

# ARE YOU GOING?

Health Care Compliance Association's

## 13th Annual Compliance Institute

April 26–29, 2009 | Caesars Palace | Las Vegas, NV



### PHYSICIAN COMPLIANCE

#### 405 Preventative Medicine for Practice-Based Research: Practical Approaches for Promoting Compliance **CHRC**

- Basic rules for conducting clinical trials
- Practical recommendations for facilitating compliance in office-based research
- Tips for managing IRBs, sponsors, and oversight agencies



#### **RACHEL NOSOWSKY, ESQ., CHRC**

(405, 509)

Senior Counsel  
Miller Canfield Paddock & Stone, PLC  
Ann Arbor, MI



#### **KELLY WILLENBERG, MBA, BSN, RN, CHRC, PHD(C)** (405, 115)

Chesnee, SC

### RESEARCH/IRB

#### 509 Conflicts of Interest in Research: The New Enforcement Frontier **CHRC**

- Who is interested in research COI, why and recent developments as drivers for change
- Federal and state legislative and regulatory responses and enforcement
- Private initiatives (AAMC, AAHRPP, industry, etc.) and practical approaches for compliance and risk mitigation



#### **KARA MORGENSTERN, JD, MPH**

(509)

Assistant General Counsel  
University of Michigan  
Health System Legal Office  
Ann Arbor, MI



#### **RACHEL NOSOWSKY, ESQ., CHRC**

(405, 509)

Senior Counsel  
Miller Canfield Paddock & Stone, PLC  
Ann Arbor, MI

Register now at [www.compliance-institute.org](http://www.compliance-institute.org)

# Health Care Compliance Association's 13th Annual Compliance Institute

**GROUP  
DISCOUNT  
AVAILABLE**  
(see registration  
form)

April 26–29, 2009 | Caesars Palace | Las Vegas, NV



## Final Program

**HCCA**

**2009**  
CAESARS PALACE  
Las Vegas, NV

**COMPLIANCE  
INSTITUTE**

April 26–29, 2009

[www.compliance-institute.org](http://www.compliance-institute.org)

888-580-8373



HCCA is  going green

HCCA conference attendees will NOT automatically receive conference binders. Attendees will receive electronic access to course materials prior to the conference and a CD on-site with all the conference materials. If you would like to purchase the binders for \$75, please choose that option on the registration form.

Register now at [www.compliance-institute.org](http://www.compliance-institute.org)

# Details

## Interact with the following exhibitors at the Institute

- 3M Health Information Systems, Inc.
- AccuScribe
- Allegiance
- Allied Management Group—Special Investigations Unit
- American Hospital Association
- Association for Healthcare Documentation Integrity
- Association for Healthcare Internal Auditors
- Atlantic Information Services
- Axentis, Inc.
- Besler Consulting
- Blicken Wolf LLC
- BNA
- Captain Integrity/B&D Consulting LLC
- Carnahan Group
- Certiphi Screening, Inc.
- Coding Metrix Inc.
- Compliance 360
- Compliance Coach
- Compliance Concepts, Inc.
- ComplyAssistant LLC
- Craneware, Inc.
- CynergisTek, Inc.
- Daylight Forensic & Advisory
- DecisionHealth
- Deloitte & Touche LLP
- eHealthcareIT
- Epstein Becker & Green
- EthicsPoint
- George Washington University
- Global Compliance
- GMS/FACIS
- HCCA
- HCPro
- Health Care Compliance Strategies
- Health Revenue Assurance Associates
- Health System Concepts, Inc.
- HealthCare Appraisers, Inc.
- Huron Consulting
- IMA Consulting
- IMEDECS
- Indidge Systems
- Intrusion Inc.
- KPMG
- MC Strategies
- McKesson (Per Se)
- MCN Healthcare
- MDaudit
- Meade & Roach, LLP
- Medelearn
- Medical Learning, Inc.
- MediTract
- Medworxx
- Navigant Consulting Inc.
- NEMEA
- NetLearning, a part of Cengage Learning
- NSC, Inc.
- Parente Randolph
- PCG Software, Inc.
- Physician Chart Auditors, LLC
- Policy Medical Inc.
- PolicyTech
- PreCheck, Inc.
- PricewaterhouseCoopers
- Protiviti, Inc.
- Reimbursement Management Consultants, Inc.
- Rippe & Kingston Systems, Inc.
- Sinaiko Healthcare Consulting, Inc.
- Strategic Management
- Vendormate, Inc.
- Wolters Kluwer/MediRegs
- Zhealth Publishing

### BECOME CERTIFIED in Health Care Compliance

at HCCA's Compliance Institute:  
2:00–4:00 PM on Wednesday,  
April 29, 2009

#### ENJOY THE BENEFITS OF CHC CERTIFICATION:

"My supervisor told me recently that when I was hired as Compliance and Quality Assurance Manager he had no idea how valuable my CHC would be. He said because of my background and this certification that I have made compliance a high priority in an organization that had little knowledge of how the field has changed in recent years. I value my CHC certification and get so much information from the *Compliance Today* articles, the webinars, and the national convention."

— Cathy Garrey, Compliance & Quality Assurance Manager,  
McHenry County Mental Health Board

Planning to take the CHC exam at the  
Compliance Institute? Sessions marked in  
the brochure with **CHC** may be helpful.



### BECOME CERTIFIED in Health Care Research Compliance

*New*

at HCCA's  
Compliance Institute: 2:00–4:00 PM  
on Wednesday, April 29, 2009

#### ENJOY THE BENEFITS OF CHRC CERTIFICATION:

Demonstrate professional standards and status for healthcare research compliance professionals • Heighten the credibility of compliance practitioners and the compliance programs staffed by these certified professionals • Ensure that each certified practitioner has the knowledge base necessary to perform the compliance function • Facilitate communication with other industry professionals, such as government officials and attorneys • Demonstrate the hard work and dedication necessary to succeed in the compliance field

Planning to take the CHRC exam at  
the Compliance Institute? Sessions  
marked in the brochure with **CHRC**  
may be helpful.





# Continuing Education Credits

**AAPC:** This program has prior approval of the American Academy of Professional Coders (AAPC) for a maximum of 21 Continuing Education Units. Granting of this approval in no way constitutes endorsement by the Academy of the program, content or the program sponsor.

**ACHE:** This program has prior approval from the American College of Healthcare Executives (ACHE) for 21 category II continuing education credits.

**AHIMA:** This program has been approved for 22 continuing education units for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). (*External Forces.*)

**ASHRM:** The following have been approved for Continuing Education Credit toward fulfillment of the requirements of ASHRM designations of FASHRM (Fellow) and DFASHRM (Distinguished Fellow) and towards CPHRM renewal. The 13th Compliance Institute conference is approved for 13.75 contact hours; pre-conference 6.0 contact hours; and Industry Immersion (115 only) 5.0 contact hours.

**CA NURSING CE:** The Health Care Compliance Association is pre-approved by the California Board of Registered Nursing: Provider Number CEP 12990, for a maximum of 25.20 contact hour(s). The following states will accept CA Board of Nursing Contact Hours: Alabama, Alaska, Arkansas, Iowa, Kansas, Kentucky, Louisiana, Michigan, Minnesota, Nebraska, Nevada, New Mexico, North Carolina, North Dakota, Ohio, Oregon, Texas, West Virginia, Wyoming. The following states do not have continuing education requirements: Arizona, Colorado, Connecticut, Georgia, Hawaii, Indiana, Maine, Missouri, Montana, New York, Oklahoma, Pennsylvania, South Dakota, Tennessee, Vermont, Virginia, Washington, Wisconsin. The following states will NOT accept CA Board of Nursing contact hours: Delaware, Florida, New Jersey, Utah. Massachusetts and Mississippi nurses may submit CA Board of Nursing contact hours to their state board, but approval will depend on review by the board. If your state is not listed, we are in the process of obtaining information regarding continuing education from your state. Please check our website for updates regarding nursing credits. Please contact Caroline Lee Bivona at [ccb@hcca-info.org](mailto:ccb@hcca-info.org) with any questions you may have.

**CCB:** CHC, CCEP, CHRC CEUs have been approved. A maximum of 25.8 (25.2 without Industry Immersions) Sunday April 26, 2009: Preconference (Max 7.2); Morning Sessions 3.6; Afternoon Sessions 3.6; Monday, April 27, 2009: Max with Industry Immersions 7.8; Max without Industry Immersions 6.9; Morning Sessions 3.6; Industry Immersions 4.2; Afternoon Sessions 3.6; Tuesday, April 28, 2009: Max with Industry Immersions 6; Max without Industry Immersions 6; Morning Session with Industry Immersion 3.6; Morning Session 3.6; Afternoon Session with Industry Immersion 2.4; Afternoon Session 2.4; Wednesday, April 29, 2009: POST CONFERENCE (Max 4.8).

**MCLE/CLE:** Required sponsor documentation has been forwarded to and credit requested from most MCLE states with general requirements for all lawyers. A total of 21.0 CLE hours have been requested from the states that recognize the 60-minute credit hour, and 25.2 CLE hours from those states granting credits on a 50-minute basis. For New York participants, 25.0 CLE hours have been requested. Lawyers seeking credit in Pennsylvania must pay fees of \$1.50 per credit hour directly to the Pennsylvania CLE Board. The Health Care Compliance Association, the sponsor, pays applicable fees in other states where the sponsor is required to do so as well as in states where a late fee may become applicable. Please be aware that each state has its own MCLE rules and regulations, including its definition of "MCLE". Therefore, certain programs may not receive credit in some states. Lawyers from Kansas and Virginia must apply for credit individually with their respective state bars. For information on approved credit hours for your state, please contact Caroline Lee Bivona at [ccb@hcca-info.org](mailto:ccb@hcca-info.org), starting two to three weeks prior to the program date. The Health Care Compliance Association is a State Bar of California approved MCLE provider, a Rhode Island Accredited Provider, and a Texas Accredited Sponsor. Legal Ethics/and or Professionalism credit is being requested for the following sessions: P10 (2.75), 410 (.5), 509 (.5), 610 (.5), 710 (1); Elimination of Bias credit is being requested for the following sessions; 601 (.5), 608 (1), 212 (1) 206 (.5).

**NAB:** This program has been submitted for 21.0 continuing education clock hours for NAB/NCERS credit. The following tracks have been submitted for NAB/NCERS credit: P3; P11; Monday General Sessions; 102; 202; 302; Tuesday General Sessions; 402; 502; 602; 702; W2. Please contact Caroline Lee Bivona at [ccb@hcca-info.org](mailto:ccb@hcca-info.org) for further information.

**NAHQ:** This activity is approved by the National Association of Healthcare Quality for 17.25 CPHQ CE credit. The certification of this activity is valid for 12 months from the date the course is first offered, April 26-29, 2009.

**NASBA/CPE:** The Health Care Compliance Association 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: Sponsor Identification No: 105638. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit and may not accept one-half credits. To verify if your state board of accountancy has adopted one-half credits, please visit our website at [www.hcca-info.org/accountancycredits](http://www.hcca-info.org/accountancycredits). Complaints regarding registered sponsors may be addressed to the National Registry of CPE Sponsors, 150 Fourth Avenue North, Suite 700, Nashville, TN 37219-2417. Website: [www.nasba.org](http://www.nasba.org). A recommended maximum of 25 credits based on a 50-minute hour will be granted for the entire learning activity including Industry Immersions. A recommended maximum of 24.5 credits based on a 50-minute hour will be granted for the entire learning activity excluding Industry Immersions. This program addresses topics that are of a current concern in the compliance environment. An understanding of the USSG's Seven Elements of an Effective Compliance Program and compliance terminology and acronyms are pre-requisites of this learning activity. This is an update, group-live activity. For more information regarding administrative policies such as complaints or refunds, call the HCCA at 888-580-8373.

**RAAC:** The Research Administrators Certification Council (RACC) promotes the concept of voluntary certification by examination for all research and sponsored programs administrators. Certification in research and sponsored programs administration is highly valued and provides formal recognition of basic knowledge in the field.

**PLEASE NOTE:** The number of CEUs awarded is subject to change, pending the clinical review of the final content. Credit hours include participation in pre- and post-conference sessions.

*HCCA is in the process of applying for additional CE credits from outside organizations. If you do not see information on your specific accreditation listed three months prior to the date of the event, please contact us at 888-580-8373, as we would like the opportunity to offer it.*

## AFFINITY GROUP MEETINGS IN 2009: Hold your organization's meeting in conjunction with HCCA's Compliance Institute!

**BENEFIT:** Holding your meeting in Las Vegas will enable your members/staff to network at the largest conference for health care compliance professionals.

**DISCOUNTS:** All members from your organization will receive the HCCA member rate to the 2009 Compliance Institute.

**BOOK YOUR MEETING:** HCCA will hold the 2009 Compliance Institute at Caesars

Palace. Approved applications will receive complimentary meeting room space at the conference site and your choice of complimentary continental breakfast or AM or PM break. Food and beverage will be arranged through HCCA.

Contact [jodi@hcca-info.org](mailto:jodi@hcca-info.org) for more information.

# Speakers



**TAMAR ABELL** (208, W2)  
Vice President  
ABS Management  
Chicago, IL



**WILMA ACOSTA, RN, BS, CHC, CHA**  
(511)  
Interim Director of Compliance  
and Accreditation  
Providence Centralia Hospital  
Centralia, WA



**TIM P. ADAMS, FACHE** (406)  
Vice President, Division II  
Community Health Systems  
Franklin, TN



**DANIEL R. ANDERSON** (W6)  
Deputy Director  
Commercial Litigation Branch  
Civil Division  
U.S. Department of Justice  
Washington, DC



**GREGORY ANDERSON** (P5)  
Partner  
Horne LLP  
Hattiesburg, MS



**JANA KOLARIK ANDERSON** (401)  
Attorney  
Epstein Becker & Green PC  
Washington, DC



**JANICE A. ANDERSON** (408)  
Partner  
Foley & Lardner LLC  
Chicago, IL



**URTON ANDERSON, CCEP** (P20)  
Chair, Dept of Accounting  
Univ of TX Austin  
McCombs School of Business  
Austin, TX



**AUDREY T. ANDREWS** (112)  
Chief Compliance Officer  
Tenet  
Dallas, TX



**CHRISTINE ANUSBIGIAN, MBA** (101)  
Senior Manager  
Deloitte & Touche LLP  
Detroit, MI



**KATIE ARNHOLT** (108)  
Senior Counsel  
US Dept of HHS OIG  
Washington, DC



**MARTI ARVIN, CHC-F, CCEP, CHRC, JD**  
(P4, W4)  
Privacy Officer  
University of Louisville  
Louisville, KY



**CHRISTINE BACHRACH, MS, CHC-F**  
(103)  
SVP & Chief Compliance Officer  
HealthSouth  
Birmingham, AL



**DEANN M. BAKER, CHC, CCEP, CHRC**  
(P17)  
Chief Corporate Compliance Officer  
Alaska Native Tribal Health Consortium  
Anchorage, AK



**DAVID BASLER** (P18)  
General Counsel/  
Director of Organizational Compliance  
ChildServe  
Johnston, IA



**PAUL BELTON, JD** (112)  
VP Corporate Compliance  
Sharp Health Care  
San Diego, CA



**MARY BENNETT** (601)  
Vice President  
Ethical Leadership Group,  
A Global Compliance Company  
Charlotte, NC



**ROBERT BENVENUTI, III** (708)  
Member  
Barnett Benvenuti & Butler PLLC  
Lexington, KY



**TERESA BIVENS, CPC, CHC** (115)  
Deputy Compliance Officer  
University of Louisville HSC  
Louisville, KY



**MICHAEL BLAU** (506)  
Partner  
Foley & Lardner LLP  
Boston, MA



**JOHN T. BOESE** (P16)  
Partner  
Fried Frank Harris Shriver & Jacobson LLP  
Washington, DC



**ROBERT L. BORNTLAGER, CHC** (P2)  
Compliance Officer  
County of San Diego  
San Diego, CA

**JANE BOUBELIK** (101)  
Chief Counsel  
UCLA Health System  
Los Angeles, CA

**MICHAEL BOWERS** (512)  
Director of Facilities & Engineering  
Riverside County Regional Medical Center



**CYNTHIA E. BOYD, MD, MBA, FACP**  
(309)  
Assoc VP & Chief Compliance Officer  
Rush University Medical Center  
Chicago, IL



**KIMBERLY BRANDT** (GEN. SESSION)  
Director Program Integrity Group  
Centers for Medicare & Medicaid Services  
Baltimore, MD



**GLORYANNE H. BRYANT** (W7)  
Senior Director  
Catholic Healthcare West  
San Francisco, CA



**KEN BURGESS** (W2)  
Attorney  
Poyner & Spruill LLP  
Raleigh, NC



**ELIZABETH CALLAHAN-MORRIS** (P7)  
Attorney  
Hall Render  
Troy, MI



**SARAH ELIZABETH CAMPBELL, CHC**  
(309)  
Director of Policy Management  
Tenet Healthcare Corporation  
Dallas, TX



**DAWN M. CARMAN, JD, CHC** (706)  
Principal  
Denali Compliance Group, LLC  
Anchorage, AK



**NICK CIANCIO** (410)  
Senior Vice President  
Marketing and Business Development  
Global Compliance  
Charlotte, NC



**DWIGHT CLAUSTRE, CHC, CHRC**  
(109, 709)  
System Dir Corp Compliance  
Catholic Healthcare West  
Phoenix, AZ



**CHRIS COLLIN** (P10)  
Manager, Ethics & Compliance  
General Mills  
Minneapolis, MN



**ANDREW G. CONKOVICH, CHC, MBA**  
(P14, 302, W2)  
Director of Regulatory Affairs  
and Compliance  
University of Louisville Hospital  
Louisville, KY



**PATRICK CONNELL, MBA, CHC, CHE**  
(111)  
Chief Compliance Officer  
Boystown National Research Hospital  
Omaha, NE



**DARRELL CONTRERAS,  
ESQ, CHC, CHRC** (P14)  
Chief Compliance Officer  
Lakeland Regional Medical Center  
Lakeland, FL

**JEFF COOPER** (609)  
Director  
Huron Consulting Group  
Washington, DC



**JAN COUGHLIN, CHC** (607)  
Compliance Program Director  
and Privacy Officer  
Scripps Health  
San Diego, CA



**JENNIFER DALEY, MD, FACP** (508)  
Chief Medical Officer  
Partners Community Health Care  
Boston, MA

**ROBERT DECONTI (W6)**  
Chief, Admin & Civil Remedies Branch  
Office of Inspector General  
Washington, DC



**SHAWN DEGROOT, CHC-F, CCEP (P17)**  
VP of Corporate Responsibility  
Regional Health  
Rapid City, SD



**PAUL DEMURO, JD, CHC (W6)**  
Partner  
Latham & Watkins, LLP  
San Francisco, CA

**MARTIN DILLER (102)**  
Chief Information Officer  
Complete Healthcare Resources, Inc.  
Dresher, PA



**CHERYL DILLON,  
RNC, BSN, WCC, LNHA (208)**  
Director of Quality Assurance  
ABS Management  
Carterville, IL



**KENDRA DIMOND, JD, CHRC (P9)**  
Director  
Daylight Forensic & Advisory  
Washington, DC

**TAMA ANTONIA DONALDSON (P12)**  
Director, Ethics & Compliance  
Abbott Vascular  
Santa Clara, CA



**ANNE E. DOYLE, MBA (113)**  
Executive VP/Chief Compliance Officer  
Fallon Community Health Plan  
Worcester, MA



**MARJORIE W. DOYLE, JD, CCEP  
(310)**  
Ethics & Compliance Advisor  
Marjorie Doyle & Associates, LLC  
Landenberg, PA



**SUZIE DRAPER (P18)**  
V.P. Business Ethics and Compliance  
Intermountain Healthcare  
Salt Lake City, UT

**KARLA DREIBACH, CHC (W2)**  
Senior Director of Compliance  
Friends Services for the Aged  
Gwynedd, PA



**JEFFREY DRIVER, JD (508, 115)**  
EVP & Chief Risk Officer  
Stanford University Medical Center  
Palo Alto, CA



**JOEL DZIENGIELEWSKI (P11)**  
Director Forensic Services  
KPMG LLP  
New York, NY



**MARK J. EDDY, BBA, CPA (207)**  
VP Internal Audit  
HCA  
Nashville, TN



**GEORGEANN EDFORD, MBA, RN, CCSP  
(114)**  
President  
Coding Compliance Solutions, LLC  
Birmingham, MI



**BRUCE W. EDWARDS,  
CISM, CISA, CIA, FLMI (P4)**  
Chief Information Security Officer  
University of Louisville  
Louisville, KY



**GARY EILAND (W6)**  
Partner  
King & Spalding LLP  
Houston, TX



**LYNN ELSTEIN (P18)**  
AVP Quality and Patient Safety  
Intermountain Healthcare  
Salt Lake City, UT



**JAMES EPEL (GEN. SESSION)**  
Vice President of Network Management  
Blue Cross Blue Shield of MN  
Minneapolis, MN



**JOANNE B. ERDE (503)**  
Partner  
Duane Morris LLP  
Miami, FL



**CHERYL DEKKER ESTERS, BS, CHC (P2)**  
Compliance Officer  
County of Solano  
Fairfield, CA



**JOHN FALCETANO,  
CHC-F, CIA, CCEP, CHRC (P17, 115)**  
Chief Audit/Compliance Officer  
University Health Systems of Eastern Carolina  
Greenville, NC



**RAMY FAYED (209)**  
Associate  
Sonnenschein Nath & Rosenthal LLP  
Washington, DC



**HEATHER FESKO (308)**  
Partner  
McGuireWoods  
Chicago, IL



**PAUL FIORELLI, JD, MBA, CCEP (710)**  
Director, Cintas Institute for Business Ethics  
Xavier University  
Cincinnati, OH



**WILLIAM FISCHER (504)**  
Of Counsel  
Holland & Hart  
Denver, CO



**JEFFREY FITZGERALD (706)**  
Partner  
Faegre & Benson, LLP  
Denver, CO



**BRIAN FLOOD (P13)**  
National Managing Director  
KPMG, LLP  
Austin, TX



**DAVID FRANK, ESQ. (503)**  
Director, Medicaid Integrity Program  
Centers for Medicare & Medicaid Services  
Baltimore, MD



**RICHARD E. GARDNER, JD (602)**  
Partner  
Arnall Golden Gregory, LLP  
Atlanta, GA



**LINDA GARRETT, JD (P2)**  
Partner  
Risk Management Services  
Cotati, CA



**STEPHEN GILLIS (707)**  
Director of Billing Compliance  
Mass General Hospital & Mass General  
Phys. Org.  
Boston, MA



**DAVID M. GLASER (206)**  
Attorney  
Fredrikson & Byron PA  
Minneapolis, MN



**ROGER S. GOLDMAN (W6)**  
Partner  
Latham & Watkins, LLP  
Washington, DC



**MARC D. GOLDSTONE, JD (406)**  
General Counsel  
Broward Health  
Fort Lauderdale, FL



**TERRI B. GRAHAM, RN, MSN,  
NHA, CHC (W2)**  
VP of Compliance and  
Corporate Compliance Officer  
Kindred Healthcare, Inc  
Louisville, KY

**MICHAEL D. GRANSTON (P16)**  
Deputy Director  
Commercial Litigation Branch  
Civil Division  
U.S. Department of Justice

**KIM GREEN (113)**  
Compliance Officer  
Blue Cross and Blue Shield  
Northern Plains Alliance  
Minneapolis, MN



**LEAH B. GUIDRY (609)**  
Director  
Huron Consulting Group  
Washington, DC



**REGINA GURVICH (303)**  
Director, Compliance and Special  
Investigations  
Health Plus PHSP  
Brooklyn, NY



**GEORGETTE GUSTIN, CPC, CCS-P, CHC  
(305)**  
Director Phys Clinic Doc. & Audit Operations  
Southern California Permanente  
Medical Group  
Pasadena, CA



# Speakers



## **BETSY HALL, MPH (708)**

Corporate Compliance Officer, Privacy Officer & Information Security Officer  
Legal, Risk Management & Compliance  
Jewish Hospital & St. Mary's HealthCare  
Louisville, KY



## **KEITH HALLELAND (211)**

Shareholder  
Halleland Lewis Nilan & Johnson, PA  
Minneapolis, MN



## **MARGARET J. HAMBLETON, CHC, MBA, CPHRM (112)**

Sr. Vice President, Ministry Integrity  
St. Joseph Health System  
Orange, CA



## **HARLAN HAMMOND (P18)**

Intermountain Healthcare  
Salt Lake City, UT



## **MARY E. HENTOSZ, MSN, CRNP, CPHQ (113)**

Senior Director, Compliance  
UPMC Health Plan  
Pittsburgh, PA

## **MOLLY HESS (402)**

Executive Director  
Philadelphia Nursing Home  
Philadelphia, PA



## **LYNDA HILLIARD, CCEP, CHC (P17)**

Deputy Compliance Officer  
University of CA  
Oakland, CA



## **DEBRA HINSON, MBA, CHC, CHP, CCEP (W4)**

VP & Chief Compliance Officer  
Regency Hospital Company  
Alpharetta, GA



## **FAITH MARIE HOPE, CHC, CPC, CCS-P (305)**

Director, Coding & Billing Compliance  
Nemours Childrens Health System  
Wilmington, Delaware



## **DAVID HORNER, PHD, CHC (403)**

Division Manager  
County of Orange Health Care Agency  
Santa Ana, CA



## **ALAN C. HOROWITZ (602)**

Assistant Regional Counsel,  
Office of the General Counsel  
U.S. Department of Health and Human Services  
Philadelphia, PA



## **DONNETTA HORSEMAN, MA, CHC, CIPP, CCE (404)**

Corporate Privacy Director  
MedStar Health, Inc.  
Baltimore, MD



## **JAMES D. HORWITZ (205)**

VP Corporate Responsibility/General Counsel  
Glens Falls Hospital  
Glens Falls, NY



## **LINDA HOWARD, CHC, JD (P6)**

Associate Vice President, Risk Control and Compliance Officer  
Amerigroup Corporation  
Virginia Beach, VA



## **JACQUELINE K. HUBER (P12)**

Corporate Vice President & Chief Compliance Officer  
Biomet, Inc.  
Warsaw, IN

## **ROBERT HUSSAR (GEN. SESSION)**

First Deputy Medicaid Inspector General  
NYS Office of the Medicaid Inspector General  
New York, NY



## **GABRIEL L. IMPERATO, ESQ, CHC (W6)**

Managing Partner  
Broad and Cassel  
Fort Lauderdale, FL

## **DAVID L. JACKSON, MD, PHD (702)**

President  
Jackson & Associates, Inc.  
Baltimore, MD



## **RORY JAFFE, MD, CHC, MBA (412)**

Executive Director  
California Hospital Patient Safety Organization (CHPSO)  
Sacramento, CA



## **ROBIN JAY (111)**

President  
Las Vegas Convention Speakers Bureau  
Las Vegas, NV



## **DARYL P. JOHNSON, MACC, AVA (506)**

Principal  
HealthCare Appraisers, Inc.  
Delray Beach, Florida



## **MILDRED L. JOHNSON, JD, CPC, CCEP (212)**

Institutional Compliance Officer  
Texas Tech University Health Sciences Center  
Lubbock, TX



## **D. SCOTT JONES, CHC (P8)**

VP Corp Comp & Risk Mgmt  
AHPIS  
Philadelphia, PA



## **DEREK KANG (703)**

Compliance Officer  
Texas Children's Hospital



## **DIANE KISSEL, PMP, CISA, CGEIT (102)**

IS Risk & Compliance Manager  
Kindred Healthcare  
Louisville, KY



## **CAROLE ANN KLOVE, RN, JD, CHRC (411)**

Chief Comp & Privacy Officer  
UCLA  
Medical Sciences  
Los Angeles, CA



## **SUZANNE KNIGHT, BSN, CHC (705)**

Senior Professional Billing and Coding Educator  
University of Michigan Faculty Group Practice  
Ann Arbor, MI

## **JAMES KOENIG (104)**

PricewaterhouseCoopers  
Philadelphia, PA

## **STEVE KOHLER (203)**

Senior Director  
McBee Associates, Inc.  
Wayne, PA



## **TERESA KRAEMER, RN, JD (114)**

Director  
Deloitte & Touche, LLP  
Portland, OR



## **LATOUR LAFFERTY, CHC (W6)**

Partner  
Fowler White Boggs Banker, PA  
Tampa, FL



## **CAROL LANDSMAN (409)**

Director  
Navigant Consulting  
New York, NY



## **DIETER LEHNORTT, MA (P11)**

Assistant Vice President/Institutional Compliance Officer  
University of Texas Southwestern Medical Center at Dallas  
Dallas, TX



## **SHAWN LEONARD (113)**

Privacy Officer & Web Master  
Health Care Compliance Association  
Minneapolis, MN



## **DANIEL R. LEVINSON (GEN. SESSION)**

Inspector General  
Office of Inspector General  
U.S. Department of Health and Human Services  
Washington, DC

## **FRANK LOPEZ (610)**

Director of Compliance  
Corporate Counsel  
Qwest Communications  
Denver, CO



## **HOLLEY THAMES LUTZ (P19, 109)**

Partner  
Sonnenschein Nath & Rosenthal LLP  
Washington, DC

## **DONNA J. MAASSEN, CHC (202, 302, W2)**

Director of Compliance  
Extendicare Health Services, Inc.  
Milwaukee, WI



## **JAN MALCOLM (GEN. SESSION)**

CEO  
Courage Center  
Minneapolis, MN



**DAVID MATYAS (115)**

Member of the Firm  
Epstein Becker and Green  
Washington, DC



**SUSAN MCANDREW, JD (304)**

Deputy Director for Health Information Privacy  
U.S. Department of Health and Human Services  
Office for Civil Rights  
Washington, DC



**JUDI MCCABE, RN, MSHP, CHC, CPHQ (108)**

Director  
TMF Health Quality Institute  
Austin, TX



**WILLIAM MCCARTHY (501)**

Senior Manager  
Parente Randolph  
Mechanicsburg, PA



**VICKIE L. MCCORMICK (P6)**

VP, Health Care Compliance  
DePuy Orthopedics  
Warsaw, IN



**DAN MCCULLOUGH, BA, RN, CHC (108)**

Analyst  
TMF Health Quality Institute  
Austin, TX



**ANDREA MCELROY (W2)**

Senior Dir Comp System Integrity  
Golden Living  
Franklin, WI



**STEVE MCGRAW (701)**

President/CEO  
Compliance 360  
Alpharetta, GA



**RYAN MEADE, JD, CHRC (W9, P19)**

Partner  
Meade & Roach, LLP  
Chicago, IL



**KELLI MEYER, CHC (507)**

Director Comp Programs  
Allina Hospitals & Clinics  
Minneapolis, MN



**ROBERT R. MICHALSKI, CHC (704)**

Vice President and Chief Compliance Officer  
West Penn Allegheny Health System  
Pittsburgh, PA



**BARBARA L. MILTENBERGER, JD, RN (702)**

Partner  
Husch Blackwell Sanders, LLP  
Jefferson City, MO



**FREDERICK M. MORGAN, JR (P16)**

Morgan Verkamp, LLC  
Cincinnati, OH



**KARA MORGENSTERN, JD, MPH (509)**

Assistant General Counsel  
University of Michigan  
Health System Legal Office  
Ann Arbor, MI



**DR. STEPHEN MORREALE, CHC, CCEP (110)**

Professor  
Worcester State College  
Worcester, MA



**MARY JO MORRISON (P8)**

Vice President, Quality  
Allina Hospitals & Clinics  
Minneapolis, MN



**MICHAEL A. MORSE, ESQ (608)**

Partner  
Pietragallo Gordon Alfano  
Bosick & Raspanti, LLP  
Philadelphia, PA



**NANCY E. MOSER, BSN, JD, CHC (308)**

System Director, Compliance/  
Quality and Risk Management  
Community Healthcare System  
Munster, IN



**GLEN C. MUELLER (607)**

Vice-President—Chief Audit, Compliance, and  
Information Security Executive  
Scripps Health  
San Diego, CA



**KAREN A. MURRAY, MBA, FACHE, CHC (707)**

Chief Compliance Officer  
Yale New Haven Hospital  
Office of Privacy & Corporate Compliance  
New Haven, CT



**LISA MURTHA, JD, CHC (P19)**

Managing Director  
Health and Education Consulting Practice  
Huron Consulting Group  
New York, NY



**LYNN MYERS, MD (312)**

VP Coding, Compliance & Education  
MedicalEdge Healthcare Group, Inc.  
Dallas, TX



**JEFFREY A. NAGEL, PHD, CHC (P2)**

Chief Compliance Officer  
Orange County Health Care Agency  
Santa Ana, CA



**DAVID B. NELSON, CISSP, CIPP/G, CHRC (604)**

Privacy Officer  
County of San Diego  
San Diego, CA



**ROBERT NICHOLSON (306)**

Of Counsel  
Broad & Cassel  
Fort Lauderdale, FL



**ROBERT NOLAN (511)**

VP & Chief Compliance Officer  
PharMerica Corporation  
Louisville, KY



**MARY ANN NORTHRUP (409)**

Associate Director  
Navigant Consulting  
Chicago, IL



**RACHEL NOSOWSKY, ESQ., CHRC (405, 509)**

Senior Counsel  
Miller Canfield Paddock & Stone, PLC  
Ann Arbor, MI



**JENNIFER M. O'BRIEN, ESQ. (P10, 201)**

Shareholder  
Halleland Lewis Nilan & Johnson  
Minneapolis, MN



**KIRK OGROSKY, JD (606)**

Deputy Chief—Fraud Section  
U.S. Department of Justice  
Washington, DC



**LISA OHRIN, ESQ. (205, 401)**

Partner  
Sonnenschein Nath & Rosenthal LLP  
Washington, DC



**TOM O'KEEFE (301)**

Executive Vice President  
Ethics Point, Inc.  
Portland, OR



**DAVID B. ORBUCH (GEN. SESSION)**

President  
Phillips Eye Institute  
Minneapolis, MN



**STEVEN W. ORTQUIST, CHC-F, CCEP (P6, 508)**

Partner, Meade & Roach, LLP  
Managing Director,  
Aegis Compliance & Ethics Center, LLP  
Chicago, IL



**SUZANNE PAGE (W9)**

University of Miami  
Miami, FL



**LARRY PARSONS (P20)**

Vice President,  
Business Conduct and Ethics  
Freescale Semiconductor, Inc.  
Austin, TX



**PHYLLIS A. PATRICK, MBA, FACHE, CHC (707)**

Compliance & Privacy Officer  
Greenwich Hospital  
Greenwich, CT



**NANCY PAYNE (P8)**

Director Compliance and  
Regulatory Affairs  
Allina Hospitals & Clinics  
Minneapolis, MN



# Speakers



**ROBERT A. PELAIA (605)**  
Senior University Counsel  
for Health Affairs—Jacksonville  
University of Florida  
Jacksonville, FL



**PAUL E. PELLETIER (W6)**  
Principal Deputy Chief, Fraud Section  
U.S. Department of Justice  
Washington, DC



**ED PETRY, PHD (P20)**  
Vice President  
Ethical Leadership Group, A Global  
Compliance Company  
Worcester, MA

**JOAN M. PODLESKI (204)**  
Dir of Institutional Ethics & Compliance  
Duke University  
Durham, NC



**STEVE PRIEST (410)**  
President  
Ethical Leadership Group,  
A Global Compliance Company  
Chicago, IL



**MARC S. RASPANTI, ESQ. (W6)**  
Partner  
Pietragallo Gordon Alfano  
Bosick & Raspanti, LLP  
Philadelphia, PA



**EDWIN RAUZI (106)**  
Partner  
Davis Wright Tremaine LLP  
Seattle, WA



**LISA RE (502)**  
Office of Counsel to the Inspector General  
Department of Health & Human Services  
Washington, DC



**ANDREW E. REISMAN (W10)**  
Senior Manager  
Ernst & Young  
Chicago, IL



**JUDY RINGHOLZ, RN, JD, CHC (408)**  
Manager  
Huron Consulting Group



**DANIEL R. ROACH (GEN. SESSION, 311)**  
VP Compliance and Audit  
Catholic Healthcare West  
San Francisco, CA



**RICK ROBINSON (709)**  
Partner  
Fulbright & Jaworski, LLP



**DON ROMANO (106)**  
Partner  
Arent Fox, LLP



**RANDY ROMES, CISSP, MCP (407)**  
Principal  
LarsonAllen, LLP  
Minneapolis, MN



**LUCY ROSE (114)**  
National Managing Director  
Deloitte & Touches' Life Sciences  
Regulatory Consulting Group



**DAVID ROSENBLUM (P6)**  
Partner  
McDermott Will & Emery LLP  
Chicago, IL



**MARK P. RUPPERT, CPA, CIA, CISA, CHFP (107)**  
Director, Internal Audit  
Cedars-Sinai Health System  
Los Angeles, CA



**PAULA G. SANDERS (202)**  
Partner  
Post & Schell, P.C.  
Harrisburg, PA



**KELLY J. SAUDERS, CPA, MBA (707)**  
Partner  
Deloitte & Touche  
New York, NY

**MITCH SARUWATARI (512)**  
VP Quality and Compliance  
LiveProcess



**MARK SAWYER, CHC (203)**  
Chief Compliance Officer and Chief of Staff  
Youth Advocate Programs, Inc.  
Johnstown, PA



**KRISTIN SCARCELLA, JD (705)**  
Assistant Director, Reimbursement,  
Compliance and Education  
University of Michigan Faculty Group Practice  
Ann Arbor, MI

**WHITNEY SCHMIDT, ESQ. (W6)**  
Chief, Civil Division  
Assistant United States Attorney  
Middle District of Florida  
Tampa, FL



**TOM SCHUMACHER (P12)**  
Vice President, Ethics and Compliance  
Cardiac Rhythm Disease Management  
Medtronic, Inc.  
Minneapolis, MN



**SANDRA L. SESSOMS, CHC (704)**  
Director, Compliance  
West Penn Allegheny Health Sys  
Pittsburgh, PA



**FRANK SHEEDER, JD, CCEP (510, W1)**  
Partner  
Jones Day  
Dallas, TX



**JAMES G. SHEEHAN, ESQ. (P13)**  
Medicaid Inspector General  
Office of the Medicaid Inspector General  
Albany, NY



**JEFFREY E. SINAIKO (115)**  
President  
Sinaiko Healthcare Consulting, Inc.  
Los Angeles, CA



**STEVEN E. SKWARA (113)**  
Partner  
Epstein Becker & Green, P.C.  
Washington, DC



**HEIDI A. SORENSEN, ESQ. (706)**  
Foley & Lardner, LLP  
Washington, DC



**PEGGY SPOSATO, RN (606)**  
Senior Legal Analyst and Investigator  
U.S. Dept. of Justice, Criminal Division  
Washington, DC



**DANIEL P. STECH, MBA, CMPE (P5)**  
Executive Director, Products and Innovation  
The Pinnacle Group  
Denver, CO



**JOHN E. STEINER, JR., ESQ. (406)**  
Chief Compliance Officer  
UK Healthcare  
Lexington, KY



**MARY STORM (P7)**  
Corporate Responsibility Officer  
St. Mary's of Michigan  
Saginaw, MI



**JOHN STOXEN (P10)**  
Director, Business Conduct & Compliance  
3M  
St. Paul, MN



**PENNY STROUD (P5)**  
President  
MD Ranger/Cattaneo & Stroud, Inc.  
Burlingame, CA



**JOSÉ TABUENA, JD, CFE, CHC (312)**  
Chief Governance and  
Compliance Officer  
MedicalEdge Healthcare Group, Inc.  
Dallas, TX

**TAMAR V. TERZIAN, ESQ. (206)**  
Senior Counsel  
Office of Counsel to the Inspector General/  
Department of Health and Human Services,  
Administrative and Civil Remedies Branch  
Washington, DC



**HARVEY TETTLEBAUM (502)**  
Partner  
Husch Blackwell Sanders, LLP  
Jefferson City, MO

**ROBERT TIETJEN (711)**  
CEO  
PolicyTech




**MATTHEW F. TORMEY (112)**  
Vice President  
Compliance, Internal Audit, and Security  
Health Management Associates




**CYNTHIA TRAPP, CHFP, CMPE, CPC, CPC-I, CCS-P, CHC, PCA (P15)**  
Director, Professional Coding  
Lahey Clinic Hospital, Inc.  
Burlington, MA

# Speakers

 **DEBBIE TROKLUS, CHC-F, CCEP, CHRC (P1)**  
AVP Compliance  
University of Louisville HSC  
Louisville, KY


 **DEAN TRUE, RN, CHC (403)**  
Compliance Officer  
Butte County Department of Behavioral Health  
Chico, CA

 **SHERYL VACCA, CHC-F, CCEP, CHRC (412, W10)**  
SVP/Chief Compliance and Audit Officer  
University of California  
Oakland, CA

 **JOHN VALENTA, CPA, MBA (101)**  
Director, Health Sciences  
Deloitte & Touche, LLP  
Costa Mesa, CA


**ANDREW VAN HAUTE (P12)**  
Associate General Counsel  
AdvaMed  
Washington, DC


 **LAWRENCE W. VERNAGLIA, MPH, JD (105)**  
Partner  
Foley & Lardner LLP  
Boston, MA


 **ANDREW WACHLER (201)**  
Owner/Principal  
Wachler & Associates, P.C.  
Royal Oak, MI


 **ROBERT A. WADE, ESQ. (611)**  
Partner  
Baker & Daniels LLP  
South Bend, IN

 **CHERYL WAGONHURST, CCEP (112)**  
Partner  
Foley & Lardner LLP  
Los Angeles, CA


 **HANK WALKER (GEN. SESSION)**  
Partner  
Andrade/Walker Consulting, LLC  
Bellevue, WA

 **WILLIAM H. WALLACE, JR, JD (209)**  
Compliance Officer  
University of Tennessee  
Knoxville, TN

 **GREGORY WARNER, CHC (P1)**  
Director for Compliance  
Mayo Clinic  
Rochester, MN

 **DEBI WEATHERFORD (307)**  
Director, Internal Audit  
Piedmont Healthcare  
Atlanta, GA

 **MATTHEW WEBER (504)**  
Partner  
Holland and Hart, LLP  
Denver, CO


 **GADI WEINREICH (106)**  
Partner  
Sonnenschein Nath & Rosenthal, LLP  
Washington, DC

**SHERRY WEISSE (P15)**  
System Project Manager Professional,  
Coding Department  
Lahey Clinic Medical Center  
Burlington, MA

**SUSAN WELSH (505)**  
Compliance Manager  
HMA  
Fort Myers, FL

**KRISTIN H. WEST, CHRC (P9)**  
Assoc VP & Director  
Emory University Office of Research Compliance  
Atlanta, GA

 **SARA KAY WHEELER (206)**  
Partner-Attorney  
King & Spalding  
Atlanta, GA


 **ROBIN L. WILCOX, CPA, CHC, CCEP (212)**  
Associate Compliance Officer  
University of Louisville  
Louisville, KY


**CHRISTINA WILDRICK (W2)**  
Director of Risk Management  
Peace Church Compliance Program  
Gwynedd, PA

 **KELLY WILLENBERG, MBA, BSN, RN, CHRC, PHD(C) (405, 115)**  
Chesnee, SC

 **KAREN D. WILSON, JD, CCEP (210)**  
Managing Director  
Citadel Compliance Group LLC  
Dallas, TX

 **LORI WINK (P7)**  
Attorney  
Hall Render  
Milwaukee, WI

 **DEBRA W. YANG (W6)**  
Partner  
Gibson Dunn & Crutcher  
Los Angeles, CA

 **HOWARD J. YOUNG, JD (101)**  
Partner  
Sonnenschein Nath & Rosenthal, LLP  
Washington, DC

 **KENNETH ZEKO (P11)**  
Director  
KPMG  
Dallas, TX

**BARBARA ZEMLOCK (402)**  
Partner  
Post & Schell, PC  
Harrisburg, PA

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# Schedule at a Glance

Tracks	GENERAL COMPLIANCE/HOT TOPICS	LEGAL & REGULATORY	MEDICAID COMPLIANCE	ADVANCED DISCUSSION GROUP
	PHYSICIAN COMPLIANCE	AUDITING & MONITORING	LONG-TERM CARE	INDUSTRY IMMERSION
	PRIVACY & SECURITY	QUALITY OF CARE	RESEARCH/IRB	TRENDS OUTSIDE HEALTHCARE
	COMPLIANCE OUTSIDE THE HOSPITAL (PRE-CONFERENCE ONLY)			

## Saturday, April 25, 2009

1:00–7:00 PM	Conference Registration
7:30–11:30 AM	Volunteer Project

## Sunday, April 26, 2009

7:30 AM–6:00 PM	Conference Registration
9:00 AM – 12:00 PM PRE-CONFERENCE	P1 Compliance 101 <b>CHC CHRC</b>
	P2 Public Entity Provider Roundtable
	P3 The Next Chapter in Medicare and Medicaid Regulation and Enforcement
	P4 HIPAA 101 <b>CHC CHRC</b>
	P5 Target Practice: Physician Contracting Strategies to Avoid the Fed's Bull's Eye
	P6 Anti-Kickback and Stark Update <b>CHC CHRC</b>
	P7 How to Tell If Your Compliance Program Is REALLY Effective <b>CHC CHRC</b>
	P8 Part 1: Combining Disciplines: The Connection between Compliance, Risk Management and Quality of Care / Part 2: The Role of Compliance in Driving Improvement in Patient Outcomes
	P9 Research Compliance 101: The Basics of Research Compliance <b>CHRC</b>
	P10 Optimizing Your Code of Conduct
2:00–5:00 PM PRE-CONFERENCE	P11 The New Regulatory Environment: Is Your Risk Assessment Process Up to Date?
	P12 Hot Topics in the Medical Device Industry
	P13 Medicaid Compliance <b>CHC</b>
	P14 Part 1: The House Always Wins: How Recent HIPAA Privacy and Security Enforcement Efforts Can Be Used to Stack the Deck in Your Favor / Part 2: Data Breach Notification: State Requirements <b>CHC</b>
	P15 Making Compliance Gains through Technology: Lessons from Eight Years at the Point of Care
	P16 Theories of Liability, Defenses, and Damages under the False Claims Act <b>CHRC</b>
	P17 Compliance & Audit Rocks On <b>CHC CHRC</b>
	P18 Part 1: A Practical Approach to Coordinating Patient Safety/Quality, Risk Management, and Compliance / Part 2: The Link between Quality and Compliance: ChildServe's Baldrige Journey
	P19 Hot Topics, Emerging Issues, and Recent Cases in Research Compliance <b>CHRC</b>
	P20 Measuring Program Effectiveness: What Works and What Doesn't <b>CHC</b>
5:30–6:30 PM	Networking Reception

## Monday, April 27, 2009

7:00 AM–6:00 PM	Conference Registration
8:30–8:40 AM	Opening Remarks
8:40–9:00 AM	Membership Meeting
9:00–9:45 AM	General Session: Integrity and Health Care Reform: The Charge to Government and Industry
9:45–10:30 AM	General Session
10:30–11:00 AM	Break



# Schedule at a Glance

## Monday, April 27, 2009 (continued)

11:00 AM–12:00 PM	101 It's Later Than You Think: Do You Know About All of Your Physician Arrangements?
	102 eDiscovery Shakedown: Lowering Your Risk
	103 Focus Areas of Medicaid Fraud Control Units
	104 Moving Beyond HIPAA: 10 Things Healthcare Organizations Need to Know About Security and Breach Compliance and Preventing Medical Identity Theft
	105 Managing Hospital/Physician Financial Relationships
	106 Update on Stark Law Developments and Related Issues <b>CHC CHRC</b>
	107 What's So Hard About Informed Consent? <b>CHC CHRC</b>
	108 Aligning Quality and Compliance: Strategies for Success
	109 Fraud and Abuse Risks in Non-Academic Research Settings <b>CHRC</b>
	110 Cost-Conscious Compliance: Promoting Integrity and Maximizing Results with Limited Resources
	111 Successful Compliance Program Strategies for Small to Medium-Size Organizations
	112 Gaining Trust and Respect: A Transition from Law Enforcement to the Private Sector
	113 Can Social Networks Change the World?
	114 Is It Possible to Manage Care and Compliance, or Is It Just an Oxymoron?
	115 Beyond the Basics: The Intersection of Revenue Cycle Effectiveness and Compliance and What You Need to Know to Improve Both at the Same Time
12:00–1:00 PM	Luncheon
1:30–2:30 PM	201 Ready or Not, Here They Come! Preparing for and Defending RAC Audits
	202 Compliance Implications of Never-Events; HAIs, MSP and TPL Developments: Strategies for Long Term Care Providers
	203 Implementing an Integrity Compliance Program in a Multi-State Non-Profit
	204 HIPAA Privacy and Research: Expected and Unexpected Consequences <b>CHC CHRC</b>
	205 Do Anything, But Don't Stand in My Blue Suede Shoes: a Compliance Officer's Analysis of Stark Law Financial Relationships
	206 Recent Developments in Voluntary Disclosure <b>CHRC</b>
	207 The Nature, Timing, and Extent of Audit Testing: Migrating to the Post-CIA Environment
	208 Making Lemonade from Lemons: Coexisting with the OIG on a Quality of Care Corporate Integrity Agreement
	209 Dealing with the Medicare Secondary Payer Rule in the Context of Research Billing <b>CHRC</b>
	210 Compliance in an Outsourced World
	211 The Board's Role in Compliance: Emerging Trends and Responsibilities <b>CHC</b>
	212 Match Game: Practical Approaches to Sanction Check Due Diligence
2:30–3:00 PM	Break
1:30–5:30 PM INDUSTRY IMMERSIONS	<b>NEW THIS YEAR: Professional Development II1 Part 1: Enjoying Greater Success through Improved Writing Skills: Defining Yourself as an Expert / Part II: Professional Development: Mastering Effective Presentation and Speaking Techniques</b>
	II2 Large Hospital & Health Systems
	II3 Payor/Managed Care
3:00–4:00 PM	301 Is Your Perspective Out of Balance? Taking a Broader View
	302 Data Breach Notification: State and Federal Law Requirements
	303 New York State: Medicaid Managed Care Compliance Landscape
	304 Federal Enforcement of the HIPAA Privacy Rule—2009
	305 Electronic Medical Records: Auditing Challenges and Associated Risks
	306 Compliance Issues Under the Food, Drug and Cosmetics Act for Pharmaceutical and Medical Device Organizations <b>CHRC</b>
	307 Ground and Air Patient Transport Processes: Smooth Cruise or Bumpy Ride?
	308 Reporting Quality to Your Board and Senior Management <b>CHC</b>
	309 How a Research Compliance Program Can Support the Institutional Strategic Plan <b>CHRC</b>
	310 Shaping Corporate Culture
	311 Demonstrating Effectiveness: Will Your Compliance & Ethics Program Pass the Test?
	312 Traversing the Clinical Terrain

# Schedule at a Glance

Tracks	GENERAL COMPLIANCE/HOT TOPICS	LEGAL & REGULATORY	MEDICAID COMPLIANCE	ADVANCED DISCUSSION GROUP
	PHYSICIAN COMPLIANCE	AUDITING & MONITORING	LONG-TERM CARE	INDUSTRY IMMERSION
	PRIVACY & SECURITY	QUALITY OF CARE	RESEARCH/IRB	TRENDS OUTSIDE HEALTHCARE
	COMPLIANCE OUTSIDE THE HOSPITAL (PRE-CONFERENCE ONLY)			

## Monday, April 27, 2009 (continued)

4:00–4:30 PM	Break
4:30–5:30 PM	401 Gainsharing: How Do You Share Cost Savings with Your Physicians?
	402 What to Do When the Investigator Knocks <b>CHC</b>
	403 Behavioral Health Medicaid Compliance: Identifying and Managing Risk in Contractual Relationships Between State/Local Governments and Non-Governmental Organizations (NGOs)
	404 From Barely Seen to Evergreen: Revitalizing Your Privacy Awareness Program
	405 Preventative Medicine for Practice-Based Research: Practical Approaches for Promoting Compliance <b>CHRC</b>
	406 Effective Compliance for Organization Attorneys and Administrators
	407 Protect, Detect, and Respond: A Security-First Strategy for HIPAA Security & Privacy <b>CHC</b>
	408 Obstacles to Improving Quality of Care and How to Overcome Them
	409 Compliance Risks in International Research <b>CHRC</b>
	410 Institutionalizing Ethics and Compliance in Everyday Business Activities
	411 Who Is in the Record? <b>CHRC</b>
412 “No Gifts Policy”: Implementation in the Academic Medical Centers <b>CHC</b>	
5:30–7:00 PM	Networking Reception

## Tuesday, April 28, 2009

7:00 AM–4:30 PM	Conference Registration
8:30–8:35 AM	Opening Remarks
8:35–9:05 AM	General Session: New Compliance Guidance: Coming Soon to Your State?
9:05–10:30 AM	General Session: Setting the Tone at the Top Without It Being a Negative
10:30–11:00 AM	Break
11:00 AM–12:00 PM	501 Information Systems: Auditing the Charge Description Master (CDM)
	502 Enforcement Perspective on Quality of Care <b>CHC</b>
	503 The Medicaid integrity Program: What Does This New Federal/State Partnership Mean to Your Hospital?
	504 Keys to Electronic Records Implementation Compliance
	505 The Good, The Bad, and the Ugly: Identifying Risk in Physician Practice Billing
	506 Fair Market Value and Health Care Compliance <b>CHRC</b>
	507 Medication Reimbursement: How to Keep Up with the Changing Times
	508 Coordinating a “Never Event” and Other Quality of Care Investigations
	509 Conflicts of Interest in Research: The New Enforcement Frontier <b>CHRC</b>
	510 Key Recent Developments Regarding Attorney-Client Privilege, Work-Product Protection and Indemnification
	511 Medicare Focus Review: Board Has Been Notified—Now What?
	512 Running Successful Hospital Exercises: Planning, Execution, and Assessment
11:00 AM –4:00 PM INDUSTRY IMMERSIONS	I14 Pharma Hot Topics in Life Sciences: What Providers and Compliance Professionals Need to Know
	I15 Academic Medical Centers: Academic Collaboration with Non-Academic Sites/ The Use of Non-Physician Practitioners in the AMC/ Risk Managers are from Mars, Compliance Officers Are from Venus?
	I16 Hot Topics
12:00–1:00 PM	Networking Luncheon

# Schedule at a Glance

## Tuesday, April 28, 2009 (continued)

1:30–2:30 PM	601 Ethics/Compliance Hotline Benchmarking: Best Practices and Data Trends <b>CHC</b>
	602 Long-Term Care Survey, Certification, and Enforcement Issues: CMS and Provider Perspectives
	603 Medicaid Compliance <b>CHC</b>
	604 Interoperable Records: The 2014 Deadline
	605 Implementing Policies on Physician/Vendor Relationships: How, When and Why?
	606 New ZPICs and How DOJ Uses Aberrations in Claims Data to Develop Leads in Case Development
	607 Leveraging Available Data, Your Desktop Software, and Other Specialized Tools for Enhanced Compliance Program Administration, Auditing & Monitoring
	608 Apologies and Reporting of Medical Errors
	609 Research and the Medical Record <b>CHRC</b>
	610 Supporting Ethics & Compliance Programs by Leveraging Technology
	611 Operational Challenges to Stark III
2:30–3:00 PM	Break
3:00–4:00 PM	701 Understanding and Optimizing Legal & Regulatory Risk Management
	702 Quality Monitors: What They Do, Do They Help, and What to Do to Avoid Them
	703 Challenges and Solutions for Providing Compliance Guidance in a Medicaid Environment <b>CHC</b>
	704 A HIPAA Security Incident and Investigation: It Can Happen to You <b>CHC</b>
	705 Medical Students & Documentation
	706 EMTALA Compliance and the Anti-kickback Statute and Stark Law <b>CHC</b>
	707 Re-Thinking Risk Assessment: Are You Counting the Ants While the Elephants Run By? <b>CHC</b>
	708 When Poor Quality Care Becomes Fraud
	709 What Every Compliance Officer Needs to Know about Research...But Is Afraid to Ask <b>CHRC</b>
	710 Just Because It's Legal Doesn't Mean It's Ethical
	711 Where's That Policy? Solving the Pitfalls of Paper-Based and Internally Built Policy & Procedure Systems

## Wednesday, April 29, 2009

7:00 AM–12:30 PM	Conference Registration
8:00 AM–12:00 PM	W1 The Road Ahead and How to Navigate it: Panel Discussion on Challenges for Health Care Organizations in 2009 and How to Address Them
	W2 Impact of the Supplemental Guidance: Provider Perspectives / Compliance, Quality Improvement and Risk Management: Making It Work in Your LTC Organization / CIAS / Long-Term Care Open Forum
	W4 Privacy Officer Roundtable <b>CHC</b>
	W6 Corporate Liability, Governance, and Compliance <b>CHC</b> / False Claims Act Enforcement Initiatives and Update / Negotiating False Claims Act Settlements
	W7 Hospital Outpatient Coding Compliance Audits
	W9 Medicare Coverage Analysis Workshop: The "How To" of Medicare Coverage in Research <b>CHRC</b>
	W10 Compliance Risk Assessment Workshop: Principles and Practice <b>CHC CHRC</b>





# ARE YOU PREPARED FOR THE RAC AUDITOR?

## Take control with a strong defense

The RAC Auditors will soon be calling on your hospital. The RAC appeals process is very complex and missed deadlines can result in the automatic recoupment of your legitimate revenues. To minimize your risk of financial losses, you need to be prepared with practical, reliable processes and controls to ensure that critical appeals deadlines are met, with complete, substantiated information.

Compliance 360 is the leader in compliance and risk management solutions for healthcare. More than 300 hospitals nationwide rely on us every day to ensure compliance with legal and industry regulations. Using our unique software solutions, they are always "audit ready" with both proactive defenses and the audit management tools needed to ensure successful audit response and appeals. We are proud to help these healthcare organizations prevent and contain compliance sanctions and we stand ready to help you as well.

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To learn more about the Compliance 360 Claims Auditor™ for managing RAC audits, please visit us at booth 102 at the HCCA Compliance Institute Conference, visit [www.compliance360.com/RAC](http://www.compliance360.com/RAC) or call us at 678-992-0262

## SATURDAY, APRIL 25

7:30–11:30 AM

HCCA Volunteer Project

1:00–7:00 PM

Conference Registration

## SUNDAY, APRIL 26

7:30 AM–6:00 PM

Conference Registration

9:00 AM – 12:00 PM

### PRE-CONFERENCE

#### GENERAL COMPLIANCE/HOT TOPICS

##### P1 Compliance 101 **CHC CHRC**

- Understand the complex regulatory framework and significant issues currently facing organizations regarding physician arrangements compliance
- Be prepared to conduct a physician arrangements diagnostic assessment starting with the contract management system
- Understand lessons learned from industry audits as well as potential consequences of government disclosure matters

Gregory Warner, Director for Compliance, Mayo Clinic; Debbie Troklus, AVP Compliance, University of Louisville HSC

#### COMPLIANCE OUTSIDE THE HOSPITAL

##### P2 Public Entity Provider Roundtable

- Discussion of the challenges created by public funds, elected boards, and mandated services
- The nature of public service: duty, ethics and effectiveness. Where are we, where are we going?
- Dialog regarding Public Entity contracting, risk management, privacy and security

Jeffrey A. Nagel, Chief Compliance Officer, County of Orange, Health Care Agency; Robert L. Borntrager, Compliance Officer, County of San Diego; Cheryl Esters, Compliance Officer, County of Solano; Linda Garrett, Partner, Risk Management Services

#### MEDICAID COMPLIANCE

##### P3 The Next Chapter in Medicare and Medicaid Regulation and Enforcement

- Major new techniques in provider review-on-site audits, data mining, risk ranking, IRS 990 review
  - Farming out enforcement at CMS: “Review-of-Providers”, and “Audit-and-Identification-of-Overpayment”, ZPICS, RACS, (Medicaid Integrity Contractors)
  - State Program Integrity Units—auditors, guns, money
- Brian Flood, Managing Director, KPMG; James Sheehan, Medicaid Inspector General, Office of the Medicaid Inspector General

#### PRIVACY & SECURITY

##### P4 HIPAA 101 **CHC CHRC**

- An overview of the HIPAA Security Rule
  - An overview of the standard transactions and code sets
  - An overview of the HIPAA Privacy Rule.
- Marti Arvin, Privacy Officer, University of Louisville; Bruce W. Edwards, Chief Information Security Officer, University of Louisville

#### PHYSICIAN COMPLIANCE

##### P5 Target Practice: Physician Contracting Strategies to Avoid the Fed’s Bull’s Eye

- OIG targeted & approved MD arrangements
  - Compensation trends & payment factors
  - Tools & strategies for FMV analysis & documentation
- Greg Anderson, Partner, Horne, LLP; Penny Stroud, MD Ranger/Cattaneo & Stroud, Inc.; Daniel Stech, Executive Director, Physician FMV LLC

#### LEGAL & REGULATORY

##### P6 Anti-kickback and Stark Update **CHC CHRC**

- Summary of the basic requirements of the Anti-kickback and Stark laws
  - Update on recent decisions, settlement and regulatory changes affecting Anti-kickback and Stark
  - Practical advice for building compliance mechanisms
- Steve Ortquist, Managing Director, Aegis Compliance & Ethics Center, LLP; Vicki McCormick, VP Health Care Compliance, DePuy Orthopedics; David Rosenbloom, Partner, McDermott Will & Emery; Linda Howard, Associate VP, Marketing Risk Control & Compliance Officer, AMERIGROUP Corp.

#### AUDITING & MONITORING

##### P7 How to Tell If Your Compliance Program Is REALLY Effective **CHC CHRC**

- Learn how to conduct a corporate compliance program assessment
  - Utilize assessment results to take your program to the next level
  - Review copies of actual assessment questions and employee surveys
- Elizabeth Callahan-Morris, Attorney, Hall Render; Mary Storm, Corporate Responsibility Officer, St. Mary’s of Michigan; Lori Wink, Attorney, Hall Render

#### QUALITY OF CARE

##### P8 Part 1: Combining Disciplines: The Connection between Compliance, Risk Management, and Quality of Care

- Learn about the quantifiable similarities between Compliance, Risk Management, and Quality of Care
- Examine how to effectively combine these disciplines, while improving compliance, quality, and patient safety
- Gain hard data that can influence healthcare decision makers

##### Part 2: The Role of Compliance in Driving Improvement in Patient Outcomes

- Use your knowledge of the current and future regulatory environment to create a strategic role for compliance in improving patient care
  - Expand the scope of your compliance program beyond billing to the work of providing quality patient care
  - Learn tips on how to build an effective partnership between compliance and quality
- D. Scott Jones, VP, Corp Compliance & Risk Management, American Healthcare Providers Insurance Services; Nancy Payne, Director Compliance and Regulatory Affairs, Allina Hospitals & Clinics; Mary Jo Morrison, Vice President, Quality, Allina Hospitals & Clinics

#### RESEARCH/IRB

##### P9 Research Compliance 101: The Basics of Research Compliance **CHRC**

- Identifying the regulators and the scope of their authority
  - Reviewing best practices for working with regulatory oversight committees (e.g., IRB, IACUC, etc.)
  - Discussing research-related operational issues
- Kristin West, Emory University; Kendra Dimond, Daylight Forensic and Advisory, LLC

## TRENDS OUTSIDE HEALTHCARE

### P10 Optimizing Your Code of Conduct

- The role of the Code of Conduct in demonstrating a corporate culture—walk the walk, talk the talk
- Education and Training—involving employees and creating individual accountability
- Assessing the Effectiveness—introduce tools to measure the effectiveness of your Code of Conduct

Jenny O'Brien, Shareholder, Director of Compliance Services, Halleland, Lewis, Nilan & Johnson; John Stoxen, Director, Business Conduct & Compliance, 3M; Chris Collin, Manager, Ethics & Compliance, General Mills

2:00–5:00 PM

## PRE-CONFERENCE

## GENERAL COMPLIANCE/HOT TOPICS

### P11 The New Regulatory Environment: Is Your Risk Assessment Process Up to Date?

- Compliance Risk Assessments: practical tips to performing compliance risk assessments
- Incorporating data analytics into the risk assessment process
- Incorporating new regulatory enforcement trends, such as RACs, into the risk assessment process

Ken Zeko, Director, KPMG; Joel Dziengielewski, Director, KPMG; Dieter Lehnortt, Compliance Officer, UT Southwestern Medical Center

## COMPLIANCE OUTSIDE THE HOSPITAL

### P12 Hot Topics in the Medical Device Industry

- Learn about the new device industry (AdvaMed) Code of Ethics and compare with the updated PhARMA Code of Ethics
- Learn about changes in the compliance landscape on federal and state level
- Hear about working under a CIA and Deferred Prosecution Agreement

Tom Schumacher, Vice President, Ethics and Compliance, Cardiac Rhythm Disease Management, Medtronic, Inc.; Andrew Van Haute, Associate General Counsel, AdvaMed; Jacqueline K. Huber, Corporate Vice President and Chief Compliance Officer, Biomet, Inc.; Tama Antonia Donaldson, Director, Ethics & Compliance, Abbott Vascular

## MEDICAID COMPLIANCE

### P13 Medicaid Compliance **CHC**

## PRIVACY & SECURITY

### P14 Part 1: The House Always Wins: How Recent HIPAA Privacy and Security Enforcement Efforts Can Be Used to Stack the Deck in Your Favor **CHC**

- Review recent HIPAA enforcement initiatives and related HIPAA news.
- Review the HIPAA Resolution Agreement and what it teaches us about future HIPAA enforcement.
- Mitigate HIPAA exposure by discussing known and unknown risks and risk mitigation techniques

### Part 2: Data Breach Notification: State Requirements

- What constitutes a data breach
- Which states include private right of action clauses in their statutes
- Notification requirements

Darrell Contreras, Chief Compliance Officer, Lakeland Regional Medical Center; Andrew G. Conkovich, Director of Regulatory Affairs and Compliance, University of Louisville Hospital

## PHYSICIAN COMPLIANCE

### P15 Making Compliance Gains through Technology: Lessons from Eight Years at the Point of Care

- Identify the components of charge capture technology that directly impact the day-to-day needs of professional compliance programs
- Discuss the limitations of EMR technology as the central focus point for a compliance program
- Understand the key players in a roll-out of charge capture and identify their institution's own readiness for undertaking such an initiative

Cynthia Trapp, Director, Professional Coding, Lahey Clinic Medical Center; Sherry Weisse, System Project Manager Professional, Coding Dept., Lahey Clinic Medical Center

## LEGAL & REGULATORY

### P16 Theories of Liability, Defenses, and Damages under the False Claims Act

## CHRC

- Basics of FCA Liability and Damages (including definitions of “falsity,” causation and “reckless disregard”)
- Who can file a *qui tam* suit? What are the risks to the provider and the whistleblower?
- Proposed FCA Amendments and post-Allison Engine cases

Moderator: John Boese, Partner, Fried Frank Harris Shriver & Jacobson LLP; Michael Granston, Deputy Director, U.S. Department of Justice; Frederick M. Morgan Jr, Morgan Verkamp LLC

## AUDITING & MONITORING

### P17 Compliance & Audit Rocks On **CHC** **CHRC**

- The Rock ‘n Rules of Compliance & Audit: Outline the basic “dance steps” for an effective compliance A & M program.
- We Will, We Will Audit You: Learn the steps of developing and conducting compliance audits
- You’ve Got a Friend: Get your colleagues on the same “sheet of music” with developing realistic management action plans

Shawn DeGroot, VP of Corporate Responsibility, Regional Health; Deann M. Baker, Chief Corporate Compliance Officer, Alaska Native Tribal Health Consortium; Lynda Hilliard, Deputy Compliance Officer, Office of the President, University of CA; John Falcatano, Chief Audit/Compliance Officer, University Health Systems of Eastern Carolina

## QUALITY OF CARE

### P18 Part 1: A Practical Approach to Coordinating Patient Safety/Quality, Risk Management, and Compliance

- Proactive approach to coordinating Patient Safety/Quality, Risk Management, and Compliance
- Coordinating Risk Assessments that improve patient care and compliance.
- A smart way to dealing with “Never Events”

Suzie Draper, VP Ethics and Compliance, Intermountain Healthcare; Lynn Elstein, Intermountain Healthcare; Harlan Hammond, AV of Risk Management, Intermountain Healthcare

### Part 2: The Link between Quality and Compliance: ChildServe’s Baldrige Journey

- Introduce Baldrige Health Care Criteria as a roadmap to improved quality of care and compliance
- Identify and overcome barriers to effective deployment and integration of organizational quality and compliance initiatives
- Explore how focus on systematic processes drives improved organizational compliance and quality health care outcomes

David Basler, General Counsel/Dir. of Organizational Compliance, ChildServe



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Which would your  
employees read?



This...

Written by a  
compliance/privacy officer

#### Stark Act

The Stark Act, 42 U.S.C. § 1395nn, is one of the most complex statutes, including  
interstate regulation, that prohibits a physician from referring to a designated  
health entity if the physician has a financial arrangement with such entity.  
Designated health services include the following: clinical laboratory physical and  
occupational therapy, radiology, radiation therapy and supplies, durable medical  
equipment, parenteral and enteral nutrition, prosthetics, orthotics and prosthetic  
devices, home health, outpatient prescription drugs, and inpatient and outpatient  
hospital. Further, financial arrangements include both compensation arrangements  
and investment or ownership arrangements.  
If a physician has a compensation arrangement with an entity that bills for  
designated health services, the physician cannot refer to such entity unless the  
arrangement meets all components of an exception. There are numerous  
exceptions that apply to the Stark Act, some of which apply only to  
investment/ownership arrangements, some that apply only to compensation  
arrangements, and some that apply to both investment/ownership arrangements  
and compensation arrangements. Each financial arrangement will need to be carefully  
analyzed to make sure that either the Stark Act does not apply, or all components of an  
applicable exception are met.  
Complicating such arrangements further, physicians, under the Stark Act, include all of  
the following family members related to the physician: husband or wife; birth or  
adopted parent, child, sibling, stepparent, stepchild, stepbrother, or stepdaughter;  
father-in-law, mother-in-law, son-in-law, daughter-in-law, brother-in-law or  
sister-in-law; grandparent or grandchild; and spouse of a grandparent or grandchild.  
Thus, even if a designated health service entity like a hospital is not contracting directly  
with a physician, the Stark Act may be implicated if the party with whom the hospital is  
contracting is related to a referring physician. The restrictions imposed by the Stark Act  
are not eliminated therefore merely by contracting with a family member of a...

or this!

# Captain Integrity<sup>SM</sup>

Doctor Williams, I believe we  
can get around the Stark Act  
by contracting with your wife.

Doesn't the Stark  
Act apply to family  
members as well?



A physician cannot  
refer a patient for  
designated health  
services to an entity  
in which they have a  
financial interest.

Under the Stark Act,  
"physician" includes  
family members such  
as Dr. Williams' wife.

If you would like more information, visit the Captain Integrity website at  
<http://www.captainintegrity.com> or contact a representative at 1.866.222.0706.

# Agenda Monday, April 27

## RESEARCH/IRB

### P19 Hot Topics, Emerging Issues, and Recent Cases in Research Compliance

#### CHRC

- Speakers will cover research compliance including cases on research billing, Stark and anti-kickback issues, effort reporting, conflicts of interest, etc.
- Analysis of the affects of quality and compliance in the research arena
- Practical insights for updating your research compliance program to mitigate risks and enhance compliance

Holley Thames Lutz, Sonnenschein, Nath & Rosenthal, LLP; Ryan D. Meade, Meade & Roach; F. Lisa Murtha, Huron Consulting Group

## TRENDS OUTSIDE HEALTHCARE

### P20 Measuring Program Effectiveness: What Works and What Doesn't

#### CHC

- Developing meaningful ethics and compliance data to demonstrate the effectiveness of your program
- The use of employee surveys for establishing ethical climate and program impact
- Strategies for communicating to your Board, CEO and employees

Larry Parsons, VP, Business Conduct and Ethics, Freescale Semiconductor, Inc.; Urton Anderson, Chair, Department of Accounting Education, McCombs School of Business, University of Texas at Austin; Ed Petry, Vice President, Ethical Leadership Group, A Global Compliance Company

## 5:30–6:30 PM

### Networking Reception

## MONDAY, APRIL 27

## 7:00 AM–6:00 PM

### Conference Registration

## 8:30–8:40 AM

### Opening Remarks

Rory Jaffe, Executive Director, California Hospital Patient Safety Organization (CHPSO)

## 8:40–9:00 AM

### Membership Meeting

Roy Snell, CEO, HCCA

## 9:00–9:45 AM

### General Session: Integrity and Health Care Reform: The Charge to Government and Industry

Daniel R. Levinson, Inspector General, Office of Inspector General, U. S. Department of Health and Human Services

## 9:45–10:30 AM

### General Session

Kim Brandt, Director Program Integrity Group, CMS

## 10:30–11:00 AM

### Break

## 11:00 AM–12:00 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 101 It's Later Than You Think: Do You Know About All of Your Physician Arrangements?

At the conclusion, attendees will:

- Understand the complex regulatory framework and significant issues currently facing organizations regarding physician arrangements compliance
- Be prepared to conduct a diagnostic assessment of the physician arrangements within their organization and develop and/or maintain a physician arrangements management system
- Understand potential consequences and nuances associated with government disclosure matters related to physician arrangements

Jane Boubelik, Chief Counsel, UCLA Health System; Howard J. Young, Partner, Sonnenschein Nath & Rosenthal, LLP; Christine Anusbigian, Sr. Manager, Deloitte; John Valenta, Director, Health Sciences, Deloitte

## LONG-TERM CARE

### 102 eDiscovery Shakedown: Lowering your Risk

- Discussion of some of the special challenges that eDiscovery imposes
- Practical tips to help ready your organization for an eDiscovery request
- The eDiscovery team: aligning IT and the Legal Department

Diane Kissel, Manager IS Risk and Compliance, Kindred Healthcare, Inc.; Marty Diller, Chief Information Officer, Complete HealthCare Resources

## MEDICAID COMPLIANCE

### 103 Focus Areas of Medicaid Fraud Control Units

- Review MFCU cases for the past two years in 26 states
- Analyze common areas for each type of healthcare entity (i.e., hospital, DME, pharma)
- Discussion of compliance and fraud controls and the differences between the two

Christine Bachrach, SVP & Chief Compliance Officer, HealthSouth

## PRIVACY & SECURITY

### 104 Moving Beyond HIPAA: 10 Things Healthcare Organizations Need to Know About Security and Breach Compliance and Preventing Medical Identity Theft

- The latest trends and compliance obligations related to security breaches, medical identity theft and incidents of data mismanagement
- How to identify for compliance and risk purposes the key electronic and paper based repositories of personal health information and other high-risk data
- Benchmark data comparing administrative and technical safeguard controls against payors, providers, pharmaceutical companies and other healthcare industries

James Koenig, Private Identity Theft Practice, PricewaterhouseCoopers

## PHYSICIAN COMPLIANCE

### 105 Managing Hospital/Physician Financial Relationships

- Overview of hospital/physician financial relationships laws with focus on recruitment and service relationships
- Application of laws to policy development, contract management and organizational education
- Establishment of internal controls, monitoring and auditing hospital/physician financial relationships

James D. Horwitz, VP Corporate Responsibility/General Counsel, Glens Falls Hospital

## LEGAL & REGULATORY

### 106 Update on Stark Law Developments and Related Issues

#### CHC CHRC

- Stark changes in the FY 2009 IPPS rule—good and bad news for compliance professionals
- Whatever happened to the Disclosure of Financial Relationships Report?
- Could your organization satisfy the existing Stark Reporting regulations?

Gadi Weinreich, Partner, Sonnenschein Nath & Rosehthal, LLP; Don Romano, Partner, Arent Fox, LLP; Edwin Rauzi, Partner, Davis Wright Tremaine, LLP

## AUDITING & MONITORING

### 107 What's So Hard About Informed Consent?

#### CHC CHRC

- The challenges posed by both the complexity of the regulations and healthcare
- How to stratify the auditing and monitoring work to facilitate your efforts
- The primary steps a non-clinician can use to validate compliance

Mark Ruppert, Director Internal Audit, Cedars-Sinai Medical Center

## QUALITY OF CARE

### 108 Aligning Quality and Compliance: Strategies for Success

- Gain insight into how quality improvement and compliance are merging in today's health care environment
- Learn strategies for mitigating financial risk through compliance/quality activities
- Discuss quality-related fraud enforcement risks and compliance program ideas from Corporate Integrity Agreements

*Dan McCullough, Analyst, TMF Health Quality Institute; Judi McCabe, Director, TMF Health Quality Institute; Katie Arnholt, Sr. Counsel, Administrative and Civil Remedies Branch, OIG*

## RESEARCH/IRB

### 109 Fraud and Abuse Risks in Non-Academic Research Settings **CHRC**

*Holley Thames Lutz, Sonnenschein, Nath & Rosenthal, LLP; Dwight Claustre, System Dir Corp Compliance, Catholic Healthcare West*

## TRENDS OUTSIDE HEALTHCARE

### 110 Cost-Conscious Compliance: Promoting Integrity and Maximizing Results with Limited Resources

An open discussion to better understand how to:

- Promote compliance and integrity with limited resources
- Enable the Compliance Officer to direct compliance effort during cost-cutting cycle
- Develop an Ombuds group to support compliance

*Stephen Morreale, Assistant Professor, Criminal Justice, Worcester State College*

## ADVANCED DISCUSSION GROUP

### 111 Successful Compliance Program Strategies for Small to Medium-Size Organizations

- Discuss sharing of personnel and resources across departments for effective monitoring and auditing functions
- Explore educational tools for employee education to include: e-learning, specialized training courses, and sharing training programs
- Discuss challenges and opportunities for incorporating specialty services and clinics into an institute wide compliance program

*Patrick Connell, Chief Compliance Officer, Boystown National Research Hospital*

## GENERAL COMPLIANCE/HOT TOPICS

### 112 Gaining Trust and Respect: A Transition from Law Enforcement to the Private Sector

- Compliance vs. Enforcement: Parallels and differences between the role of a compliance officer and the role of an enforcement agent
- Listening vs. Speaking: You must understand the business, the people, and the culture and this won't happen with you telling war stories
- Liked or Respected: What is more important?

*Matthew F. Tormey, Vice President, Compliance, Internal Audit, and Security, Health Management Associates*

## GENERAL COMPLIANCE/HOT TOPICS

### 113 Can Social Networks Change the World?

- How do people change the world? Through networking and coming together to solve big problems, such as the Geneva Convention of 1864
- HCCA is the world leader in health care compliance—stay up-to-the-minute on current issues, trends, policies, and more on HCCA's Social Network: [community.hcca-info.org](http://community.hcca-info.org)

*Shawn Leonard, Privacy Officer and Web Master, HCCA*

## GENERAL COMPLIANCE/HOT TOPICS

### 114 Is It Possible to Manage Care and Compliance, or Is It Just an Oxymoron?

- How can quality of care be monitored in an environment that has a different reporting system?
- When costs are managed effectively in the managed care setting does it mean that services were withheld or there was underutilization?
- What the documentation says or doesn't say: in the absence of billing using CPT codes, do providers still have to meet documentation requirements?

*Georgeann Edford, President, Coding Compliance Solutions, LLC*

## GENERAL COMPLIANCE/HOT TOPICS

### 115 Beyond the Basics: The Intersection of Revenue Cycle Effectiveness and Compliance and What You Need to Know to Improve Both at the Same Time

- Detailed discussion of legal and operational sources of compliance problems within the revenue cycle beyond the basics such as coding
- Site of service, professional scope of practice, clinical documentation, financial status, provider numbers, incident to services and impact of joint ventures on billing compliance will be addressed
- Practical recommendations for identifying and addressing the issues and examples where opportunities for improvement have been quantified

*Jeffrey E. Sinaiko, President, Sinaiko Healthcare Consulting, Inc.; David Matyas, Member of the Firm, Epstein Becker and Green*

12:00–1:00 PM

Luncheon

1:30–2:30 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 201 Ready or Not, Here They Come! Preparing for and Defending RAC Audits

- Proactive strategies for preparing for the RACS and limiting organizational liability
- Understanding and utilizing the appeals process to make the best case possible for your organization
- Sharing lessons learned from the RAC demonstration project

*Jenny O'Brien, Shareholder, Hallelund Lewis Niland & Johnson; Andrew Wachler, Owner/Principal, Wachler & Associates*

## LONG-TERM CARE

### 202 Compliance Implications of Never-Events; HAIs, MSP and TPL Developments: Strategies for Long-Term Care Providers

- Explore some of the potential unintended consequences of the movement to use payment to improve patient safety and quality of care
- Implications of offering settlements to families who believe they or their loved ones may have experienced an adverse event at your facility
- Practical suggestions about strategic compliance considerations for moving forward in this new environment

*Paula Sanders, Partner, Post & Schell, PC; Donna Maassen, Director of Compliance, Extencare Health Services, Inc.*

## MEDICAID COMPLIANCE

### 203 Implementing an Integrity Compliance Program in a Multi-State Non-Profit

- Discuss the challenges of developing a comprehensive compliance program in a multi-faceted, multi-state program
- Discuss how to develop the compliance program: necessary resources, constraining costs, and adequate service-wide training
- Discuss the contemporary regulatory environment and how providers and management comply without losing quality of care

*Mark Sawyer, Chief Compliance Officer, Youth Advocate Programs; Steve Kohler, Senior Director, McBee Associates, Inc.*



# Volunteer with HCCA and Opportunity Village

SPACE IS LIMITED: SIGN UP TODAY

**Date:** SATURDAY, APRIL 25, 2009

**Time:** 7:30–11:30 AM

Volunteers will help Opportunity Village prepare for their largest fundraiser, Magical Forest. Projects include restringing lights, planting trees, repainting decorative items, etc. Please dress for working outdoors.

Opportunity Village is a not-for-profit organization that serves men and women with intellectual disabilities by providing programs and services to enhance their daily lives. Founded in 1954, Opportunity Village offers vocational training, job placement, art enrichment and social recreation for the special citizens we serve.

What is the Magical Forest? The Magical Forest is a holiday-themed park that operates for about 40 nights from mid-November through December 30. Started in 1992 as a fundraiser for Opportunity Village and a way to give back to the community that has given us so much support, the event has grown to become one of Las Vegas's most well know and anticipated holiday happenings and our largest fundraising event.

## Learn more and sign up

For more details on this great opportunity, visit the Institute's website at [www.compliance-institute.org](http://www.compliance-institute.org).

Transportation will be provided to and from the location.

**Ready to sign up to volunteer or want more information?**

Contact Jodi Erickson Hernandez at 952-405-7926 or [jodi@hcca-info.org](mailto:jodi@hcca-info.org)



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## PRIVACY & SECURITY

### 204 HIPAA Privacy and Research: Expected and Unexpected Consequences **CHC CHRC**

- What changed for clinical researchers after April of 2003?
- What are the consequences of HIPAA on research that crosses basic science and clinical science lines?
- How can Privacy Officers help researchers?

Joan M. Podleski, Director of Institutional Ethics & Compliance, Duke University

## PHYSICIAN COMPLIANCE

### 205 Do Anything, But Don't Stand in My Blue Suede Shoes: a Compliance Officer's Analysis of Stark Law Financial Relationships

- Application of the new principles and how to issue-spot for compliance risks
- Identification of problems with formerly compliant arrangements that may require renegotiation as a result of the new regulations
- Considerations of the application of the latest changes and interpretations from CMS on the relationships between physicians, hospitals and other entities providing designated health services

Larry Vernaglia, Partner, Foley & Lardner, LLP; Lisa Ohrin, Partner, Sonnenschein Nath & Rosenthal LLP

## LEGAL & REGULATORY

### 206 Recent Developments in Voluntary Disclosure **CHRC**

- The statutory obligation of returning "known overpayments" to federal health programs and the disclosure of employee "misconduct"
- The risks and rewards of voluntary disclosure of misconduct and the who, what, why and where of such disclosures
- Alternatives for documenting the results of the investigation and issues of voluntary disclosure to government representatives and waiver of the privilege

David M. Glaser, Attorney, Fredrikson & Byron; Sara Kay Wheeler, Partner, King & Spalding; Tamar V. Terzian, Esq., Senior Counsel, Office of Counsel to the Inspector General/ Department of Health and Human Services, Administrative and Civil Remedies Branch

## AUDITING & MONITORING

### 207 The Nature, Timing, and Extent of Audit Testing: Migrating to the Post-CIA Environment

- Let's discuss a post-CIA audit environment
- Starting or expanding your compliance audit activities? Designing a post-CIA compliance audit plan is like getting a fresh start
- What should or can the audit team focus on, post-CIA

Mark Eddy, Vice President, Internal Audit Department, HCA

## QUALITY OF CARE

### 208 Making Lemonade from Lemons: Coexisting with the OIG on a Quality of Care Corporate Integrity Agreement

- Unique perspective of the long-term care provider and clinical staff on surviving a Quality of Care CIA
- Challenges of the long-term care provider in implementing a Quality of Care CIA and practical tips for a successful implementation
- Keys to a positive relationship between the long-term care provider, OIG and Federal Monitors during a Quality of Care CIA

Tamar Abell, VP, ABS Management; Cheryl Dillon, Director of Quality Assurance, Regional Director, ABS Management

## RESEARCH/IRB

### 209 Dealing with the Medicare Secondary Payer Rule in the Context of Research Billing **CHRC**

- Provide an overview of the MSP Laws
- Address CMS's view on voluntary promises to pay triggering MSP liability
- Highlight recent MSP cases and discuss challenges facing providers

Ramy Fayed, Sonnenschein Nath & Rosenthal LLP; William Wallace, CCO, University of Tennessee Graduate School of Medicine

## TRENDS OUTSIDE HEALTHCARE

### 210 Compliance in an Outsourced World

- Understand the basics of outsourcing and why it significantly increases compliance risks
- Identify commonly outsourced services in the health-care industry and associated compliance risks
- Learn about "must have" clauses in outsourcing contracts and how to negotiate and enforce them

Karen Wilson, Managing Director, Citadel Compliance Group

## ADVANCED DISCUSSION GROUP

### 211 The Board's Role in Compliance: Emerging Trends and Responsibilities **CHC**

- Emerging government expectations for business organizations
- The board's evolving role in compliance
- The increasing value of an effective compliance program

Keith Halleland, Shareholder, Halleland, Nilan, Lewis & Johnson

## GENERAL COMPLIANCE/HOT TOPICS

### 212 Match Game: Practical Approaches to Sanction Check Due Diligence

- Learn the sanction check laws and understand the benefits of a comprehensive sanction check policy
- Identify factors to consider when evaluating information obtained from sanction checks
- Receive templates and matrix tools for verification of potential matches to document due diligence

Mildred Johnson, Institutional Compliance Officer, Texas Tech University Health Sciences Center; Robin Wilcox, Associate Compliance Officer, University of Louisville

1:30–5:30 PM

## INDUSTRY IMMERSIONS

### INDUSTRY IMMERSION

#### II1 Part 1: Enjoying Greater Success through Improved Writing Skills: Defining Yourself as an Expert

- What you need to know about writing for the public; why is it different?
- How can writing effectively improve other's perceptions of you?
- Why publishing documents, articles or books will lend additional credibility to your reputation

#### Part II: Professional Development: Mastering Effective Presentation and Speaking Techniques

- How to work the room, use humor, and deliver the right amount of information
- How to create exciting PowerPoint presentations that keep you and your audience on track
- The 10 biggest mistakes most speakers make and the hidden secret of the master close

Robin Jay, Award-winning Author, Speaker, and President, Las Vegas Convention Speakers Bureau

### INDUSTRY IMMERSION

#### II2 Large Hospital & Health Systems

- How to ensure that you are maximizing the use of your compliance program resources
- Re-evaluating the traditional compliance program structure and support
- How to make your policies and procedures understandable and your training more effective

Cheryl Wagonhurst, Foley & Lardner; Paul Belton, VP of Corporate Compliance, Sharp Healthcare; Margaret Hambleton, Sr. Vice President, Ministry Integrity, St. Joseph Health System; Audrey Andrews, Chief Compliance Officer, Tenet

## INDUSTRY IMMERSION

### 113 Payor/Managed Care

- Fraud Waste and Abuse prevention and best practices: monitoring, detection, investigation, and reporting
- Medicare and Medicaid Hot Topics, and preparing and living through a Medicare Part D audit
- Practical strategies for monitoring vendors and contractors

*Facilitator: Anne Doyle, Executive VP/Chief Compliance Officer, Fallon Community Health Plan; Steven E. Skwara, Partner, Epstein Becker & Green, P.C.; Kim Green, Compliance Officer, Blue Cross and Blue Shield Northern Plains Alliance; Mary E. Hentosz, Senior Director, Compliance, UPMC Health Plan*

2:30–3:00 PM

Break

3:00–4:00 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 301 Is Your Perspective Out of Balance? Taking a Broader View

- Examine the current state of most organizations and learn about their issue and event management initiatives
- Understand how the identification, management, analysis and remediation of issues and events help health care organizations proactively manage risk
- Highlight the real business benefits that can be derived from such a program/initiative

*Tom O'Keefe, Executive Vice President, EthicsPoint, Inc.*

## LONG-TERM CARE

### 302 Data Breach Notification: State and Federal Law Requirements

- Recent enforcement of security rules
- State specific notification statutes including penalties for non-compliance and statutory exceptions
- Participants will discuss notification process and notification letter content

*Andrew G. Conkovich, Director of Regulatory Affairs and Compliance, University of Louisville Hospital; Donna Maassen, Director of Compliance, Extencicare Health Services, Inc.*

## MEDICAID COMPLIANCE

### 303 New York State: Medicaid Managed Care Compliance Landscape

- Medicaid spending reaching critical point and the largest U.S. Medicaid program takes action
- With powerful laws in hand and clear mandate, the new office of Medicaid Inspector General takes a fresh look at Compliance Programs
- Health care entities respond to changes by “upgrading” Compliance Programs and establishing framework for measuring their “effectiveness”

*Regina Gurvich, Director, Compliance and Special Investigations, Health Plus PHSP*

## PRIVACY & SECURITY

### 304 Federal Enforcement of the HIPAA Privacy Rule—2009

- Updates on OCR's Privacy Rule enforcement efforts
- Major new enforcement initiatives
- Emerging Issues (Privacy and HIT, Privacy and GINA, Patient Safety and Quality Improvement Act of 2005 enforcement)

*Susan McAndrew, Deputy Director for Health Information Privacy, U.S. Department of Health and Human Services, Office for Civil Rights*

## PHYSICIAN COMPLIANCE

### 305 Electronic Medical Records: Auditing Challenges and Associated Risks

- Impact on the coding & documentation auditing process
- Practical auditing tips
- Best Practice discussion

*Faith Marie Hope, Dir., Coding & Billing Compliance, Nemours Children Foundation; Georgette Gustin, Director Phys Clinic Doc. & Audit Operations, Southern California Permanente Medical Group*

## LEGAL & REGULATORY

### 306 Compliance Issues Under the Food, Drug and Cosmetics Act for Pharmaceutical and Medical Device Organizations **CHRC**

- A review of the basis for liability under the Food, Drug and Cosmetics Act (FDCA)
- A discussion of recent enforcement actions brought under the FDCA
- A review of the leading compliance risks associated with the FDCA for health care business organizations

*Robert Nicholson, Broad and Cassel*

## AUDITING & MONITORING

### 307 Ground and Air Patient Transport Processes: Smooth Cruise or Bumpy Ride?

- Ground and air patient transport impacts compliance, patient satisfaction, revenue, expenses, and regulatory reporting. Understand the obstacles to an effective process
- Discover how to audit ground and air transport processes and operational monitoring techniques to employ
- Discuss best practices for patient transport

*Debi Weatherford, Director, Internal Audit, Piedmont Healthcare*

## QUALITY OF CARE

### 308 Reporting Quality to Your Board and Senior Management **CHC**

- Why it is important to report quality issues to your Board and senior management
- What should be reported, the duties of the Board
- Practical tools and examples to assist you in reporting

*Heather Fesko, Partner, McGuireWoods; Nancy Moser, System Director, Compliance/Quality and Risk Management, Community Healthcare System*

## RESEARCH/IRB

### 309 How a Research Compliance Program Can Support the Institutional Strategic Plan **CHRC**

- What type of research organization do you want to be and what is the goal of your research?
- What are the billing risks and challenges associated with certain studies and how do you strategically plan for this from a business/financial perspective
- Does your hospital or organization have an infrastructure to support the type of research you want to conduct, e.g. early phase studies with high risk and no billing?

*Sarah Campbell, Director of Policy Management, Tenet Healthcare; Cynthia Boyd, Corporate Compliance Officer, Rush University Medical Center*

## TRENDS OUTSIDE HEALTHCARE

### 310 Shaping Corporate Culture

- Identifying, talking, and walking the organization's values
- Ways to enlist and engage front-line supervisors
- Organizational discussion of successes and failures

*Marjorie W. Doyle, Ethics & Compliance Advisor, Marjorie Doyle & Associates, LLC*

## ADVANCED DISCUSSION GROUP

### 311 Demonstrating Effectiveness: Will Your Compliance & Ethics Program Pass the Test?

- Helping boards and management understand the compliance and ethics challenge
- Developing metrics and benchmarks
- Documenting and reporting ethics and compliance activities

*Dan Roach, VP Compliance and Audit, Catholic Healthcare West*

## GENERAL COMPLIANCE/HOT TOPICS

### 312 Traversing the Clinical Terrain

- Discuss areas where issues of “clinical judgment” intersect the challenges being managed by compliance
- Ideas to promote clarity of roles and accountabilities will also be covered
- Practical case studies will be provided with ideas for defusing tensions that can naturally occur when issues of professional clinical judgment impact assessment of compliance

*José Tabuena, Chief Governance and Compliance Officer, MedicalEdge Healthcare Group, Inc.; Lynn Myers, VP Coding, Compliance & Education, MedicalEdge Healthcare Group, Inc.*

4:00–4:30 PM

Break

4:30–5:30 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 401 Gainsharing: How Do You Share Cost Savings with Your Physicians?

- Gainsharing can implicate several fraud and abuse laws—CMP, Anti-kickback Statute and the Stark Law
- OIG and now CMS have issued guidance on these arrangements
- We will discuss ways that a hospital may structure these arrangements

*Jana Kolarik Anderson, Attorney, Epstein Becker & Green, PC; Lisa Ohrin, Partner, Sonnenschein Nath & Rosenthal LLP*

## LONG-TERM CARE

### 402 What to Do When the Investigator Knocks **CHC**

- The facility’s rights when investigators come knocking
- Strategic issues to be considered when dealing with the investigators on site
- Practical considerations involved with dealing with on-site investigations

*Barbara Zemlock, Partner, Post & Schell, PC; Molly Hess, Executive Director, Philadelphia Nursing Home*

## MEDICAID COMPLIANCE

### 403 Behavioral Health Medicaid Compliance: Identifying and Managing Risk in Contractual Relationships Between State/Local Governments and Non-Governmental Organizations (NGOs)

- Identifying the unique characteristics that exist between public and private organizations and the delivery of mental health services
- Contractual language that fortifies and mitigates both compliance program risk and responsibility, and quality care expectations
- Ongoing oversight strategies to ensure compliance and quality of care

*Dean True, Compliance Officer, Butte County Department of Behavioral Health; David Horner, Division Manager, County of Orange Health Care Agency*

## PRIVACY & SECURITY

### 404 From Barely Seen to Evergreen: Revitalizing Your Privacy Awareness Program

- Take your organization’s privacy awareness from “barely seen” to “evergreen”
- Real tools you can use at your organization to raise employee awareness
- Beef up your privacy education without increasing your budget

*Donnetta Horseman, Corporate Privacy Director, MedStar Health, Inc.*

## PHYSICIAN COMPLIANCE

### 405 Preventative Medicine for Practice-Based Research: Practical Approaches for Promoting Compliance **CHRC**

- Basic rules for conducting clinical trials
- Practical recommendations for facilitating compliance in office-based research
- Tips for managing IRBs, sponsors, and oversight agencies

*Kelly Willenberg; Rachel Nosowsky, Senior Counsel, Miller Canfield Paddock & Stone, PLC*

## LEGAL & REGULATORY

### 406 Effective Compliance for Organization Attorneys and Administrators

- Top 5 ways that the compliance department can deliver “value added” results to hospital operators and attorneys
- Top 5 ways that the Compliance department can alienate Operations and Legal in less than 30 seconds
- Best practices in integrating Compliance, Legal and Operations

*Marc Goldstone, General Counsel, Broward Health; John Steiner, Chief Compliance Officer, UK HealthCare; Tim P. Adams, Vice President, Division II, Community Health Systems*

## AUDITING & MONITORING

### 407 Protect, Detect, and Respond: A Security-First Strategy for HIPAA Security & Privacy **CHC**

After this session, attendees will:

- think differently about the fundamental problem of information security
- have resources to better identify emerging risk issues
- leave with clear strategies that make a profound short term impact on the risk management posture
- be better equipped to manage this risk on an ongoing basis

*Randy Romes, Principal, LarsonAllen, LLP*

## QUALITY OF CARE

### 408 Obstacles to Improving Quality of Care and How to Overcome Them

- Notwithstanding the longstanding focus on Quality of Care, hospitals and physicians have struggled to prevent medical error and improve quality
- Discuss why it is more important than ever that health care entities tackle the impediments to preventing medical error and proactively driving quality of care
- This presentation will focus on the legal, operational, financial and clinical obstacles to improving quality of care (and ultimately enhance compliance) and discuss various approaches to solving them

*Janice Anderson, Partner, Foley & Lardner, LLP; Judy Ringholz, Manager, Huron Consulting Group*

## RESEARCH/IRB

### 409 Compliance Risks in International Research **CHRC**

- Varying patient populations, healthcare access and systems, and cultural differences will affect the study endpoints
- Varying country regulations surrounding data security and patient privacy
- Allowable payments differ by country due to fair market value and FCPA regulations

*Mary Ann Northrup, Associate Director, Navigant Consulting; Carol Landsman, Director, Navigant Consulting*



## TRENDS OUTSIDE HEALTHCARE

### 410 Institutionalizing Ethics and Compliance in Everyday Business Activities

- Examine tactics for helping employees navigate through “gray” areas
- Consider approaches to incorporating core values in everyday work behaviors and employee performance plans

Nick Ciancio, Senior Vice President, Marketing and Business Development, Global Compliance; Steve Priest, President, Ethical Leadership Group, A Global Compliance Company

## ADVANCED DISCUSSION GROUP

### 411 Who Is in the Record? **CHRC**

- Review recent trends for enforcement of HIPAA and state privacy and security laws
- Discuss best practices for auditing and monitoring access to the clinical record
- Explore options to enhance protection of the record without compromising access for clinical care

Carole A. Klove, Chief Compliance and Privacy Officer, UCLA Medical Sciences

## GENERAL COMPLIANCE/HOT TOPICS

### 412 “No Gifts Policy”: Implementation in the Academic Medical Centers **CHC**

This session will describe how one organization developed and implemented their no gifts policy. The participant will be able to:

- discuss the research that was conducted related to gifts and their influence on physicians
- identify challenges an organization might face related to implementing such a policy
- identify practices which will assist an organization in the smooth transition of policy implementation

Sheryl Vacca, SVP/Chief Compliance and Audit Officer, University of California; Rory Jaffe, Executive Director, California Hospital Patient Safety Organization (CHPSO)

## 5:30–7:00 PM

### Networking Reception

## TUESDAY, APRIL 28

## 7:00 AM–4:30 PM

### Conference Registration

## 8:30–8:35 AM

### Opening Remarks

Rory Jaffe, Executive Director, California Hospital Patient Safety Organization (CHPSO)

## 8:35–9:05 AM

### General Session: New Compliance Guidance: Coming Soon to Your State?

- The New York OMIG Compliance Guidance
- Key issues and benchmarks
- Implications for providers

Robert Hussar, First Deputy Medicaid Inspector General, NYS Office of the Medicaid Inspector General; Dan Roach, VP Compliance and Audit, Catholic Healthcare West

## 9:05–10:30 AM

### General Session: Setting the Tone at the Top Without It Being a Negative

Moderator: David Orbuch, President, Phillips Eye Institute; Hank Walker, Partner, Andrade/Walker Consulting, LLC; Jan Malcolm, CEO, Courage Center; James Eppel, Vice President of Network Management, Blue Cross Blue Shield of MN

## 10:30–11:00 AM

### Break

## 11:00 AM–12:00 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 501 Information Systems: Auditing the Charge Description Master (CDM)

- How Certified Information Systems Auditors approach the auditing of information systems by using the CDM as a model
  - Techniques using common desktop tools such as Audit Command Language, Excel, etc. to uncover errors will be demonstrated and discussed
  - How IS auditing can foster a defensive pricing strategy
- William McCarthy, Senior Manager, Parente Randolph

## LONG-TERM CARE

### 502 Enforcement Perspective on Quality of Care **CHC**

- Recent developments in Quality of Care Corporate Integrity Agreements
- Expanding the universe of targets for enforcement
- 2008 Supplemental Compliance Program Guidance for Nursing Facilities

Lisa Re, Office of Counsel to the Inspector General, Department of Health & Human Services; Harvey Tettlebaum, Partner, Husch Blackwell Sanders LLP

## MEDICAID COMPLIANCE

### 503 The Medicaid Integrity Program: What Does This New Federal/State Partnership Mean to Your Hospital?

- Overview of the implementation and operation of the MIP
- Explanation of the manner and methods that the MIP will use to identify key issues for review and target facilities for audit
- Discussion of the Medicaid Integrity Contractor audits, including process for oversight by MIP

Joanne B. Erde, Partner, Duane Morris; David Frank, Director, Medicaid Integrity Program, CMS

## PRIVACY & SECURITY

### 504 Keys to Electronic Records Implementation Compliance

- The types of deliverables and warranties needed in vendor contracts
- How HIPAA's security rules affect system design
- How to enlist provider participation in electronic records implementation without violating regulatory restrictions

Matt Weber, Partner, Holland & Hart, LLP; Bill Fischer, Holland & Hart

## PHYSICIAN COMPLIANCE

### 505 The Good, The Bad, and the Ugly: Identifying Risk in Physician Practice Billing

- Know your provider: are they standing out in a crowd?
- When a “different” coding pattern isn't bad, and when it's a bulls-eye!
- “How-To” analyze physician billing/coding patterns for compliance “red flags”

Susan Welsh, Compliance Manager, HMA

## LEGAL & REGULATORY

### 506 Fair Market Value and Health Care Compliance **CHRC**

- Recent regulatory changes affecting “per click” leases, under arrangements and other transactions
- Assessing FMV of pay for quality programs after Advisory Opinion 08-16 and proposed Stark rules
- Approaches to establishing FMV, whether performed internally or by an outside consultant

Daryl Johnson, Partner, HealthCare Appraisers; Michael Blau, Partner, Foley & Lardner



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## AUDITING & MONITORING

### 507 Medication Reimbursement: How to Keep Up with the Changing Times

- The pharmacy world is complex and an organization must ensure that regulatory changes are applied within systems, to facilitate meeting the necessary billing requirements
- Ensuring identification of pharmacy risks areas within healthcare organizations, to guarantee steps are taken to mitigate any risk
- Understand the Medicare medication billing requirements, to ensure successful compliance strategies

*Kelli Meyer, Director Compliance Programs, Allina Hospitals & Clinics*

## QUALITY OF CARE

### 508 Coordinating a “Never Event” and Other Quality of Care Investigations

- Role play of a hypothetical quality of care or “never event” investigation
- Multi-disciplinary review of issues to look for and address
- Best practices in coordinating a quality investigation with other stake holders

*Jennifer Daley, Chief Medical Officer, Partners Community Health Care; Jeffrey Driver, EVP & Chief Risk Officer, Stanford University Medical Center; Steve Ortquist, Managing Director, Aegis Compliance & Ethics Center, LLP*

## RESEARCH/IRB

### 509 Conflicts of Interest in Research: The New Enforcement Frontier **CHRC**

- Who is interested in research COI, why and recent developments as drivers for change
- Federal and state legislative and regulatory responses and enforcement
- Private initiatives (AAMC, AAHRPP, industry, etc.) and practical approaches for compliance and risk mitigation

*Kara Morgenstern, University of Michigan; Rachel Nosowsky, Senior Counsel, Miller Canfield Paddock & Stone, PLC*

## TRENDS OUTSIDE HEALTHCARE

### 510 Key Recent Developments Regarding Attorney-Client Privilege, Work-Product Protection and Indemnification

- The government’s historical erosion of these bedrock doctrines
- Judicial and legislative backlash
- Challenges faced by organizations in establishing and maintaining privilege and work product protection

*Frank Sheeder, Partner, Jones Day*

## ADVANCED DISCUSSION GROUP

### 511 Medicare Focus Review: Board Has Been Notified—Now What?

- Discuss board members’ anxiety regarding the financial and/or fraud concerns
- What the C-level dynamics the compliance officer must be sensitive to...or face credibility issues
- Real life credibility issues will be discussed

*Wilma Acosta, Interim Director of Compliance and Accreditation, Providence Centralia Hospital; Robert Nolan, VP & Chief Compliance Officer, PharMerica Corporation*

## GENERAL COMPLIANCE/HOT TOPICS

### 512 Running Successful Hospital Exercises: Planning, Execution, and Assessment

- Identify key compliance requirements for hospital-based exercises
- Review components for developing an exercise project
- List evaluation steps for improving future exercises
- Discuss best practices and lessons learned from hospital experiences

*Mitch Saruwatari, VP Quality and Compliance, LiveProcess; Michael Bowers, Director of Facilities & Engineering, Riverside County Regional Medical Center*

11:00 AM –4:00 PM

## INDUSTRY IMMERSIONS

### INDUSTRY IMMERSION

### 114 Pharma Hot Topics in Life Sciences: What Providers and Compliance Professionals Need to Know

- Changes to the PhRMA Code—how pharmaceutical representatives interactions with providers may change
- Learning’s from recent medical device enforcement actions: what it means to activities involving providers
- FDA regulations: what it means to promote off-label and what providers need to know

*Lucy Rose, National Managing Director, Deloitte & Touche’s Life Sciences Regulatory Consulting Group; Terri Kraemer, Director, Deloitte & Touche LLP*

## INDUSTRY IMMERSION

### 115 Academic Medical Centers: Academic Collaboration with Non-Academic Sites/ The Use of Non-Physician Practitioners in the AMC/ Risk Managers are from Mars, Compliance Officers Are from Venus?

- Medical school and hospital compliance when you have an affiliation agreement relationship
- Use of mid-level providers in the academic setting
- Academic and community setting collaboration

*Kelly Willenberg; Teresa M Bivens, Deputy Compliance Officer, Univ of Louisville HSC; Jeffrey Driver, EVP & Chief Risk Officer, Stanford University Medical Center; John Falcetano, Chief Audit/Compliance Officer, University Health Systems of Eastern Carolina*

## INDUSTRY IMMERSION

### 116 Hot Topics

12:00–1:00 PM

Networking Luncheon

1:30–2:30 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 601 Ethics/Compliance Hotline Benchmarking: Best Practices and Data Trends **CHC**

- How effective is anonymous ethics helpline reporting?
- What is the most effective way to advertise your helpline?
- What types of data should be tracked and reported to executive leadership?

*Mary Bennett, VP, Ethical Leadership Group, A Global Compliance Company*

## LONG-TERM CARE

### 602 Long-Term Care Survey, Certification, and Enforcement Issues: CMS and Provider Perspectives

- Review CMS’ enforcement actions (e.g., CMPs, termination) and explore settlement vs. litigation of those cases
- Understand the federal appeals process for enforcement actions
- Examine the relationship between the States’ Informal Dispute Resolution (IDR) process and its impact on CMS

*Alan C. Horowitz, Assistant Regional Counsel, Office of the General Counsel, U.S. Department of Health and Human Services; Richard E. Gardner, Partner, Arnall Golden Gregory LLP*

## MEDICAID COMPLIANCE

### 603 Medicaid Compliance **CHC**

## PRIVACY & SECURITY

### 604 Interoperable Records: The 2014 Deadline

- The reasoning behind and legal mandates that drive the effort for the interoperable health record
- The players, elements and functioning that comprise an effective interoperable system
- The barriers and issues that must be addressed for successful interoperability

David Nelson, Privacy Officer, County of San Diego

## PHYSICIAN COMPLIANCE

### 605 Implementing Policies on Physician/Vendor Relationships: How, When and Why?

- You need to implement policies regulating gifts and interactions between pharmaceutical representatives and physicians at your institution. Now what?
- Review obstacles and debates to expect, lessons and pitfalls to avoid, and resources available
- Discuss practical implementation solutions and sample policies from institutions that moved in the “pharm-free” direction

Robert A. Pelaia, Senior University Counsel for Health Affairs-Jacksonville, University of Florida

## LEGAL & REGULATORY

### 606 New ZPICs and How DOJ Uses Aberrations in Claims Data to Develop Leads in Case Development

- Learn how Department of Justice Prosecutors are using data from the new ZPICs to look for aberrations in billing patterns to start investigations
- Discuss the transfer of Medicare data from PSCs to ZPICs and how it is impacting enforcement
- Hear a discussion of how criminal prosecutions are being driven by the data

Kirk Ogrosky, Deputy Chief, U.S. Department of Justice; Peggy Sposato, Senior Legal Analyst and Investigator, U.S. Department of Justice, Criminal Division

## AUDITING & MONITORING

### 607 Leveraging Available Data, Your Desktop Software, and Other Specialized Tools for Enhanced Compliance Program Administration, Auditing & Monitoring

- Learn how to integrate and maximize technologies to enhance your compliance program effectiveness
- Gain insights on practical uses of audit software tools from examples of actual audits performed
- Obtain information on continuous compliance auditing/ monitoring for revenue cycle, privacy, OIG exclusions, and Stark

Glen Mueller, Vice-President—Chief Audit, Compliance, and Information Security Executive, Scripps Health; Jan Coughlin, Compliance Program Director and Privacy Officer, Scripps Health

## QUALITY OF CARE

### 608 Apologies and Reporting of Medical Errors

- Provide a comprehensive review of state apology laws, the limits of the protections afforded by these statutes, the benefits and risks of apologies, and strategies for adopting procedures for apologies
- Provide a comprehensive review of federal and state statutes and regulations that mandate that hospitals and healthcare providers report medical errors, adverse events and device failures
- Provide a detailed review of the new federal regulations under the Patient Safety and Quality Improvement Act of 2005 establishing a comprehensive national structure for the voluntary reporting of medical errors

Michael Morse, Partner, Pietragallo Gordon Alfano Bosick & Raspanti, LLP

## RESEARCH/IRB

### 609 Research and the Medical Record **CHRC**

- What are the salient issues for an institution that maintains both research records and medical records?
- What are the regulatory requirements for each type of record?
- How do/should these records overlap? How do/should these records be separated?

Leah Guidry, Huron Consulting Group, LLC; Jeff Cooper, Director, Huron Consulting Group

## TRENDS OUTSIDE HEALTHCARE

### 610 Supporting Ethics & Compliance Programs by Leveraging Technology

- Leveraging learning management systems to do more than track training completions
- Map this—automated curriculum mapping
- Channels for delivering awareness (You be the judge, Policy Pursuit, Targeted Messaging, etc.)

Frank Lopez, Director of Compliance, Corporate Counsel, Qwest Communications

## GENERAL COMPLIANCE/HOT TOPICS

### 611 Operational Challenges to Stark III

- Real-life Stark Law operational issues facing hospitals, physicians and other providers
- 2008 Physician Fee Schedule Proposals and 2009 IPPS Changes
- How to audit for Stark Law compliance

Bob Wade, Partner, Baker & Daniels, LLP

2:30–3:00 PM

Break

3:00–4:00 PM

## GENERAL COMPLIANCE/HOT TOPICS

### 701 Understanding and Optimizing Legal & Regulatory Risk Management

- Understand the fundamentals of risk management
- Learn how to gain more value from your investments in regulatory compliance
- See how other healthcare organizations are addressing their risk management needs while reducing costs and improving operational efficiency

Steve McGraw, President & CEO, Compliance 360

## LONG-TERM CARE

### 702 Quality Monitors: What They Do, Do They Help, and What to Do to Avoid Them

- A day in the life of Federal Monitors under a CIA; areas reviewed off-site
- Discussion of the areas reviewed on-site by the Federal Monitor
- Nuts and bolts for focusing on strengths, weaknesses and opportunities for improvement

David Jackson, President, Jackson and Associates, Inc.; Barbara L. Miltenberger, Attorney, Husch Blackwell Sanders, LLP

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## MEDICAID COMPLIANCE

### 703 Challenges and Solutions for Providing Compliance Guidance in a Medicaid Environment **CHC**

- Discuss challenges for navigating regulatory guidance in a Medicaid environment
- Discuss strategies for defining effective solutions to key compliance initiatives

Derek Kang, Compliance Officer, Texas Children's Hospital

## PRIVACY & SECURITY

### 704 A HIPAA Security Incident and Investigation: It Can Happen to You **CHC**

- Learn about areas of risk for security breaches
- How to develop a corrective action plan in response to a HIPAA Security audit
- Take-away tools for assessment of your security program

Robert Michalski, Vice President and Chief Compliance Officer, West Penn Allegheny Health System; Sandra Sessoms, Director, Compliance, West Penn Allegheny Health System

## PHYSICIAN COMPLIANCE

### 705 Medical Students & Documentation

- Discuss approaches to implementing a policy across multiple units of a large Health System
- Discuss system challenges requiring significant coordination throughout the development and implementation of new policy
- Monitoring and subsequent continuous process improvement to ensure successful outcome, and lessons learned

Kristin Scarcella, Dir. of Prof. Reimbursement, Compliance & Education Office, Univ. of Michigan Faculty Group Practice; Suzanne Knight, Sr. Professional Billing and Coding Educator, Univ. of Michigan Faculty Group Practice

## LEGAL & REGULATORY

### 706 EMTALA Compliance and the Anti-kickback Statute and Stark Law **CHC**

- Discussion of EMTALA basics and new regulations for call coverage
- Structuring call coverage without implicating fraud and abuse laws
- Resources and operational challenges in EMTALA compliance

Heidi Sorensen, Of Counsel, Foley & Lardner LLP; Dawn Carman, Principal, Denali Compliance Group, LLC; Jeff Fitzgerald, Partner, Faegre & Benson

## AUDITING & MONITORING

### 707 Re-Thinking Risk Assessment: Are You Counting the Ants While the Elephants Run By? **CHC**

- Practical tips on how to focus limited time and resources in the "right" areas
- Leverage operational initiatives to address compliance risk areas
- Networking and sharing best practices with peers

Stephen Gillis, Director of Billing Compliance, Mass General Hospital & Mass General Phys. Org; Karen Murray, Chief Compliance Officer, Yale New Haven Health System; Kelly Saunders, Partner, Deloitte & Touche LLP; Phyllis Patrick, Compliance & Privacy Officer, Greenwich Hospital

## QUALITY OF CARE

### 708 When Poor Quality Care Becomes Fraud

- Understand the relationship between the Medicare and Medicaid Conditions of Participation, the OIG/AHLA guidance for Boards of Directors on Compliance and Quality, the revised guidance for long-term care facilities, and the False Claims Act
- Discuss recent enforcement actions
- Take home practical tools and steps to integrate quality into compliance

Robert Benvenuti, Attorney, Barnett Benvenuti & Butler, PLLC; Betsy Hall, Director of Corporate Compliance, Privacy and Information Security, Jewish Hospital & St. Mary's HealthCare, Inc. (JHSMH)

## RESEARCH/IRB

### 709 What Every Compliance Officer Needs to Know about Research...But Is Afraid to Ask **CHRC**

- What is research, and why should you care?
- Understanding the compliance issues related to research: IRB approval process, adverse events, billing issues, sponsor agreements
- What do you do with it when you know?

Rick Robinson, Fulbright & Jaworski, LLP; Dwight Claustre, System Director Corporate Compliance, Catholic Healthcare West

## TRENDS OUTSIDE HEALTHCARE

### 710 Just Because It's Legal Doesn't Mean It's Ethical

- The "value" of "Values"
- The parable of the SADHU
- Name that Scandal / Name that Scoundrel

Paul Fiorelli, Director, Cintas Institute for Business Ethics, Xavier University

## GENERAL COMPLIANCE/HOT TOPICS

### 711 Where's That Policy? Solving the Pitfalls of Paper-Based and Internally Built Policy & Procedure Systems

- Examine the headaches, risks, and costs of both paper-based and internally built electronic policy management systems
- Review time and cost-saving benefits of implementing an online policy management application
- Outline suggested assessment criteria for choosing the software that best meets your needs
- Discuss best practices for setup in the hospital environment

Robert Tietjen, CEO, PolicyTech; Hospital co-presenter TBD

## WEDNESDAY, APRIL 29

7:00 AM–12:30 PM

Conference Registration

8:00 AM–12:00 PM

## GENERAL COMPLIANCE/HOT TOPICS

### W1 The Road Ahead and How to Navigate it: Panel Discussion on Challenges for Health Care Organizations in 2009 and How to Address Them

Frank Sheeder, Partner, Jones Day

## LONG-TERM CARE

### W2 Impact of the Supplemental Guidance: Provider Perspectives

- Highlights of the quality components included in the supplemental guidance
- Analysis: what do providers probably have in place to address the components
- Analysis: how do providers address the components not met by existing policies/procedures and processes

Terri B. Graham, VP of Compliance and Corporate Compliance Officer, Kindred Healthcare, Inc.

### (W2 continued) Impact of the Supplemental Guidance: Legal Perspective

- Learn how to advise clients about potential modifications to compliance programs necessitated by the Supplemental Guidance
- Understand industry efforts to help providers merge the Supplemental Guidance into existing compliance programs
- Analysis: how can providers meaningfully address the OIG's updated risk areas in compliance programs

Ken Burgess, Attorney, Poyner & Spruil LLP

## (W2 continued) Compliance, Quality Improvement and Risk Management: Making It Work in Your LTC Organization

### Organization

- Defining the roles of compliance, quality, and risk within your organization
- Creating pathways for communication and efficiencies
- Utilizing tools and resources for increased effectiveness

*Karla Dreisbach, Senior Director of Compliance, Peace Church Compliance Program; Christina Wildrick, Director of Risk Management, Peace Church Compliance Program*

## (W2 continued) CIAS

- Brief overview of what is a CIA, how it differs from the CMS survey process and key components of all OIG CIA's, specifically the federal monitor
- The different challenges of implementing a corporate integrity agreement in a large organization versus a small organization
- Where we are today, lessons learned, and how to improve a facility's compliance program

*Andrea McElroy, Sr. Director of Compliance System Integrity, Golden Living; Tamar Abell, Vice President, ABS Management*

## (W2 continued) Long-Term Care

### Open Forum

*Donna Maassen, Director of Compliance, Extencare Health Services, Inc.; Andrew G. Conkovich, Director of Regulatory Affairs and Compliance, University of Louisville Hospital*

## PRIVACY & SECURITY

## W4 Privacy Officer Roundtable **CHC**

This session will be a facilitated discussion of current issues in privacy compliance, and an opportunity to hear colleagues discuss and share ideas on how to address hot topics, as well as what has and has not worked for them.

*Marti Arvin, Privacy Officer, Univ of Louisville; Debra I. Hinson, VP & Chief Compliance Officer, Regency Hospital Company*

## LEGAL & REGULATORY

## W6 Corporate Liability, Governance, and Compliance **CHC**

- A review of the impact of the passage of the Sarbanes-Oxley Act, the Sentencing Guideline Amendments of 2004, and Department of Justice prosecution policies
- A review of the basis for liability and obligations for business organizations who enter into Deferred Prosecution Agreements with the DOJ and/or Corporate Integrity Agreements with the OIG HHS
- A review of strategies and guidance for responding to government investigations and the U.S. DOJ and its attorneys and agents and other federal and state enforcement agencies

*Gabriel Imperato, Partner, Broad and Cassel; Debra Wong Yang, Partner, Gibson Dunn & Crutcher; Paul E. Pelletier, Principal Deputy Chief, Fraud Section, U.S. Department of Justice; Paul DeMuro, Partner, Latham & Watkins LLP;*

## (W6 continued) False Claims Act Enforcement Initiatives and Update

- Overview of current enforcement initiatives
- Discussion of recent laws and rule proposals, including advisory opinions and recent judicial interpretations of the False Claims Act
- Practical strategies for assessing internal compliance and minimizing False Claims Act risks

*Gary Eiland, Partner, King & Spalding; L.T. Lafferty, Shareholder, Fowler White Boggs Banker, PA; Whitney Schmidt, ACE Coordinator, U.S. Attorney's Office*

## (W6 continued) Negotiating False Claims Act Settlements

- A discussion of factors which typically result in the settlement of False Claims Act cases with the Department of Justice and/or Relator
- An overview of the most common issues and aspects of negotiating settlements under the False Claims Act with the United States Attorney and Department of Justice
- A review of the most common issues which are confronted in concluding a CIA with the OIG HHS

*Roger Goldman, Partner, Latham & Watkins LLP; Daniel R. Anderson, Assistant Director, U.S. Department of Justice; Marc S. Raspanti, Partner, Pietragallo Gordon Alfano Bosick & Raspanti, LLP; Robert DeConti, Chief, Admin & Civil Remedies Branch, Office of Inspector General*

## AUDITING & MONITORING

## W7 Hospital Outpatient Coding Compliance Audits

- Review coding auditing and monitoring compliance program elements
- Discuss specific target CPTs, modifiers or APCs, and optional action and recommendations to develop
- Look at key elements and aspects of auditing hospital outpatient department service areas

*Gloryanne Bryant, Senior Director, Catholic Healthcare West*

## RESEARCH/IRB

## W9 Medicare Coverage Analysis Workshop: The "How To" of Medicare Coverage in Research **CHRC**

- Learn a step-by-step process to perform a Medicare Coverage Analysis
- Examine techniques to document analysis
- Walk through multiple hypothetical research studies
- Review tools available for conducting a Medicare Coverage Analysis

*Ryan D. Meade, Meade & Roach, LLP; Suzanne Page, University of Miami*

## TRENDS OUTSIDE HEALTHCARE

## W10 Compliance Risk Assessment Workshop: Principles and Practice **CHC**

Identifying and prioritizing legal, regulatory and reputational risk is the foundation of any compliance program. In this interactive session, we will discuss risk assessment methodology, share best practices of health care and general compliance programs, and work through hypothetical case studies.

*Sheryl Vacca, SVP/Chief Compliance and Audit Officer, University of California; Andy Reisman, Ernst & Young*



## Attendees also get a FREE trial subscription to *Report on Medicare Compliance*—valued at \$140

As an added bonus, Compliance Institute attendees will receive a FREE trial subscription to the award-winning *Report on Medicare Compliance*. Packed with news and strategies to help you run a more effective compliance operation, this weekly newsletter includes peer-tested guidance, notice on federal activity, and practical tools such as checklists, worksheets and form templates that you can easily adopt into your office's procedures.

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- Compliance Site Evaluations
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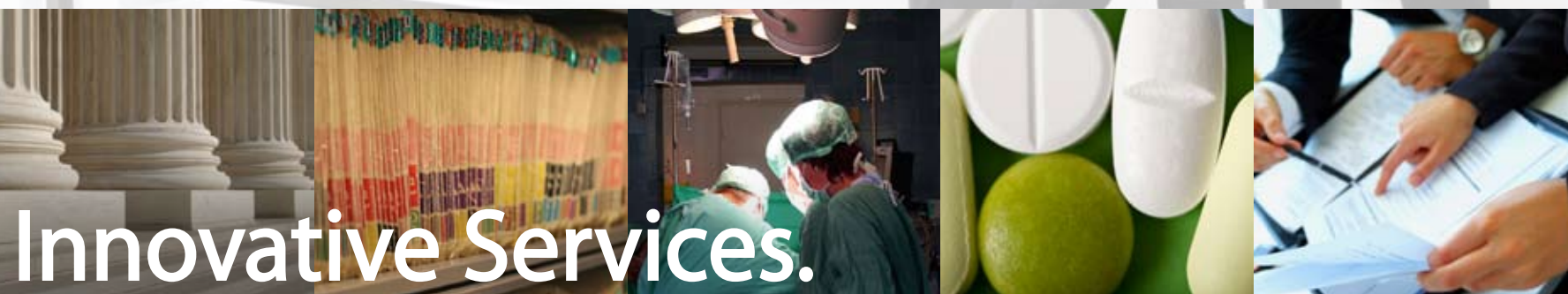
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Name: \_\_\_\_\_  
(please type or print)

Please fill out the following information. Sharing your demographic information with HCCA will help us create better networking opportunities for you.

### STEP 1: Demographic Information

What titles best describe your job? Select all that apply.

- |  |   |
|--|---|
| <input type="checkbox"/> Academic/Professor          | <input type="checkbox"/> Consultant                           |
| <input type="checkbox"/> Administration              | <input type="checkbox"/> Controller                           |
| <input type="checkbox"/> Asst Compliance Officer     | <input type="checkbox"/> Ethics Officer                       |
| <input type="checkbox"/> Attorney (In-House Counsel) | <input type="checkbox"/> Executive Director                   |
| <input type="checkbox"/> Attorney (Outside Counsel)  | <input type="checkbox"/> General Counsel                      |
| <input type="checkbox"/> Audit Analyst               | <input type="checkbox"/> Health Information Management        |
| <input type="checkbox"/> Audit Manager/Officer       | <input type="checkbox"/> HIPAA/Privacy Officer                |
| <input type="checkbox"/> Billing Manager/Officer     | <input type="checkbox"/> Human Resources                      |
| <input type="checkbox"/> Charger Master              | <input type="checkbox"/> Medical Director                     |
| <input type="checkbox"/> Chief Compliance Officer    | <input type="checkbox"/> Nurse                                |
| <input type="checkbox"/> Chief Executive Officer     | <input type="checkbox"/> Nurse Manager                        |
| <input type="checkbox"/> Chief Financial Officer     | <input type="checkbox"/> Patient Safety Officer               |
| <input type="checkbox"/> Chief Information Officer   | <input type="checkbox"/> Pharmacy Director                    |
| <input type="checkbox"/> Chief Medical Officer       | <input type="checkbox"/> Physician                            |
| <input type="checkbox"/> Chief Operating Officer     | <input type="checkbox"/> President                            |
| <input type="checkbox"/> Clinical                    | <input type="checkbox"/> Quality Assurance/Regulatory Officer |
| <input type="checkbox"/> Coder                       | <input type="checkbox"/> Reimbursement Coordinator            |
| <input type="checkbox"/> Compliance Analyst          | <input type="checkbox"/> Research Analyst                     |
| <input type="checkbox"/> Compliance Coordinator      | <input type="checkbox"/> Risk Management                      |
| <input type="checkbox"/> Compliance Director         | <input type="checkbox"/> Trainer/Educator                     |
| <input type="checkbox"/> Compliance Fraud Examiner   | <input type="checkbox"/> Vice President                       |
| <input type="checkbox"/> Compliance Officer          |   |
| <input type="checkbox"/> Compliance Specialist       |   |

List others not listed here: \_\_\_\_\_

\_\_\_\_\_

What year did you start in Compliance? \_\_\_\_\_

What certifications do you hold? Select all that apply.

- |                                |                                |                                |                               |
|--------------------------------|--------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> BA    | <input type="checkbox"/> CHC-F | <input type="checkbox"/> FHFMA | <input type="checkbox"/> MSN  |
| <input type="checkbox"/> BBA   | <input type="checkbox"/> CHE   | <input type="checkbox"/> JD    | <input type="checkbox"/> MT   |
| <input type="checkbox"/> BS    | <input type="checkbox"/> CHP   | <input type="checkbox"/> LLM   | <input type="checkbox"/> NHA  |
| <input type="checkbox"/> BSN   | <input type="checkbox"/> CHRC  | <input type="checkbox"/> MA    | <input type="checkbox"/> PhD  |
| <input type="checkbox"/> CCEP  | <input type="checkbox"/> CIA   | <input type="checkbox"/> MBA   | <input type="checkbox"/> RHIA |
| <input type="checkbox"/> CEM   | <input type="checkbox"/> CPA   | <input type="checkbox"/> MHA   | <input type="checkbox"/> RHIT |
| <input type="checkbox"/> CCS   | <input type="checkbox"/> CPC   | <input type="checkbox"/> MPA   | <input type="checkbox"/> RN   |
| <input type="checkbox"/> CCS-P | <input type="checkbox"/> CPHQ  | <input type="checkbox"/> MPH   |                               |
| <input type="checkbox"/> CFE   | <input type="checkbox"/> DDS   | <input type="checkbox"/> MS    |                               |
| <input type="checkbox"/> CHC   | <input type="checkbox"/> ESQ   | <input type="checkbox"/> MSHA  |                               |

List others not listed here: \_\_\_\_\_

\_\_\_\_\_

What type of health care entity do you work for? Select all that apply.

- |   |  |
|---|--|
| <input type="checkbox"/> Academic                   | <input type="checkbox"/> Long-Term Care  |
| <input type="checkbox"/> Ambulance/Transportation   | <input type="checkbox"/> Managed Care  |
| <input type="checkbox"/> Behavioral Health          | <input type="checkbox"/> Medical Device Manufacturer                                 |
| <input type="checkbox"/> Consulting Firm            | <input type="checkbox"/> Medical/Clinical Research                                   |
| <input type="checkbox"/> Durable Medical Equipment  | <input type="checkbox"/> Nursing   |
| <input type="checkbox"/> Government Provider        | <input type="checkbox"/> Other Provider of Services/Products to Health Care Entities |
| <input type="checkbox"/> Health System              | <input type="checkbox"/> Payor/Insurance   |
| <input type="checkbox"/> Health System/Teaching     | <input type="checkbox"/> Pharmaceutical Manufacturer                                 |
| <input type="checkbox"/> Home Care/Hospice          | <input type="checkbox"/> Physician Practice  |
| <input type="checkbox"/> Hospital                   | <input type="checkbox"/> Rehabilitation  |
| <input type="checkbox"/> Hospital/Teaching          | <input type="checkbox"/> Retail Pharmacy   |
| <input type="checkbox"/> Integrated Delivery System | <input type="checkbox"/> Third Party Billing   |
| <input type="checkbox"/> Integrated Health System   |  |
| <input type="checkbox"/> Laboratory                 |  |
| <input type="checkbox"/> Law Firm                   |  |

List others not listed here: \_\_\_\_\_

\_\_\_\_\_

What is the corporate structure of your organization?

- For-profit  
 Non-profit

How many employees does your health care organization have?

- |                                      |  |
|--------------------------------------|--|
| <input type="checkbox"/> 1-50        | <input type="checkbox"/> 5,001-7,500   |
| <input type="checkbox"/> 51-100      | <input type="checkbox"/> 7,501-10,000  |
| <input type="checkbox"/> 101-250     | <input type="checkbox"/> 10,001-15,000 |
| <input type="checkbox"/> 251-500     | <input type="checkbox"/> 15,001-20,000 |
| <input type="checkbox"/> 501-1,500   | <input type="checkbox"/> 20,001-30,000 |
| <input type="checkbox"/> 1,501-3,000 | <input type="checkbox"/> 30,001-50,000 |
| <input type="checkbox"/> 3,001-4,000 | <input type="checkbox"/> 50,001-75,000 |
| <input type="checkbox"/> 4,001-5,000 | <input type="checkbox"/> 75,001+       |

Please tell us if you are a first-time attendee of the Compliance Institute:

- This is my first annual Compliance Institute

*Registration continues on next page (over)*

# Registration

HCCA's 13<sup>th</sup> Annual 2009 Compliance Institute

## STEP 2

Please type or print your contact information.

Mr.  Mrs.  Ms.  Dr.

Member ID

First MI Last

Credentials

Title

Place of Employment

Mailing Address

City State Zip

Phone

Fax

E-mail (required for confirmation notification)

CI0409W

## STEP 3: Session Choices

Please select sessions to assist HCCA in room planning. Choices are not binding. Select only ONE session per time slot (Industry Immersions overlap with Breakout Sessions).

SATURDAY, APRIL 25

Register me for the HCCA Volunteer Project (7:30–11:30 AM)

SUNDAY, APRIL 26

Pre-Conference 9:00 AM–12:00 PM

P1  P2  P3  P4  P5  P6  P7  P8  P9  P10

Pre-Conference 2:00–5:00 PM

P11  P12  P13  P14  P15  P16  P17  P18  P19  P20

Register me for the Sunday night Networking Reception (5:30–6:30 PM)

MONDAY, APRIL 27

Breakout Sessions 11:00 AM–12:00 PM

101  102  103  104  105  106  107  108  
 109  110  111  112  113  114  115

Breakout Sessions 1:30–2:30 PM

201  202  203  204  205  206  207  208  209  210  211  212

Industry Immersions 1:30–5:30 PM  ii1  ii2  ii3

Breakout Sessions 3:00–4:00 PM

301  302  303  304  305  306  307  308  309  310  311  312

Breakout Sessions 4:30–5:30 PM

401  402  403  404  405  406  407  408  409  410  411  412

Register me for the Monday night Networking Reception (5:30–7:00 PM)

TUESDAY, APRIL 28

Breakout Sessions 11:00 AM–12:00 PM

501  502  503  504  505  506  507  508  509  510  511  512

Industry Immersions 11:00 AM–4:00 PM  ii4  ii5  ii6

Breakout Sessions 1:30–2:30 PM

601  602  603  604  605  606  607  608  609  610  611

Breakout Sessions 3:00–4:00 PM

701  702  703  704  705  706  707  708  709  710  711

WEDNESDAY, APRIL 29

Post-Conference 8:00 AM–12:00 PM

W1  W2  W4  W6  W7  W9  W10

## HOW TO REGISTER

**MAIL** Include registration form with check payable to:  
HCCA, 6500 Barrie Road, Suite 250, Minneapolis, MN 55435

**ONLINE** Visit [www.compliance-institute.org](http://www.compliance-institute.org)

**FAX** to 952-988-0146 (including billing information)

**QUESTIONS?** Call 888-580-8373 or e-mail [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org)

## STEP 4: Choose Your Registration

Prices reflect savings

REGISTER by 4/1/09 after 4/1/09

- |  |               |         |
|--|---------------|---------|
| <input type="checkbox"/> HCCA Members .....                          | \$949 .....   | \$999   |
| <input type="checkbox"/> Membership Renewal & Registration .....     | \$1,244 ..... | \$1,294 |
| <input type="checkbox"/> Non-Members .....                           | \$1,099 ..... | \$1,149 |
| <input type="checkbox"/> New Membership & Registration* .....        | \$1,149 ..... | \$1,199 |
| <input type="checkbox"/> Pre-Conference Registration Morning .....   | \$125 .....   | \$125   |
| <input type="checkbox"/> Pre-Conference Registration Afternoon ..... | \$125 .....   | \$125   |
| <input type="checkbox"/> Post-Conference Registration .....          | \$125 .....   | \$125   |
| <input type="checkbox"/> Conference Binders .....                    | \$75 .....    | \$75    |

\*New members only. (Dues regularly \$295 annually.)

**TOTAL:**

## STEP 5: Payment

Check enclosed (payable to HCCA)

Invoice me Purchase Order # \_\_\_\_\_

Charge my:  Visa  MasterCard  AmericanExpress

Credit Card Account Number

Credit Card Expiration Date

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Cardholder's Signature



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# Registration Information

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Call 866-227-5944 to book your reservations,  
or visit the following link: [www.harrahs.com/CheckGroupAvailability.do?propCode=CLV&groupCode=SCHCC9](http://www.harrahs.com/CheckGroupAvailability.do?propCode=CLV&groupCode=SCHCC9)

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opulent Palace Tower, these ample guest rooms  
measure at least 500 square feet.

**Augustus Tower Deluxe Rooms:** \$289 per  
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elegance synonymous with Caesars Palace.

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group rate is Monday, March 31, 2009, or until  
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room block may sell out prior to the hotel cut-  
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**REGISTRATION PAYMENT TERMS** Checks  
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HCCA will charge your credit card the correct  
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**TAX DEDUCTIBILITY** All expenses incurred to  
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**CANCELLATIONS/SUBSTITUTIONS** No refunds  
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You may send a substitute, or receive a credit  
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**MEALS** Continental breakfast and lunch are  
provided on Monday and Tuesday. Coffee will  
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**SPECIAL NEEDS** Prior to your arrival, please  
call HCCA at 888-580-8373 if you have a  
special need and require accommodation to  
participate in the Compliance Institute.

**DRESS CODE** Business casual dress is  
appropriate for this conference.

**AGREEMENTS & ACKNOWLEDGEMENTS** I  
agree and acknowledge that I am undertaking  
participation in HCCA events and activities as  
my own free and intentional act, and I am fully  
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on the registration form.



# HCCA



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April 26–29, 2009

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13th Annual

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