

12 CLE CREDITS INCLUDING ETHICS | 14 CPA CREDITIS | 12 NURSING HOME ADMINISTRATOR CREDITS

24TH ANNUAL

HEALTH LAW INSTITUTE

The event of the year for every health law professional!

5 GREAT REASONS TO ATTEND

- 1.** Get the latest word on what's happening at HHS from current Deputy Secretary of HHS Eric Hargan.
- 2.** Highly sought after speaker and leading expert and researcher on health care management and economics, Professor Van Horn, delivers Tuesday's keynote address.
- 3.** Choose the topics that matter most to you and your clients – over 48 different topics!
- 4.** Take away impressive Institute materials that you'll refer to time and time again.
- 5.** Enjoy networking with your colleagues at the Safe Harbor Reception!



Continuing Legal Education Arm
of the Pennsylvania Bar Association

Philadelphia

TUE. & WED., MAR. 13 & 14, 2018

PA CONVENTION CENTER, 12TH & ARCH STREETS

8:30 am to 4:35 pm; check-in and continental
breakfast begin at 7:45 am each day

24TH ANNUAL

HEALTH LAW INSTITUTE

With so many changes on the horizon, the Health Law Institute delivers critical new content in a practical, well-rounded agenda. The Institute provides a place for you to learn new information and insights on the most important developments and practice challenges. Join us for this annual event where more than 400 health law professionals gather for a rich educational experience – and the opportunity to network and socialize!

The Institute kicks off with the always popular “Year in Review”

Take this opportunity to stay on top of all of the significant case law developments and regulatory changes in health law in our opening session. In this energetic hour you will be given a journey through all of the new and important case law and regulatory developments by Charles Artz, Barbara Blackmond and Mark Gallant. It’s the perfect way to explore what is happening across a broad spectrum of health law issues. You’ll also get a glimpse at what is on the horizon in health law.

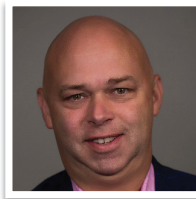
“You receive invaluable interaction with state and federal regulators!”



Hear directly from Eric Hargan, current Deputy Secretary at U.S. Health and Human Services

Deputy Secretary Eric Hargan at HHS will be sharing his insights about the initiatives of the

Department. His remarks are sure to offer you and your clients a new perspective on the role of HHS now and in the months ahead. This session kicks off Wednesday’s sessions – you won’t want to miss hearing what Deputy Secretary Hargan has to say.



Special Guest Speaker: Professor Van Horn on the Changing Healthcare Customer

The healthcare conversation in the US has been dominated by government health care policy. Relatively little attention has been paid to changes in the private sector and how this will affect the future of health care provision. The dynamic and engaging Professor Van Horn will contrast government initiatives around the ACA with the evolving posture of employers with respect to health benefits. This change has resulted in a new healthcare customer – the individual consumer. How must health care providers think about their business differently? How will health law be impacted? Professor Van Horn will challenge the way you think about the future of health law.

Professor Van Horn’s remarks will be followed immediately by the Safe Harbor Cocktail Reception – join us!

An unparalleled opportunity to be updated on the most significant health law developments of the year *and* what is trending!

The much anticipated False Claims Act Update is back

Courts are continuing to release False Claims Act decisions at a brisk pace. You'll hear each panelist's viewpoint on the latest cases. Our stellar panel includes Margaret Hutchinson, Chief of the Civil Division of the US Attorney's Office, Eastern District of PA; David Laigaie and Matthew Hogan. Come to hear the insightful banter and to be updated on all that's new!

Tips for medical staff leaders and counsel who advise them

Do you advise medical staff leaders? If so, this Super Workshop is one you'll want to attend. In a lively discussion, Barbara Blackmond and Linda Haddad will fill you in on the most significant issues for medical staff leaders. The issues are getting more and more complicated each year. Take away tips that will help you and your clients navigate these complex issues more effectively.

Be updated on all that's new in health care reform

Our outstanding panelists, Mark Gallant, Laval Miller-Wilson and Sandra Ykema, will not only offer the absolute latest information about healthcare reform, but will break down how it will impact your clients. The health care provider, consumer and commercial insurance perspectives will all be provided.



Alice Gosfield addresses one of the hottest issues in health law

Physician leasing has become one of the hot button issues in health law. Join Alice Gosfield to find out why leasing has become such a big issue and how the landscape is changing. Are restrictive covenants necessary? How do you handle the introduction of new physicians? Who owns the records? Gosfield will answer these and many more questions about this important area of health law practice. Guaranteed to be a crowd pleaser!



Jim Sheehan looks at "Reporting Up" to the "Highest Authority that Can Act on Behalf of the Organization"

How should lawyers act when they believe that corporate agents engage in actions or refuse to engage in actions which violate the legal obligations of the organization? Join Jim Sheehan to examine the ethical duties and options for attorneys with knowledge of actual or potential illegal conduct by the organization or its agents in this thought-provoking ethics hour.

"I love that there are sessions on so many current and developing topics."

8:30 - 8:35 *Welcome*

8:35 - 10:05 **The Health Law Year in Review**
MR. ARTZ, MS. BLACKMOND, MR. GALLANT

10:05 - 10:30 *Break*

10:30 - 12:00	1 SUPER WORKSHOP		2 SUPER WORKSHOP	
	False Claims Act Update <i>Mr. Hogan Ms. Hutchinson Mr. Laigaie</i>		Hot Topics for Medical Staff Leaders and Counsel Who Advise Them <i>Ms. Blackmond Ms. Haddad</i>	
	3 JUST THE BASICS 10:30 - 11:00	4 JUST THE BASICS 11:00 - 11:30	5 JUST THE BASICS 11:30 - 12:00	
Fundamentals of HIPAA Privacy <i>Ms. Kornrumpf</i>		The ABCs of HIPAA Security <i>Mr. Shay</i>		Submission and Payment of Claims <i>Ms. Brancatella</i>

12:00 - 1:15 *Lunch for all attendees*

1:15 - 2:15	6	7 ETHICS	8	9	10	11
	Inside the OCR Investigation/Audit Process <i>Dr. Fliszar Ms. Holland Ms. Smith</i>	Codes of Conduct: Do They Really Prevent Unethical/Illegal Conduct? <i>Mr. Hoffman</i>	Representations and Warranties in Healthcare Transactions <i>Ms. Hepp Ms. Schreiber</i>	Beyond Repeal: Developments for Health Benefit Plans under the Affordable Care Act <i>Ms. Gifford Mr. Leeds</i>	What Is Happening in NJ Health Law <i>Ms. Palestini</i>	Changing Horses: Legal and Practical Issues Surrounding Electronic Health Record (EHR) Transitions <i>Mr. Shay</i>
	12 JUST THE BASICS 1:15 - 1:45			13 JUST THE BASICS 1:45 - 2:15		
Health Care Facility Licensure in Pennsylvania <i>Ms. Johnson</i>			Medical Staff Issues <i>Ms. Nagele</i>			

2:15 - 2:25 *Break*

2:25 - 3:25	14 ETHICS	15	16	17	18	19
	To Disclose or Not to Disclose: Is It Ever a Question? <i>Mr. Mustokoff</i>	Informed Consent After <i>Shinal</i> <i>Mr. Ryan</i>	The Business Implications of Health Reform <i>Mr. Harris Mr. Thallner</i>	Antitrust Law: What's New? <i>Mr. Honart</i>	Scenes from a Medical Staff Hearing <i>Mr. Bubba Ms. Shields</i>	Blockchain and Healthcare Privacy Laws Just Don't Mix <i>Mr. Guagliardo Ms. Klein</i>
	20 JUST THE BASICS 2:25 - 2:55			21 JUST THE BASICS 2:55 - 3:25		
Basics of Medicare/Medicaid Fraud & Abuse <i>Mr. Sokolow</i>			Fraud & Abuse Compliance <i>Mr. Sokolow</i>			

3:25 - 3:35 *Break*

3:35 - 4:35	KEYNOTE ADDRESS
	<p>The Changing Healthcare Customer: What It Means for US Healthcare PROFESSOR VAN HORN</p>

4:35 - 5:30



JOIN US!
The "Safe Harbor" Reception

You are invited to a relaxing and enjoyable reception immediately following the keynote address by our special guest speaker, Professor Van Horn. Enjoy great food and drink with the music of The Mélange Collective Jazz Trio in the background. It's the perfect way to unwind and visit with your colleagues at the end of the day.

8:30 - 9:30 News from Washington: What's Happening at HHS
CURRENT DEPUTY SECRETARY HARGAN, HHS

9:30 - 9:45 Break

9:45 - 10:45	24	25	26 SUPER WORKSHOP	27	28
	Recent Developments at the PA Department of Human Services <i>Ms. Grogan Ms. Leisch</i>	2018 Research Law in Review <i>Ms. Murtha</i>	Healthcare Reform: How the Landscape Is Changing <i>Mr. Gallant Mr. Miller-Wilson Ms. Ykema</i>	State and Federal Criminal and Civil Enforcement Priorities in Healthcare in 2018: A Discussion <i>Ms. Fullmer Ms. Leahy Ms. Malone Mr. Raphael</i>	Successful Integration and Use of Advanced Practice Professionals (APPs) <i>Ms. Nagele Ms. Sher</i>

10:45 - 11:00 Break

11:00 - 12:00	29	30 SUPER WORKSHOP	31	32	33
	Community Health Choices and the New Federal Medicaid Managed Care Rules <i>Mr. Cherry Mr. Hancock Ms. Leisch</i>	Lessons Learned from Physician Leasing <i>Ms. Gosfield</i>	What's the Future of the CMS 60-Day Overpayment Rule – Can Negligence Really Trigger False Claims Act Exposure? <i>Ms. Hein Ms. Rowland</i>	The Opioid Epidemic in Pennsylvania: Top 10 Legal Considerations for Health Care Providers <i>Mr. Moak</i>	Living with MACRA (The Medicare Access and CHIP Reauthorization Act of 2015) and Value Based Payments in the Real World <i>Mr. Mattioli Dr. Moses Mr. Sherry</i>

12:00 - 1:15 Lunch for all attendees

1:15 - 2:15	34	35	36 ETHICS	37	38	39
	Hot Issues in Health Insurance from the Insurance Regulator Perspective <i>Mr. Mendelsohn Ms. Ykema</i>	Smashing into Windows: The Limits of Consumer Sovereignty in Health Care <i>Prof. Furrow</i>	Being Professionally Responsible in a Sometimes Irresponsible Healthcare World <i>Ms. Benesch Mr. Wax</i>	Stark Self-Disclosure Protocol—Do New Rules Indicate a New Attitude? <i>Mr. Casale</i>	Community Health Choices: Using Managed Care to Deliver Medicaid-Funded Long-Term Services and Supports (LTSS) in Pennsylvania <i>Mr. Miller-Wilson Ms. Torregrossa</i>	Beyond the Financial Terms: Understanding Key Legal Issues in Payer-Provider Contracts in 2018 <i>Mr. Raphaely</i>

2:15 - 2:25 Break

2:25 - 3:25	40	41 SUPER WORKSHOP ETHICS	42	43	44
	PA Department of Health Update <i>Mr. Koltash Ms. Leshko Mr. Snyder</i>	Advice for Lawyers Considering "Reporting Up" Information about Illegal Conduct "To the Highest Authority" <i>Mr. Sheehan</i>	Regulatory Implications of Various Hospital Service Configurations – An Update on Provider-Based Status, Co-Location Arrangements and Micro Hospitals <i>Ms. LaManna Ms. Raleigh</i>	Tax Issues Impacting Tax-Exempt Healthcare Organizations <i>Mr. Hennessey</i>	One Call Away: Healthcare Telephone Consumer Protection Act (TCPA) Class Actions <i>Mr. Rosenthal</i>

3:25 - 3:35 Break

3:35 - 4:35	45	46	47	48	49
	New LLC Law in PA: How Is It Changing the Structure of Healthcare Entities <i>Mr. Hoy Ms. Jacobs</i>	Telemedicine Implementation: Do's and Don'ts <i>Mr. Quashie Ms. Rosenthal</i>	The Regulation of Medical Marijuana Under Federal and Pennsylvania Law <i>Mr. Goldberg</i>	Clinical Laboratories: They're Back Under the Government and Whistleblower's Microscope <i>Ms. Brecht</i>	Advancing Value-Based Contracting for Prescription Drugs and Medical Devices <i>Mr. Bassman Mr. Boise</i>

SESSION DESCRIPTIONS

Tuesday

MAR
13

8:35 AM – 10:05 AM

The Health Law Year in Review

MR. ARTZ, MS. BLACKMOND, MR. GALLANT

Don't miss your chance to catch up on all of the important healthcare developments over the past year. Our dynamic panel will bring you the hottest developments related to physicians, hospitals and Affordable Care Act (ACA) litigation and reimbursement developments. They will also offer their insights into the trends in health law and what lies ahead in these areas.

10:30 AM – 12:00 PM

SUPER WORKSHOP

1. False Claims Act Update

MR. HOGAN, MS. HUTCHINSON, MR. LAIGALE

The number of False Claims Act cases filed and settled continues to rise. Join our distinguished panel as they examine the most notable False Claims Act cases from the past year. The panel will also discuss major issues that have arisen—or that loom on the horizon—involving the FCA. Always a lively discussion!

SUPER WORKSHOP

2. Hot Topics for Medical Staff Leaders and Counsel Who Advise Them

MS. BLACKMOND, MS. HADDAD

Join us for a lively discussion on: • medical staff implications of the opioid crisis • unification of medical staffs within hospitals in systems • reorganization of hospital medical staffs • strategies to address physician burnout.

JUST THE BASICS (10:30 – 11:00 AM)

3. The Fundamentals of HIPAA Privacy

MS. KORNRUMPF

Learn about the HIPAA Privacy Rule in a post-HITECH world. We will explore: • who must comply with HIPAA/HITECH and what information HIPAA/HITECH protects • the obligation of covered entities and business associates on the use and disclosure of protected health information • the rights of individuals and their protected health information.

JUST THE BASICS (11:00 – 11:30 AM)

4. The ABCs of HIPAA Security

MR. SHAY

Learn about the HIPAA Security and Breach Notification Rules in a post-HITECH world. We will explore: • the obligations of covered entities and business associates to secure protected health information and electronically protected health information • the requirements of the breach notification rule • enforcement and penalties.

JUST THE BASICS (11:30 AM – 12:00 PM)

5. Submission and Payment of Claims

MS. BRANCATELLA

Hear the nuts and bolts of common compensation methods under payer/provider contracts such as fee-for-service and capitation payments, and touch on the evolving world of value based payments and

provider risk. Explore common payment concerns including the process for submitting claims, prompt payment, overpayment recovery, coordination of benefits, and emerging regulatory issues related to value based payments.

1:15 PM – 2:15 PM

6. Inside the OCR Investigation/Audit Process

DR. FLISZAR, MS. HOLLAND, MS. SMITH

Come to learn about important HIPAA compliance updates from the past year, as well as how to prepare for a phase 2 audit or other investigations by OCR.

ETHICS

7. Codes of Conduct: Do They Really Prevent Unethical/Illegal Conduct?

MR. HOFFMAN

The health care industry has a long history of implementing corporate compliance programs to prevent and detect potential illegal conduct. Often overlooked is the requirement that an “ethics” program must play an important role in order for a compliance program to be effective. This session will discuss recent unethical and illegal conduct in a variety of industries and will focus attention on the value and effectiveness of Codes of Conduct in accomplishing the mandates of corporate compliance.

“Health lawyers in the public and private sectors gather together to share information!”

8. Representations and Warranties in Healthcare Transactions

MS. HEPP, MS. SCHREIBER

Come to discover the importance of representations and warranties in healthcare transactions from both the Buyer's and Seller's perspectives, including ways to minimize risk in transaction documents. Examine the interplay between representations and warranties and indemnification. Explore options for insurance to help address risk and bridge the gap between representations and warranties and indemnification obligations.

9. Beyond Repeal: Developments for Health Benefit Plans Under the Affordable Care Act

MS. GIFFORD, MR. LEEDS

Whether or not any provisions of the Affordable Care Act are repealed or replaced, changes are coming. Come to acknowledge those changes, with a particular focus on how they affect the health benefit plans of healthcare providers.

10. What Is Happening in NJ Health Law

MS. PALESTINI

Attend to hear about the developments in New Jersey healthcare law, including: • opioids and the regulatory environment • healthcare facility and service licensure/certification updates and insights

• the effect of *Allstate Insurance Company v. Northfield Medical Center, P.C.* on captive PC structures and management services • the new (effective February 1, 2018) exception to the Codey Law prohibition against physician self-referrals for alternative payment models (“APMs”).

11. Changing Horses: Legal and Practical Issues Surrounding Electronic Health Record (EHR) Transitions

MR. SHAY

Discover the reasons why physicians change EHRs, and examine common problems relating to changing EHRs, including those relating to data transfer, HIPAA concerns, and other issues. Consider EHR license agreement provisions and how they can affect this process. Take away practical suggestions for navigating the transition from one EHR to another.

JUST THE BASICS (1:15 – 1:45 PM)

12. Health Care Facility Licensure in Pennsylvania

MS. JOHNSON

Attend to understand the who, what and why of health care facilities licensure in Pennsylvania, including: • a breakdown of the main health care licensing agencies • the relevant licensure laws and regulations • a discussion of cross-jurisdictional licensure issues • the interplay between federal reimbursement requirements and state licensure requirements.

JUST THE BASICS (1:45 – 2:15 PM)

13. Medical Staff Issues

MS. NAGELE

Take away an understanding of the unique medical oversight structure for physicians and other professionals who practice in hospitals, ACOs, CINS, clinics and large physician practices. Attend to learn: • federal and state regulatory and accreditation requirements • Medical Staff Bylaws, Rules and Regulations • Peer Review Privilege, Policies and Procedures • HCQIA Immunity and NPDB Reporting • managing patient safety and conduct.

2:25 PM – 3:25 PM

ETHICS

14. To Disclose or Not to Disclose: Is It Ever a Question?

MR. MUSTOKOFF

Here is your chance to hear a discussion of trends in health care fraud and abuse enforcement, and the ethical questions these trends present to healthcare attorneys. Using the complex arrangements between pharmacies and physicians, salespeople and attorneys as a backdrop, we will address key issues that arise during healthcare investigations, including: • identifying the actual client • working with corporate counsel and deciding whether to continue existing relationships with outside professionals • protecting the attorney-client privilege • determining whether to enter joint defense agreements and when to divorce from alleged bad-actors • to disclose or not—fulfilling obligations to report alleged misconduct to regulatory authorities.

15. Informed Consent After *Shinal*

MR. RYAN

Explore the wide-reaching effects of the PA Supreme Court's recent decision on informed consent in *Shinal v. Toms*, including: • what exactly is the holding of *Shinal*? • how must hospitals, physicians, and other healthcare providers adjust their informed consent policies and practices to comply with *Shinal*? • how will *Shinal* affect the litigation of informed consent claims? • will *Shinal* be effective in achieving its stated goals?

16. The Business Implications of Health Reform

MR. HARRIS, MR. THALLNER

Just as we were getting comfortable with the regulations and strategies associated with the Affordable Care Act, we face the continuing prospect of uncertain changes. We will address the business implications and legal considerations of up-to-the-minute ACA changes. We will focus on Medicare value-based payment models (ACOs and bundled payments), health insurance exchanges, and changes to Medicaid funding.

17. Antitrust Law: What's New?

MR. HONART

Attend to hear the latest developments concerning: • provider-provider integration including health system mergers, health system/physician transactions, and physician group mergers • provider/payor integration • payor/payor mergers • joint ventures involving providers and payors.

18. Scenes from a Medical Staff Hearing

MR. BUBBA, MS. SHIELDS

Experience a "re-enactment" of an internal hospital hearing in which a physician's clinical privileges and medical staff membership are at risk. The re-enactment will provide a procedural format to discuss HCQIA, medical staff bylaws, what constitutes an adverse recommendation, hearing notice contents, the importance of re-hearing conferences, the role of the Hearing Officer, discovery considerations, strategic use of expert witnesses, settlement negotiations, and appellate review standards.

19. Blockchain and Healthcare Privacy Laws Just Don't Mix

MR. GUAGLIARDO, MS. KLEIN

Many experts believe blockchain technology will drive innovation in health information and that it has the potential to solve critical health care issues, including interoperability, security, records management and data exchange. But will the heavily regulated health care industry be able to adopt the technology in a meaningful way? Learn how blockchain technology works, as well as potential applications in health care, including regulatory barriers to implementation and privacy concerns.

JUST THE BASICS (2:25 - 2:55 PM)

20. Basics of Medicare/Medicaid Fraud & Abuse

MR. SOKOLOV

It is essential that health law professionals have a grasp of the cornerstones of leading fraud and abuse laws such as the Anti-Kickback Statute, the Stark Law and the False Claims Act. Here is your opportunity to explore the broad scope of these laws, recent amendments, and ongoing enforcement efforts designed to protect the public funds that support the Medicare and Medicaid programs.

JUST THE BASICS (2:55 - 3:25 PM)

21. Fraud & Abuse Compliance

MR. SOKOLOV

It is often said in sports that the best offense is a good defense. By analogy, in the heavily regulated health law field, one of the keys to the successful growth and operation of any health care business is a good corporate compliance program. Attend to learn the importance of health care compliance programs, how to establish them, implement them and determine if they are operating effectively. Their potential impact on Medicare and Medicaid revenues will also be discussed.

3:35 PM - 4:35 PM

KEYNOTE ADDRESS

22. The Changing Healthcare Customer: What it Means for US Healthcare

PROF. VAN HORN

The healthcare conversation in the US has been dominated by government health care policy. Relatively little attention has been paid to changes in the private sector and how this will affect the future of health care provision. The dynamic and engaging Professor Van Horn will contrast government initiatives around the ACA with the evolving posture of employers with respect to health benefits. This change has resulted in a new healthcare customer - the individual consumer. How must health care providers think about their business differently? How will health law be impacted? Professor Van Horn will challenge the way you think about the future of health law.

"What a valuable event - well worth the cost!"

Wednesday

MAR
14

8:30 AM - 9:30 AM

PLENARY SESSION

23. News from Washington: What's Happening at HHS

CURRENT DEPUTY SECRETARY HARGAN

Hear directly from the Deputy Secretary of Health and Human Services about what is happening in Washington. You will learn about any new guidelines or initiatives. Don't miss this opportunity to get the "inside scoop"!

9:45 - 10:45

24. Recent Developments at the PA Department of Human Services

MS. GROGAN, MS. LEISCH

Hear an update on healthcare-related activities of the Department of Human Services in the past year. Specific topics include: • changes to the home-and community-based waiver services for individuals with physical disabilities or an intellectual disability or autism • 2017-18 budget of Department programs • litigation against the Department in a variety of areas.

25. 2018 Research Law in Review

MS. MURTHA

Come to understand all of the new laws, regulations, and agency guidance on research-related topics affecting research universities, hospitals and institutes. We will also review DHHS, PHS, and OIG enforcement initiatives in clinical research as well as new litigation related to research topics. Finally, we will identify how research organizations should address these new issues and initiatives.

SUPER WORKSHOP

26. Healthcare Reform: How the Landscape is Changing

MR. GALLANT, MR. MILLER-WILSON, MS. YKEMA

Join us to understand the changes that may happen with healthcare reform. We will share from our perspectives concerning both government programs and commercial insurance. We will walk you through the current state of the law and how it affects your clients.

27. State and Federal Criminal and Civil Enforcement Priorities in Healthcare in 2018: A Discussion

MS. FULLMER, MS. LEAHY, MS. MALONE, MR. RAPHAEL

We will discuss criminal and civil enforcement priorities in health care for 2018 and beyond. Topics include: • changes in criminal enforcement priorities for the Medicaid Fraud Unit of the Attorney General's Office of Commonwealth of Pennsylvania in 2018 and beyond • the Attorney General's use of civil statutes to pursue providers • an update on federal criminal and civil enforcement priorities under the Trump Administration.

28. Successful Integration and Use of Advanced Practice Professionals (APPs)

MS. NAGELE, MS. SHER

The use of APPs in the hospital and ambulatory setting is expanding rapidly, driven by quality, efficiency and economic factors. We will address a host of challenges: • licensing and clinical oversight of APPs • credentialing and privileging challenges • establishing scope of practice • engaging the supervising/collaborating physicians in effective oversight of APPs • integrating APPs into medical staff governance.

SESSION DESCRIPTIONS

Wednesday
continued

MAR
14

11:00 AM – 12:00 PM

29. Community Health Choices and the New Federal Medicaid Managed Care Rules

MR. CHERRY, MR. HANCOCK, MS. LEISCH

Community Health Choices (CHC) is Pennsylvania's new managed care program for health care and long-term services and supports rendered to older persons and persons with physical disabilities. We will address the new federal Medicaid managed care regulations issued in 2016; DHS's experience navigating those requirements; and the unique components of CHC, including the complaints and grievances process.

SUPER WORKSHOP

30. Lessons Learned from Physician Leasing

MS. GOSFIELD

Attend to discover: • issues in the Professional Services Agreement • whether there is a separate Management Services Agreement • whether restrictive covenants are necessary • how to handle the introduction of new physicians • dispute resolution • fair market value issues • clinical integration • who owns the records • how is the second negotiation different.

31. What's the Future of the CMS 60-Day Overpayment Rule – Can Negligence Really Trigger False Claims Act Exposure?

MS. HEIN, MS. ROWLAND

Join us for a discussion on: • the 60-Day Rule application to Medicaid and Medicare • the must-watch, ongoing federal litigation brought by United Healthcare Insurance Company's Part C plans against the United States to square agency rulemaking imposing a negligence standard for addressing overpayments on Medicare Part C and D providers with the FCA's stricter "knowledge" requirement • steps that providers can take to mitigate against potential fraud liability in this uncertain regulatory landscape.

32. The Opioid Epidemic in Pennsylvania: Top 10 Legal Considerations for Health Care Providers

MR. MOAK

Explore the top ten legal issues presented by the opioid epidemic in Pennsylvania, including the evolving regulatory landscape, clinical collaboration among providers, managed care and reimbursement issues, obligations with respect to the criminal justice and child welfare systems, litigation, and future changes on the horizon.

33. Living with MACRA (The Medicare Access and CHIP Reauthorization Act of 2015) and Value Based Payments in the Real World

MR. MATTIOLI, DR. MOSES, MR. SHERRY

The move towards value based payment models will continue to create disruption throughout the medical community, and especially in the physician community. Explore the underlying issues that these models may create in terms of practical day to day operations, as well as the potential legal issues that may be generated as a result of these new developments.

1:15 PM – 2:15 PM

34. Hot Issues in Health Insurance from the Insurance Regulator Perspective

MR. MENDELSON, MS. YKEMA

Come to hear about the hot topics in health insurance from the perspective of the state regulator, including: • the alphabet soup in the news, AHPs, STLDIs, HRAs, HSAs, CSRs, §1332 and more • MHPAEA—mental health parity requirements and enforcement • inter-agency efforts to address the opioid crisis • national litigation update • state legislation update.

"This Institute has an excellent mix of pertinent topics affecting the healthcare industry."

35. Smashing into Windows: The Limits of Consumer Sovereignty in Health Care

PROF. FURROW

"Transparency" in health care imagines model patients who can manage their own illness, process all information, and partner with the doctor. Consider the structural, legal, and behavioral barriers to such an ideal model of patient choice, including physician constraints, hospitals' lack of responsibility, and patient bounded rationality. Examine the evolution of consent models. Explore structural changes such as patient engagement in accountable care organizations (ACOs), and technologies such as virtual tools and social media to improve patient decision-making.

ETHICS

36. Being Professionally Responsible in a Sometimes Irresponsible Healthcare World

MS. BENESCH, MR. WAX

In a complicated, and ever-changing legal environment, healthcare lawyers often walk a fine line in determining what is legal, what is ethical, and what is not. We will address: • who is the client in various hospital/physician situations • conflicts of interest in healthcare corporate and litigation settings • the role of counsel versus business advisor • confidentiality and sharing information with third parties • the role of indemnity in healthcare documents.

37. Stark Self-Disclosure Protocol—Do New Rules Indicate a New Attitude?

MR. CASALE

Beginning on June 1, 2017, providers must use CMS's updated Stark Self-Disclosure. Attend to hear: • an overview of the new protocol • what has changed • what has remained the same • how the new rules and policy statements that were published in the November 15, 2015 Federal Register are affecting this process.

38. Community Health Choices: Using Managed Care to Deliver Medicaid-Funded Long-Term Services and Supports (LTSS) in Pennsylvania

MR. MILLER-WILSON, MS. TORREGROSSA

The state has begun its ambitious initiative to put more than 420,000 Pennsylvanians who are dually eligible for Medicare and Medicaid and individuals with physical disabilities into Medicaid managed care. Examine how the program has rolled out in Southwestern PA, plans for the roll out in Southeastern PA starting in July 2018 and what it has meant for providers and consumers.

39. Beyond the Financial Terms: Understanding Key Legal Issues in Payer-Provider Contracts in 2018

MR. RAPHAEL

Attend to become aware of the key non-financial terms of payer-provider contracts. Topics include: • limited networks • audits and data requests • assignment • tiered networks • takebacks and offsets • after-acquired providers • utilization review • regulatory requirements • eligibility determinations • all products clauses • leases and rental network • dispute resolution • issues presented by self-insured plans • value based programs • contract amendments.

2:25 PM – 3:25 PM

40. PA Department of Health Update

MR. KOLTASH, MS. LESHKO, MR. SINYDER

Join us to explore the issues that were addressed by the Pennsylvania Department of Health during the past year and that are expected to remain of prime importance in 2018. Learn about implementation of any recently enacted legislation and any forthcoming promulgation of new and revised regulations.

SUPER WORKSHOP

ETHICS

41. Advice for Lawyers Considering "Reporting Up" Information about Illegal Conduct "To the Highest Authority"

MR. SHEEHAN

How should lawyers act when they believe that corporate agents engage in actions or refuse to engage in actions which violate the legal obligations of the organization? What factors should they consider? What record should they develop? Examine the ethical duties and options for attorneys with knowledge of actual or potential illegal conduct by the organization or its agents. Analyze the differing rules that apply in Pennsylvania and New Jersey to the same conduct, and additional obligations imposed by Sarbanes-Oxley.

42. Regulatory Implications of Various Hospital Service Configurations – An Update on Provider-Based Status, Co-Location Arrangements and Micro Hospitals

MS. LAMANNA, MS. RALEIGH

Explore with us: • provider-based status – mid-build attestations, shared space considerations and provider-based audits • regulatory issues with co-located providers and suppliers, including hospitals within hospitals and satellites • micro hospitals – what are they and can they survive regulatory scrutiny?

43. Tax Issues Impacting Tax-Exempt Healthcare Organizations

MR. HENNESSEY

Take away an update on various tax issues specifically affecting tax-exempt Section 501(c)(3) healthcare organizations. Topics include: • impact of ACA repeal/replacement and federal tax reform legislation • recent federal income tax cases, rulings and other developments • status of Section 501(r) compliance/audits • IRS Form 990 and other procedural updates • Pennsylvania state/local tax issues.

44. One Call Away: Healthcare Telephone Consumer Protection Act (TCPA) Class Actions

MR. ROSENTHAL

In the healthcare context, the Telephone Consumer Protection Act (TCPA) law regulates the use of automatic telephone-dialing systems to contact patients for debt collection purposes, as well as healthcare related text reminders and confirmations (like flu shots and appointment reminders, lab results, and prescription notifications). Take away helpful insights to minimize the risk of, and defend against, a TCPA class action.

3:35 PM – 4:35 PM

45. New LLC Law in PA: How Is It Changing the Structure of Healthcare Entities

MR. HOY, MS. JACOBS

Learn the changes to LLC law in Pennsylvania, resulting from the enactment of Act 170, effective April 1, 2017: • structure and context of the new LLC law • governance of LLCs • duties of members and managers • nature and transferability of membership interests.

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46. Telemedicine Implementation: Do's and Don'ts

MR. QUASHIE, MS. ROSENTHAL

Cross-border licensure, reimbursement, scope of practice, credentialing, vendor selection, contracting, cybersecurity, and liability are some of the issues organizations need to properly address to establish a compliant and functioning telemedicine program. Join us to learn the best practices to observe when implementing a proper telemedicine program, as well as common missteps that may potentially reduce the chance of success.

47. The Regulation of Medical Marijuana Under Federal and Pennsylvania Law

MR. GOLDBERG

For thousands of years marijuana has been believed to provide health benefits. In 1970, it was officially outlawed as a Schedule 1 drug under the Controlled Substances Act. Over time a number of states passed legislation permitting the cultivation, processing, dispensing and consumption of marijuana for medical and/or recreational purposes, including Pennsylvania. The story on marijuana is expansive and evolving. This session focuses on the current and historical federal framework for cultivating, selling and using marijuana in the U.S., and Pennsylvania's medical marijuana legislation.

48. Clinical Laboratories: They're Back Under the Government and Whistleblower's Microscope

MS. BRECHT

Join us for a discussion on: • clinical laboratory cases which have been settled or are being litigated throughout the United States • fraud theories that are new or back after many years • the prosecution and qui tam relators' theories, as well as some of the defenses that are being raised • the interesting defense and government motion practices that are occurring in some of these laboratory cases.

49. Advancing Value-Based Contracting for Prescription Drugs and Medical Devices

MR. BASSMAN, MR. BOISE

Rising health care and prescription drug prices have dominated the headlines for months, as lawmakers and companies search for solutions that lower costs while preserving quality of care. Payors, government and industry have endorsed using value-based contracting for prescription drugs and devices, but significant regulatory hurdles still exist. Using a case study, examine issues in value-based contracting, including contractual considerations.

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Andrea M. Kahn-Kothmann, Esq.

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Ms. Kahn-Kothmann is Senior Counsel at Thomas Jefferson University in Philadelphia, where she has been a member of the legal team for 11 years. In addition to representing the health sciences university and its component professional schools on general legal matters, her primary clients are Jefferson's various health care provider entities, including a 650-physician, multi-specialty faculty practice plan and several acute care hospitals which she represents on health care regulatory and transactional issues.

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Mr. Mattioli concentrates his health law practice in the areas of antitrust, privacy, fraud and abuse, credentialing, HITECH/ HIPAA and commercial litigation involving healthcare providers. His practice includes representation of, among others, clients in antitrust litigation, class action litigation, fraud, false claims act, breach of contract and negligence claims where he has dealt with the discovery of electronic evidence in a variety of different contexts.

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Mr. Shay retired from the practice of law. He practiced in the health care field with special emphasis on complex regulatory problems and provider relationships with payors. Much of his practice focused on the critical intersection between e-health, electronic health information management and such rapidly evolving payor relationships as consumer directed health arrangements, performance based compensation and data driven care solutions.

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Ms. Siegel practices exclusively in the field of health law. Her practice includes representation of institutional and individual health care providers in business and regulatory matters.

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