
Bass Berry & Sims PLC
Nashville, TN

David J. Hyman, Esq.
David J. Hyman Attorney At Law
Tulsa, OK

Lori S. Baker, CPC, RHIA
HORNE LLP
Ridgeland, MS

Don Barbo
Deloitte Financial Advisory
Services LLP
Dallas, TX

Troy Barsky, Esq.
Director, Division of Technical
Payment Policy
Centers for Medicare and
Medicaid Services
Baltimore, MD

Thomas E. Bartrum, Esq.
Baker Donelson Bearman
Caldwell & Berkowitz PC
Nashville, TN

Timothy S. Belisle, Esq.
Vice President and General
Counsel
Mountain States Health Alliance
Johnson City, TN

Vanessa Benavides
Corporate Compliance Officer
Tenet Healthcare Corporation
Dallas TX

Ann M. Bittinger, Esq.
Bittinger Law Firm
Jacksonville, FL

Timothy P. Blanchard, Esq.
Blanchard|Manning LLP
Orcas, WA

Philip M. Bluestein, Esq.
Law Office of Philip M. Bluestein
Boulder, CO

Christi J. Braun, Esq.
OBER | KALER
Washington, DC

Cheryl S. Camin, Esq.
Winstead PC
Dallas, TX

Patrick S. Coffey, Esq.
Locke Lord Bissell & Liddell LLP
Chicago, IL

Gerald E. DeLoss, Esq.
DeLoss Health Law
Deerfield, IL

Paul R. DeMuro, Esq.
Latham & Watkins LLP
San Francisco, CA

Catherine T. Dunlay, Esq.
Taft Stettinius & Hollister LLP
Columbus, OH

Gary W. Eiland, Esq.
King & Spalding LLP
Houston, TX

Bryan L. Fredericks, MPH
Chief Operating Officer
Summa Physicians, Inc.
Akron, OH

Robert A. Gerberry, Esq.
Associate General Counsel
Summa Health System
Akron, OH

Marc D. Goldstone, Esq.
Vice President and Associate
General Counsel- Division II
Community Health Systems
Franklin, TN

Alice G. Gosfield, Esq.
Alice G. Gosfield & Associates PC
Philadelphia, PA

Daniel M. Grauman
President and CEO
DGA Partners
Bala Cynwyd, PA

Cynthia Grubbs
Acting Deputy Director/
Associate Director for Policy
Health Resources Services
Administration
US Department of Health and
Human Services
Rockville, MD

Leah B. Guidry, Esq.
Wellspring & Stockamp, Huron
Healthcare
Washington, DC

Julie E. Kass, Esq.
OBER | KALER
Baltimore, MD

Marilyn Lamar, Esq.
Liss & Lamar PC
Oak Brook, IL

David T. Lewis, Esq.
Husch Blackwell Sanders LLP
Chattanooga, TN

Carol K. Lucas, Esq.
Buchalter Nemer PLC
Los Angeles, CA

Patricia A. Markus, Esq.
Smith Moore Leatherwood LLP
Raleigh, NC

Hal McCard, Esq.
Vice President and Associate
General
Counsel Division IV
Community Health Systems
Franklin, TN

Sean R. McKenna, Esq.
Assistant US Attorney
U S Attorney's Office for the
Northern
District of Texas
Dallas, TX

David M. McMillan
PYA
Knoxville, TN

Kristin Miles, Esq.
Assistant Attorney General
Attorney General's Office, UW
Division
Seattle, WA

Kimberly A. Mobley
Sullivan Cotter and Associates, Inc.
Detroit, MI

Chris J. Mollet, Esq.
Associate University Counsel
University of Illinois
Chicago, IL

E. Haavi Morreim, JD, PhD
Professor
College of Medicine University
of Tennessee
Cordova, TN

John Moses
Principal and Chief Executive
Officer
MDReview
Ketchum, ID

Lisa M. Ohrin, Esq.
Katten Muchin Rosenman LLP
Washington, DC

Charles B. Oppenheim, Esq.
Hooper Lundy & Bookman, Inc.
Los Angeles, CA

Peter A. Pavarini, Esq.
Squire Sanders & Dempsey LLP
Columbus, OH

Bruce I. Petrie, Esq.
Graydon Head & Ritchey LLP
Cincinnati, OH

Joan C. Ragsdale, Esq.
COO
MedManagement LLC
Birmingham, AL

Robert T. Rhoad, Esq.
Crowell & Moring LLP
Washington, DC

Vicki L. Robinson, Esq.
Chief, Industry Guidance
Office of Inspector General
US Department of Health and
Human
Services
Washington, DC

Todd A. Rodriguez, Esq.
Fox Rothschild LLP
Exton, PA

Kristen B. Rosati, Esq.
Coppersmith Schermer &
Brockelman PLC
Phoenix, AZ

Michael F. Schaff, Esq.
Wilentz Goldman & Spitzer PA
Woodbridge, NJ

Jack S. Schroder, Jr., Esq.
Big Canoe, GA

Jeffrey K. Shapiro, Esq.
Hyman Phelps & McNamara PC
Washington, DC

Toby G. Singer, Esq.
Jones Day
Washington, DC

Tom Sullivan
Deputy Director, Human Rights
Campaign Family Project
Human Rights Campaign
Washington, DC

Stacey A. Tovino, JD, PhD
Professor of Law
William S. Boyd School of Law,
University
of Nevada, Las Vegas
Las Vegas, NV

Danielle L. Trostorff, Esq.
Baker Donelson Bearman
Caldwell & Berkowitz PC
New Orleans, LA

Claire M. Turcotte, Esq.
Bricker & Eckler LLP
West Chester, OH

Robert A. Wade, Esq.
Baker & Daniels LLP
South Bend, IN

John P. Wiegand, Esq.
Staff Attorney
Federal Trade Commission
San Francisco, CA

Cynthia F. Wisner, Esq.
Associate Counsel
Trinity Health

Program Agenda

Thursday, February 10, 2011

6:45 am–6:10 pm

Registration and Information

6:45–8:00 am

Continental Breakfast sponsored by HORNE LLP
(attendees, faculty and registered spouses and guests welcome)

7:00–7:50 am

Provider Obligations and Responsibilities on Access for Patients
sponsored by AHLA's Advisory Council on Diversity
Venessa Benavides
Tom Sullivan

- * Joint Commission's new standard on patient rights
- * New HHS Rule on visitation rights
- * Best practices on the provision of healthcare for the LGBT community
- * The business case for success

GENERAL SESSION

8:00–8:15 am

Welcome and Introduction
Gerald M. Griffith, AHLA President-Elect
S. Allan Adelman, Hospitals Program Chair

8:15–9:45 am

Top Legal Developments for Hospitals and Physicians
Jack S. Schroder, Jr.
Cynthia F. Wisner

CONCURRENT SESSIONS

10:00–11:30 am Extended Sessions

A. Getting Organized to Provide Accountable Care: Physician and Hospital Perspectives in Structuring an ACO

Catherine T. Dunlay
Bryan L. Fredericks
Robert A. Gerberry
Michael F. Schaff

- * Accountable Care Organizations, their intended functions, the statutory and regulatory guidance addressing ACOs, and the status of ACO development efforts
- * Structures for physician collaboration
 - ♦ Physicians' viewpoint on ACO organization and operation
 - ♦ Physician governance, including board and committee structures
 - ♦ Evolution of a physician practice from independent silos of physicians to a true clinically integrated entity
 - ♦ Methodologies to ensure greater accountability, including use of performance based compensation based on RVU production, quality outcomes and achievement of goals

- * Integrating hospitals, physicians and other providers
 - ♦ Hospitals' viewpoint on ACO organization and operation
 - ♦ Structures for hospital-physician integration – clinic and employment models, joint venture/PHO models, governance, contractual relationships
 - ♦ Creating a culture of transparency and trust among the hospital and physicians
- * Effect of Stark Law, Anti-Kickback Statute, Civil Monetary Penalty provisions and comparable state laws on structure and operation of an ACO
- * Lessons learned from the process undertaken by Summa Health System to engage its employed and independent physicians as members of its ACO (with operations commencing on January 1, 2011) as part of the Premier Health Alliance Implementation Collaborative

B. Government Investigations and False Claims Act Compliance: New Requirements and New Challenges for Providers

Gary W. Eiland
Robert T. Rhoad

- * Recent amendments to the False Claims Act and healthcare reform legislation provisions creating new enforcement risks and compliance challenges for providers
- * Current government enforcement priorities, initiatives, and settlements affecting providers
- * Effective responses to healthcare-based False Claims Act Litigation initiated by DOJ/whistleblowers
- * Protecting yourself from False Claims Act and other government investigations, litigation and prosecution

C. Finding Common Cause in Quality and Value

Alice G. Gosfield

- * How health reform created common bonds
- * Non-acquisition/employment financial strategies
- * PROMETHEUS Payment: the only new payment model
- * Compensating physicians for quality: from the hospital, within groups
- * Clinical integration: more than an antitrust notion

D. Legal and Operational Compliance with the Stark and Anti-Kickback Laws – Physician and Vendor Relationship Compliance: What Your Organization Needs to Know, Needs to Do, and Needs to Communicate to Get This Right

Leah B. Guidry
Lisa M. Ohrin

- * Legal perspective – How do the provisions of PPACA change the landscape of compliance and reporting? What do they mean individually and in concert?
- * The new Stark Self Disclosure Protocol at CMS: Practical tips and pitfall avoidance
- * Who are the whistleblowers? They aren't who you might think

Program Agenda

- * IRO Perspective – What can CIAs and IROs teach us about compliance?
- * Operational Perspective – You have the legal documents in place, what do you do now? Physician/vendor relationship compliance beyond the General Counsel's office

11:45 am–12:45 pm

E. Clinical Research in a Community Hospital

(not repeated)

Kevin Eskew

Richard G. Korman

- * Benefits and risks of nurturing a research program in a community hospital
- * What makes a community hospital unique vis-à-vis an academic environment?
- * The optimal infrastructure - “right sizing”
- * Human research protections programs in a community hospital setting
- * How research compliance programs can fit the needs of a community hospital

F. Documentation of Medical Necessity: Avoiding Overpayments, Penalties and Fraud Allegations

Timothy P. Blanchard

Joan C. Ragsdale

- * Medical necessity documentation standards
- * Government review of medical necessity
- * Tips for audits, investigations and appeals
- * Proactive compliance program strategies

G. Stark Self Disclosure

Troy Barsky

Robert A. Wade

- * Self-Disclosure requirements
- * Audit and review challenges when preparing self-report
- * Issues providers need to consider when preparing self-report
- * Factors CMS will use when negotiating settlement

H. Follow the Money: Accountable Care, Payment Reform and the Law

Thomas E. Bartrum

Peter A. Pavarini

- * Payment systems intended to move providers from productivity to accountability, including pay for coordinated care management, risk pools, withholds, and incentives, shared savings, episodic/bundled payments, payment penalties, pay for performance and capitation models
- * The risks and rewards of payment systems in transition and their influence on the restructuring of American healthcare
- * How ACOs (and others) might structure their own internal payment systems to transition physicians and other providers from productivity to accountability for quality, outcomes, resource management and patient centeredness

- * Potential federal and state legal issues created by the flow of funds through an ACO including self-referral issues, anti-kickback issues, civil money penalty issues, tax-exempt issues, ability to assume risk under state insurance laws, and state self-referral, kickback, corporate practice and fee splitting prohibitions

J. Hospital Acquisitions of Physician Practices: A Legal and Fair Market Value Analysis

Don Barbo

Cheryl S. Camin

- * Physician practice valuation methods and comparison of the valuation methods in moving from value to price
- * Fair market value definition as viewed by hospitals, medical groups/physicians, appraisers and the federal government
- * Legal restrictions in determining the value of physician practices
- * Current trends and factors in physician practice acquisitions as a physician-hospital integration strategy

K. Privacy Compliance in the Crosshairs of Competing Policies

Marilyn Lamar

Kristen B. Rosati

- * Complying with the new amendments to the HIPAA Privacy Rule
- * Handling privacy in an integrated, community electronic health record
- * Protecting providers in “cloud computing”

12:45–2:00 pm

Lunch on your own or attend one of the Practice Group Lunches: Antitrust and Business Law and Governance (joint luncheon); **Healthcare Liability and Litigation**; or **Labor and Employment and Medical Staff, Credentialing, and Peer Review** (joint luncheon), sponsored by MDReview (additional fee; limited attendance; pre-registration required; see page 20 for descriptions and pages 21-22 to register)

CONCURRENT SESSIONS

2:10–3:10 pm

L. Protecting PHI: The Legal Duties of Health Lawyers Post-HITECH (not repeated)

Cynthia Y. Reisz

Stacey A. Tovino

- * The direct application of the HIPAA Privacy Rule to business associates, including outside healthcare counsel; and the extension of business associate obligations to subcontractors
- * Required amendments to business associate agreements between covered entities and business associates and required amendments to (or execution of new) business associate agreements between business associates and subcontractors

Program Agenda

- * The application of civil and criminal penalties to business associates who inappropriately use and disclose protected health information
- * Transition provisions, effective dates and compliance dates

M. What Are Federally Qualified Health Centers and How Can They Be Integrated into a Continuum of Care? (not repeated)

Carol K. Lucas

- * What are FQHC's and why should you be interested in them?
- * Benefits of FQHC designation
- * FQHC governance requirements
- * Issues raised by hospital sponsorship of FQHCs
- * FQHC application issues
- * Health reform effect on FQHCs

N. Accountable Care Organizations: The Cost of Performance – It's Not Your Mother's Fee-For-Service World

Paul R. DeMuro

Danielle L. Trostorff

- * The alignment strategies for patient care delivery utilizing the medical home, CPOE, ePrescribing, interdisciplinary patient care teams and bundled services
- * The goal of transparency in healthcare delivery based on evidence-based medicine, best practices, clinical pathways, protocols and policies, care management reporting and tracking of patient care outcomes
- * The incentives to integrate achieving interoperable medical information highways through EHRs, and/or cloud computing to share patient information, provide dashboards of patient care decision trees and clinical decision support, provide timely alerts and reminders, account for care delivery and measure outcomes while avoiding costly work arounds

O. Merger and Acquisition Activity for Hospital and Health Systems: Post-Reform Priorities and Trends

Michael McArthur

James F. Owens

- * Recent hospital and health system M&A activity
- * M&A priorities for hospital and health system management
- * Typical transaction structures and legal issues in acquisitions of hospitals and physician practices
- * Case study of a hospital's acquisition of a physician practice

P. My Score Is Better Than Your Score (and so Is My Reimbursement): "Inducing" Non-Employed Physicians to Assist with Hospital Quality Initiatives

Ann M. Bittinger

Marc D. Goldstone

- * CMS pay for quality initiatives-the 10,000 foot view
- * Pay for quality "results" models-risks and benefits
- * Pay for quality "assistance" models-risks and benefits

- * Leveraging existing relationships to include quality criteria-what's it worth?
- * FMV and ways to demonstrate it

3:25–4:25 pm

Q. How Does Health Information Exchange Actually Work? (not repeated)

Gerald E. DeLoss

Patricia A. Markus

- * Legal issues related to HIE: Compliance with federal and state laws, privacy and security issues, patient consent to HIE, permitted purposes for exchange and liability issues
- * HIE participation agreements (contractual provisions)
- * Practical issues, including HIE governance and sustainability

R. National Practitioner Data Bank Reporting Issues

Cynthia Grubbs

- * What constitutes professional competence or conduct for reporting purposes?
- * What constitutes an "investigation" for reporting purposes?
- * When is a report required for resigning privileges while under or to avoid an investigation?
- * What constitutes a reportable "surrender" of privileges?
- * When is an action considered to be taken by a healthcare entity as opposed to an individual?
- * When does proctoring or supervision constitute a reportable restriction of privileges?

S. Everything I Need to Know about Legal Ethics and Professional Responsibility I Learned from My Healthcare Clients

Kristin Miles

- * The impact of impaired lawyers and what we must learn from how healthcare addresses impaired professionals
- * How hot topics in healthcare quality and billing relate to legal ethics and what we can learn from them
- * Why legal competence is more than spotting issues or researching law, especially as reimbursement and fraud and abuse begins to encompass quality of care
- * Why your legal advice on HIPAA and HITECH may be as relevant to the non-health lawyers in your firm as your health law colleagues and your clients

T. Strategic Decisions for ACOs and Their Antitrust Implications

Daniel M. Grauman

Toby G. Singer

- * The top line strategic and financial implications of the ACO movement for providers
- * How providers might integrate and consolidate for operational and financial success
- * How to reconcile antitrust principles with the goals of ACOs when developing an antitrust-compliant program
- * How to apply antitrust guidance from the federal enforcement agencies to multiprovider arrangements, including principles gleaned from the federal government's ACO workshop

Program Agenda

G. Stark Self Disclosure (repeat)

J. Hospital Acquisitions of Physician Practices: A Legal and Fair Market Value Analysis (repeat)

4:40–5:40 pm

U. Physician Compensation: Trends, Approaches and Oversight (not repeated)

Kimberly A. Mobley

Claire M. Turcotte

- * Emerging physician compensation trends and approaches
- * Legal and regulatory concerns and implications of compensation approaches
- * Governance and oversight of physician compensation arrangements, including options and best practices

V. RAC, ZPIC and Other Audits: What to Do When They Knock on Your Door (not repeated)

Lori S. Baker

David T. Lewis

- * Real stories of physician audit experiences
- * Audit targets and methodologies used to support overpayment demands
- * Steps on preparing for and responding to audits
- * Appeal tips and common errors

H. Follow the Money: Accountable Care, Payment Reform and the Law (repeat)

4:40–6:10 pm Extended Sessions

B. Government Investigations and False Claims Act Compliance: New Requirements and New Challenges for Providers (repeat)

C. Finding Common Cause in Quality and Value (repeat)

D. Legal and Operational Compliance with the Stark and Anti-Kickback Laws – Physician and Vendor Relation- ship Compliance: What Your Organization Needs to Know, Needs to Do, and Needs to Communicate to Get This Right (repeat)

5:40-7:00 pm

Reception sponsored by HORNE LLP

(attendees, faculty and registered spouses and guests welcome)

Friday, February 11, 2011

7:30 am-3:25 pm

Registration and Information

7:30-8:30 am

Continental Breakfast sponsored by HORNE LLP
(attendees, faculty, and registered spouses and guests welcome)

CONCURRENT SESSIONS

8:30-9:30 am

W. Medicare and Medicaid Audits – A Year in Review: PPACA, Medicare Appeals Council Decisions, Emerging Federal Case Law, and the New Consumer Appeals Process (not repeated)

Andrew B. Wachler

- * Recent developments and audit activity under the Medicaid Integrity Program
- * Expansion of the RAC program to Medicare Parts C and D and Medicaid under PPACA
- * Emerging legal issues including recent MAC and federal court decisions and the role of these decisions in Medicare audit appeal strategy
- * The interim final rules for the new federal consumer appeals process

X. Healthcare Labor and Employment Law for Physicians Practices, Hospitals and Health Systems (not repeated)

Bruce I. Petrie

- * Recent developments in healthcare labor and employment law
- * Employment discrimination law in a healthcare workforce
- * Unionization and labor issues impacting hospitals, physicians and residents (i.e., how a union gets in and items for employers to watch)
- * Recent employment law regulatory changes
- * Dealing with the “Facebook culture” in the healthcare workplace: Legal issues relating to email, internet and electronic media

Y. Section 501(r) and Tax Exemption Responsibilities under PPACA

Lisa J. Gilden

Gerald M. Griffith

Z. Life after Tuomey Healthcare: Practical Issues in Commercial Reasonableness and Fair Market Value

David Pursell

David W. Thompson

- * Impact of recent case law on hospital/physician contracting
- * Commercial reasonableness after Tuomey
- * Commercial reasonableness v. fair market value
- * Case study in commercial reasonableness/fair market value issues

9:40-10:40 am

AA. Practical Approaches to Managing Conflicts of Interest and Gifts Issues (not repeated)

Greg S. Radinsky

- * Summary of new laws and industry guidance on conflicts of interest and gifts
- * Controls to prevent Stark and Anti-Kickback violations
- * Conflicts of Interest and Gift Settlements to share with employees
- * Pitfalls to avoid in implementing a more stringent Conflicts of Interest policy

Program Agenda

- * Hot compliance issues related to industry-physician relationships and hospital collaborations
- * Practical tips on auditing and monitoring compliance with your Conflicts of Interest and Gifts policy

BB. Collision Course: The Intersection of Peer Review and the Discipline of Employed Physicians

David B. Adcock

Maria Greco Danaher

- * The role of peer review of employed physicians and the extent to which HCQIA immunities are available in the employment context
- * When physician retention and disciplinary decisions should be submitted to procedures defined in the Medical Staff Bylaws
- * Provisions that should be included in Physician Employment Contracts to help avoid unintended legal liability for employment issues
- * Establish whether disruptive behavior or inappropriate conduct is an employment issue, a med staff issue, or both, and whether standards of acceptable conduct are different for employed physicians and medical staff members
- * The limits to which peer review records can be protected during employment litigation

N. Accountable Care Organizations: The Cost of Performance – It's Not Your Mother's Fee-For-Service World (repeat)

R. National Practitioner Data Bank Reporting Issues (repeat)

10:50-11:50 am

CC. The Essential New Paradigm for Hospital Counsel and Hospital's Providers Counsel: Enterprise Risk Management (not repeated)

Jay A. Martus

Peggy L. B. Nakamura

- * Enterprise risk management overview
- * Establish governing board directive on strategic importance of comprehensive disruptive provider policies and processes
- * Collaborative process of facility administration and medical staff to:
- * Identify provider best conduct practices, develop consensus on what constitutes disruptive behavior; create a pragmatic and specific code of conduct; encourage and support timely episodic reporting; implement behavioral surveys; structure a thorough and fair investigative and adjudicative process and apply appropriate and measurable remediation steps
- * Effect implementation strategies to continually educate and evolve institutional cultural attitudes and perspectives of disruptive behavior for permanent medical staff members and temporary staff members including Locum Tenens Physicians

S. Everything I Need to Know about Legal Ethics and Professional Responsibility I Learned from My Healthcare Clients (repeat)

T. Strategic Decisions for ACOs and Their Antitrust Implications (repeat)

Y. Section 501(r) and Tax Exemption Responsibilities under PPACA (repeat)

11:50 am-1:05 pm

Lunch on your own or attend the Health Information and Technology and Hospitals and Health Systems (joint luncheon), **sponsored by Quorum Health Resources LLC** (additional fee; limited attendance; pre-registration required; see page 20 for descriptions and pages 21-22 to register)

CONCURRENT SESSIONS

1:15-2:15 pm

DD. Early Mediation Beats Litigation for Improving Healthcare Quality: Opportunities for Hospitals and Physicians to Collaborate (not repeated)

E. Haavi Morreim

- * Although litigation aims to improve quality by deterring tortfeasors from future similar conduct, errors in health-care are often the product of complex system failures much more than individual poor performance
- * Early mediation can serve far better than litigation to facilitate the communication essential to fix system-level problems, preserve important relationships, and achieve better and fairer outcomes for all parties
- * These points will be illustrated via Root Cause Analysis of the death of a 16-year-old obstetric patient who was accidentally given epidural anesthesia through an intravenous line
- * Although the mandate to report med-mal payments to the National Practitioner Data Bank often inhibits physicians from participating in early mediation, hospitals and physicians working together can lawfully avoid NPDB reports

F. Documentation of Medical Necessity: Avoiding Overpayments, Penalties and Fraud Allegations (repeat)

O. Merger and Acquisition Activity for Hospital and Health Systems: Post-Reform Priorities and Trends (repeat)

P. My Score Is Better Than Your Score (and so Is My Reimbursement): "Inducing" Non-Employed Physicians to Assist with Hospital Quality Initiatives (repeat)

2:25-3:25 pm

K. Privacy Compliance in the Crosshairs of Competing Policies (repeat)

Z. Life after Tuomey Healthcare: Practical Issues in Commercial Reasonableness and FMV (repeat)

BB. Collision Course: The Intersection of Peer Review and the Discipline of Employed Physicians (repeat)

Adjournment

Program Faculty

PLANNING COMMITTEE

S. Allan Adelman, Esq.

Hospitals Program Chair
Adelman Sheff & Smith LLC
Annapolis, MD

Almeta E. Cooper, Esq.

Associate Vice President & Associate
General Counsel
OSU Medical Center
Columbus, OH

Lisa J. Gilden, Esq.

Vice President & General Counsel
Catholic Health Association
Washington, DC

Louise M. Joy, Esq.

Joy & Young LLP
Austin, TX

Robert A. Wade, Esq.

Baker & Daniels LLP
South Bend, IN

Cynthia F. Wisner, Esq.

Associate Counsel
Trinity Health
Farmington Hills, MI

David B. Adcock, Esq.

Ogletree Deakins Nash Smoak & Stewart PC
Raleigh, NC

Lori S. Baker, CPC, RHIA

HORNE LLP
Ridgeland, MS

Don Barbo

Deloitte Financial Advisory Services LLP
Dallas, TX

Troy Barsky, Esq.

Director, Division of Technical Payment
Policy
Centers for Medicare and Medicaid Services
Baltimore, MD

Thomas E. Bartrum, Esq.

Baker Donelson Bearman Caldwell &
Berkowitz PC
Nashville, TN

Vanessa Benavides

Corporate Compliance Officer
Tenet Healthcare Corporation
Dallas TX

Ann M. Bittinger, Esq.

Bittinger Law Firm
Jacksonville, FL

Timothy P. Blanchard, Esq.

Blanchard|Manning LLP
Orcas, WA

Cheryl S. Camin, Esq.

Winstead PC
Dallas, TX

Maria Greco Danaher, Esq.

Ogletree Deakins Nash Smoak & Stewart PC
Pittsburgh, PA

Gerald E. DeLoss, Esq.

DeLoss Health Law
Deerfield, IL

Paul R. DeMuro, Esq.

Latham & Watkins LLP
San Francisco, CA

Catherine T. Dunlay, Esq.

Taft Stettinius & Hollister LLP
Columbus, OH

Gary W. Eiland, Esq.

King & Spalding LLP
Houston, TX

Kevin Eskew, Esq.

SNR Denton
Chicago, IL

Bryan L. Fredericks, MPH

Chief Operating Officer
Summa Physicians, Inc.
Akron, OH

Robert A. Gerberry, Esq.

Associate General Counsel
Summa Health System
Akron, OH

Marc D. Goldstone, Esq.

Vice President and Associate General
Counsel- Division II
Community Health Systems
Franklin, TN

Alice G. Gosfield, Esq.

Alice G. Gosfield & Associates PC
Philadelphia, PA

Daniel M. Grauman

President and CEO
DGA Partners
Bala Cynwyd, PA

Gerald M. Griffith, Esq.

Jones Day
Chicago, IL

Cynthia Grubbs

Acting Deputy Director/Associate Director
for Policy
Health Resources Services Administration
US Department of Health and Human
Services
Rockville, MD

Leah B. Guidry, Esq.

Wellspring & Stockamp, Huron Healthcare
Washington, DC

Richard G. Korman, Esq.

General Counsel
Saint Joseph Regional Medical Center
South Bend, IN

Marilyn Lamar, Esq.

Liss & Lamar PC
Oak Brook, IL

David T. Lewis, Esq.

Husch Blackwell Sanders LLP
Chattanooga, TN

Carol K. Lucas, Esq.

Buchalter Nemer PLC
Los Angeles, CA

Patricia A. Markus, Esq.

Smith Moore Leatherwood LLP
Raleigh, NC

Jay A. Martus, Esq.

SVP & General Counsel
Sheridan Healthcare, Inc.
Sunrise, FL

Michael McArthur

Deloitte Corporate Finance LLC
Los Angeles, CA

Kristin Miles, Esq.

Assistant Attorney General
Attorney General's Office, UW Division
Seattle, WA

Kimberly A. Mobley

Sullivan Cotter and Associates, Inc.
Detroit, MI

E. Haavi Morriem, JD, PhD

Professor
College of Medicine University of Tennessee
Cordova, TN

Peggy L. B. Nakamura, RN, MBA, Esq.

Assistant Vice President
Adventist Health
Roseville, CA

Lisa M. Ohrin, Esq.

Katten Muchin Rosenman LLP
Washington, DC

Program Faculty

James F. Owens, Esq.

Paul Hastings Janofsky & Walker LLP
Los Angeles, CA

Peter A. Pavarini, Esq.

Squire Sanders & Dempsey LLP
Columbus, OH

Bruce I. Petrie, Esq.

Graydon Head & Ritchey LLP
Cincinnati, OH

David Pursell, Esq.

Husch Blackwell Sanders LLP
Kansas City, MO

Greg S. Radinsky

Vice President, Chief Corporate Compliance
Officer
North Shore Long Island Jewish Health
System
Great Neck, NY

Joan C. Ragsdale, Esq.

COO
MedManagement LLC
Birmingham, AL

Cynthia Y. Reisz, Esq.

Bass Berry & Sims PLC
Nashville, TN

Robert T. Rhoad, Esq.

Crowell & Moring LLP
Washington, DC

Kristen B. Rosati, Esq.

Coppersmith Schermer & Brockelman PLC
Phoenix, AZ

Michael F. Schaff, Esq.

Wilentz Goldman & Spitzer PA
Woodbridge, NJ

Jack S. Schroder, Jr., Esq.

Big Canoe, GA

Toby G. Singer, Esq.

Jones Day
Washington, DC

Tom Sullivan

Deputy Director, Human Rights Campaign
Family Project
Human Rights Campaign
Washington, DC

David W. Thompson

CBIZ MHM LLC
Leawood, KS

Stacey A. Tovino, JD, PhD

Professor of Law
William S. Boyd School of Law, University of
Nevada, Las Vegas
Las Vegas, NV

Danielle L. Trostorff, Esq.

Baker Donelson Bearman Caldwell &
Berkowitz PC
New Orleans, LA

Claire M. Turcotte, Esq.

Bricker & Eckler LLP
West Chester, OH

Andrew B. Wachler, Esq.

Wachler & Associates PC
Royal Oak, MI

Program at a Glance

Wednesday, February 9, 2011

7:00 am– 5:45 pm	Registration and Information		
8:00– 9:45 am	GENERAL SESSION 8:00-8:15 am Welcome and Introduction <i>Griffith, McGinty</i> 8:15-9:45 am What Physician Counsel Need to Know about Healthcare Reform <i>Kass, Robinson</i>		
10:00– 11:00 am	Legal Issues in Physician-Owned Device Companies: What You Need to Know about Stark, Anti-Kickback and FDA (not repeated) <i>Oppenheim Shapiro</i>	How Early Dispute Resolution Beats Litigation for Improving Healthcare: Opening the Mediation Door Wider for Physicians <i>Morreim</i>	Protecting PHI: The Legal Duties of Health Lawyers Post-HITECH <i>Reisz Tovino</i>
11:15 am– 12:15 pm	Healthcare Labor and Employment Law for Physicians Practices, Hospitals and Health Systems (not repeated) <i>Petrie</i>	To Par or Not to Par: Legal Issues for Physicians in Opting Out, Going Non-Par and Adding Cash Pay Lines of Service <i>Rodriguez</i>	Practice Mergers: Watch Out for the FTC <i>Braun Wiegand</i>
12:15– 1:35 pm	Lunch on your own or attend the Physician Organizations Practice Group luncheon, sponsored by PYA (additional fee; limited attendance; pre-registration required; see pages 21-22)		
1:45– 2:45 pm	RAC, ZPIC and Other Audits: What to Do When They Knock on Your Door <i>Baker Lewis</i>	How Does Health Information Exchange Actually Work? <i>DeLoss Markus</i>	Physician Compensation: Trends, Approaches and Oversight <i>Mobley Turcotte</i>
3:00– 4:00 pm	Managing Conflicts of Interest in the Era of Physician/Hospital Integration (not repeated) <i>Belisle McMillan Moses</i>	How Early Dispute Resolution Beats Litigation for Improving Healthcare: Opening the Mediation Door Wider for Physicians (repeat) <i>Morreim</i>	Practice Mergers: Watch Out for the FTC (repeat) <i>Braun Wiegand</i>
4:15– 5:45 pm Extended Sessions	Getting Organized to Provide Accountable Care: Physician and Hospital Perspectives in Structuring an ACO <i>Dunlay Fredericks Gerberry Schaff</i>	Ramped Up Enforcement Risk for Physicians and Physician Groups Lacking Effective Compliance <i>Coffey McKenna Mollet</i>	It's a Small World After All – Physician and Hospital Employment Perspectives <i>Bluestein McCard McGinty</i>
5:45– 6:45 pm	Reception sponsored by HORNE LLP (attendees, faculty and registered spouses and guests welcome)		

Physicians and Physician Organizations Law Institute Hospitals and Health Systems Law Institute

Programs at a Glance

Thursday, February 10, 2011

Please Note: The sessions in the dark shaded boxes are included on the agendas of both the Physicians Law Institute and the Hospitals Law Institute. Other sessions are on the program indicated.

6:45 am– 6:10 pm	Registration and Information					
6:45– 8:00 am	Continental Breakfast sponsored by HORNE LLP (attendees, faculty and registered spouses and guests welcome)					
7:00– 7:50 am	Provider Obligations and Responsibilities on Access for Patients sponsored by AHLA's Advisory Council on Diversity <i>Benavides, Sullivan</i>					
8:00– 9:45 am	GENERAL SESSION 8:00-8:15 am Welcome and Introduction <i>Griffith, Adelman</i> 8:15-9:45 am Top Legal Developments for Hospitals and Physicians <i>Schroder, Wisner</i>					
10:00– 11:30 am Extended Sessions	(Physicians Only) Ramped Up Enforcement Risk for Physicians and Physician Groups (repeat) <i>Coffey McKenna Mollet</i>	(Physicians Only) It's a Small World after All - physician and Hospital Employment Perspectives (repeat) <i>Bluestein McCard McGinty</i>	Getting Organized to Provide Accountable Care: Physician and Hospital Perspectives in Structuring an ACO <i>Dunlay Fredericks Gerberry Schaff</i>	Government Investigations and False Claims Act Compliance: New Requirements and New Challenges for Providers <i>Eiland Rhoad</i>	Finding Common Cause in Quality and Value <i>Gosfield</i>	Legal and Operational Compliance with the Stark and Anti – Kickback Laws – Physician and Vendor Relationship Compliance <i>Guidry Ohrin</i>
11:45 am– 12:45 pm	(Hospitals only) Clinical Research in a Community Hospital (not repeated) <i>Eskew Korman</i>	Documentation of Medical Necessity: Avoiding Overpayments, Penalties and Fraud Allegations <i>Blanchard Ragsdale</i>	Stark Self Disclosure <i>Barsky Wade</i>	Follow the Money: Accountable Care, Payment Reform and the Law <i>Bartrum Pavarini</i>	Hospital Acquisitions of Physician Practices: A Legal and Fair Market Value Analysis <i>Barbo Camin</i>	Privacy Compliance in the Crosshairs of Competing Policies <i>Lamar Rosat</i>
12:45– 2:00 pm	Lunch on your own or attend the Antitrust and Business Law and Governance (joint luncheon), Healthcare Liability and Litigation, or Labor and Employment and Medical Staff, Credentialing, and Peer Review (joint luncheon) sponsored by MDReview (additional fee; limited attendance; pre-registration required See pages 21-22)					

Programs at a Glance

Thursday, February 10, 2011 continued

2:10– 3:10 pm	(Physicians only) To Par or Not to Par: Legal Issues for Physicians in Opting Out, Going Non-Par and Adding Cash Pay Lines of Service (repeat) <i>Rodriguez</i>	(Hospitals only) Merger and Acquisition Activity for Hospital and Health Systems: Post-Reform Priorities and Trends <i>McArthur Owens</i>	What Are Federally Qualified Health Centers and How Can They Be Integrated into a Continuum of Care? (not repeated) <i>Lucas</i>	Accountable Care Organizations: The Cost of Performance– It’s Not Your Mother’s Fee-For Service World <i>DeMuro Trostorff</i>	Protecting PHI: The Legal Duties of Health Lawyers Post-HITECH <i>Reisz Tovino</i>	My Score Is Better Than Your Score (and so Is My Reimbursement): “Inducing” Non-Employed Physicians to Assist with Hospital Quality Initiatives <i>Bittinger Goldstone</i>
3:25– 4:25 pm	How Does Health Information Exchange Actually Work? <i>DeLoss Markus</i>	National Practitioner Data Bank Reporting Issues <i>Grubbs</i>	Everything I Need to Know about Legal Ethics and Professional Responsibility I Learned from My Healthcare Clients <i>Miles</i>	Strategic Decisions for ACOs and Their Antitrust Implications <i>Grauman Singer</i>	Stark Self Disclosure (repeat) <i>Barsky Wade</i>	Hospital Acquisitions of Physician Practices: A Legal and Fair Market Value Analysis (repeat) <i>Barbo Camin</i>
4:40– 5:40 pm	Physician Compensation: Trends, Approaches and Oversight <i>Mobley Turcotte</i>	RAC, ZPIC and Other Audits: What to Do When They Knock on Your Door <i>Baker Lewis</i>	Follow the Money: Accountable Care, Payment Reform and the Law (repeat) <i>Bartrum Pavarini</i>	4:40–6:10 pm Extended Sessions		
				Government Investigations and False Claims Act Compliance: New Requirements and New Challenges for Providers (repeat) <i>Eiland Rhoad</i>	Finding Common Cause in Quality and Value (repeat) <i>Gosfield</i>	Legal and Operational Compliance with the Stark and Anti-Kickback Laws-Physician and Vendor Relationship Compliance (repeat) <i>Guidry Ohrin</i>
5:40– 7:00 pm	Reception sponsored by HORNE LLP (attendees, faculty and registered spouses and guests welcome)					

Program at a Glance

Friday, February 11, 2010

7:30 am– 3:25 pm	Registration and Information			
7:30– 8:30 am	Continental Breakfast sponsored by HORNE LLP (attendees, faculty, and registered spouses and guests welcome)			
8:30– 9:30 am	Medicare and Medicaid Audits-A Year in Review: PPACA, Medicare Appeals Council Decisions, Emerging Federal Case Law, and the New Consumer Appeals Process (not repeated) <i>Wachler</i>	Healthcare Labor and Employment Law for Physicians Practices, Hospitals and Health Systems (not repeated) <i>Petrie</i>	Section 501(r) and Tax Exemption Responsibilities under PPACA <i>Gilden Griffith</i>	Life after Tuomey Healthcare: Practical Issues in Commercial Reasonableness and Fair Market Value <i>Pursell Thompson</i>
9:40– 10:40 am	Practical Approaches to Managing Conflicts of Interest and Gifts Issues (not repeated) <i>Radinsky</i>	Collision Course: The Intersection of Peer Review and the Discipline of Employed Physicians <i>Adcock Danaher</i>	Accountable Care Organizations: The Cost of Performance – It’s Not Your Mother’s Fee-For-Service World (repeat) <i>DeMuro Trostorff</i>	National Practitioner Data Bank Reporting Issues (repeat) <i>Grubbs</i>
10:50– 11:50 am	The Essential New Paradigm for Hospital Counsel and Hospital’s Providers Counsel: Enterprise Risk Management (not repeated) <i>Martus Nakamura</i>	Strategic Decisions for ACOs and Their Antitrust Implications (repeat) <i>Grauman Singer</i>	Everything I Need to Know about Legal Ethics and Professional Responsibility I Learned from My Healthcare Clients (repeat) <i>Miles</i>	Section 501(r) and Tax Exemption Responsibilities under PPACA (repeat) <i>Gilden Griffith</i>
11:50 am– 1:05 pm	Lunch on your own or attend the Health Information and Technology and Hospitals and Health Systems (joint luncheon), sponsored by Quorum Health Resources LLC (additional fee; limited attendance; pre-registration required; see pages 21-22)			
1:15– 2:15 pm	Early Mediation Beats Litigation for Improving Healthcare Quality: Opportunities for Hospitals and Physicians to Collaborate (not repeated) <i>Morreim</i>	My Score Is Better Than Your Score (and so Is My Reimbursement): “Inducing” Non-Employed Physicians to Assist with Hospital Quality Initiatives (repeat) <i>Bittinger Goldstone</i>	Documentation of Medical Necessity: Avoiding Overpayments, Penalties and Fraud Allegations (repeat) <i>Blanchard Ragsdale</i>	Merger and Acquisition Activity for Hospital and Health Systems: Post-Reform Priorities and Trends (repeat) <i>McArthur Owens</i>
2:25– 3:25 pm	Privacy Compliance in the Crosshairs of Competing Policies (repeat) <i>Lamar Rosati</i>	Collision Course: The Intersection of Peer Review and the Discipline of Employed Physicians (repeat) <i>Adcock Danaher</i>	Life after Tuomey Healthcare: Practical Issues in Commercial Reasonableness and FMV (repeat) <i>Pursell Thompson</i>	

Practice Group Luncheon Presentations

February 9, 2011

PHYSICIAN ORGANIZATIONS

Sponsored by PYA

Roundtable Discussion of Recent Issues Affecting Physicians

Ann M. Bittinger, Esq.

(Moderator) Bittinger Law Firm, Jacksonville, FL

Rick L. Hindmand, Esq.

McDonald Hopkins LLC, Chicago, IL

Julie E. Kass, Esq.

OBER | KALER, Baltimore, MD

David T. Lewis, Esq.

Husch Blackwell Sanders LLP, Chattanooga, TN

Kim Harvey Looney, Esq.

Waller Lansden Dortch & Davis LLP, Nashville, TN

Sidney S. Welch, Esq.

Arnall Golden Gregory LLP, Atlanta, GA

The Practice Group leaders will lead luncheon attendees in an interactive discussion of the following topics of interest to physicians and physician entities:

- * Accountable Care Organizations
- * Screening Guidelines
- * Physician Fee Schedule
- * Voluntary Self Disclosure

February 10, 2011

ANTITRUST AND BUSINESS LAW AND GOVERNANCE (joint luncheon)

Legal and Practical Issues for New Business Models in a More Integrated Delivery System

Mark R. Thompson, Esq.

Seigfreid Bingham Levy Selzer & Gee PC, Kansas City, MO

Christine L. White, Esq.

Federal Trade Commission, Northeast Regional Office, New York, NY

This program will address Accountable Care Organizations and other business models being contemplated in response to reforms in healthcare delivery. CMS and FTC guidance will be discussed, along with legal and practical issues associated with forming these business affiliations. The prohibition against the corporate practice of medicine and fee splitting will also be addressed.

HEALTHCARE LIABILITY AND LITIGATION

Spoliation, Lies, and Magnetic Tape: Best Practices for Successfully Handling Documents in a Healthcare Investigation

William H. Jordan, Esq.

Alston & Bird LLP, Atlanta, GA

Michael E. Paulhus, Esq.

King & Spalding LLP, Atlanta, GA

Rebekah N. Plowman, Esq.

Nelson Mullins Riley & Scarborough LLP, Atlanta, GA

This presentation will offer a panel discussion from lawyers who regularly handle the problems that coalesce when electronic documents become central in a healthcare investigation or litigation matter. The presentation will provide tips and real-world experience on how to plan for and defend government investigations or healthcare litigation from an IT perspective. The presenters will also discuss the key steps a healthcare entity should take to prepare for the possibility that it will

be subpoenaed and have to account for how its IT systems operate and how documents are preserved.

LABOR AND EMPLOYMENT AND MEDICAL STAFF, CREDENTIALING, AND PEER REVIEW (joint luncheon)

Sponsored by MDReview

“Employed” versus “Independent” Models of Physician Integration: Common Challenges, Unique Solutions

Michael A. Cassidy, Esq.

Tucker Arensberg, Pittsburgh, PA

David B. Adcock, Esq.

Ogletree Deakins Nash Smoak & Stewart PC, Raleigh, NC

- * Gaining acceptance and adherence to evidence-based clinical protocols
- * Creating a team culture in which physicians view themselves as functioning within a system of care
- * Curbing unprofessional behavior and conduct
- * Addressing substandard clinical practices and patient safety issues
- * Dealing with issues of impairment or physical/mental health disabilities

In the employment context, these issues are managed through the employment relationship. In the “independent” context they are managed largely through the integrated entity’s credentialing and peer review processes. The speakers will compare and contrast the particular challenges and strengths of each of the two models.

February 11, 2011

HEALTH INFORMATION AND TECHNOLOGY AND HOSPITALS AND HEALTH SYSTEMS (joint luncheon)

Sponsored by Quorum Health Resources LLC

The Promise of E-Health: Patient Safety, Provider Liability and Health Information Technology

Sharona Hoffman

Professor of Law & Bioethics, Co-Director, Law-Medicine Center Case

Western Reserve University School of Law, Cleveland, OH

Jacob Reider, MD

Chief Medical Informatics Officer, Allscripts,

Albany, NY

Health information technology (HIT) will soon be a fixture in medical offices. This talk will analyze the benefits and risks of this technology and assess how it can both improve health outcomes and pose liability risks for the healthcare providers. The luncheon will also outline recent regulations that have been enacted to govern HIT, critique them, and suggest interventions that could enhance the quality, safety and security of health IT implementations.

Physicians and Physician Organizations Law Institute Hospitals and Health Systems Law Institute

Registration Form

3

To register: Remit payment and completed registration form by mail to the American Health Lawyers Association • P.O. Box 79340 • Baltimore, MD 21279-0340 or fax with credit card information to (202) 775-2482. To register by phone call (202) 833-1100, prompt #2. If any program is over-subscribed, only AHHA members will be placed on a waiting list. On-site registrations will be accepted on a space-available basis only.

Name: _____ Member ID #: _____

First Name for Badge (if different than above): _____

Title: _____

Organization: _____

Address: _____

City: _____ State: _____ ZIP+ 4: _____

Telephone: (____) _____ Fax: (____) _____

E-Mail: _____

Spouse/Guest _____

REGISTRATION INFORMATION

Please Register Me for the Physicians Program Only

Postmarked and paid by January 14, 2011:

Members: \$730 Non-Members: \$955

\$655 each additional member registering from same organization at same time on the same check or credit card payment

Postmarked and paid between January 15 and February 4, 2011:

Members: \$855 Non-Members: \$1080

\$780 each additional member registering from same organization at same time on the same check or credit card payment

Please Register Me for the Hospitals Program Only

Postmarked and paid by January 14, 2011:

Members: \$775 Non-Members: \$1000

\$700 each additional member registering from same organization at same time on the same check or credit card payment

Postmarked and paid between January 15 and February 4, 2011:

Members: \$900 Non-Members: \$1125

\$825 each additional member registering from same organization at same time on the same check or credit card payment

Please Register Me for Both the Physicians and the Hospitals Programs

Postmarked and paid by January 14, 2011:

Members: \$1130 Non-Members: \$1350

\$1060 each additional member registering from same organization at same time on the same check or credit card payment

Postmarked and paid between January 15 and February 4, 2011:

Members: \$1250 Non-Members: \$1470

\$1170 each additional member registering from same organization at same time on the same check or credit card payment

Printed Course Materials

All attendees will receive an electronic version of the full set of course materials for the program (more information on page 1). If you would like to purchase a binder, please indicate that below:

- I am registering for the Physicians Program and would like to purchase a binder for \$65
- I am registering for the Hospitals Program and would like to purchase a binder for \$65
- I am registering for the Physicians and Hospitals Program and would like to purchase both binders for \$130

Physicians and Physician Organizations Law Institute Hospitals and Health Systems Law Institute

I will require: Audio Visual Mobility Other assistance _____
 I have special dietary needs

REGISTRATION INFORMATION

Please fill in applicable amount: (Sorry! Registrations cannot be processed unless accompanied by payment.)

\$ _____ Registration Fee

\$ _____ Printed Course Materials \$65 Physicians binder \$65 Hospitals binder

Practice Group Luncheons (\$35 for sponsoring PG members; \$45 for non-members)

\$ _____ Physician Organizations – February 9

\$ _____ Antitrust *and* Business Law and Governance (Joint Luncheon)– February 10

– OR –

Healthcare Liability and Litigation – February 10

– OR –

Medical Staff, Credentialing, and Peer Review *and* Labor and Employment (Joint Luncheon) – February 10

\$ _____ Hospitals and Health Systems *and* Health Information and Technology (Joint Luncheon) – February 11

\$ _____ Spouse/Guest Fee (\$30)

\$ _____ Membership Dues (Date admitted to the bar/graduated: / /)

\$ _____ Total Enclosed

Check enclosed (Make checks payable to American Health Lawyers Association)

Bill my credit card:     Diners Club

Number: _____ Exp. Date: /

Name of Cardholder: _____

Signature of Cardholder: _____

ZIP Code of Cardholder's Billing Address _____

Please Note: Should your credit card total be miscalculated, AHLA will charge your credit card for the correct amount. To receive a refund of the registration fee paid minus \$125, cancellation notice must be received in writing by February 1, 2011. If you are registered for both programs and cancel your registration for one of the programs, you will not be charged the \$125 administration fee. Please see page 23 of this brochure for AHLA's full refund policy.

Fed ID No. 23-7333380

Program Information

Dates: February 9-11, 2011
Place: The Cosmopolitan of Las Vegas
3708 Las Vegas Blvd South
Las Vegas, NV 89109
Phone: (702) 698-7100
Reservations: (877) 551-7772

Physicians Program Only

Postmarked and paid by January 14, 2011

\$730 For the first Member
\$655 For each additional Member
\$955 Non-Members

Postmarked and paid between January 15 and February 5, 2011*

\$855 For the first Member
\$780 For each additional Member
\$1080 Non-Members

Hospitals Program Only

Postmarked and paid by January 14, 2011

\$775 For the first Member
\$700 For each additional Member
\$1000 Non-Members

Postmarked and paid between January 15 and February 5, 2011*

\$900 For the first Member
\$825 For each additional Member
\$1125 Non-Members

Physicians and Hospitals Programs Dual Registration

Postmarked and paid by January 14, 2011

\$1130 For the first Member
\$1060 For each additional Member
\$1350 Non-Members

Postmarked and paid between January 15 and February 5, 2011*

\$1250 For the first Member
\$1170 For each additional Member
\$1470 Non-Members

* Registration fees increase \$100 after this date.

If you have indicated an incorrect amount due to errors in addition or not being eligible for a specific rate, AHLA will charge the correct amount to the credit card you have supplied.

Discounted Registration Fees: In-house counsel, government employees, academicians, solo practitioners and students: please call (202) 833-1100, prompt #2 for special discounted registration fees.

Spouse/Guest Fee: For an additional \$30 spouses and adult guests can register to attend the reception(s) and the breakfast(s). Please sign up on the registration form on pages 21-22.

Continuing Education: Participants will be given continuing education forms at the program. Forms must be completed and returned to AHLA staff to receive credit. AHLA is an approved sponsor of continuing legal education credits in most states. The **Physicians** seminar will be worth approximately 14.5 continuing education credits (including 1.0 ethics credit) based on a 60-minute hour and 17.4 credits (including 1.2 ethics credits) based on a 50-minute hour. The **Hospitals** seminar will be worth approximately 12.5 continuing education credits (including 1.0 ethics credits) based on a 60-minute hour and 15.0 credits (including 1.2 ethics credits) based on a 50-minute hour.

AHLA 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 addressed to the National Registry of CPE Sponsors, 150 Fourth Avenue North, Suite 700, Nashville, TN 37219-2417. Web site: www.nasba.org. The Physicians program will be worth approximately 17.0 CPE credits and Hospitals program will be worth approximately 15.0 CPE credits.

There are no prerequisites or advanced preparations required to register for this group live program. Those seeking accounting credits should be familiar with the basic concepts of law and terminology associated with representing physicians and hospitals in order to obtain the full educational benefit of these programs. Sessions are intermediate to advanced unless otherwise noted.

Membership: Dues are \$185 for those admitted to the Bar/graduated from college within the last four years; \$300 for those admitted/graduated more than four but less than eight years ago; and \$345 for those admitted/graduated eight or more years ago. Dues are \$155 (or \$75 for electronic benefits) for government employees and full-time academicians; and \$15 for full-time law school students to receive benefits electronically. Include the applicable membership fee with your registration form and take advantage of the program registration fee for members.

Cancellations/Substitutions: Cancellations must be received in writing *no later than February 1, 2011*. Refunds will not be issued for cancellations received after this date. Registration fees, less a \$125 administrative fee, will be refunded approximately 3-4 weeks following the program. If you wish to send a substitute or need more information regarding refund, complaint and program cancellation policies, please call the Member Service Center at (202) 833-1100, prompt #5. Please note that registration fees are based on the AHLA membership status of the individual who actually attends the program.

Special Needs: If you have needs requiring special assistance or accommodations, including special dietary needs, or have questions about accessibility issues at the program, contact our special needs coordinator, Valerie Eshleman at (202) 833-0784 or veshleman@healthlawyers.org.

Travel: Association Travel Concepts (ATC) has negotiated discounts with United, American, Avis and Hertz Rental Car to bring you special airfares and car rental rates lower than those available to the public. Discounts of 4-15% apply to travel on February 1, 2011. Some restrictions may apply and a service fee may apply. ATC will also search for the lowest available fare on any airline.

ASSOCIATION TRAVEL CONCEPTS

1-800-458-9383

email: reservations@atcmeetings.com

www.atcmeetings.com

(follow the Member Travel links)

Fax: (858) 362-3153

ATC is available for reservations from 8:30 am until 8:00 pm Eastern, Monday through Friday.



1620 Eye Street, NW
6th Floor
Washington, DC 20006-4010

Physicians and Physician
Organizations Law Institute
February 9–10, 2011

Hospitals and Health Systems
Law Institute
February 10–11, 2011

The Cosmopolitan of Las Vegas
Las Vegas, NV

Register by January 14 and save!
For updates and to register, go to
www.healthlawyers.org/programs

Presorted
First-Class Mail
U.S. Postage Paid
Suburban, MD
Permit No. 4841