



Physicians and Physician Organizations Law Institute February 8-9, 2012

Hospitals and Health Systems Law Institute February 9-10, 2012

Loews Portofino Bay Hotel • Orlando, FL

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
James R. Dutro, Esq.
Lisa J. Gilden, Esq.
Louise M. Joy, Esq.
Robert A. Wade, Esq.
Cynthia F. Wisner, Esq.

**Information inside on the Mediation
Trainings February 6-7, 2012!**



HORNE

CPAs & Business Advisors

HORNE LLP has provided sponsorship
in support of both programs.

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

Make plans to join us in Orlando!

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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 15-18, 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 Orlando at the beautiful, Loews Portofino Bay at Universal Orlando 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:

- * Affiliated Monitors
- * Carnahan Group – *sponsor of the eProgram*
- * DGA Partners
- * HealthCare Appraisers
- * HORNE LLP – *sponsor of the Physicians and Hospitals Law Institutes and Program App*
- * MaxWorth Consulting Group LLC
- * Medical Protective
- * MediTract
- * MDReview
- * The Pinnacle Group
- * PYA – *sponsor of the Physician Organizations Practice Group Luncheon*
- * QHR Intensive Resources
- * Sullivan Cotter and Associates, Inc – *Sponsor of the BLG, HHS, and In-House Counsel Joint Practice Group Luncheon*
- * Towers Watson

HOTEL RESERVATIONS

Hotel accommodations are not included in the registration fee. AHLA has reserved a block of rooms at Loews Portofino Bay Hotel at a discounted rate of \$210 per night. To make reservations, please call (888) 430-4999. **The room block expires January 16, 2012.** 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 App



Put all the conference details in the palm of your hand with AHLA mobile phone app. Attendees at the Physicians and Hospitals Law Institutes will be able to access information about the programs on their mobile phones. The app, 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 app and the password necessary to access the information will be sent to attendees shortly before the programs.

Program Agenda

Wednesday, February 8, 2012

7:00 am-5:15 pm

Registration and Information

GENERAL SESSION

8:00-8:15 am

Welcome and Introduction

Charlene L. McGinty, Physicians Program Chair
Dinetia M. Newman, AHLA President-Elect

8:15-9:45 am

Keynote Address – OIG Enforcement Initiatives with Respect to Physicians

Gregory Demske

CONCURRENT SESSIONS

10:00-11:00 am

A. The Fundamentals of Representing Physicians – Life Cycle of a Physician Practice Association (not repeated)

Michael F. Schaff

- * Who is your client?
- * Who can employ a physician?
- * Basic issues in physician employment contracts
- * Becoming a shareholder in a medical practice
- * Retirement/sale
- * Post-termination restrictions

B. Current Antitrust Issues Relating to Physician Mergers, Acquisitions and Combinations

David A. Ettinger

- * How to analyze the antitrust risks from a physician combination.
- * Key antitrust issues during the transaction process.
- * Unique issues raised by physician specialty transactions.
- * Defending state and federal antitrust inquiries.
- * Integration issues: When will a merger be viewed as collusion?
- * Special antitrust considerations applicable to ACO's

C. Physician Employment Losses: Alarming Trend or Misunderstood Performance Metric

Douglas K. Anning
Jon-David Deeson

- * The current trend, issues and implications of financial performance of hospital-owned practices
- * Use of case study to illustrate how organizational decisions regarding reporting profit and loss for hospital-owned practices impact physician employment financial performance
- * Legal and enterprise risk management implications including Stark, Anti-Kickback and Tax-Exempt status for 501(c)(3) organizations

- * What observations can be made about “best practice standards” for better performing hospital-owned groups
- * What matters most in terms of advising hospital executives and their boards specific to physician employment losses

11:15 am-12:15 pm

D. Compliance in the Eye of the Independent Monitor (not repeated)

Vincent L. DiCianni

- * The practitioner's dilemma: To agree to an “independent monitor” program
- * The independent monitor's view
- * Best practice/compliance programs in action
- * The benefits of independent monitoring
- * The downside to independent monitors
- * Case studies

E. Selling Your Practice – Perspectives from the Investment Banker and the Private Equity Firm

Ralph W. Davis

Cynthia Y. Reisz

R. Riley Sweat

F. The Brave New World of HIPAA Compliance

Leon Rodriquez

Sarah E. Swank

12:15-1:35 pm

Lunch on your own or attend Antitrust or Labor and Employment Practice Group Luncheon

(additional fee; limited attendance; pre-registration required; see page 19 for descriptions and pages 21-22 to register)

CONCURRENT SESSIONS

1:45-2:45 pm

G. Special Real Estate Issues for the Practice Management Real Estate Tenant and Sublandlord

(not repeated)

Gregory G. Gosfield

- * Economic issues that drive the negotiating posture of the landlord and its mortgagee
- * Differences between a lease and other contracts
- * Regulatory issues affecting the landlord and tenant in a health facility lease
- * Health facility issues in a real estate lease
- * Key lease provisions for the practice group with illustrations of negotiating positions and compromises

Program Agenda

H. Medicare Audit and Appeals Workshop: Practical Advice on Preparing for and Responding to RAC, ZPIC and MAC Audits

*Anna M. Grizzle
Scott McBride*

- * Recent trends in contractor audits, including RACs, ZPICs, and PSCs
- * Impact of such audits on providers
- * Preparing for specific types of contractor audits
- * Key steps and strategies to consider in responding to Medicare contractors
- * Tiered appeals process, efficient allocation of time and money, and practical advice on a successful appeals strategy

J. Medical Group Employment and Physician Peer Review: Oil and Water?

Steven V. Schnier

- * Preparing agreements that address both the Medical Group's need for fair and efficient employment decisions and the Physician's expectation of collegial peer review
- * What type of review hearing or meeting does the Medical Group provide after the "without cause" termination of the Physician's employment?
- * How to prepare Medical Group-Physician agreements that do not contain three, four, or five inconsistent and probably mutually exclusive review opportunities
- * Are Medical Group employment decisions reportable to the National Practitioner Data Bank and/or the State licensing agency and, if so, what are the Medical Group peer review implications
- * How does the Physician exercise an "opportunity to cure" the unstated reason that will soon lead to the "without cause" termination?
- * Can an agreement contain a "without cause" termination provision and also embody the peer review fairness that the modern Physician expects and deserves?

3:00-4:00 pm

K. Physician Integration and Long Term Care (not repeated)

James F. Miles

- * Types of legal structures available
- * Compliance with Stark, Anti-Kickback and the Corporate Practice of Medicine Doctrine
- * Medicaid reimbursement considerations
- * Relationship to Medicare, Medicaid and commercial pay ACO initiatives

L. The Latest and Greatest about ACOs and Other Physician Integration Models

*Julie E. Kass
David T. Lewis*

- * New regulations, in particular any changes from the proposed regulations
- * Antitrust issues and concerns
- * Fraud and Abuse Waivers – what they look like in the final regulations and should there be anything more or different
- * Tips for formation
- * Other integration models
 - ♦ Patient centered medical homes
 - ♦ Hospital pay for quality results

B. Current Antitrust Issues Relating to Physician Mergers, Acquisitions and Combinations (repeat)

4:15-5:15 pm

C. Physician Employment Losses: Alarming Trend or Misunderstood Performance Metric (repeat)

E. Selling Your Practice – Perspectives from the Investment Banker and the Private Equity Firm (repeat)

L. The Latest and Greatest about ACOs and Other Physician Integration Models (repeat)

5:15-6:15 pm

Reception sponsored by HORNE LLP

(attendees, faculty and registered spouses and guests welcome)

6:15-7:15 pm

Celebrating Diversity and Inclusiveness Reception

(attendees and faculty of both programs are welcome)
This event is sponsored by AHLA's Advisory Council on Diversity. Help us celebrate diversity among our membership and leadership. Come with existing friends and leave with new friends. Please indicate on the registration form if you plan to attend.

Program Agenda

Thursday, February 9, 2012

7:00 am-5:15 pm

Registration and Information

7:00-8:00 am

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

GENERAL SESSION

8:00-8:15 am

Welcome and Introduction

Dinetia Newman, 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

10:15-11:15 am

M. Hospital Physician Affiliations – The Good, the Bad and the Ugly

Almeta E. Cooper
Anthea R. Daniels

- * Fair market valuations/purchase price issues
- * Allocation of purchase price
- * Covenants not to compete
- * Purchasing ancillaries/and loss of revenue
- * Adjusting revenue and guaranteeing compensation

N. Physician-Hospital Syndication Unwind Exploratory – A Primer on the Gross Anatomy of a Complicated Surgery

Marc D. Goldstone
Roger D. Strode, Jr.

- * Examination of legal and business reasons for unwind of the syndication
- * Can you unwind the syndication (easily or not)
- * Valuation, payment of consideration and referral issues
- * Securities law issues
- * Collateral issues

O. The Perils and Pitfalls of Careful Drafting: How Stark Has Changed the Risk Calculus

Robert G. Homchick
Kim H. Looney

- * The pros and cons of direct versus indirect financial relationships
- * Complexity versus Practicality. When should you sacrifice precision for ease of implementation?
- * Evergreen clauses? Are the 6 month holdover provision and temporary noncompliance exception enough to save the arrangement?
- * Late fees and other penalties – good idea or bad idea?
- * Non-monetary compensation exception and other problems, or “if you can control it don’t measure it”

P. On-Call Compensation: Market Trends, FMV and Commercial Reasonableness, and Governance Oversight

Kimberly A. Mobley
Robert A. Wade

- * Market trends related to physician on-call pay
- * Key compliance issues with regard to physician on-call pay
- * Tools and approaches for developing a regulatory compliant on-call pay approach
- * Fair market value/commercial reasonableness considerations
- * OIG Advisory Opinions and Cases Involving Call Compensation

Q. Social Media

Maria Greco Danaher
Kimberly W. Daniel

11:25 am-12:25 pm

R. Reviewing Valuation Reports: An Advanced Course for Healthcare Attorneys (not repeated)

Gregory D. Anderson
John R. Holdenried

- * Legal and ethical responsibilities for review of valuator’s work product
- * Appraisal sanctioning bodies and reporting standards
- * Valuator’s and attorney’s perspective and tips
- * Practical advice for reviewing reports
- * Hypothetical valuation report review

S. HIPAA Breach Notification – Case Studies on What to Do and When to Report (not repeated)

Elizabeth Callahan-Morris
Colleen M. McClorey

Program Agenda

T. Quality Driven Healthcare: A Medical Staff's Increasing Role Post Healthcare Reform

Christopher B. Anderson
Walter Morrissey

- * Major regulators and reimbursement developments driving the shift to valuing quality of care
- * Mechanisms to engage and compensate members of a hospital's medical staff for the design and implementation of system wide quality initiatives including the development of quality metric standards and utilization of evidence-based medicine
- * Development and use of credentialing and other peer review mechanisms, including joint credentialing and quality committees, to standardize and enhance the provision of care across a health system, an ACO or other loosely affiliated entities
- * Considerations regarding developments of structures designed to preserve traditional peer review immunities and evidentiary privileges

U. Special Legal Ethics Concerns for the Healthcare Lawyer

Harry M. Brown

- * Who is the client - particularly when you are "deal" counsel?
- * Long-distance lawyering in a jurisdiction that is not home.
- * What if you become a witness or a target and what does the client's "advice of counsel" defense do to you?
- * The lawyer as corporate director - duties, responsibilities and pitfalls

V. Drinking the Consolidation Kool-Aid

Daniel M. Grauman
John R. Washlick

- * Key hospital industry, legal and regulatory and operating trends in an unbiased way, with no ax to grind
- * What will be required for success in the future, the economics of size and scale in the healthcare provider segment, and the challenges of integration
- * How to honestly assess your situation, and what hospital leadership should be monitoring
- * Strategic hospital-hospital and hospital-physician collaboration models – organizational structures and operational pros and cons,
- * Key legal and regulatory considerations for these collaboration models
- * Determine if you really need to partner, and in what way

12:25-1:35 pm

Lunch on your own or attend the Physician Organizations, sponsored by PYA, or Healthcare Liability and Litigation/Health Information Technology (joint luncheon) Practice Group Luncheon

(additional fee; limited attendance; pre-registration required; see page 19 for descriptions and pages 21-22 to register)

CONCURRENT SESSIONS

1:45-2:45 pm

W. Regulatory and Payment Issues and the Patient Centered Medical Home (not repeated)

John E. Wyand

- * Joint principles of the patient centered medical home
- * Legal issues associated with a patient-centered medical home model
- * Payment issues associated with a patient-centered medical home model
- * Hybrid payment models

X. Government Investigations, Settlements and False Claims Act Update (not repeated)

Gary W. Eiland

- * Recent amendments to the federal False Claims Act and other compliance and enforcement authorities emanating from the healthcare reform legislation
- * Recent government investigations, enforcement actions, and False Claims Act settlements including Stark Law, Kickback, and other initiatives and settlements
- * Other current regulatory initiatives and hot-button compliance issues
- * Practical strategies for assessing internal compliance, minimizing False Claims Act risks and implications for healthcare organizations

F. The Brave New World of HIPAA Compliance (repeat)

H. Medicare Audit and Appeals Workshop: Practical Advice on Preparing for and Responding to RAC, ZPIC and MAC Audits (repeat)

M. Hospital Physician Affiliations – The Good, the Bad and the Ugly (repeat)

Program Agenda

3:00-4:00 pm

Y. Fundamentals and Practicalities of Identifying and Returning Overpayments (not repeated)

Laura K. Martin

Lisa M. Ohrin

- * The types of “overpayments” in physician practices and hospital settings, as well as how they relate to each other
- * Determining the amount of the overpayment
- * The impact of the “reverse” False Claims Act and the Affordable Care Act on auditing and refund practices
- * Case studies in auditing, including the determination of the type and scope of the audit
- * Practical tips for refunding overpayments

J. Medical Group Employment and Physician Peer Review: Oil and Water? (repeat)

U. Special Legal Ethics Concerns for the Healthcare Lawyer (repeat)

N. Physician-Hospital Syndication Unwind Exploratory – A Primer on the Gross Anatomy of a Complicated Surgery (repeat)

4:15-5:15 pm

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O. The Perils and Pitfalls of Careful Drafting: How Stark Has Changed the Risk Calculus (repeat)

P. On-Call Compensation: Market Trends, FMV and Commercial Reasonableness, and Governance Oversight (repeat)

V. Drinking the Consolidation Kool-Aid (repeat)

T. Quality Driven Healthcare: A Medical Staff’s Increasing Role Post Healthcare Reform (repeat)

Adjournment

Physicians Program Faculty

PLANNING COMMITTEE

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Bala Cynwyd, PA

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Farmington Hills, MI

John E. Wyand, Esq.
Squire Sanders & Dempsey LLP
Washington, DC

Program Agenda

Thursday, February 9, 2012

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A. Hospital Physician Affiliations – The Good, the Bad and the Ugly

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- * Fair market valuations/purchase price issues
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- * Adjusting revenue and guaranteeing compensation

B. OIG Enforcement Initiatives Relating to Hospitals

Gregory Demske
S. Craig Holden

- * Recent False Claim Act cases
 - ♦ Stark/Kickback cases
 - ♦ Short stay cases
- * OIG Audit initiatives
- * OIG Self-Disclosure Protocol
- * Mandatory repayment rules

C. The Perils and Pitfalls of Careful Drafting: How Stark Has Changed the Risk Calculus

Robert G. Homchick
Kim H. Looney

- * The pros and cons of direct versus indirect financial relationships
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E. Social Media

Maria Greco Danaher
Kimberly W. Daniel

11:25 am-12:25 pm

F. The Value-Based Purchasing Program – A Beginning of a New Era in Medicare Payments

Daniel J. Hettich

- * Key elements of Medicare’s VBP program including an analysis of the program’s quality measures, performance standards and scoring and payment methodologies
- * The new and controversial, outcome and efficiency domains considered for the 2014 VBP program
- * The policy implications of the VBP program, areas of controversy, and practical considerations for hospitals

G. Reviewing Valuation Reports: An Advanced Course for Healthcare Attorneys

Gregory D. Anderson
John R. Holdenried

- * Legal and ethical responsibilities for review of valuator’s work product
- * Appraisal sanctioning bodies and reporting standards
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- * Hypothetical valuation report review

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Colleen M. McClorey

K. Special Legal Ethics Concerns for the Healthcare Lawyer

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L. Drinking the Consolidation Kool-Aid

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Scott McBride

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- * Impact of such audits on providers
- * Preparing for specific types of contractor audits
- * Key steps and strategies to consider in responding to Medicare contractors
- * Tiered appeals process, efficient allocation of time and money, and practical advice on a successful appeals strategy

N. The Brave New World of HIPAA Compliance

(not repeated)

Leon Rodriguez
Sarah E. Swank

O. National Practitioner Data Bank

Timothy B. Adelman
Cynthia Grubbs

- * Whether a report to the National Practitioner Data Bank is required in grey areas such as:
 - ◆ Informal agreement by practitioner not to exercise privileges during investigation
 - ◆ Requirement for second opinion before surgery
 - ◆ Settlement of a claim based on vicarious liability for non-defendant physician
 - ◆ Corrective action based solely on action taken at another hospital
 - ◆ Automatic termination of privileges resulting from termination of employment contract
 - ◆ Resignation during a Focused Professional Practice Evaluation (FPPE)
 - ◆ Resignation while reappointment application is pending following adverse recommendation
 - ◆ Suspension/Termination for criminal conduct outside of the hospital
 - ◆ Corrective action based on providing false information
- * Bylaw provisions addressing reporting issues

Program Agenda

P. Government Investigations, Settlements and False Claims Act Update

Gary W. Eiland

- * Recent amendments to the federal False Claims Act and other compliance and enforcement authorities emanating from the healthcare reform legislation
- * Recent government investigations, enforcement actions, and False Claims Act settlements including Stark Law, Kick-back, and other initiatives and settlements
- * Other current regulatory initiatives and hot-button compliance issues
- * Practical strategies for assessing internal compliance, minimizing False Claims Act risks and implications for healthcare organizations

A. Hospital Physician Affiliations – The Good, the Bad and the Ugly (repeat)

3:00-4:00 pm

Q. Tackling Medical Necessity and Quality Issues Prior to DOJ, OIG and CMS Intervention

Kirk Ogrosky

- * How and when to take matters to the Chief of Staff, Medical Executive Committee, Compliance and Legal Counsel
- * How to effectively utilize the peer review process
- * How recent False Claims Act reforms impact the government's ability to pursue cases.
- * How to address issues without alienating your practitioners
- * How DOJ, OIG and CMS contractors are focusing on quality and medical necessity issues to recover funds

R. Conversion is Good for the Soul: Transforming Free-Standing Facilities to Hospital Outpatient Departments – A User's Guide

Hal McCard

Andrew J. Murray

- * Driving forces behind transactions and typical acquisition targets
- * Strategic thinking behind acquisitions and “lessons learned” from completed transactions
- * Challenges of acquiring facilities from physicians – from valuation disputes to disagreement among partners
- * Structuring and negotiating the transaction
- * State licensing and Medicare provider-based issues (including CMS' resistance to conversion of ASCs)
- * Potential antitrust issues to consider in the wake of increased enforcement efforts by FTC and DOJ

S. Fundamentals and Practicalities of Identifying and Returning Overpayments

Laura K. Martin

Lisa M. Ohrin

- * The types of “overpayments” in physician practices and hospital settings, as well as how they relate to each other

- * Determining the amount of the overpayment
- * The impact of the “reverse” False Claims Act and the Affordable Care Act on auditing and refund practices
- * Case studies in auditing, including the determination of the type and scope of the audit
- * Practical tips for refunding overpayments

T. Medical Group Employment and Physician Peer Review: Oil and Water

Steven V. Schnier

- * Preparing agreements that address both the Medical Group's need for fair and efficient employment decisions and the Physician's expectation of collegial peer review
- * What type of review hearing or meeting does the Medical Group provide after the “without cause” termination of the Physician's employment?
- * How to prepare Medical Group-Physician agreements that do not contain three, four, or five inconsistent and probably mutually exclusive review opportunities
- * Are Medical Group employment decisions reportable to the National Practitioner Data Bank and/or the State licensing agency and, if so, what are the Medical Group peer review implications
- * How does the Physician exercise an “opportunity to cure” the unstated reason that will soon lead to the “without cause” termination?
- * Can an agreement contain a “without cause” termination provision and also embody the peer review fairness that the modern Physician expects and deserves?

K. Special Legal Ethics: Concerns for the Healthcare Lawyer (repeat)

4:15-5:15 pm

U. Best Practices for Overseeing an Internal Audit

Karie Rego

- * When and why to do an audit
- * Whether to use the attorney-client privilege
- * How to work effectively with internal auditors
- * How to find and choose outside assistance
- * How to construct an audit without creating additional risk
- * How to best report out audit results to the system and board

C. The Perils and Pitfalls of Careful Drafting: How Stark Has Changed the Risk Calculus (repeat)

D. On-Call Compensation: Market Trends, FMV and Commercial Reasonable-ness, and Governance Oversight (repeat)

E. Social Media (repeat)

Program Agenda

H. Quality Driven Healthcare: A Medical Staff's Increasing Role Post Healthcare Reform (repeat)

L. Drinking the Consolidation Kool-Aid (repeat)

5:15-6:30 pm

Reception sponsored by HORNE LLP

(attendees, faculty and registered spouses and guests are welcome to attend)

7:00 pm

Young Professionals Networking Dinners

The Young Professionals Council would like to extend a special invitation to young professionals for dinner. The Young Professionals Council has made reservations at several restaurants in the area so that individuals can go to dinner as a group. Dinner will be on your own dime, but the time spent with your fellow young professionals will be priceless! Sign-up sheets for the restaurants will be available at the AHLA Resource Center table.

Friday, February 10, 2012

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)

7:30-8:30 am

Fair Market Value Affinity Group Breakfast

(attendees and faculty welcome; please sign up on the registration form if you would like to attend; space is limited)
This session will be for those who are interested in discussing regulatory and case law developments that reflect the importance of fair market value (FMV) in healthcare transactions, from perspectives on the government's view of FMV, to the fallout over the Bradford and Tuomey cases, to Office of Inspector General opinions that underscore that an arrangement's lack of commercial reasonableness may not pass muster (regardless of FMV), and on to final regulations for accountable care organizations. The session will include a brief presentation of the year in review and the look ahead for FMV in healthcare transactions, followed by an opportunity for questions and discussion by attendees of the session and government view.

CONCURRENT SESSIONS

8:30-9:30 am

V. The iPhone as a Medical Device (not repeated)

Melissa L. Markey

- * When is a mobile app a medical device?
- * What are the concerns related to mobile apps which are used in healthcare?
- * What privacy and security issues must be considered in deciding whether to support a medical mobile app?
- * The docs want the app – how can the hospital respond?

W. Adapting Employed Physician Compensation Models on the Road to Accountable Care

Catherine T. Dunlay

Robert A. Gerberry

- * Emerging physician compensation models that include reimbursement methodologies for meeting pay for performance standards, accountable care goals, value-based purchasing outcomes, achievement of quality metrics and delivery of coordinated care in accordance with the new paradigm of healthcare
- * Various pilot projects undertaken by Summa including a review of the shared savings outcomes from first year of operations of the Summa Accountable Care Organization and other pilot projects undertaken with its payer partner, SummaCare, to reward physicians for providing value-based care through incorporation of quality metrics and population health service measures
- * New payment metrics to reward physicians for attaining the goals of accountable care
- * Compensation models that best fit with the strategic goals and mission of medical groups and foundations, community hospitals, academic medical centers and integrated delivery systems
- * Governance structures and administrative processes needed to establish and administer the new compensation models and the strategies necessary to obtain organizational buy-in for implementing physician compensation plans that may produce less revenue during the transition from volume to value-based payments
- * Effects of tax-exemption criteria, CMP limitations and Stark law on design of physician compensation models and achieving the goals of increased integration of care
- * The evolving legal standards being developed by the OIG, CMS and IRS to allow for greater flexibility in compensating physicians for providing high quality care at a lower cost in a more coordinated fashion.
- * The advantages and disadvantages of various physician compensation plans and the process an organization should undertake to choose a plan that best aligns with its strategic vision

Program Agenda

X. Community Needs Assessment

Douglas K. Anning

Julie A. Trocchio

P. Government Investigations, Settlements and False Claims Act Update (repeat)

9:40-10:40 am

Y. COPs, POCs, and SIAs: Update on Medicare Conditions of Participation, Government Enforcement and Agreements

Joseph Geraci

Louise M. Joy

- * Revisions to Hospital Conditions of Participation (COPs)
- * Medicare Termination Actions
- * Government Enforcement Issues
 - ♦ Hospital Response and Plans of Correction (POCs)
 - ♦ Immediate Jeopardy and Impact on Value-Based Purchasing (VBP)
 - ♦ Increased Use of Systems Improvement Agreements (SIAs)

Z. Co-Management Arrangements: Getting Beyond a Medical Director Arrangement to a True Accountable Care Steppingstone

Priya J. Bathija

Steven A. Eisenberg

- * Description of a co-management arrangement, and why it is different than a medical director agreement or gainsharing arrangement
- * Review compliance concerns around co-management arrangements
- * How co-management can be a steppingstone to accountable care
- * Combining co-management and gainsharing
- * Case example: Co-Management Arrangement Involving Surgical Services, with multiple physician groups who are otherwise competitors and including primary negotiation points

O. National Practitioner Data Bank (repeat)

U. Best Practices for Overseeing an Internal Audit (repeat)

10:50-11:50 am

B. OIG Enforcement Initiatives Relating to Hospitals (repeat)

F. The Value-Based Purchasing Program – A Beginning of a New Era in Medicare Payments (repeat)

G. Reviewing Valuation Reports: An Advanced Course for Healthcare Attorneys (repeat)

R. Conversion is Good for the Soul: Transforming Free-Standing Facilities to Hospital Outpatient Departments – A User's Guide (repeat)

11:50 am-1:05 pm

Lunch on your own or attend:

Medical Staff, Credentialing, and Peer Review or Business Law and Governance/Hospitals and Health Systems/In-House Counsel (joint luncheon), sponsored by Sullivan Cotter and Associates, Inc., Practice Group Luncheon

(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

J. HIPAA Breach Notification – Case Studies on What to Do and When to Report (repeat)

S. Fundamentals and Practicalities of Identifying and Returning Overpayments (repeat)

X. Community Needs Assessment (repeat)

Y. COPs, POCs, and SIAs: Update on Medicare Conditions of Participation, Government Enforcement & Agreements (repeat)

2:25-3:25 pm

Q. Tackling Medical Necessity and Quality Issues Prior to DOJ, OIG and CMS Intervention (repeat)

W. Adapting Employed Physician Compensation Models on the Road to Accountable Care (repeat)

Z. Co-Management Arrangements: Getting Beyond a Medical Director Arrangement to a True Accountable Care Steppingstone (repeat)

Adjournment

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Programs at a Glance

Wednesday, February 8, 2012

7:00 am-5:15 pm	Registration and Information		
8:00-9:45 am	<p align="center">General Session 8:00-8:15 am Welcome and Introduction <i>McGinty, Newman</i></p> <p align="center">8:15-9:45 am Keynote Address – OIG Enforcement Initiatives with Respect to Physicians <i>Demske</i></p>		
10:00-11:00 am	<p>The Fundamentals of Representing Physicians – Life Cycle of a Physician Practice Association (not repeated)</p> <p align="center"><i>Schaff</i></p>	<p>Current Antitrust Issues Relating to Physician Mergers, Acquisitions and Combinations</p> <p align="center"><i>Ettinger</i></p>	<p>Physician Employment Losses: Alarming Trend or Misunderstood Performance Metric</p> <p align="center"><i>Anning Deeson</i></p>
11:15 am-12:15 pm	<p>Compliance in the Eye of the Independent Monitor (not repeated)</p> <p align="center"><i>DiCianni</i></p>	<p>Selling Your Practice – Perspectives from the Investment Banker and the Private Equity Firm</p> <p align="center"><i>Davis Reisz Sweat</i></p>	<p>The Brave New World of HIPAA Compliance</p> <p align="center"><i>Rodriguez Swank</i></p>
12:15-1:35 pm	<p align="center">Lunch on your own or attend: Antitrust or Labor and Employment Practice Group Luncheon (additional fee; limited attendance; pre-registration required; see page 19 for descriptions and pages 21-22 to register)</p>		
1:45-2:45 pm	<p>Special Real Estate Issues for the Practice Management Real Estate Tenant and Sublandlord (not repeated)</p> <p align="center"><i>Gosfield</i></p>	<p>Medicare Audit and Appeals Workshop: Practical Advice on Preparing for and Responding to RAC, ZPIC and MAC Audits</p> <p align="center"><i>Grizzle McBride</i></p>	<p>Medical Group Employment and Physician Peer Review: Oil and Water?</p> <p align="center"><i>Schnier</i></p>
3:00-4:00 pm	<p>Physician Integration and Long Term Care (not repeated)</p> <p align="center"><i>Miles</i></p>	<p>The Latest and Greatest about ACOs and Other Physician Integration Models</p> <p align="center"><i>Kass Lewis</i></p>	<p>Current Antitrust Issues Relating to Physician Mergers, Acquisitions and Combinations (repeat)</p> <p align="center"><i>Ettinger</i></p>
4:15-5:15 pm	<p>The Latest and Greatest about ACOs and Other Physician Intergration Models (repeat)</p> <p align="center"><i>Kass Lewis</i></p>	<p>Physician Employment Losses: Alarming Trend or Misunderstood Performance Metric (repeat)</p> <p align="center"><i>Anning Deeson</i></p>	<p>Selling Your Practice – Perspectives from the Investment Banker and the Private Equity Firm (repeat)</p> <p align="center"><i>Davis Reisz Sweat</i></p>
5:15-6:15 pm	<p align="center">Reception sponsored by HORNE LLP (attendees, faculty and registered spouses and guests welcome)</p>		
6:15-7:15 pm	<p align="center">Celebrating Diversity and Inclusiveness Reception (attendees and faculty of both programs welcome)</p>		

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

Programs at a Glance

Thursday, February 9, 2012

Please Note: The session 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.

7:00 am-5:15 pm	Registration and Information					
7:00-8:00 am	Continental Breakfast sponsored by HORNE LLP (attendees, faculty and registered spouses and guests welcome)					
8:00-9:45 am	GENERAL SESSION 8:00-8:15 am Welcome and Introduction <i>Adelman, Newman</i> 8:15-9:45 am Top Legal Developments for Hospitals and Physicians <i>Schroder, Wisner</i>					
10:15-11:15 am	(Physicians Only) Physician-Hospital Syndication Unwind Exploratory – A Primer on the Gross Anatomy of a Complicated Surgery <i>Goldstone Strode</i>	(Hospitals Only) OIG Enforcement Initiatives Relating to Hospitals <i>Demske Holden</i>	Hospital Physician Affiliations – The Good, the Bad and the Ugly <i>Cooper Daniels</i>	The Perils and Pitfalls of Careful Drafting: How Stark Has Changed the Risk Calculus <i>Homchick Looney</i>	On-Call Compensation: Market Trends, FMV and Commercial Reasonableness, and Governance Oversight <i>Mobley Wade</i>	Social Media <i>Danaher Daniel</i>
11:25 am-12:25 pm	(Hospitals Only) The Value-Based Purchasing Program – A Beginning of a New Era in Medicare Payments <i>Hettich</i>	Reviewing Valuation Reports: An Advanced Course for Healthcare Attorneys <i>Anderson Holdenreid</i>	Quality Driven Healthcare: A Medical Staff’s Increasing Role Post Healthcare Reform <i>Anderson Morrissey</i>	HIPAA Breach Notification – Case Studies on What to Do and When to Report <i>Callahan-Morris McClorey</i>	Special Legal Ethics Concerns for the Healthcare Lawyer <i>Brown</i>	Drinking the Consolidation Kool-Aid <i>Grauman Washlick</i>
12:25-1:35 pm	Lunch on your own or attend: Physician Organizations, sponsored by PYA, or Healthcare Liability and Litigation/ Health Information Technology (joint luncheon) Practice Group Luncheon (additional fee; limited attendance; pre-registration required; see page 19 for descriptions and pages 21-22 to register)					
1:45-2:45 pm	(Physicians Only) Regulatory and Payment Issues and the Patient Centered Medical Home (not repeated) <i>Wyand</i>	(Hospitals Only) National Practitioner Data Bank <i>T. Adelman Grubbs</i>	Hospital Physician Affiliations – The Good, the Bad and the Ugly (repeat) <i>Cooper Daniels</i>	Medicare Audit and Appeals Workshop: Practical Advice on Preparing for and Responding to RAC, ZPIC and MAC Audits <i>Grizzle McBride</i>	The Brave New World of HIPAA Compliance <i>Rodriguez Swank</i>	Government Investigations, Settlements and False Claims Act Update <i>Eiland</i>

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

Programs at a Glance

Thursday, February 9, 2012 (continued)

3:00-4:00 pm	(Physicians Only) Physician-Hospital Syndication Unwind Exploratory – A Primer on the Gross Anatomy of a Complicated Surgery (repeat) <i>Goldstone Strode</i>	(Hospitals Only) Tackling Medical Necessity and Quality Issues Prior to DOJ, OIG and CMS Intervention <i>Ogrofsky</i>	(Hospitals Only) Conversion is Good for the Soul: Transforming Free-Standing Facilities to Hospital Outpatient Departments – A User’s Guide <i>McCard Murray</i>	Fundamentals and Practicalities of Identifying and Returning Overpayments <i>Martin Ohrin</i>	Medical Group Employment and Physician Peer Review: Oil and Water? <i>Schnier</i>	Special Legal Ethics Concerns for the Healthcare Lawyer <i>Brown</i>
4:15-5:15 pm	(Hospitals Only) Best Practices for Overseeing an Internal Audit <i>Rego</i>	Social Media (repeat) <i>Danaher Daniel</i>	The Perils and Pitfalls of Careful Drafting: How Stark Has Changed the Risk Calculus (repeat) <i>Homchick Looney</i>	On-Call Compensation: Market Trends, FMV and Commercial Reasonableness, and Governance Oversight (repeat) <i>Mobley Wade</i>	Drinking the Consolidation Kool-Aid (repeat) <i>Grauman Washlick</i>	Quality Driven Healthcare: A Medical Staff’s Increasing Role Post Healthcare Reform (repeat) <i>Anderson Morrissey</i>
5:15-6:30 pm	Reception sponsored by HORNE LLP (attendees, faculty and registered spouses and guests are welcome to attend)					
7:00 pm	Young Professionals Networking Dinners (Sign-up at the AHLA Resource Center Table)					

Programs at a Glance

Friday, February 10, 2012

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) Fair Market Value Affinity Group Breakfast (attendees and faculty welcome; space is limited; sign-up on the registration form)			
8:30-9:30 am	The iPhone as a Medical Device (not repeated) <i>Markey</i>	Adapting Employed Physician Compensation Models on the Road to Accountable Care <i>Dunlay Gerberry</i>	Community Needs Assessment <i>Anning Trocchio</i>	Government Investigations, Settlements and False Claims Act Update (repeat) <i>Eiland</i>
9:40-10:40 am	COPs, POCs and SIAs: Update on Medicare Conditions of Participation, Government Enforcement Agreements <i>Geraci Joy</i>	Co-Management Arrangements: Getting Beyond a Medical Director Arrangement to a True Accountable Care Steppingstone <i>Bathija Eisenberg</i>	National Practitioner Data Bank (repeat) <i>T. Adelman Grubbs</i>	Best Practices for Overseeing and Internal Audit (repeat) <i>Rego</i>
10:50-11:50 am	The Value-Based Purchasing Program – A Beginning of a New Era in Medicare Payments (repeat) <i>Hettich</i>	Conversion is Good for the Soul: Transforming Free-Standing Facilities to Hospital Outpatient Departments – A User's Guide (repeat) <i>McCard Murray</i>	OIG Enforcement Initiatives Relating to Hospitals (repeat) <i>Demske Holden</i>	Reviewing Valuation Reports: An Advanced Course for Healthcare Attorneys (repeat) <i>Anderson Holdenried</i>
11:50 am-1:05 pm	Lunch on your own or attend: Medical Staff, Credentialing, and Peer Review or Business Law and Governance/ Hospitals and Health Systems/In-House Counsel (joint luncheon) sponsored by Sullivan Cotter and Associates, Inc., Practice Group Luncheon (additional fee; limited attendance; pre-registration required; see page 20 for descriptions and pages 21-22 to register)			
1:15-2:15 pm	Fundamentals and Practicalities of Identifying and Returning Overpayments (repeat) <i>Martin Ohrin</i>	HIPAA Breach Notification – Case Studies on What to Do and When to Report (repeat) <i>Callahan-Morris McCorley</i>	Community Needs Assessment (repeat) <i>Anning Trocchio</i>	COPs, POCCs and SIAs: Update on Medicare Conditions of Participation, Government Enforcement and Agreements (repeat) <i>Geraci Joy</i>
2:25-3:25 pm	Co-Management Arrangements: Getting Beyond a Medical Director Arrangement to a True Accountable Care Steppingstone (repeat) <i>Bathija Eisenberg</i>	Adapting Employed Physician Compensation Models on the Road to Accountable Care (repeat) <i>Dunlay Gerberry</i>	Tackling Medical Necessity and Quality Issues Prior to DOJ, OIG and CMS Intervention (repeat) <i>Ogrosky</i>	

Practice Group Luncheon Presentations

February 8, 2012

Antitrust

The Role of Economic Analysis in Healthcare Antitrust: Cutting-Edge Economics Meets the Anomalies of the Health- care System

Mark Mattioli, Esq. (Moderator)

Marshall Dennehy Warner Coleman & Goggin, King of Prussia, PA

Glenn Melnick, PhD

*School of Policy, Planning, and Development, University of South-
ern California, Los Angeles, CA*

Alison Oldale, PhD

Bureau of Economics, Federal Trade Commission, Washington, DC

Economic theory is at the core of antitrust analysis. In the health-care sector, cases are sometimes won or lost based upon economic theory. Nevertheless, healthcare markets are often viewed more like quantum theory, where the typical laws of behavior seemingly do not apply given the difficulty in measuring price and determining its impact on consumers. Hear from two economists about the difficult and sometimes contrary conclusions that can be reached in dealing with healthcare markets and the role of evolving economic theory to these cases. These issues will be explored utilizing discussion of Dr. Glenn Melnick's paper, "The Increased Concentration of Health Plan Markets Can Benefit Consumers Through Lower Hospital Prices." The speakers will also discuss the role of economic literature in shaping antitrust policy.

Labor and Employment

Alternative Dispute Resolution: Obtaining Maximum Benefit From the Process

Michael Jordan, Esq.

Jordan Resolutions LLC, Cleveland, OH

Alternative dispute resolution (ADR) proceedings, particularly mediation and arbitration, are now a common alternative to litigation. In light of the expense of trial and the potential risks associated with jury verdicts, ADR may be particularly attractive in employment disputes. This presentation will discuss AHLA's ADR rules that are important for parties to understand when handling a case in ADR, and review how and when it makes sense to consider modifying the standard rules. We will also address the efficacy of ADR in resolving class actions or multi-party disputes. Finally, from the perspective of a mediator or arbitrator, we will discuss common mistakes made by parties in mediation and arbitration proceedings—and how to avoid them.

February 9, 2012

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

- * Audits/investigations
- * Employment
- * Enforcement
- * Physician behavior
- * Retail clinics

Health Information and Technology and Healthcare Liability and Litigation

Responding to an Alleged Data Breach: Things Outside Coun- sel Should Know

George B. Breen, Esq. (Moderator)

Epstein Becker Green, Washington, DC

Karen Grant

Partners HealthCare System Inc., Boston, MA

Dina Marty, Esq.

Wake Forest Baptist Medical Center, Winston-Salem, NC

Outside counsel rarely experience first-hand the whirlwind of activity that can arise when a covered entity is faced with a claim that a data breach has occurred. The panelists will discuss processes for investigating and responding to an alleged breach, describe surprises that can arise during an investigation, and share ways in which outside counsel can assist covered entities and business associates in being better prepared for—and perhaps preventing—a data breach.

Practice Group Luncheon Presentations

February 10, 2012

Medical Staff, Credentialing, and Peer Review Preventative Medicine: Hospitals' Use of Credentialing and Peer Review to Avoid Liability

Gregory Demske, Esq.
U.S. Department of Health & Human Services, Washington, DC

This presentation will examine the administrative remedies available to the Office of Inspector General (OIG) to address substandard and unnecessary care by physicians practicing in hospitals and enforcement efforts by the U.S. Department of Justice and OIG to address failures in this area. In addition, the presentation will provide OIG's perspective on the steps hospitals should take to reduce the risk of physicians failing to meet professional standards in their care of patients in hospitals to improve quality and decrease liability.

Business Law and Governance, Hospitals and Health Systems, and In-House Counsel, and the Enterprise Risk Management Task Force Sponsored by Sullivan Cotter and Associates Inc.

I Went to Law School—How in the World Am I Supposed to Help With Quality Initiatives?

Robin Locke Nagele, Esq.
Post & Schell PC, Philadelphia, PA

Hospitals and physicians worry about quality, but there is also a place for lawyers in quality initiatives. Lawyers must turn ideas into descriptions of what can be measured and into actual commitments. They must work with credentialing, privileging, and medical staff issues related to quality. They must turn quality initiatives into contracts and policies for hospitals, physicians, managed care organizations, accrediting organizations, and others. This luncheon presentation will explain:

- * Current trends in developing actual quality metrics
 - What is being measured and how
 - Reporting metric data
- * Practicalities in translating quality issues into binding contracts

New Mediation Trainings

February 6-7, 2012

Loews Portofino Bay Hotel, Orlando, FL

Part I (Feb. 6th and Feb. 7th, 1 1/2 days): Introduction to Mediation Process and Skills for Use in Healthcare Disputes

This course will introduce theory, principles, process steps, essential skills and ethical requirements in mediation to those who are considering service as a mediator. The course will provide the trainee with a firm foundation for additional learning and honing of skills as a neutral. Training techniques will include lecture; observation; role plays with coaching by trainers; and post-role play debriefing.

Trainers:

Jane Reister Conard, JD
Jane Reister Conard LLC, Sun Valley, ID

Jeanne F. Franklin, Esq.
FranklinSolutions, Arlington, VA

AHLA Members or enrolled AHLA Dispute Resolvers: \$595 /
Non-Members: \$795

Special Discount for Both Days!

AHLA Members or enrolled AHLA Dispute Resolvers:
\$745 / Non-Members: \$945

Attendance is limited to 24 participants for each part on a first-come, first-serve basis. For more information and to register, go online to www.healthlawyers.org/adr

Part II (Feb. 7th, 1/2 day): Introduction to Mediating Medical Malpractice Claims and Lawsuits

A specific application of mediation to medical malpractice claims and lawsuits, this training will introduce how interest-based mediators proceed on the principle that the mediation is not simply bargaining for money and as a result use techniques to create greater satisfaction for the parties and promote resolution. The training will benefit those with some experience in mediation, physicians or other healthcare providers, and those who have received introductory training in mediation, including those who attend the Part. I: Introduction to Mediation Process and Skills which precedes this training. Attendees will find this training a helpful "next step" in their learning as they will be exposed to how to mediate difficult cases, which often have heightened emotion. Such lessons are transferrable to other types of healthcare mediations. Training will include lecture, observation, and opportunity to practice in role plays with coaching by trainers, and debriefing.

Trainer:

Chris Stern Hyman, Esq.
Medical Mediation Group LLC, New York, NY

AHLA Members or enrolled AHLA Dispute Resolvers: \$195 /
Non-Members: \$295

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

Registration Form

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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 AHLA 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

AHLA/FAHA Members: \$745 Non-Members: \$970

\$670 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

AHLA/FAHA Members: \$775 Non-Members: \$1000

\$700 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

AHLA/FAHA Members: \$1140 Non-Members: \$1360

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

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

I plan to attend the Diversity Reception - Wednesday, February 8

I plan to attend the Fair Market Value Affinity Group Breakfast (space is limited) - Friday, February 10

Printed Course Materials

All attendees will receive an electronic version of the full set of course materials for the program. 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 \$95

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

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

\$95 Combined Physicians and Hospitals Binder

Practice Group Luncheons (\$35 for sponsoring PG members; \$50 for non-members)

\$ _____ Antitrust – February 8

– OR –

Labor and Employment – February 8

\$ _____ Physician Organizations – February 9

– OR –

Healthcare Liability and Litigation *and* Health Information Technology (Joint Luncheon) – February 9

\$ _____ Medical Staff, Credentialing, and Peer Review – February 10

– OR –

Hospitals and Health Systems, In-House Counsel, *and* Business Law and Governance (Joint Luncheon) – February 10

\$ _____ 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, 2012. 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.

Fed ID No. 23-7333380

Program Information

Dates: February 8-10, 2012
Place: Loews Portofino Bay at Universal Orlando Hotel
5601 Universal Blvd Orlando, FL 32819
Orlando, FL 32819

Reservations: (888) 430-4999

Physicians Program Only

\$745 For the first Member*
\$670 For each additional Member*
\$970 Non-Members

Hospitals Program Only

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

Physicians and Hospitals Programs Dual Registration

\$1140 For the first Member*
\$1060 For each additional Member*
\$1360 Non-Members

* Members of the American Health Lawyers Association and the Florida Academy of Healthcare Attorneys are eligible for the member rate.

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 13.0 continuing education credits (including 1.0 ethics credit) based on a 60-minute hour and 15.6 credits (including 1.2 ethics credits) based on a 50-minute hour. The **Hospitals** seminar will be worth approximately 11.5 continuing education credits (including 1.0 ethics credits) based on a 60-minute hour and 13.8 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 15.0 CPE credits and Hospitals program will be worth approximately 13.0 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; \$305 for those admitted/graduated between four and eight years ago; and \$350 for those admitted/graduated eight or more years ago. Dues are \$100 for government employees and full-time academicians; \$80 for paralegals, \$160 for public interest professionals and \$25 for full-time law school students. 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, 2012*. 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, Enterprise 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 5-13, 2012. 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.



AMERICAN
HEALTH LAWYERS
ASSOCIATION

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

**Physicians and Physician
Organizations Law Institute**
February 8-9, 2012

**Hospitals and Health
Systems Law Institute**
February 9-10, 2012

**Loews Portofino Bay at
Universal Orlando Hotel**
Orlando, FL

For updates and to register, go to
www.healthlawyers.org/programs

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