

TWO PREEMINENT CONFERENCES ON HEALTHCARE ENFORCEMENT AND COMPLIANCE



THE NATIONAL SYMPOSIUM ON
HEALTH CARE ENFORCEMENT

WEDNESDAY
FEBRUARY 25, 1998



THE NATIONAL CONGRESS ON
HEALTH CARE COMPLIANCE

THURSDAY & FRIDAY
FEBRUARY 26-27, 1998

SHERATON WASHINGTON HOTEL
WASHINGTON, D.C.

- ✓ The most complete analysis of Health Care Enforcement and Compliance Issues in one place, presented through 15 General Sessions, 35 Concurrent Sessions and nearly 100 Government and Private Sector Speakers.
- ✓ Major presentations by DHHS Office of Inspector General, the Department of Justice, Federal Bureau of Investigation, Federal Trade Commission, Health Care Financing Administration, Internal Revenue Service, the National Health Care Anti Fraud Association, the Securities and Exchange Commission and U.S. Attorneys' Offices.
- ✓ The only seminar on Compliance and Enforcement with the broad support of the following sponsors:

The American Ambulance Association
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The Americans Compliance Institute
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Health Affairs Journal
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A TIDAL WAVE OF GOVERNMENTAL INVESTIGATIONS AND PROSECUTIONS

PROSECUTION of health care fraud has become the preeminent challenge to health care providers and payors. Civil and criminal prosecutions are not only regular topics for the cover of *Modern Healthcare*, but also common front page stories in the *New York Times* and the *Wall Street Journal*.

In 1992, the U.S. General Accounting Office estimated that health care fraud amounted to approximately 10% of total national health expenditures. In 1997, the DHHS Office of Inspector General (OIG) reported to Congress that approximately 14% of Medicare claims were paid inappropriately, due to fraud or abuse. Although these statistics are subject to debate, they have fueled the enforcement fires.

The United States Government has declared health care fraud as its #2 priority, second only to violent crime. The Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Balanced Budget Act of 1997 (BBA) have broadly expanded enforcement jurisdiction and funding.

FBI health care investigations have increased from approximately 650 in 1992 to over 2,200 in 1996. The FBI's funding for health care investigations is projected to increase from approximately \$45 million in 1997 to approximately \$120 million in 2003.

OIG has received substantial new enforcement funding through HIPAA: \$100 million in FY 1997, growing to \$240 million in FY 2003. In FY 97, OIG grew from 900 to 1200 employees and opened six new investigative offices. By the end of the decade, OIG will have an office in all states.

Prominent health care organizations have acquiesced to staggering fines. Caremark has entered into public and private settlements for a reported \$250 million. SmithKline Beecham recently settled for \$325 million.

Last year Columbia/HCA was the company that would transform health care delivery under the dynamic leadership of CEO Rick Scott. This year Columbia/HCA is in reorganization, subject to multiple federal investigations. Rick Scott has left the company.

These governmental enforcement initiatives are increasingly supplemented by qui tam False Claim Act lawsuits brought by private citizens against health care organizations. These private plaintiffs share in any recovery. In FY 1987, 33 qui tam cases were filed. In FY 1996, 360 cases were filed. Approximately one-third of all pending qui tam cases are health care related.

IN RESPONSE HEALTH CARE COMPLIANCE EFFORTS PROLIFERATE RAPIDLY

IN RESPONSE to this massive wave of health care investigations and enforcement, providers and payors are engaged in feverish efforts to assure compliance.

Detailed compliance plans are being formulated by leading health care delivery and financing organizations. These plans are structured to conform to the requirements in The Federal Sentencing Guidelines. The OIG has issued a model clinical lab compliance plan. It is anticipated that a model hospital compliance plan will be issued early in 1998. Medical group and health plan model compliance plans will follow.

Perhaps the hottest new job classification in health care is Chief Compliance Officer. A whole new industry of health care consultants, information systems experts, attorneys and ethicists is emerging to assist the health care industry in its compliance efforts.

WHO SHOULD ATTEND THE SYMPOSIUM AND CONGRESS:

- Health Care leaders, including CEOs and CFOs in hospitals, medical groups and IPAs, ancillary providers, long term care organizations and health plans
- Members of the Board of Trustees of Health Care Enterprises
- Health Care Compliance Officers
- Health Care Risk Managers
- Health Care Finance, Patient Accounts and Billings Specialists
- Physicians and Other Health Professionals
- Health Care Consultants and Attorneys
- Health Care Regulators
- Health Care Researchers and Policy Makers

THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE SPONSORS

The American Ambulance Association
American Association of Homes and Services for the Aging
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The Ethics Resource Center
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The Health Care Compliance Association
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The Health Ethics Trust
The Healthcare Financial Management Association
The Health Insurance Association of America
The International Billing Association
The IPA Association of America
Medical Group Management Association
Medicode, Inc.
Modern Healthcare Magazine
The National IPA Coalition
National SubAcute Care Association
Piper Jaffray Inc.
Report On Medicare Compliance
Salomon Smith Barney
St. Anthony Publishing, Inc.
Strategic Management Systems, Inc.

TWO PREEMINENT CONFERENCES IN ONE LOCATION:

The National Symposium on Health Care Enforcement and the National Congress on Health Care Compliance will both be held at the Sheraton Washington Hotel.

Conference attendees should make hotel reservations directly with the Sheraton Washington by calling: (202) 328-2950. Ask for the Enforcement and Compliance Conference to receive the special rates. We expect the room block to sell out, so please register early.

THE NATIONAL SYMPOSIUM ON HEALTH CARE ENFORCEMENT

THE NATIONAL SYMPOSIUM ON HEALTH CARE ENFORCEMENT has been convened to encourage a national dialogue on governmental and private sector health care enforcement initiatives currently sweeping health care finance and delivery.

The nation's leading health care regulators and prosecutors from the Office of Inspector General of the Department of Health and Human Services, the Federal Bureau of Investigation, the Health Care Financing Administration, the Federal Trade Commission, the Securities and Exchange Commission, various United States Attorneys General's Offices and the Department of Justice will describe in detail current and future health care enforcement initiatives.

A panel of provider and payer representatives will discuss the appropriateness of recent governmental enforcement initiatives in the array of responsive compliance strategies.

QUESTIONS TO BE ADDRESSED AT THE SYMPOSIUM:

- What is the genesis and history of the current wave of health care enforcement?
- What are the details regarding specific recent governmental health care fraud enforcement initiatives?
- What types of enforcement activities other than those health care fraud investigations pursued by the FBI and OIG might be targeted by other federal agencies, e.g. the IRS regarding exempt organizations, the SEC regarding public companies and the FTC and DOJ regarding antitrust?
- What issues will the government pursue next through audits, investigations and enforcement initiatives?
- How do various federal and state regulators, including the OIG, FBI, DOJ, U.S. Attorneys, Postal Inspectors, etc., coordinate and pursue future investigations?
- What initiatives are private payers taking to prevent and prosecute alleged health fraud?
- How are private individuals able to bring qui tam False Claims Act lawsuits against health care organizations and share a portion of any recovery?

ABOUT THE SYMPOSIUM SPONSOR:

THE HEALTH CARE COMPLIANCE ASSOCIATION (HCCA) is a Forum for health care professionals involved in compliance. The mission of HCCA is to provide a collaborative forum that promotes integrity and ethical behavior through the development of comprehensive compliance programs throughout the entire health care industry. HCCA is a national organization whose function is to facilitate the introduction, development and maintenance of quality health care compliance programs; to provide a forum for understanding the complicated health care environment; and to provide educational opportunities for those involved with compliance in the health care industry.

For questions about HCCA membership, please call Debbie Troklus at 502-852-0758.

THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE

THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE has been organized to encourage a discussion among health care regulators, providers and payors regarding compliance and ethics in the health field. The Congress seeks to further a culture of ethics and integrity in the nation's health enterprise.

As a collegial forum, the Congress creates a positive environment in which health care providers and payors interact with regulators, consultants, attorneys, ethicists and innovators in health care compliance.

The Congress will provide practical and up to date information regarding responsive strategies to governmental enforcement initiatives and investigations: Operation Restore Trust, DRG 3 Day Window, PPS Hospital Discharge/Transfer, DRG Creep/Upcoding, LabScam/Operation "Bad Bundle", Physicians at Teaching Hospitals (PATH), Third Party Physician Billings/Reassignment, Ambulance overbilling, etc.

The Congress seeks to facilitate the development of practical and implementable compliance plans which integrate all major bodies of law and regulation into a comprehensive compliance effort.

Presentations before the Congress focus on real and practical experience in the field, sophisticated solutions to complex problems and strategies for timely implementation. Compliance is not a text book enterprise. It is a daily challenge, ranging from the assessment of complex policy and legal issues to the seemingly more mundane tasks of guideline development and employee training.

Through its 2 days, 8 General Sessions, 35 Concurrent Sessions and approximately 70 presenters, the Congress attempts to establish a direct link to enforcement realities and compliance innovation at the local level where the rubber hits the road.

QUESTIONS TO BE ADDRESSED AT THE CONGRESS:

- How to avoid and defend qui tam lawsuits alleging health care fraud filed by private parties?
- How to respond and maintain attorney-client privilege in response to a governmental investigation and subpoena.
- What model compliance plans are being drafted by OIG?
- What innovative approaches to compliance plan development and implementation are being pursued in specific industry sectors?
- What is the appropriate job description and reporting relationship for a chief compliance officer?
- What advanced strategies can be employed in the finance and patient accounting office to assure compliance?
- How can effective employee training programs be established to implement a compliance program?
- How should health care boards of directors and executive staff carry out their fiduciary duties to limit individual liability and how to obtain appropriate insurance?
- What can be learned from the earlier health care fraud investigations and prosecutions, e.g., Caremark, NME and T2?
- What lessons can be learned from compliance experience in the defense and financial services industries?
- How can individual health care managers and professionals develop a personal compliance plan?
- What do policy makers and regulators see as the future of the health care enforcement and compliance effort?

THE NATIONAL SYMPOSIUM ON HEALTH CARE ENFORCEMENT

WEDNESDAY, FEBRUARY 25, 1998

PROGRAM

WEDNESDAY, FEBRUARY 25, 1998

6:45 AM - 7:45 AM
7:45 AM

REGISTRATION AND CONTINENTAL BREAKFAST

WELCOME AND SPEAKER INTRODUCTIONS

Co-Moderator Roy J. Snell, President, The Health Care Compliance Association

Co-Moderator Peter N. Grant, J.D., Ph.D. Partner, Davis Wright Tremaine, LLP

7:45 AM - 8:45 AM

OFFICE OF THE INSPECTOR GENERAL, DHHS: ENFORCEMENT OF HEALTH CARE

FALSE CLAIMS AND FRAUD AND ABUSE

D. McCarty "Mac" Thornton, Esq., Chief Counsel to the Inspector General, DHHS

8:45 AM - 9:45 AM

HEALTH CARE ANTITRUST

Robert F. Leibenluft, Esq., Assistant Director

Federal Trade Commission, Bureau of Competition, Healthcare Division

David C. Jordan, Esq., Assistant Chief Health Care Antitrust Task Force, U.S. Department of Justice

9:45 AM - 10:15 AM

COFFEE BREAK

10:15 AM - 11:15 AM

HEALTH CARE ENFORCEMENT: TAX EXEMPT ORGANIZATIONS AND PUBLIC COMPANIES

Marcus S. Owens, Director, Exempt Organizations Division, Internal Revenue Service

Paul K. Gerlach, Esq., Associate Director, Enforcement Division, U.S. Securities and Exchange Commission

11:15 AM - 12:00 PM

MANAGED CARE ENFORCEMENT

Bruce Fried, Director, Center for Health Plans & Providers, HCFA

12:00 PM - 1:30 PM

LUNCHEON SESSION

OFFICE OF INSPECTOR GENERAL, DHHS: WHAT WE WANT TO SEE IN HEALTH CARE COMPLIANCE PLANS

Levin Morris, Esq., Assistant Inspector General for Legal Affairs, DHHS

1:30 PM - 2:15 PM

HEALTH CARE ENFORCEMENT IN THE PRIVATE SECTOR

William J. Mahon, Executive Director, National Health Care Anti Fraud Association

2:15 PM - 3:00 PM

OVERVIEW OF HEALTH CARE FRAUD INVESTIGATIONS

John R. Molesworth, Chief, Healthcare Fraud Unit

Federal Bureau of Investigation

3:00 PM - 3:30 PM

COFFEE BREAK

3:30 PM - 4:15 PM

HEALTH CARE CIVIL AND CRIMINAL PROSECUTIONS

David Hoffman, Esq., Assistant U.S. Attorney, Philadelphia

4:15 PM - 5:30 PM

INDUSTRY REACTION TO FEDERAL HEALTH CARE ENFORCEMENT INITIATIVES -

A PANEL DISCUSSION

Thomas L. Adams, President and CEO, Medical Group Management Association

Ivy Baer, Esq., Regulatory Counsel and Director, Association of American Medical Colleges

Donald Fisher, Ph.D., CEO, American Medical Group Association

Bruce Gilbert, Esq., Chairman, Federation of American Health Systems and General Counsel, Universal Health Services, Inc.

Bill Gindoff, President, Health Insurance Association of America

and Former Member of U. S. House of Representatives

Mary Grealy, Esq., Senior Washington Counsel, American Hospital Association

Mickey Herbert, Co-CEO, Physicians Health Services and Chair, American Association of Health Plans

Edward B. Hensfeld, Esq., Associate General Counsel, American Medical Association

Albert Holloway, President and CEO, The IPA Association of America

Nancy Oswald, Ph.D., President, National IPA Coalition

Moderated by John K. Igelhart, Editor, Health Affairs

5:30 PM

ADJOURNMENT



THE NATIONAL SYMPOSIUM
ON HEALTH CARE
ENFORCEMENT

THE NATIONAL SYMPOSIUM ON HEALTH CARE ENFORCEMENT IS
PRESENTED BY
THE HEALTH CARE COMPLIANCE ASSOCIATION

THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE

THURSDAY-FRIDAY, FEBRUARY 26-27, 1998

PROGRAM

THURSDAY, FEBRUARY 26, 1998

7:00 AM - 7:45 AM
7:45 AM - 8:00 AM

REGISTRATION AND CONTINENTAL BREAKFAST

INTRODUCTION

HEALTH CARE COMPLIANCE: THE ISSUE OF THE NEW MILLENNIUM

Moderator and Chair: Peter N. Gant, J.D., Ph.D., Partner, Davis Wright Tremaine, LLP

8:30 AM - 9:00 AM

STRATEGIC RESPONSES TO THE CHALLENGE OF HEALTH CARE COMPLIANCE

*Richard Kisserow, President, Strategic Management Systems, Inc.
and Former Inspector General, DHHS*

9:30 AM - 10:30 AM

HEALTH CARE COMPLIANCE OFFICERS: THEIR ROLE AND RESPONSIBILITIES

*Eileen T. Boyd, Esq., Chief Compliance Officer, UCSF Stanford Health Care
and Former Assistant Inspector General, DHHS*

*William P. Conaboy, Esq., Vice President and General Counsel, Corporate Compliance Officer, Allied Health Services, Inc.
F. Lisa Murtha, Director of Control and Compliance, Deloitte & Touche, Philadelphia, Former Compliance Officer,
University of Pennsylvania and Former Compliance Officer, Pennsylvania Blue Shield
Brent Saunders, Esq., Senior Vice President Compliance and Regulatory Affairs,
Home Care Concepts of America*

Gregory J. Warner, Chair, Compliance Director, Mayo Foundation

*Moderated by Roy J. Snell, Chief Compliance Officer, University of Wisconsin Hospitals, Clinics and Medical
Foundation and President, The Health Care Compliance Association*

10:30 AM - 11:00 AM
11:00 AM - 12:00 PM

COFFEE BREAK

1 - A GENERAL PROVIDER AND PAYOR STRATEGIES IN DEVELOPING AND IMPLEMENTING COMPLIANCE PLANS

*Eileen T. Boyd, Esq., Chief Compliance Officer, UCSF Stanford Health Care
and Former Assistant Inspector General, DHHS*

1 - B INTERNAL AUDITS, DISCLOSURE OBLIGATIONS AND COMPLIANCE WITH FEDERAL SENTENCING GUIDELINES

Steven Kuzma, Partner, Ernst & Young, L.L.P.

Gregory Luer, Esq., Jones, Day, Reavis & Pogue

Robert Williams, M.D., Senior Manager, Ernst & Young, L.L.P.

1 - C ENFORCEMENT BY WHISTLEBLOWER: A PLAINTIFF ATTORNEY'S PERSPECTIVE ON BRINGING HEALTH CARE QUI TAM CLAIMS

Mark Allen Kleiman, Esq., The Law Offices of Mark Kleiman

J. Michael Papantonio, Esq., Levin, Middlebrooks, Thomas, Mitchell, Green, Eschner, Proctor & Papantonio

1 - D COMPLIANCE PLAN RESEARCH ACROSS INDUSTRIES: WHAT WORKS AND DOES NOT WORK IN HEALTH CARE

Christina Breen, Executive Director and Research Coordinator, Council of Ethical Organizations/Health Ethics Trust

Elisa Goldberg, Managing Director, Council of Ethical Organizations/Health Ethics Trust

1 - E COMPLIANCE LESSONS FROM THE PAST: THE EXPERIENCE OF CAREMARK, NME AND T2

Robert F. Smith, Esq., Senior Counsel, Motorola, Inc. and Former General Counsel, Caremark

*Christi R. Sudzbach, Esq., Senior Vice President and Associate General Counsel,
Tenet Healthcare Corporation*

Paul Quiner, Esq., Senior Vice President and General Counsel, Coram Health Care

12:00 PM - 1:30 PM

LUNCHEON SESSION

ETHICS VERSUS COMPLIANCE - HOW DO THEY RELATE?

Frank Nannan, Chief Consultant, The Ethics Resource Center

2 - A RECENT GOVERNMENTAL ENFORCEMENT INITIATIVE: OPERATION RESTORE TRUST, DRG 3 DAY WINDOW PROJECT AND PPS HOSPITAL DISCHARGE/TRANSFER INVESTIGATION

Andrew Quinn, Esq., Partner, Compliance Concepts and Former Assistant U.S. Attorney, Middle District of Pennsylvania

2 - B CLINICAL LAB/ANCILLARY SERVICE COMPLIANCE PLANS

Jeffrey F. Boothe, Esq., Partner, Oppenheimer Wolff & Donnelly

and General Counsel, Clinical Laboratory Management Association

Harvey A. Yampolsky, Esq., Partner, Arant, Fox, Kintner, Plotkin & Kahn

and Former Chief Counsel, Office of Inspector General, DHHS

2 - C RESPONDING TO AN IRS EXEMPT ORGANIZATION AUDIT

T.J. Sullivan, Esq., Partner, Gardiner, Carton & Douglas

and Former Special Assistant (Healthcare) To the IRS, Assistant Commissioner (Exempt Orgs.)

CONCURRENT
SESSIONS

CONCURRENT
SESSIONS

THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE

THURSDAY-FRIDAY, FEBRUARY 26-27, 1998

PROGRAM

THURSDAY, FEBRUARY 26, 1998 (continued)

CONCURRENT SESSIONS

2:30 PM - 2:45 PM
2:45 PM - 3:45 PM

2 - D ENFORCEMENT BY WHISTLEBLOWER: AVOIDING AND DEFENDING HEALTH CARE QUI TAM CLAIMS

Robert Fabrikant, Esq., Sidley & Austin, Former Assistant U.S. Attorney, Washington D.C. and Former Chief, Energy, Antitrust Division, U.S. Department of Justice
Charles Murdter, Esq., Davis Wright Tremaine, LLP
and Former Trial Attorney, Department of Justice, Criminal Division, Fraud Section

2 - E TELLING COLUMBIA'S STORY

Vivian Campbell, Senior Vice President, Columbia/HCA

2 - F AMERICAN HEALTH CARE COMPANIES DOING BUSINESS OVERSEAS: THE INTERNATIONAL ASPECTS OF COMPLIANCE

L. Stephen Vincze, J.D., LL.M., Attorney at Law

TRANSITION BREAK

3 - A RECENT GOVERNMENTAL ENFORCEMENT INITIATIVE: DRG CREEP/UPCODING - PNEUMONIA UPCODING INVESTIGATION

Thomas Scholomiti, Manager, Coopers & Lybrand L.L.P.
Diane Cahalan, Manager, Coopers & Lybrand L.L.P.
Patrick Hooper, Esq., Hooper, Lundy & Bookman, Inc.

3 - B PHYSICIAN PRACTICE MANAGEMENT COMPANY COMPLIANCE PLANS

Lucy C. Hicks, Esq., Vice President, Legal Services, MedPartners, Inc.

3 - C COMPLIANCE TRAINING FOR PROVIDER EMPLOYEES, INCLUDING PATIENT ACCOUNTS, REIMBURSEMENT AND DRG CODERS

Stephen Spargo, CPM, President, Compliance Concepts
and Former Senior Vice President, Finance, Allegheny Health Systems

3 - D HEALTH CARE ETHICS: INFINITE IN ALL DIRECTIONS

Michael Daigneault, President, The Ethics Resource Center

3 - E UNDERSTANDING AND COMPLYING WITH THE FEDERAL SENTENCING GUIDELINES

Irene H. Nagel, J.D., Ph.D., Associate Provost for Research and Dean of the Graduate School, University of Maryland

3 - F COMPLIANCE ISSUES IN IMPLEMENTING THE SNF PPS SYSTEM

Malcolm H. Morrison, Ph.D., Morrison Informatics, Inc.

COFFEE BREAK

3:45 PM - 4:15 PM
4:15 PM - 5:30 PM

HEALTH CARE ENFORCEMENT AND COMPLIANCE: APPLYING LESSONS FROM OTHER INDUSTRIES

Mark Pastin, Ph.D., President, Council of Ethical Organizations/Health Ethics Trust
Alan Yuspeh, Esq., Senior Vice President, Ethics Compliance and Corporate Responsibility, Columbia/HCA

FRIDAY,
FEBRUARY 27,
1998

7:00 AM - 7:45 AM
7:45 AM - 8:45 AM

CONCURRENT SESSIONS

REGISTRATION AND CONTINENTAL BREAKFAST

4 - A RECENT GOVERNMENTAL ENFORCEMENT INITIATIVE: LAB SCAM/OPERATION "BAD BUNDLE"

Lisa Marie Sylvia, Esq., Mintz, Levin, Cohn, Ferris, Glovsky & Popeo, P.C.
and Former Senior Counsel, Office of Counsel to the Inspector General, DHHS

4 - B HOSPITAL AND MULTI-INSTITUTIONAL HEALTH SYSTEM COMPLIANCE PLANS

John Steiner, Esq., Assistant General Counsel, American Hospital Association

4 - C BOARD OF DIRECTORS AND EXECUTIVE STAFF FIDUCIARY DUTY, CONFLICTS OF INTEREST, D & O COVERAGE AND RIGHT TO INDEPENDENT COUNSEL

Edwin C. Schonfeld, Partner, Coopers & Lybrand L.L.P. and Member of the Board of Directors, Children's National Medical Center
Edwin D. Rauzi, Esq., Partner, Davis Wright Tremaine LLP
AHA Board of Directors Video: Framework For Compliance

4 - D COORDINATING RESPONSES TO MEDICAID AND MEDICARE FRAUD INVESTIGATIONS

Harvey Werblowsky, Esq., McDermott, Will & Emery, Former Senior Attorney, Office of Inspector General, DHHS and Former Assistant Attorney General for Medicaid Fraud in New York and New Jersey

4 - E WILL COMPLIANCE PLANS BECOME PREREQUISITES TO VENTURE CAPITAL FUNDING, GOING PUBLIC AND THE ISSUANCE OF TAX-EXEMPT BONDS?

Daniel Cain, Principal, The Cain Brothers & Company, L.L.C.

4 - F CONTINGENCY FEE AUDITING - AN ENDANGERED SPECIES?

Joseph J. Russo, Esq., President and General Counsel, Cabot Marsh Corporation

TRANSITION BREAK

8:45 AM - 9:00 AM

THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE

THURSDAY-FRIDAY, FEBRUARY 26-27, 1998

PROGRAM

FRIDAY, FEBRUARY 27, 1998 (continued)

9:00 AM - 10:00 AM

CONCURRENT
SESSIONS

5 - A RECENT GOVERNMENTAL ENFORCEMENT INITIATIVE: PHYSICIANS AT TEACHING

HOSPITALS (PATH) INVESTIGATIONS/LITIGATION

Robert F. Bacon, MHA, Director, Compliance and Review Services University of Pennsylvania Health System
Leonard C. Homer, Esq., Ober, Kaler, Grimes & Shriver

5 - B INTEGRATED DELIVERY SYSTEM COMPLIANCE PLANS

Daniel R. Roach, Esq., Associate General Counsel, Allina Health System

5 - C RESPONSE TO GOVERNMENTAL SUBPOENAS, AUDITS AND SEARCH WARRANTS AND

MAINTAINING ATTORNEY-CLIENT PRIVILEGE IN COMPLIANCE AUDITS AND INVESTIGATIONS

Robert Homchick, Esq., Davis Wright Tremaine, LLP
Thomas H. Suddath, Esq., Montgomery, McCracken, Walker & Rhoads, L.L.P., Counsel,
The Health Care Compliance Association and Former Assistant U.S. Attorney, Philadelphia

5 - D PRIVATE SECTOR ENFORCEMENT: WHAT ARE PRIVATE PAYORS DOING?

Valli Baldassano, Esq., Assistant U.S. Attorney, Philadelphia
Alison M. Duncan, Esq., Porter, Wright, Morris & Arthur

5 - E MANAGEMENT'S ROLE IN COMPLIANCE: REPORTING RELATIONSHIPS AND STAFF EDUCATION

Marc Dettmann, Esq., Chief Operating Officer, University of Wisconsin Medical Foundation
Roy J. Snell, Chief Compliance Officer, University of Wisconsin Hospitals, Clinics and Medical Foundation and
President, The Health Care Compliance Association

TRANSITION BREAK

10:00 AM - 10:15 AM

10:15 AM - 11:15 AM

6 - A RECENT GOVERNMENTAL ENFORCEMENT INITIATIVE: THIRD PARTY PHYSICIAN

BILLINGS/REASSIGNMENT INVESTIGATION

William Aseltyme, Esq., Assistant General Counsel, Sutter Health
Paul DeMuro, Esq., Partner, Latham & Watkins

6 - B HEALTH PLAN COMPLIANCE PLANS

Mark S. Joffe, Esq., The Law Offices of Mark Joffe
Kathleen Pellegrini, Esq., Associate General Counsel, Humana, Inc.

6 - C MEDICAL GROUP COMPLIANCE PLANS

Lynne Chafetz, Esq., Associate Administrator and General Counsel, Virginia Mason Health System

6 - D APPROVING TRANSACTIONS UNDER IRS EXEMPT ORGANIZATION INTERMEDIATE SANCTION RULES

Thomas K. Hyatt, Esq., Ober, Kaler, Grimes and Shriver

6 - E ADVANCED ISSUES IN FINANCE AND PATIENT ACCOUNTS COMPLIANCE STRATEGIES

Daniel Rode, Technical Director, HFMA Knowledge Network, Healthcare Financial Management Association
Robbi-Lynn Wamuk, Esq., Technical Director, Legal and Legislative Services
Healthcare Financial Management Association

TRANSITION BREAK

11:15 AM - 11:30 AM

11:30 AM - 12:30 PM

7 - A RECENT GOVERNMENTAL ENFORCEMENT INITIATIVE: AMBULANCE OVERBILLING INVESTIGATION

Darrel J. Grinstead, Esq., Partner, Hogan & Hartson, L.L.P.
David A. Nevins, Executive Vice President, American Ambulance Association

7 - B POST ACUTE CARE, SKILLED NURSING FACILITY AND HOME HEALTH AGENCY COMPLIANCE PLANS

Jody Ann Noon, R.N., J.D., Partner, Davis Wright Tremaine, LLP

7 - C THIRD PARTY BILLING COMPANY COMPLIANCE PLANS

David Jakelski, President, Seminars, Training and Consulting and President, International Billing Association

7 - D HOW WILL HEALTH CARE ENFORCEMENT INITIATIVES AFFECT MANAGED CARE ORGANIZATIONS?

David Butler, Vice President, Strategic Management Systems, Inc. and Former Deputy Associate Administrator
Operations and Resource Management, HCFA

7 - E MEDICINE, MONEY AND MORALS - PHYSICIANS' CONFLICTS OF INTEREST

Mark A. Rodwin, J.D., Ph.D., Department of Public and Environmental Affairs, Indiana University

LUNCHEON SESSION

DEVELOPING A PERSONAL ETHICS AND COMPLIANCE PLAN

Richard L. Clarke, HFMA, President and CEO, Healthcare Financial Management Association

THE FUTURE OF HEALTH CARE COMPLIANCE

Representative Pete Stark (Invited)
Representative Bill Thomas (Invited)
Chris Jennings (Invited) White House Spokesman on Healthcare

ADJOURNMENT

12:30 PM - 2:00 PM

2:00 PM - 3:30 PM

3:30 PM

CONCURRENT
SESSIONS

THE NATIONAL SYMPOSIUM ON HEALTH CARE ENFORCEMENT THE NATIONAL CONGRESS ON HEALTH CARE COMPLIANCE

WEDNESDAY-FRIDAY, FEBRUARY 25-27 1998

REGISTRATION FORM

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LAFAYETTE, CA 94549

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2 PRICING

ONE DAY - NATIONAL SYMPOSIUM

☐ FEBRUARY 25, 1998: \$425

TWO DAY - NATIONAL CONGRESS

☐ FEBRUARY 26-27, 1998: \$850

THREE DAY - BOTH SYMPOSIUM AND CONGRESS

☐ FEBRUARY 25-27, 1998: \$1,195

THREE DAY PROGRAM INCLUDES 15 GENERAL SESSIONS,
35 CONCURRENT SESSIONS, BREAKFAST AND LUNCH.

HOW TO REGISTER

FULLY COMPLETE STEPS 1-3 (ONE FORM PER REGISTRANT,
PHOTOCOPIES ACCEPTABLE) PAYMENT MUST ACCOMPANY
EACH ORDER.

By FAX: 510-284-6209

By Phone: 510-284-6205

By Mail: ALLIANCE OF HEALTHCARE ADVISORS, INC.
251 LAFAYETTE CIRCLE, SUITE 150
LAFAYETTE, CALIFORNIA 94549

REGISTRATION FEES ARE NOT REFUNDABLE
SCHEDULE SUBJECT TO CHANGE

HOTEL INFORMATION

A SPECIAL RATE OF \$177 (SINGLE AND \$197, DOUBLE OCCUPANCY)
PER NIGHT HAS BEEN ARRANGED FOR THIS CONFERENCE. PLEASE
MAKE YOUR RESERVATIONS DIRECTLY WITH THE SHERATON
WASHINGTON HOTEL AND MENTION THE ENFORCEMENT AND
COMPLIANCE CONFERENCE TO RECEIVE THIS REDUCED RATE.
RESERVATIONS WILL BE ACCEPTED UNTIL JANUARY 24, 1998.
AFTER THAT CUT-OFF DATE, RESERVATIONS WILL BE ACCEPTED ON A
SPACE-AVAILABLE BASIS AND AT THE PREVAILING GROUP RATES.

THE SHERATON WASHINGTON HOTEL

2650 WOODLEY ROAD AT CONNECTICUT AVENUE, N.W.
WASHINGTON D.C. 20008
RESERVATIONS: (202) 328-2950

3 PAYMENT OPTIONS

**PLEASE ENCLOSE PAYMENT WITH YOUR REGISTRATION AND
RETURN IT TO THE CONFERENCE REGISTRAR AT THE ABOVE
ADDRESS, OR FAX YOUR CREDIT CARD PAYMENT TO
510-284-6209**

☐ CHECK/MONEY ORDER ENCLOSED (CHECKS PAYABLE TO
THE ALLIANCE OF HEALTHCARE ADVISORS, INC.)
FEDERAL TAX ID 68-0315289

AMERICAN EXPRESS ☐ VISA ☐ MASTERCARD ☐

TOTAL \$ _____

ACCOUNT # _____

EXPIRATION DATE _____

NAME ON CARD _____

SIGNATURE OF CARDHOLDER _____