



HEALTHCARE AT RISK 2019 CHESS MOVE TO VALUE SUMMIT

September 11–13, 2019

Move
to Value

**Benton Convention Center
Winston-Salem, NC**



OUR SPONSORS



 **CHESS**

AGENDA

WEDNESDAY, SEPTEMBER 11, 2019

Provider Pre-Conference

3:15 PM – 8:30 PM

Pre-Conference is reserved for Physicians, APPs, and Health Care Executives

3:15 PM **Provider Pre-Conference Registration**

3:45 PM **Welcome**

4:00 PM **WFHN Complex Care Clinic: A Team-Based Approach to Value-Based Care**

*Richard Orr, MD, Wake Forest Health Network
Cory Sessoms, MD, Wake Forest Health Network*

The Wake Forest Health Network Complex Care Clinic is a comprehensive transitional care clinic focused on improving the outcomes of patients with complex medical problems who have been hospitalized and are in risk-based contracts. By using a team approach and a large set of tools and strategies, the team has substantially reduced hospital readmissions, improved patient outcomes, and lowered the cost of care for these patients, generating a positive ROI. The team will present a case study of a patient in their clinic with each member telling the story of the role they played in caring for the patient. Dr. Orr will describe the clinic's toolbox and Dr. Sessoms will present the clinic's remarkable results.

5:00 PM **PEARLS in Patient Communication**

*Andora Bass, MD, Wake Forest Baptist Health
Raghava Nagaraj, MD, Wake Forest School of Medicine
William Rice, MD, Wake Forest Baptist Health*

Drs. Bass, Nagaraj and Rice will review and demonstrate three important communication skills:

- Beginning the visit by connecting with the patient, eliciting the list of problems, and setting the agenda for the visit.
- Building rapport and conveying empathy during the visit by demonstrating reflective listening, using tools to help understand the patient's perspective, and demonstrating tools to convey empathy
- Wrapping up the encounter using dialogue rather than monologue and using teach back.

6:00 PM **Dinner**

Understanding Medicaid Transformation in North Carolina

Kelly Garrison, MBA, MHA, Emiro Health

As North Carolina transitions Medicaid from a state-administered program to one managed by prepaid health plans it is critical for providers to understand and prepare. Ms. Garrison will begin with a brief background of the process that the Department of Health and Human Services (DHHS) has undertaken to design and obtain approval for the program. DHHS has established goals and objectives that provide a framework for transformation efforts. Ms. Garrison will discuss each of the key programmatic design components and how it was developed in furtherance of the state's goals. Finally, she will discuss the functions of managed care that have the most significant impact on providers and highlight what providers should now be doing in preparation for go-live.

7:30 PM **Provider Focused Analytics**

Brian J. Wells, MD, PhD, Wake Forest School of Medicine

The healthcare system resides in a world of ever increasing data streams and sophisticated algorithms. These tools promise the ability for improved efficiency and better outcomes. Unfortunately, many of the promised benefits have yet to be realized in practice and physicians are flooded with information and increased demands of electronic documentation. Dr. Wells will discuss analytical challenges associated with healthcare data and barriers to the implementation of clinical decision support tools. He will then discuss examples of potential solutions aimed at maximizing the knowledge gained from healthcare data and improving medical decision making..

8:30 PM **Closing Remarks**

AGENDA

THURSDAY, SEPTEMBER 12, 2019

North Carolina Medical Society | Population Health Collaborative

7:30 AM – 12:00 PM

7:30 AM **Registration**

8:00 AM **Breakfast**

9:00 AM **Physician Burnout: The Key to Solving Engagement Issues**

David Nace, MD, Innovacer

Physicians are concerned about the rapidly increasing administrative tasks and uncertainty in payment models due to recent regulatory changes. They spend more than a quarter of their time on EHRs, resulting in low care quality, reduced patient satisfaction, and increased burnout rate. Increased administrative burden is the key driver for the increase in physician burnout, therefore adoption of point-of-care insights and supports can reduce screen-time and allow greater patient-physician interaction time.

10:00 AM **Health Initiative**

11:00 AM **Panel: Connecting Healthcare**

12:00 PM **Lunch**

CHES Move to Value Summit | Healthcare at Risk

12:00 PM – 5:00 PM

12:00 PM **Lunch & Registration**

1:00 PM **North Carolina Value Environment**

Mandy Cohen, MD, Secretary, North Carolina Department of Health and Human Services

Dr. Cohen will highlight work being done by the state to drive value-based healthcare and how her department is leveraging the transition to managed care for over 1.5 million Medicaid beneficiaries to align incentives and focus on health outcomes. With insight from her work as a physician, she will stress the importance of social determinants and explain the state's focus on healthy opportunities with programs such as a state-wide resource platform called NCCARE360, and Medicaid pilots that will invest \$650 million to provide human services that improve health.

2:00 PM **ACO News & Innovations**

Teresa Wilson, DHHS Centers for Medicare & Medicaid Services

This session will describe the current Medicare Accountable Care Organization (ACO) options and those that are announced for 2020. The primary focus of the session is to highlight wellness and savings strategies of successful ACOs including telemedicine, addressing social determinants of health care, behavioral health integration, hospital-at-home programs, and approaches to address long-term opioid use.

2:50 PM **Break**

3:00 PM **Innovations in Addressing Social Determinants of Health Among Medicare Beneficiaries**

John Gorman, Gorman Health Group

An arms race is escalating among Medicare Advantage and Medicaid plans and health systems to offer new benefits and services in SDOH, such as housing, food insecurity, social isolation and transportation. Research is demonstrating that interventions in these areas may be the best hope of "bending the cost curve" for these beneficiaries and improving population health. There's also huge questions about how to pay for them, and integrate them into care coordination efforts. 25-year industry veteran John Gorman will light the path forward.

4:00 PM **Medicaid at Risk: Initiatives to Reduce State Risk**

Kelly Garrison, MBA, MHA, Emtiro Health

Ms. Garrison will provide a national overview of how managed care has been leveraged by states to address the costs associated with various populations and covered benefits under the Medicaid program. In addition to traditional managed care, several states have engaged provider-led accountable care organizations (ACO) to address spending growth and improve quality. Finally, states and managed care plans are engaging in Medicaid value-based payment (VBP) initiatives to shift risk and increase accountability at the provider level. North Carolina has the opportunity to review the challenges other states have experienced when implementing these delivery system and payment reforms to learn from their mistakes. Ms. Garrison will present case studies from three state Medicaid programs that have implemented programs similar to North Carolina's proposed transformation.

5:00 PM **Closing Remarks**

AGENDA

FRIDAY, SEPTEMBER 13, 2019

CHES Move to Value Summit | Healthcare at Risk

7:00 AM – 12:15 PM

7:00 AM **Breakfast**

8:00 AM **How Federal Policy is Driving Value Based Care**

Mara McDermott, JD, McDermott + Consulting

This session will provide an overview of the landscape for the movement to value in Washington, DC. Featuring a discussion of where we are with MACRA implementation and new CMS Innovation Center delivery and payment models, expect to come away with an understanding of how the Administration and Congress are impacting the move to value.

9:00 AM **Payer Perspective on Risk**

Shawn D. Gallagher, MBA, FAHM, Humana

Jeff Kiser, Aetna

Robert L. Waterhouse Jr., MD, MBA, HSM, UnitedHealthcare

Mark Werner, Blue Cross North Carolina

The Payer Panel will include local leaders from Aetna, BCBSNC, Humana, and United Healthcare. Panelists will address various subjects in respect to value-based healthcare including how their respective organizations are successfully implementing and managing risk through value. The panel will conclude with a Q&A from audience members.

Enhancing the Health of Our Community

Alisahah Cole, MD, Atrium Health

Dr. Cole will discuss what impacts health, how to recognize different health disparities across multiple segments, and how to track and measure health outcomes related to community initiatives.

9:50 AM **Break**

10:00 AM **NCIOM Accountable Care Communities**

Adam Zolotor, MD, NC Institute of Medicine

An Accountable Care Community is a regional multisector partnership that shares responsibility for coordinating and financing efforts to address multiple drivers of health. This model offers a new way to think about partnership and health. In the context of a rapid shift to value based payment in private and public insurance markets, North Carolina has an opportunity to rethink how we conceive health and the goals of our health system. This presentation will include a description of the opportunities, the model of an Accountable Care Community, and the necessary components and strategies at the state and local level.

Transitioning to Value: A Roadmap for Small and Rural Hospitals

Mary Blackburn, RN, MSN, Hugh Chatham Memorial Hospital

The journey from volume to value is uniquely different and can be particularly challenging for small and rural hospitals to navigate. This session will explore Hugh Chatham Memorial Hospital's approach, successes, and roadblocks as we have transitioned the care delivery system, providers and patients into an ACO care model that is designed to deliver value through lowering cost while providing exceptional clinical outcomes. Working through the existence of conflicting incentives, limited resources and competing priorities requires strong leadership, exceptional communication throughout the process, education of key stakeholders, and collaboration with experienced partners to make necessary organizational and operation changes for a successful future.

11:00 AM **Technology Solutions in a Risk-based Environment**

Paul Grundy, MD, Innovaccer

Amid rising costs and overutilization of resources, the aging population and increase in chronic diseases have become major challenges. It's mostly due to the lack of effective patient-provider channels, which often result in patients visiting emergency or urgent care facilities due to lack of knowledge about their health conditions. An efficient patient-physician relationship can significantly reduce the risk of unnecessary utilization and need for high-end care facilities. To address every patient's unique needs, physicians need specific insights into their historical data, vitals, lab reports, and more — right at the point-of-care. There should be a relationship-based approach to address patient needs and leverage relevant information to plan interventions. Primary care facilities need provider leaders who can enable efforts that can ensure holistic care.

12:00 PM **Closing Remarks**

12:15 PM **Lunch & Networking**

OUR SPEAKERS

Andora Bass, MD



Dr. Bass is the Section Chief for Pediatric Critical Care in the Department of Anesthesiology, Medical Director for the Pediatric Intensive and Intermediate Care Units, and Medical Director of Respiratory Care at Wake Forest Baptist Medical Center. Her clinical and research interests are in extracorporeal life support and advanced modalities for acute respiratory failure. She has been a facilitator for the Program to Enhance Relationship-Centered Communication at Wake Forest Baptist Medical Center since 2016.

Mary F. Blackburn, RN, MSN



Mary Blackburn brings more than 30 years of health care management experience to her roles as Chief Nursing Officer and Vice President of Growth and Market Development at Hugh Chatham Memorial Hospital in Elkin, NC. Since joining Hugh Chatham in 2007, she has held several positions, including Chief Practice Officer, Vice President of Operations, and Acting Chief Executive Officer. She has been at the forefront of Hugh Chatham's focus on sustainability through innovation, acute care and surgical services, provider recruitment, system-wide regulatory compliance and risk management, and strategic planning initiatives focused on growth and care transformation.

Mandy K. Cohen, MD, MPH



Dr. Cohen was appointed to the role of Secretary of the North Carolina Department of Health and Human Services in January 2017. Secretary Cohen and her team work tirelessly to improve the health, safety and well-being of all North Carolinians. Secretary Cohen and her team are focused on building a strong, efficient Medicaid program, improving early childhood health, safety and education, and combating the opioid crisis. Secretary Cohen is an internal medicine physician and has experience leading complex health organizations. Previously, she was the Chief Operating Officer and Chief of Staff at the Centers for Medicare and Medicaid Services. She brings a deep understanding of health care to the state and has been responsible for implementing policies for Medicare, Medicaid, the Children's Health Insurance Program, and the Federal Health Insurance Marketplace.

Alisahah J. Cole, MD



Dr. Cole is highly passionate about health equity, advocating that everyone should have the ability to achieve great health, no matter what they look like, how much money they make, or where they come from. In 2016, she became the first Vice President, System Medical Director of Community Health for Atrium Health. Most recently, she was promoted to Chief Community Impact Officer of Atrium Health, with expanding responsibilities over Health Equity, Community Health, Environmental Sustainability, Mobile Medicine, and Faith Community Health Ministry.

Shawn D. Gallagher, MBA, FAHM



Shawn Gallagher is the Regional Vice President of Provider Experience for Humana's Mid-Atlantic Region, where he is responsible for the development and execution of strategic provider relationships including contracting, business development, provider engagement, relations, and communications. Shawn has more than 20 years of health care experience, and in his 11 years at Humana, has played a significant role in transforming physicians' relationships from volume to value through innovative arrangements with integrated delivery systems, primary care physician groups, accountable care organizations, clinically integrated networks, and physicians health organizations, leveraging pay-for-performance and risk payment models.

Kelly Garrison, MBA



Kelly Garrison is the President and CEO for Emtiro Health, and serves as the Executive Director for Northwest Community Care Network (NCCN). Kelly joined NCCN more than seven years ago as the quality development coordinator and has served in a variety of positions that focused on quality, informatics, and operations. Through her experience in both hospital and community settings, she has developed a desire to support all sectors of health care with innovative models to drive improvement.

John Gorman



John Gorman is the Founder and Former Chairman at Gorman Health Group. For 22 years, he led the development of the industry's leading consulting practice and several entrepreneurial ventures in government health programs. His work focuses on Medicare Advantage, Medicaid, and Accountable Care Act strategy, and social determinants of health. John serves on the Board of Directors of Health Alliance Plan, the insurer arm of Henry Ford Health System. He is also on the Editorial Advisory Boards of Atlantic Information Systems and Bloomberg Government/Health.

Paul Grundy, MD



Dr. Grundy is the Chief Transformation Officer at Innovaccer. Affectionately known as the 'Godfather' of the Patient-Centered Medical Home model, he is the Founding President of the Patient-Centered Primary Care Collaborative (PCPCC) and a member of the National Academy of Medicine. Prior to Innovaccer Dr. Grundy enjoyed an esteemed career at IBM, as the Chief Medical Officer of IBM Healthcare Life Sciences, and the Global Director of Healthcare Transformation.

OUR SPEAKERS

Jeff Kiser



Jeff Kiser is the Market Head of Sales & Service for Aetna. In this capacity, Jeff is responsible for all new business sales and account management activities in the Carolinas. He has more than 25 years of health executive experience, including leadership roles with WakeMed Health & Hospitals, where he served as Director of Managed Care Contracting/Corporate & Community Health, and with UnitedHealthcare, where he served as Director of Network Management for North Carolina.

Mara McDermott, JD



Mara McDermott is Vice President of McDermott+Consulting, and is an accomplished health care executive with a deep understanding of federal health care law and policy, including delivery system reform, physician payment, and Medicare payment models. Most recently, Mara served as the Senior Vice President of Federal Affairs at America's Physician Groups. She worked on behalf of the association's member organizations to advance policies that promoted coordinated care, including working with members of Congress and their staffs, the administration, health policy stakeholders, and coalitions to advance alternative payment models. Previously, Mara was counsel in the health industry practice at a law firm in Washington, DC. She focused on issues affecting health industry clients, with emphasis on health policy and regulatory issues facing physician organizations, hospitals, pharmaceutical companies and academic medical institutions.

David Nace, MD



Dr. Nace has over 20 years of executive management experience leading large healthcare systems and payer health plans, as well as healthcare IT organizations. As a former Senior Vice President, Chief Medical Officer (CMO) with United Health Group and a Vice President, CMO with Aetna he combines a deep understanding of the industry with strong collaborative and cross-functional leadership skills. Presently, he is the CMO at Innovaccer.

Richard Lowman Orr, Jr. MD



Dr. Orr has practiced internal medicine for more than 30 years and served in leadership positions including hospital internal medicine medical staff leader and nursing home medical director. In 2013, he led Cornerstone Health Care's move to value as the frontline clinic leader in the Complex Care Clinic where patient care redesign reduced the cost of care by 14% within 13 months while improving clinical outcomes. He currently serves as the Clinical Medical Director of the Wake Forest Health Network Complex Care Clinic with goals of leading an expert clinical team that provides the right care at the right time in the right place for the most complex patients in value-based contracts.

Melanie Phelps, JD



Melanie Phelps serves as Senior Vice President, Health System Innovation, and Deputy General Counsel for the North Carolina Medical Society, where she has worked for over 19 years. She focuses on a variety of health policy issues and represents the interests of the medical community in public and private forums. Melanie provides research on legislative and regulatory matters and general legal and policy guidance on many of the issues affecting health care. She focuses most of her attention on issues related to the transition to value-driven health care, improving health, and connecting the traditional health care system with community health partners to address determinants of health. Melanie also serves as adjunct assistant professor in the Department of Academic Education at the Campbell University Jerry M. Wallace School of Osteopathic Medicine.

William Rice, MD



Dr. Rice is a Wake Forest School of Medicine faculty member and is the Medical Director for the University Internal Medicine practice. He received his degree from Bowman Gray School of Medicine in 1989 and completed his internal medicine residency at North Carolina Baptist Hospital in 1992. In addition to his faculty responsibilities, he enjoys teaching WakeOne optimization skills to colleagues.

Cory John Sessoms, MD



For the first seven years following his residency, Dr. Sessoms has worked as a hospitalist at High Point Medical Center. In 2015, he helped implement Cornerstone Health Care's (now Wake Forest Health Network's) Transitional Care Clinic, which focused on caring for uninsured and high-risk patients following hospital discharge. He currently serves as the Medical Director for the Transitional Care Clinic and has helped to reduce hospital readmission in this population. In 2016, Cory developed a successful system-wide sepsis initiative using lean process improvement. He later began serving as the hospital's Readmission Team Physician Leader focusing on reducing hospital admissions. In 2019, he began serving as Administrative Medical Director of the Wake Forest Health Network Complex Care Clinic along with Dr. Richard Orr, with goals of transforming the clinic into a transition-based clinic.

Robert L Waterhouse Jr., MD, MBA, HSM



Dr. Waterhouse finished high school in Newport News, Virginia. He pursued his undergraduate and medical education at Northwestern University in the Honors Program in Medical Education. He trained in urology at Case Western University Hospitals of Cleveland for both residency and fellowship. After finishing training, he began an academic career with the Urology Department at the Mount Sinai School of Medicine in New York, leaving in 1999 to found Piedmont Urology in the Charlotte, NC metropolitan area. There he pursued both an MBA and Health Sector Management certification from Fuqua School of Business at Duke University. From 2015 through 2017, he served as the medical director and chief medical officer for Carolina Urology. In addition, he led the organization's clinical research as principal investigator. He is a member of the National Medical Association and its associated R. Frank Jones Urology Section Executive Committee and the American Urology Association and its Public Policy Council. In 2017, he left clinical practice to pursue a career in population health with UnitedHealthCare of North Carolina as Chief Medical Officer.

OUR SPEAKERS

Brian J. Wells, MD, PhD



Dr. Wells has extensive experience in the extraction and analyses of EHR data both locally and for multicenter projects like the CDC funded SEARCH for Diabetes in Youth. Much of his research has focused on the creation of risk prediction models built from EHR data and the evaluation of outcomes in patients with diabetes. Dr. Wells is passionate about improving the creation and implementation of clinical decision support tools for better medical decision-making. He is the Principle Investigator of a currently funded AHRQ grant that is targeting high risk patients with “Direct to patient” text messages for hemoglobin A1c screening. The hope is to empower patients and improve efficiency by directing alerts away from physicians to other health care providers and patients directly.

Mark Werner



Mark Werner is the Vice President of Provider Networks for Blue Cross North Carolina. He is responsible for contracting, servicing, and creating strategic partnerships with providers in North Carolina. Mark has been with Blue Cross NC for over 20 years. Previously, he was the Director of Provider Contracting for Blue Cross NC, where he was responsible to oversee all provider contracting for North Carolina. This included maintaining the contractual relationships with the network of hospitals, physicians, and ancillary providers. Mark has over 20 years of experience in the managed care business. He has extensive background in negotiating and educating managed care provider networks in North Carolina. Prior to joining Blue Cross NC, he held a variety of managed care positions for both providers and payers.

Teresa Wilson



Teresa Wilson has worked for the Centers for Medicare & Medicare Services for more than 30 years. From 2004–2010, she was a founding employee of a biomedical device company for which she managed intellectual property, FDA submissions, and global marketing. Teresa rejoined CMS in 2011 to work with Medicare Shared Savings Program, Pioneer, and Next Generation Accountable Care Organizations. She currently works with 27 Next Generation ACOs. Teresa is a guest faculty member of Georgia’s Tech’s Master of Biomedical Innovation & Design program. She is also a TEDMED Innovation Research Scholar.

Adam J. Zolotor, MD, DrPH



Dr. Zolotor is the President and CEO of the North Carolina Institute of Medicine (NCIOM) and a professor of family medicine at the University of North Carolina School of Medicine. Dr. Zolotor has practiced family medicine in a small-town practice, rural emergency department, county health department and academic medical center. Dr. Zolotor started his academic career in child injury research and is well-known nationally for his work on the prevention of physical abuse, shaken baby syndrome and child discipline, as well as the policy issues around prevention. He joined the NCIOM in 2012 as the Vice President, and has served as the President and CEO since 2014. Dr. Zolotor has been involved in the institute’s leadership in developing many new initiatives, including the rural health plan, the child maltreatment prevention plan, the plan for Alzheimer’s and related dementia, and the legislative health policy fellowship program. Dr. Zolotor still practices family medicine at the University of North Carolina.