HealthCare Appraisers, Inc. and VMG Health have provided sponsorship in support of this program.

Supporting Organization Sponsor:
National Association of Medicaid Fraud Control Units
Program Planning Committee

Robert G. Homchick, Program Chair
Amanda Walker Copsey
J. Reginald Hill
John E. Kelly
Katherine A. Lauer
Albert W. Shay

Program Learning Objectives

• Gain a greater understanding of regulations (Stark, False Claims Act, Anti-Kickback Statute) and enforcement efforts in these areas

• Learn how emerging regulatory trends, recent case law, and legislative development will affect legal and compliance practices in health care

• Network with peers and learn about the challenges and risk areas faced by plans and providers

Program Sponsors

HealthCare Appraisers
VMG Health

Exhibitors

Affiliated Monitors, Inc.
AMGA Consulting
Bay Area Healthcare Advisors LLC
BKO LLP
BRG Healthcare
Carnahan Group
Coker Group
FHAS, Inc.
HealthCare Appraisers Inc.
HORNE LLP
KPMG LLP
Navigant
Ntracts LLC
Pinnacle Healthcare Consulting
Protiviti
PYA
Veralon
VMG Health
Widener University Delaware Law School

Hotel Information

Renaissance Harborplace Hotel
The Gallery Mall
202 E Pratt St
Baltimore, MD 21202
Phone: (410) 547-1200

Hotel accommodations are not included in the registration fee. Call Renaissance Harborplace Hotel at (410) 547-1200 and indicate that you are attending the AHLA program or go online to http://bit.ly/renaissance_FC17. Rooms at the group rate of $219 single/double occupancy are limited and may sell out prior to the Tuesday, September 12, 2017 cut-off.

Program Fees

Early Registration
Postmarked and paid on or before September 12, 2017
First AHLA Member: $860
Non-Member: $1110
Multi-member (each additional AHLA Member from the same firm/organization): $785
First AHLA In-House Counsel/Compliance Officer Member: $760
Multi-member (each additional AHLA In-House Counsel/Compliance Officer Member from the same organization): $685
In-House Counsel/Compliance Officer Non-Member: $1010

Registration
Postmarked and paid after September 12, 2017*
First AHLA Member: $985
Non-Member: $1235
Multi-member (each additional AHLA Member from the same firm/organization): $910
First AHLA In-House Counsel/Compliance Officer Member: $885
Multi-member (each additional AHLA In-House Counsel/Compliance Officer Member from the same organization): $810
In-House Counsel/Compliance Officer Non-Member: $1135

Discounts

Solo Practitioner: $100 off full applicable rate

AHLA Government Member: $515
AHLA Academician Member: $515
AHLA Public Interest Professional Member: $515
Government/Academician/Public Interest Professional Non-Member: $590

* Fees increase $100 after this date

Media Partner:

Corporate Compliance Insights

Corporate Compliance Insights is the Web’s premier publishing and knowledge-sharing forum for thought leaders in Governance, Risk and Compliance. CCI’s mission is to educate and encourage informed interaction within the compliance community and to offer resources and career support to compliance professionals around the world. The online publication is a wholly owned subsidiary of Conselium Executive Search.

For the most up-to-date information and to register, visit our website at www.healthlawyers.org/programs
Wednesday, October 4, 2017
1:00-5:30 pm
Registration and Information

CONCURRENT SESSIONS

1:30-2:45 pm
Extended Sessions

A. Stark Primer (not repeated)
   Joan P. Dailey
   Gary W. Herschman
   • The central element of the Stark law and regulations
   • How to analyze a Stark issue
   • Various Stark law and regulatory exceptions
   • Differentiating the Stark law and the Anti-Kickback Statute
   • Practice tips

B. An Overview of Medicare Advantage and Part D: Basics, Fundamentals, and Compliance Challenges (not repeated)
   Thomas R. Barker
   Lawrence W. Vernaglia
   This session will provide attendees with a basic overview of the legal and regulatory structure of the Medicare Advantage (MA) and Medicare prescription drug (Part D) programs. It will also focus on current compliance concerns for those providing advice to MA and Part D plans. Compliance is a high priority focus of the government and attorneys providing advice to these plans must be aware of current developments.
   • Medicare Advantage and Part D basics
   • Overall regulatory requirements for MA and Part D plans

C. New Compliance Program Guidance from DOJ and HHS-OIG
   Laura E. Ellis
   Michael B. Lampert
   Thomas J. Schumacher
   In February 2017, DOJ released a list of common questions that it may ask in evaluating corporate compliance programs. In March, HHS-OIG, in conjunction with HCCA, released a resource guide for measuring compliance program effectiveness. Together, the documents present a practical, functional, and informed view of what makes compliance programs work. This session will include:
   • The DOJ and HHS-OIG guidance documents, and the differences between them
   • Consider what the guidance suggests of evolving standards for compliance programs
   • How organizations may approach consideration of their own programs in light of the guidance

3:00-4:00 pm

D. Law and Order AKS—A Practitioner’s Primer on the Anti-Kickback Statute (not repeated)
   Jacqueline C. Baratian
   Spencer K. Turnbull
   This introductory level session will cover AKS basics then explore them in the context of real world fact patterns.
   • Purpose and prohibitions of the AKS, plus its exceptions and safe harbors
   • Relationship between the AKS and the False Claims Act
   • Application of the AKS in different segments of the health care industry, illustrated by recent case law and hypothetical scenarios
   • How to use OIG’s Advisory Opinions and other guidance documents to avoid running afoul of the AKS, and how to handle potential AKS violations when they’re discovered

E. Fair Market Value and Physician Entity Transactions—Primer for Health Lawyers and Compliance Officers (not repeated)
   Stuart A. Neiberg
   Joseph N. Wolfe
   • Why “Fair Market Value” matters—a brief discussion of the history of FMV, underlying definitions, related regulatory guidance, basic valuation principles, and approaches
   • Common recurring problems in health care valuation (including data issues and the distinction of “commercial reasonableness”)
   • Different types of arrangements requiring valuation services (e.g., compensation valuation, business valuation, machinery and equipment valuations, and real estate valuations)
   • Unique transaction structures (e.g., rights of first refusal, options, licensing arrangements, etc.)

F. Provider-Based Status under Siege: Do the Benefits Justify the Costs of Compliance? (not repeated)
   Andrew D. Ruskin
   • Potential advantages to provider-based status
   • Provider-based compliance requirements
   • Recent changes in reimbursement for provider-based sites
   • 340B drug utilization in provider-based sites
   • Addressing instances of commingled space
Continuing Education Credit Information

CLE/MCLE: AHLA has applied for 14.5 credits (including 2.00 ethics credit) for 60-minute states and approximately 17.4 credits (including 2.4 ethics credit) for 50-minute states.

CPE: AHLA will be applying for 17.0 CPE credits.

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 Ave. North, Suite 700, Nashville, TN 37219-2417. NASBA’s website is www.nasba.org.

CCB: This education activity has been submitted to the Compliance Certification Board (CCB)® and is currently pending their review for approval of CCB CEUs. We will be applying for 17.4 CCB credits.

Participants will be given Continuing Education Request forms at the program. Forms must be completed and returned to AHLA staff to receive credit. The sessions, unless otherwise designated, are intermediate to advance in level. This program is designed to be an update on developments in the area of health law. 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 and terminology associated with health law in order to obtain the full educational benefit of this program.

4:15-5:15 pm

G. False Claims Act Primer (not repeated)
Laurence J. Freedman
Benjamin C. Wei

• Elements of False Claims Act (“FCA”) liability
• FCA qui tam provisions and procedural bars
• “Reverse False Claim” liability
• FCA Liability after the Supreme Court’s 2016 decision in United States ex rel. Escobar v. Universal Health Services, Inc
• Developments in FCA enforcement, including individual liability
• FCA damages and penalties, including penalty increases under Federal Civil Penalties Inflation Act Adjustment Act of 2015
• Settlement of FCA matters

H. Privacy and Security: The Principles and Playbook for Managing Compliance and Breach Response (not repeated)
April Carlson
Amy S. Leopard

• HIPAA framework for covered entities and their business associates, including the HITECH Act, and the Privacy, Security, and Breach Notification Rules
• Auditing and monitoring compliance with the HIPAA Privacy Rule limits on uses and disclosures, privacy rights, and administrative requirements and the HIPAA Security Rule administrative, physical, and technical safeguards
• Managing privacy and security breaches under the HIPAA Breach Notification Rule and state law requirements

5:15-6:30 pm

Networking and Diversity+Inclusion Reception, hosted by AHLA’s Diversity+Inclusion Council, sponsored by HealthCare Appraisers, Inc. and VMG Health

Join AHLA for a combined Welcome Reception and Diversity+Inclusion Reception. Learn more about AHLA’s diversity and inclusion initiatives. Network with AHLA leaders and your fellow colleagues. This event is included in the program registration. Attendees, faculty, and registered spouses and guests are welcome.

Thursday, October 5, 2017

7:00 am-5:00 pm

Registration and Information 7:00-7:50 am

Compliance Professionals Networking Breakfast

This event is included in the program registration; limited attendance; pre-registration required.

7:00-8:00 am

Continental Breakfast, sponsored by HealthCare Appraisers, Inc. and VMG Health

This event is included in the program registration fee. Attendees, faculty, and registered guests are welcome.
8:00-8:15 am
Welcome and Introductions
Marilyn Lamar, AHLA President-Elect
Robert G. Homchick, Program Committee Chair

8:15-9:30 am
Who Broke My Crystal Ball?
Advising in the Time of Uncertainty
Katherine A. Lauer ( Moderator)
Benton Curtis
Janet L. Goldstein
Kirk Ogrosky

9:30-10:45 am
Year in Review
Elizabeth B. Carder-Thompson
It’s been another roller coaster year for fraud and abuse and related health care developments. This fast-paced session will provide an overview of recent events, and introduce multiple topics to be addressed in later focused break-out sessions during the conference:
• HHS and OIG stage largest health care fraud takedown in history
• Continued record breaking numbers of false claims act recoveries
• The Yates Memo on individual culpability in action
• Escobar aftermath: The questions on “implied certifications” continue
• Testing the government’s authority to extrapolate false claims
• Regulatory due diligence: CMP, anti-kickback safe harbor final rules, new compliance guidance by DOJ and OIG
• Anti-kickback settlement amounts stun providers
• Insider trading and other noteworthy developments
• CDC public health priorities, and multi-pronged opioid addiction efforts
• Whither Obamacare? The health care reform wars continue
• Ransomware attacks against hospitals— the new HIPAA violation?
• Notable items you may have missed

10:45-11:15 am
Coffee Break, sponsored by HealthCare Appraisers, Inc. and VMG Health
Exhibits Open—Meet the Exhibitors

11:15 am-12:30 pm
Extended Sessions
K. The Art and Science of Regulatory and Compliance Due Diligence—Maximizing Value while Mitigating Risk (not repeated)
Ted Lotchin
Tony R. Maida
Louis Pichini
Regulatory due diligence is a critical step for all parties involved in any potential health care transaction, from basic affiliation agreements to full scale acquisitions. Our panel will provide an in-depth discussion of strategies for maximizing the value of a potential transaction while mitigating the risks inherent in different segments of the health care industry.
• The purpose and goals of regulatory due diligence from the buyer, seller, and lender perspectives
• Key fraud and abuse risks, methods for evaluating those risks, and the impact of government touches and CIAs on a potential transaction
• The evolving concepts of “fair market value” and “commercial reasonableness”
• Using case studies, explore ways to address risk within certain transaction structures

L. Educating Senior Leadership on Cybersecurity
Marti Arvin
James Cannatti
Joseph A. Dickinson
• Involvement in privacy and security issues, why it is important
• Critical information senior leadership needs to know
• Getting senior leadership involved with your cybersecurity program
• Overcoming the geek speak communication barrier

M. Medical Necessity and the False Claims Act—Lions and Tigers and Experts, Oh My!
John-David H. Thomas (Moderator)
J. Reginald Hill
Marc S. Raspanti
Jessica Sievert
• An examination of the role of medical necessity in fraud and compliance, from an identified compliance concern, to a government investigation, to a False Claims Act lawsuit
• Practical tips from compliance, defense, government and relator’s counsel on how to address common questions and issues that will arise when addressing questions of medical necessity
• Use of data and outlier analyses in identifying compliance concerns and responding to, and defending, cases based on medical necessity, including the use of sampling and medical experts, and the design of medical reviews for both internal compliance purposes and litigation
• Practical and legal issues relating to damages that are unique to medical necessity cases, including the calculation of offset and the advisability and feasibility of re-pricing claims

N. Self-Disclosure in 2017: Options and Opportunities
Linda A. Baumann
Matthew Edgar
Tamara Forys
Margaret Hutchinson
• Impact of the recent changes in health law on self-disclosure
• How to know whether to self-disclose
• What are your options if you decide to self-disclose and what process is required for each?
• Tips from regulators on best practices for self-disclosure
• Risks for individuals raised by self-disclosure

C. New Compliance Program Guidance from DOJ and HHS-OIG (repeat)
Membership
Dues are $235 for those admitted to the Bar/graduated from college within the last four years; $355 for those admitted/graduated between four and seven years ago; and $400 for those admitted/graduated eight or more years ago. Dues are $120 for government employees and full-time academicians; $105 for paralegals, $125 for public interest professionals, and $100 for retired professionals. Include the applicable membership fee with your registration form and take advantage of the program registration fee for members.

Live Tweet the Program Using #AHLA17
Will you be at the Fraud and Compliance Forum? We encourage you to live tweet and include hashtag #AHLA17 so that attendees can learn from more than one session at once, and so that members unable to attend still feel plugged in.

Download the Annual Meeting App
This free app is available in the iTunes App store or Google Play store by searching ‘AHLA’.
1. Download AHLA, by Bravura Technologies, onto your mobile device and hit open.
2. Choose ‘Events’ to find the Fraud and Compliance Forum. Click on the event (you’ll be prompted to enter your email address). You will not be able to access the event features of a program if you are not registered for the event.
3. The App will include the agenda, attendee list, and access to the PowerPoint presentations.

The Fraud and Compliance Forum portion of the AHLA App is sponsored by:

Pinnacle Healthcare Consulting

12:30-1:45 pm
Lunch on your own or attend the Fraud and Abuse Practice Group Luncheon, sponsored by PYA
This event is not included in the program registration; there is an additional fee; limited attendance; pre-registration required.
Title: The Opioid Crisis—New Government Enforcement Initiatives and Future Implications for the Health Care Industry
Speakers:
Melissa Jampol (Moderator), Epstein Becker & Green, PC, New York, NY
Demetra Ashley, Acting Assistant Administrator, Division of Control Division, US Department of Justice, Washington, DC
Gary Cantrell, Deputy Inspector General for Investigations, Office of the General Counsel, Washington, DC
Jane H. Yoon, Of Counsel, Litigation Department, Paul Hastings LLP, New York, NY

Q. Legal Ethics: Saying No to the CEO Client? Don’t Let Your Job Cost You Your Career
Robert A. Gerberry
Renee M. Howard
Clevonne M. Jacobs
• Identifying the client and understanding the implications of representing the organization and not the executives
• Providing legal advice to the CEO
• When to raise the subject of separate counsel
• The career limiting and ethical implications of reporting up the chain
• Navigating internal politics, understanding your clients’ perspectives while maintaining your fiduciary and professional obligations
• Survival through knowledge of your audience—subtle vs direct, passive vs aggressive
• Documentation of your advice—is there any value to the CYA email/memo?
• Bottom line—to thine own self be true

R. False Claims Act Update
Eva Gunasekera
Colin Huntley
Discussion about recent legal and statutory developments in the False Claims Act context, including:
• Significant litigation and settlements in the areas of Part C managed care, electronic health records, and skilled nursing facilities
• Development on the applicability of the Supreme Court Escobar decision and the continuing evolution of implied certification FCA theories
• Evaluation of Medicare 60-Day Overpayment Rule, including recent case law and discussion about the impact of this rule in FCA enforcement actions
• Case law developments in pleading standards, including discussion of public disclosure and 9(b) requirements

S. A Brave New World: Defending Physician Compensation Arrangements in the Current Enforcement Environment
Anna M. Grizzle
Tizgel K. S. High
Albert (Chip) D. Hutzler
• Recent cases and settlements highlighting risk associated with physician compensation arrangements
• Regulatory framework for defending physician compensation arrangements with particular emphasis on ensuring fair market value and commercial reasonableness
• Structuring and managing physician compensation arrangements to ensure ongoing compliance

3:15-4:15 pm

T. Legal Ethical Issues for Fraud and Abuse Lawyers: Risks that Lurk in Compliance, Investigations, and Litigation
Laura F. Laemmle-Weidenfeld
Regina G. Morano
Heidi A. Wendel
• Applicable ethical rules relating to investigations, litigation, and compliance advice
• Assessment of risk areas for in-house and outside counsel, compliance officers, and whistleblower counsel
• Evolving issues (rethinking Upjohn in a Yates Memo world, cybersecurity, preservation of privilege)
• Professional and personal risks to counsel
• Recommended best practices

S. A Brave New World: Defending Physician Compensation Arrangements in the Current Enforcement Environment (repeat)

4:30-5:00 pm

X. Federal Enforcement of Fraud and Abuse Involving Opioid Abuse and Diversion (not repeated)
Michelle Bergholtz Frazier
Stacy G. Ward
• In light of the current epidemic of opioid abuse and opioid-related deaths, federal efforts to combat this problem are on the rise through the use of drug diversion laws and fraud and abuse laws
• Recent civil and criminal enforcement efforts related to opioids abuse and diversion pursued under the Controlled Substances Act and the False Claims Act
• Best practices related to effective compliance programs for providers and entities that dispense controlled substances

Y. Compliance and Valuation Hot Topics in Telemedicine
Claire E. Castles
Ben Ulrich
• General regulatory compliance considerations, current reimbursement payment environment surrounding telemedicine, including Medicare’s billing requirements and the status of parity laws
• Strategies of leveraging telemedicine for hospitals, including key compliance considerations
• Fair market value and commercial reasonableness considerations related to contracting with physicians and vendors for telemedicine services

5:00-6:00 pm

Networking Reception, sponsored by HealthCare Appraisers, Inc. and VMG Health
This event is included in the program registration. Attendees, faculty, and registered guests are welcome.

Friday, October 6, 2017
7:00 am-2:45 pm

Registration Information
7:00-7:50 am

Networking Breakfast, hosted by AHLA’s Women’s Leadership Council, sponsored by Sullivan, Cotter and Associates, Inc. This event is included in the program registration; limited attendance; pre-registration required.
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.

Spouse/Guest Fee
For an additional $30 spouses and adult guests can register to attend the reception on Wednesday and Thursday evenings and the breakfasts on Thursday and Friday mornings. Please sign up on the registration form. (Children are welcome to attend these events at no additional charge.)

Travel
Association Travel Concepts (ATC) has negotiated discounts with United, Delta, Hertz, and Enterprise Rental Car to bring you special airfares and car rental rates lower than those available to the public. Discounts apply for travel for AHLA 2017 meetings, discounts available 3 days pre/post meeting start/end dates. Restrictions 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
http://www.atcmeetings.com/ahla

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

Cancellations/Substitutions
Cancellations must be received in writing no later than September 25, 2017. 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 (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.

7:00-8:00 am

Continental Breakfast, sponsored by HealthCare Appraisers, Inc. and VMG Health

This event is included in the program registration fee. Attendees, faculty, and registered guests are welcome.

8:00-9:15 am Extended Sessions

CC.  Top Legal and Compliance Threats Facing In-House Counsel and Compliance Officers (not repeated)
Ritu K. Cooper
Marc D. Goldstone
Teresa A. Williams

- Emerging threats faced by in-house counsel and compliance officers
- Cybersecurity and ransomware attacks
- The rapidly changing regulatory landscape and increasing compliance responsibilities
- The legal constraints with hospital/physician realignment initiatives
- Changing payment structures and required regulatory oversight
- The uptick in governmental investigations, audits and settlements
- When to engage outside counsel to preserve the attorney-client privilege
- The whistleblower threat
- Best practice tips

J.  Defending against Claims of Health Care Fraud in the Age of Government “Big Data” Mining (repeat)

L.  Educating Senior Leadership on Cybersecurity (repeat)

M.  Medical Necessity and the False Claims Act–Lions and Tigers and Experts, Oh My! (repeat)

N.  Self-Disclosure in 2017: Options and Opportunities (repeat)

9:30-10:30 am

DD.  MFCU Program Integrity Initiatives and Medicaid Fraud Trends (not repeated)
Sherrie Brown
Christy Wells

- MFCU authority overview
- CMS 2016 Managed Care Regulation Program Integrity highlights
- I-STOP
- Prosecutions and settlements
- Fraud trends

EE.  Advanced Stark
Troy A. Barsky
Kevin G. McAnaney

- Recent developments in legislation, case law, regulation, and guidance related to the Stark Law
- Developing alternate payment methodologies that comply with Stark
- Cutting edge issues in physician compensation, including bonuses tied to aggregate “group” targets, network loyalty, and hospital/system financial performance

FF.  Defending the C-Suite
Albert W. Shay
Rob Zink

- The Yates Memo on individual accountability for corporate wrongdoing and consider its significance under the current Administration
- Settlements involving individuals found liable for corporate wrongdoing in the wake of the Yates Memo
- Does the Yates Memo and DOJ’s greater focus on individual liability change the way we counsel senior management, prophylactically and in the context of an ongoing compliance investigations
- Potential challenges created by the Yates Memo when defending corporate clients in compliance investigations
- Tips to in-house and outside counsel on how to minimize the risks that senior management will be viewed as responsible for corporate wrongdoing
GG. Anatomy of a Data Breach: How to Prepare and Respond to the Inevitable
John Bailey
Barbara Holland
Lisa S. Rivera
- Current enforcement trends by HHS, Office for Civil Rights (HHS OCR)
- Recurring data and privacy compliance issues that HHS OCR and providers are experiencing
- OCR’s desk audits
- Data breach hypothetical identifying compliance issues and best practices

U. Beneficiary Inducements: What’s New and What’s Still True (repeat)

10:45 am-11:45 am

HH. 340B Program Compliance: Pitfalls, Disclosures, Best Practices and Recent Developments (not repeated)
Cindy K. Bartlett
Barbara Straub Williams
- 340B program requirements
- Common compliance pitfalls
- What to do if a compliance issue is discovered
- Best practices for a compliant program
- Recent developments

P. USS Value Based—Navigating Old Obstacles in the New World (advanced) (repeat)

R. False Claims Act Update (repeat)

T. Legal Ethical Issues for Fraud and Abuse Lawyers: Risks that Lurk in Compliance, Investigations, and Litigation (repeat)

V. The Time Is Now—Medicare Advantage/Medicaid Managed Care Comes to the Forefront of Enforcement (repeat)

11:45-1:00 pm
Lunch on your own

CONCURRENT SESSIONS

1:00-2:00 pm

Q. Legal Ethics: Saying No to the CEO Client? Don’t Let Your Job Cost You Your Career (repeat)

W. Compliance Audits in the Era of the 60 Day Rule—No Good Deed Goes Unpunished? (repeat)

EE. Advanced Stark (repeat)

FF. Defending the C-Suite (repeat)

GG. Anatomy of a Data Breach: How to Prepare and Respond to the Inevitable (repeat)

2:15-2:45 pm

JJ. Medicare Trends and OIG Analytics (not repeated)
Steve Shandy
HHS-OIG uses several approaches for monitoring and analyzing Medicare payments and trends on an ongoing basis. This session will highlight:
- Recent Medicare payment and other trends
- Trends in HHS-OIG law enforcement actions
- Examples of OIG analytic approaches for identifying questionable billing and to support future work planning

Y. Compliance and Valuation Hot Topics in Telemedicine (repeat)

Z. Hot Topics for Long Term Care (repeat)

AA. Clinical Laboratories—Under the Government’s Microscope (repeat)

BB. Hospice and Home Health in the Crosshairs: Enforcement, Contractor Audits, and Compliance (repeat)

Adjournment
## Program Schedule

**Wednesday, October 4, 2017**

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<tr>
<th>Time</th>
<th>Session</th>
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<tbody>
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<td>1:00-5:30 pm</td>
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| 1:30-2:45 pm | 1. **A. Stark Primer** (not repeated)  
               Dailey Herschman                                                     |
|           | 2. **B. An Overview of Medicare Advantage and Part D: Basics, Fundamentals, and Compliance Challenges** (not repeated)  
               Barker Vernaglia                                                   |
|           | 3. **C. New Compliance Program Guidance from DOJ and HHS-OIG**  
               Ellis Lampert Schumacher                                           |
| 3:00-4:00 pm | 4. **D. Law and Order AKS-A Practitioner's Primer on the Anti-Kickback Statute** (not repeated)  
               Baratian Turnbull                                                 |
|           | 5. **E. Fair Market Value and Physician Entity Transactions–Primer for Health Lawyers and Compliance Officers** (not repeated)  
               Neiberg Wolfe                                                     |
|           | 6. **F. Provider-Based Status under Siege: Do the Benefits Justify the Costs of Compliance?** (not repeated)  
               Ruskin                                                            |
| 4:15-5:15 pm | 7. **G. False Claims Act Primer** (not repeated)  
                Freedman Wei                                                     |
               Carlson Leopard                                                   |
|           | 9. **J. Defending Against Claims of Health Care Fraud in the Age of Government “Big Data” Mining**  
               Hymans Joseph Wisner                                              |
| 5:15-6:30 pm | 10. **Networking and Diversity+Inclusion Reception**, *hosted by AHLA’s Diversity+Inclusion Council*,  
                *sponsored by HealthCare Appraisers, Inc. and VMG Health*  
                (This event is included in the program registration fee. Attendees, faculty, and registered guests are welcome) |
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<td>N. Self-Disclosure in 2017: Options and Opportunities</td>
<td>Baumann, Edgar, Forys, Hutchinson</td>
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<tr>
<td>C. New Compliance Program Guidance from DOJ and HHS-OIG (repeat)</td>
<td>Ellis, Lampert, Schumacher</td>
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<tr>
<td>12:30-1:45 pm</td>
<td>Lunch on your own or attend the Fraud and Abuse Practice Group Luncheon, sponsored by PYA</td>
<td>(This event is not included in the program registration; there is an additional fee; limited attendance; pre-registration required)</td>
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<tr>
<td>2:00-3:00 pm</td>
<td>Emerging Administrative Enforcement Tools (not repeated)</td>
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<tr>
<td>O. USS Value Based Navigating Old Obstacles in the New World (advanced)</td>
<td>Burns, Waltz, Carden, Homchick</td>
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<tr>
<td>Q. Legal Ethics: Saying No to the CEO Client? Don’t Let Your Job Cost You Your Career</td>
<td>Gerberry, Howard, Jacobs</td>
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<td>R. False Claims Act Update</td>
<td>Gunasekera, Huntley</td>
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<tr>
<td>S. A Brave New World: Defending Physician Compensation Arrangements in the Current Enforcement Environment</td>
<td>Grizzle, High, Hutzler</td>
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### Thursday, October 5, 2017, Continued

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<tr>
<th>Time</th>
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<th>Speakers</th>
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<tbody>
<tr>
<td>3:15-4:15 pm</td>
<td>T. Legal Ethical Issues for Fraud and Abuse Lawyers: Risks that Lurk in Compliance, Investigations, and Litigation</td>
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<td>V. The Time Is Now—Medicare Advantage/Medicaid Managed Care Comes to the Forefront of Enforcement</td>
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<td>W. Compliance Audits in the Era of the 60 Day Rule—No Good Deed Goes Unpunished?</td>
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<td>Chen, Kass, Grizzle, High, Hutzler</td>
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<td>X. Federal Enforcement of Fraud and Abuse Involving Opioid Abuse and Diversion (not repeated)</td>
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<td>Y. Compliance and Valuation Hot Topics in Telemedicine</td>
<td>Castles, Ulrich</td>
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<td>AA. Clinical Laboratories—Under the Government’s Microscope</td>
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<td>BB. Hospice and Home Health in the Crosshairs: Enforcement, Contractor Audits, and Compliance</td>
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<td>Hessler, Miller</td>
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<tr>
<td>4:30-5:00 pm</td>
<td>Networking Reception, sponsored by HealthCare Appraisers, Inc. and VMG Health (This event is included in the program registration. Attendees, faculty, and registered guests are welcome)</td>
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<tr>
<td>5:00-6:00 pm</td>
<td>Networking Reception, sponsored by HealthCare Appraisers, Inc. and VMG Health (This event is included in the program registration. Attendees, faculty, and registered guests are welcome)</td>
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### Friday, October 6, 2017

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<tr>
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<tbody>
<tr>
<td>7:00-7:50 am</td>
<td>Networking Breakfast, hosted by AHLA's Women's Leadership Council, sponsored by Sullivan, Cotter and Associates, Inc. (This event is included in the program registration; limited attendance; pre-registration required)</td>
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<td>7:00-8:00 am</td>
<td>Continental Breakfast, sponsored by HealthCare Appraisers, Inc. and VMG Health (This event is included in the program registration fee. Attendees, faculty, and registered guests are welcome)</td>
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<tr>
<td>8:00-9:15 am</td>
<td>Extended Sessions</td>
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<td></td>
<td>CC. Top Legal and Compliance Threats Facing In-House Counsel and Compliance Officers (not repeated)</td>
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<td></td>
<td>J. Defending against Claims of Health Care Fraud in the Age of Government “Big Data” Mining (repeat)</td>
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<td>L. Educating Senior Leadership on Cybersecurity (repeat)</td>
<td>Arvin, Cannatti, Dickinson</td>
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<td></td>
<td>M. Medical Necessity and The False Claims Act—Lions and Tigers and Experts, Oh My! (repeat)</td>
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<td>N. Self-Disclosure in 2017: Options and Opportunities (repeat)</td>
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<td>Thomas (Moderator), Hill, Raspanti, Sievert, Baumann, Edgar, Forsy, Hutchinson</td>
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<tr>
<td><strong>9:30-10:30 am</strong></td>
<td><strong>DD. MFCU Program Integrity Initiatives and Medicaid Fraud Trends</strong> (not repeated)</td>
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<td><strong>EE. Advanced Stark</strong></td>
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<td><strong>FF. Defending the C-Suite</strong></td>
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<td><strong>GG. Anatomy of a Data Breach: How to Prepare and Respond to the Inevitable</strong></td>
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<td><strong>U. Beneficiary Inducements: What’s New and What’s Still True</strong></td>
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<td>Brown Wells</td>
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<td><strong>10:45 am-11:45 am</strong></td>
<td><strong>HH. 340B Program Compliance: Pitfalls, Disclosures, Best Practices and Recent Developments</strong> (not repeated)</td>
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<td><strong>P. USS Value Based Navigating Old Obstacles in the New World</strong> (advanced) (repeat)</td>
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<td><strong>R. False Claims Act Update</strong> (repeat)</td>
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<td><strong>T. Legal Ethical Issues for Fraud and Abuse Lawyers: Risks that Lurk in Compliance, Investigations, and Litigation</strong> (repeat)</td>
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<td>Carden Homchick</td>
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<td>Laemmle-Weidenfeld Morano Wendel</td>
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<td>Gibson Holden</td>
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<td><strong>11:45-1:00 pm</strong></td>
<td><strong>Lunch on your own</strong></td>
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<td><strong>1:00-2:00 pm</strong></td>
<td><strong>Q. Legal Ethics: Saying No to the CEO Client? Don’t Let Your Job Cost You Your Career</strong> (repeat)</td>
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<td><strong>2:15-2:45 pm</strong></td>
<td><strong>JJ. Medicare Trends and OIG Analytics</strong> (not repeated)</td>
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<td><strong>Y. Compliance and Valuation Hot Topics in Telemedicine</strong> (repeat)</td>
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<td>Miller</td>
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