

Remington's Home and Community Based Care 20/20 Vision

Opportunities to be a solution and contributor to the future of health care

AGENDA

Tuesday, October 22, 2019

Networking Connection Breakfast

7:30am – 8:00am

20/20 Vision: Opportunities To Be A Solution And Contributor To The Future Of Health Care

8:00am – 9:00am



SPEAKER: LISA REMINGTON, President, Remington Health Strategy Group and Publisher, The Remington Report

We explore critical issues by examining ways for your organization to adapt to the changing health care delivery system, opportunities to engage solutions in the care ecosystem, and solutions to achieve greater partnership value.

What Does the Future of Value-Based Models Look Like? How Ready is Your Organization?

9:00am – 9:45am



SPEAKER: LISA REMINGTON, President, Remington Health Strategy Group and Publisher, The Remington Report

Today, most of the dollars in value-based arrangements flow through a fee-for-service chassis. ACOs and hospitals are in the midst of navigating change in how they operate and deliver care. All providers need to be thinking ahead about where they will be in the future and their infrastructure for managing risk. We will explore the framework, and you can assess your organization's readiness.

Morning Break

9:45am – 10:15am

Case Study: Strategic Scorecards to Align Key Performance Indicators to Operational, Quality and Financial Goals

10:15am – 11:15am

Discussions to follow



SPEAKER: KIM M. KRANZ, RN, MS, CHPCA
President, Catholic Home Care & Good Shepherd Hospice, Catholic Health Services of Long Island

In this session, key operational, quality and financial performance indicators are identified to drive greater accountability for home health, hospice, palliative care, private duty, adult day care, SNFs and insurers. Dashboard management reports will align performance to accountability.

Your takeaways:

- Understand strategic alignment of key performance indicators to support your strategic plan.
- Identify key performance indicators for high-performing organizations.
- Review key performance indicators across the PAC network.
- Analyze data and understand benchmark resources to drive accountability.

Case Study: Home Health Performance Networks: Criteria and Engagement Opportunities

11:15am – 12:00pm

Discussions to follow



SPEAKER: DANIEL K. KRIEGER, MBA, NHA
Corporate Value Based Reimbursement, Presbyterian Senior Living

Presbyterian Senior Living are engaged in six value based arrangements and have designed a Home Health Performance Network to reduce total cost of care and reduce or eliminate readmission rates as well as ED usage. Key criteria determines which home health providers are chosen and remain in the network. As more stakeholders choose to work with performance networks, Presbyterian Senior Living criteria mirrors the expectations set by entities that we are engaged with in the value based arrangements.

You will learn:

- The business opportunity of performance networks
- Value-based engagement opportunities
- Expectations of value propositions
- Criteria and objectives of the performance network

Lunch

12:00pm – 1:15pm

Case Study: Medicare Spending Per Beneficiary: How Your Organization Can Be A Cost-Savings/Cost Reduction Value Partner

1:15pm – 2:15pm

Discussions to follow



SPEAKER: MILDRED FERRITER, CEO and Executive Director, Community Health Center

ACOs, hospitals, physicians and payers are focused on reducing the cost of care. A quality measure, Medicare Spending Per Beneficiary (MSPB) is tracked three days before an admission, during the hospital stay and when the patient is using post-acute services. Post-acute accounts for 40% of this spend. Well-coordinated home and community based services dramatically impact the overall total cost of care; affordable daily in-home care costs, reduced readmissions to the hospital, shorter hospital stays, and lower utilization of high-cost services. A criteria hospitals and ACOs are tapping into for preferred providers is what is their Medicare Spend per Beneficiary. How are they helping reduce the overall cost of care. Meet Millie who will provide you with the meat and potatoes of how her organization has tackled MSPB.

In this session, you will learn:

- The insights of Medicare Spending Per Beneficiary
- How to analyze and capture the data points
- The value propositions to partnerships

Adjournment

2:15pm

What your peers are saying after attending Remington Conferences

“Always great information that sparks action and strategic thought process. When I go home I always feel empowered to implement change that launches our agency further.”

– Linda Murphy, CEO, Concierge Home Care

BONUS WEBCAST

WEBINAR #1 | December 5, 2019

▶▶ 3:00pm – 4:00pm (Eastern)

WEBINAR #2 | January 16, 2020

▶▶ 3:00pm – 4:00pm (Eastern)

After the 2019 October conference, we continue our discussions and conversation. Invite your management team and staff to listen in.



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Networking Connection Breakfast

7:30am – 8:00am

Peer Exchange Knowledge Tapping: Networking Round Tables to Improve Performance Profitability and Growth

8:00am – 9:15am

8:00am – 8:30am and 8:45am – 9:15am

(Each round table lasts 30 minutes and then repeats)

Join a facilitated round table. Tap into collective knowledge and exchange your experience and perspectives with each other. This is a unique opportunity to deepen discussions around key issues and topics with your colleagues. Exchange information about their successes and challenges. What's working ... what's not. ½ hour one topic ... move to your next favorite topic for the next ½ hour.

Choose from these topics:

- Hospice and Palliative Care
- Preparing for PDGM
- Payer Relationships
- ACO Partnerships and Strategies
- Preferred Provider Network Strategies

Morning Break

9:15am – 9:30am

Case Study: Shift Happens! How To Become a Highly Reliable Organization in a Shifting Healthcare Market

9:30am – 10:30am

SPEAKERS:



ANTHONY EVANS
President, Pure Healthcare



KERRY K. HAMILTON
President & CEO, Hospice of Central Ohio & Chief Strategy Officer, Ohio's Hospice



JEFFREY LYCAN, RN
Executive Vice-President of Mission Advocacy for Ohio's Hospice

Shift Happens! In this presentation, speakers briefly look the at shifts to underscore WHY CHANGE and their three-pronged strategy to change to address the SHIFTING healthcare market.

In this discussion, the focus is not just about hospice. It is about how an organization is transforming to create new care models, programs, and initiatives to prepare for value-based care.

In this session learn how to:

- Optimizes Care & Services – Outcomes and Consistency (**Highly Reliable Organization**)
- Optimizes Resources – Economies of Scale and **Skill**
- Optimizes Mission & Brand – brand being more **important** tomorrow
- Scale to become a **risk-bearing** or participating organization
- Transition to **Preeminent** post-acute chronic illness provider

Adjournment

10:30am