



MEDICAL
PRACTICE
EXCELLENCE

Pathways

CONFERENCE

June 7 - 8, 2022
Digital Experience
(DX)



Conference Program Details

MPE22 Pathways Conference DX June 7-8, 2022 | All times listed EST

Program Eligible for:

ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU : 1 | PDC: 1 – 50 - 60 MIN SESSIONS
ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5 – 25 MIN SESSION

TUESDAY JUNE 7

10:00-10:15 AM | Welcome and Updates

Welcome to the Medical Practice Excellence: Pathways Digital Experience!

Join Craig Wiberg, Senior Editor, Industry Insights in a brief Welcome to get the learning started. Learn about how to create the best experience for you and your organization in the platform. Hear about cutting-edge educational content that dozens of industry thought leaders will be offering, and learn how to identify and optimize networking opportunities and interactions with valuable partners. You'll also learn how to use the many features the virtual convention center offers.

100 series

10:30 - 11:20 AM ET

Tuesday, June 7

CON101 | What's New in Payer Contracting?

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Payer Contract Analysis and Negotiation

Intermediate | Traditional | Analysis

Speaker: Marcia L. Brauchler, M.P.H., CPC-I, F.A.C.M.P.E., C.P.H.Q., president and founder, Physicians' Ally, Inc.

Payers are attempting to control their provider networks to bring more stability to their bottom line. However, this can have massive operational and financial implications for your practice. In this session, learn common elements of payer contract language and strategies for addressing fee schedules with payers. For example, if your specialty is considering anything cutting edge, watch out for limitations on new technology, prohibitions on pass-through billing and attempted limits on private practice acquisitions through non-assignment clauses. The speaker will provide actual language from payer agreements and helpful reminders about the traditional language terms that can have an adverse financial impact on your practice, such as notice of material change, term language lock-ins, all product participation requirements, and penalties for non-timely demographic updates. This session will provide you with the knowledge to:

1. Point out new language relevant to billing operations that directly and adversely impact revenue
2. Collect the new, relaxed E/M documentation standards for your commercial agreements
3. Examine new payer contract language that could impede a practice's strategic growth plan in areas such as expanded ancillary services, practice acquisition, and new locations

100 series

10:30 - 11:20 AM ET

Tuesday, June 7

CON102 | The Quest for Lost Revenue and Denial Prevention

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Revenue Cycle Management

Basic | Traditional | Comprehension

Speaker: Stuart Newsome, vice president, strategic partnerships, Alpha II

Billing and coding has become more complex, and pressure has increased on provider margins. Shifting your organization's focus to claim denial prevention and education, while engaging a partner to recoup lost revenue on your behalf, will improve overall revenue cycle workflow. This session focuses on implementing best practices for using coding technology and clinical claims editing coupled with a risk-free denials and underpayment recovery solution to maximize reimbursement. This results in revenue leakage prevention, cash acceleration, and revenue integrity optimization. Attendees will learn about best practices to employ throughout your revenue cycle from front-end to coding and billing and finally post-adjudication review. Revenue cycle leaders will learn the value of partnering with a zero-balance review professional who will conduct a targeted review of your practice's denied and underpaid claims to recover lost revenue with no financial risk to your organization. This session will provide you with the knowledge to:

1. Identify your organization's rate of claim denial and rejection
2. Recognize where revenue leakage occurs within the revenue cycle and how education improves this process
3. Discuss how risk-free zero balance reviews recoup lost revenue

100 series

10:30 - 11:20 AM ET

Tuesday, June 7

CON103 | Here, There and Everywhere: Engaging Employees in a Hybrid World

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Staffing and Human Resources

Traditional |Intermediate |Application

Speaker: Beth Austin, vice president, operations, Spectrum Management Services Company

Organizations have grappled with what to do about the thousands of employees who suddenly became remote workers during the COVID-19 pandemic. With the research showing that approximately three quarters of employees wished to continue remote work in some fashion, organizations quickly began to consider arrangements that could meet the needs of both employees and employers. In this session, the speaker will discuss various approaches and provide insight into the hybrid model adopted by a large multispecialty physician practice. In this session attendees will learn strategies for developing a model that balances job functions with employee preferences and aligns with organizational values, as well as approaches to building a positive workplace culture and maximizing employee engagement in a fully or partially remote work environment. The session will detail how remote or hybrid work models can be an opportunity to improve employee productivity and organizational efficiency, and present lessons learned from the approach adopted by a large, multispecialty medical practice. This session will provide you with the knowledge to:

1. Operate a hybrid model that balances job functions with employee preferences and aligns with organizational values
2. Manage a positive workplace culture that maximizes employee engagement in a fully or partially remote work environment
3. Produce hybrid work models that improve employee productivity and organizational efficiency

100 series

10:30 - 11:20 AM ET

Tuesday, June 7

CON104 | 19 Massive Telehealth Learnings After 4,000,000 Visits in 2021

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Patient Access

Traditional | Intermediate | Analysis

Speakers: Matt McBride, co-founder and chief executive officer, Mend
Vladimir Negron, head of Demand Generation, Mend

This session will explore how to integrate in-person and virtual healthcare solutions to create the highest level of patient satisfaction. Attendees will learn best practices for hybridized healthcare and what has been effective towards the success of a leading telemedicine and AI-powered patient engagement platform. Achieving hybridized healthcare success comes from listening to providers and patients to ensure accessible, affordable care. Attendees will learn how focusing on customer service fosters positive, long-standing engagement and why practices should tailor efforts to the patient's desire for more convenient, consumer-centric care. The session will detail how to achieve ease of patient and provider communication with A.I. predictability, using technology to reduce administrative burden, increase quality time with patients and improve efficiency. This session will provide you with the knowledge to:

1. Organize telehealth and in-person care offerings for a hybridized healthcare setting with seamless patient experience
2. Outline best practices for providing a positive, patient-centered experience throughout the entirety of the virtual visit
3. Prepare technological solutions that make telehealth easy to use and accessible for all patients

100 series

10:30 - 11:20 AM ET

Tuesday, June 7

CON105 | A Data-Driven Approach to Managing High-Performing Medical Groups

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Business Intelligence

Intermediate | Traditional | Analysis

Speaker: Brandt Jewell, senior vice president, Coker Group

Medical groups of all sizes and levels of integration struggle to utilize data to drive action and accountability. This session will explain how to develop a data-driven culture to improve operational and financial performance, providing options and examples of proven metrics and tactics. The speaker will discuss performance metrics and ways to utilize data as the backbone of consistency to develop a high-performing culture of accountability. He will also address tactics for actionable reporting and consistent communication across organizational levels and ways to engage providers and employees in ownership of data and outcomes. This session will provide you with the knowledge to:

1. Distinguish components and management principles for developing a data-driven culture
2. Calculate key performance indicators and targets, including financial, provider productivity and compensation, patient access, revenue cycle, and nonprovider staffing

3. Prepare tactics for utilizing data to manage staff and engage providers as leaders, mentors and champions with common group-level objectives

SPEED SESSIONS – SPONSORED

11:35 AM- 12:00 PM ET

Tuesday, June 7

SP01 | Improving Satisfaction and the Bottom Line with Patient-Centric Tools

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Content area: Operational Excellence

Learning Level: Basic

Speaker: Christine Fontaine, Solution Strategist, Waystar

The process of paying for healthcare is stressful and complex for providers and patients alike. So much so, many patients are foregoing needed care due to their financial responsibility. As a healthcare provider, it is crucial that your organization prioritize patient-centric processes and tools that facilitate faster, more complete collections – while driving increased patient satisfaction. In this session, learn how one medical practice was able to accelerate cash flow and reduce manual work by 60%. This session will provide you with the knowledge to:

1. Discuss patient engagement tools to overcome payment challenges.
2. Describe how automation improves patient payment processes.
3. Identify how patient-centric solutions can improve cash flow and increase patient engagement.

SPEED SESSIONS – SPONSORED

11:35 AM- 12:00 PM ET

Tuesday, June 7

SP02 | Protect Your Revenue and Improve Financial Outcomes with Ambient Clinical Intelligence

Eligible for ACMPE : 0.5 | CEU : 0.5

Content Area: Operational Excellence

Traditional | Basic | Comprehension

Speakers: Reid Conant, MD, chief medical information officer, Nuance Communications
Jonathan M. Greer, MD, rheumatologist, Arthritis and Rheumatology of Palm Beach

In today's climate, financial recovery is of the utmost importance. The ageold saying, "time is money," is especially accurate when referring to 'physicians' time. Join us as we explore how to surround the patient-physician encounter with AI-powered, voice-enabled ambient technology to boost efficiency, increase throughput, and improve the patient physician experience. Join this session discover why optimizing 'physicians' time has a critical effect on productivity , how their time can best be utilized to achieve desired financial outcomes. This session will provide you with the knowledge to:

1. Identify opportunities increase operational efficiencies
2. Describe strategies to boost physician satisfaction
3. Discuss the effectiveness of your organization's current revenue cycle processes

SPEED SESSIONS – SPONSORED

11:35 AM- 12:00 PM ET

Tuesday, June 7

SP03 | Data Drives the Future of Physician Practice Management, Best Practices for Practice Management Reporting

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Traditional | Intermediate | Application
Operational Excellence

Speakers: Davis Creech, director, Healthcare Services Group Advisors
Beth Simpson, senior manager, Healthcare Services Group Advisors

Hospitals invest in physician practices to improve community access, E.D. coverage, and ensured market viability. Health systems also realize building their employed network, is an investment in their ability to improve quality through better care coordination and managing risk contracts over the long term. But, as health systems continue to employ larger numbers of physicians, many challenges have emerged. Mismatches in supply and demand, inadequate management infrastructure, and organizations' willingness to invest capital in practices have steadily increased losses on employed physician networks. Many organizations are at the point where there is a threat to bottom lines. These factors are not new issues, yet most health systems still do not have a sophisticated understanding of the root cause of the losses in their network. Health systems must embrace a data-driven management style to pinpoint where these losses start and determine to fix them. Data will be the key to successful physician networks in the future. This session will provide you with the knowledge to:

1. Discover key metrics that need to be reported regularly and incorporated into practice management dashboards
2. Produce physician practice management dashboards for key organization stakeholders (executive, medical group leadership, practice managers)
3. Develop a reporting structure that keeps data consistent and valuable for decision-making

Visit the Solution Center 12:20 - 12:50 PM | Tuesday, June 7

Go explore the Solution Center. These industry experts have partnered with MGMA to bring solutions to your everyday problems. Access the Solution Center from the home page navigation or these tiles on the platform

EXPLORE LEARN AND EARN!

Earn "click by click" engagement points as you visit the solution providers in the platform and engage in their content to learn more about their services. Each button you click to text a booth staff member or to watch a video will be tallied for our Engagement Prize drawing at the end of Day 2 before the mainstage session kicks off! Make sure you are there to hear your name! Cash and other prizes just for learning more about these crucial partners in the march for medical practice excellence!

Be present to win in session MS01: Wednesday, June 8, 3:45pm ET where we will draw and announce the winners!

THANK YOU PATHWAYS DX SPONSORS



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200 SERIES

12:50 PM – 1:40PM ET

Tuesday, June 7

CON201 | Creating Effective Tools for Managing Contracts and Fee Schedules

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Payer Contract Analysis and Negotiation

Intermediate | Traditional | Application

Speaker: Bryan Wood, M.B.A., practice administrator, Cockerell and McIntosh Pediatrics

Managing contracts and fee schedules is an important part of managing a medical practice. Unfortunately, many practice management systems lack the tools and reports to effectively manage this aspect of the revenue cycle. In this session, learn how organizations can take advantage of common applications, such as Microsoft Excel and Power Pivot, to create powerful tools and reports. The speaker will demonstrate a variety of tools that can be built to help analyze and compare payer contracts, set fee schedules and prices, and even estimate patient responsibility. These tools will not only help make the management process easier, but will enable managers to solve problems and make better business decisions. This session will provide you with the

knowledge to:

1. Discover the challenges and limitations of managing payer contracts and fee schedules with out-of-the box practice management tools
2. Apply common B.I. tools, such as Microsoft Excel Power Pivot, that enhance the management of payer contracts and fee schedules
3. Use the B.I. tools to conduct analyses and solve problems

200 SERIES

12:50 PM – 1:40PM ET

Tuesday, June 7

CON202: Managing Revenue Cycle Resources for Optimal Results

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Revenue Cycle Management

Basic | Traditional | Comprehension

Speaker: Paola Turchi, M.S.H.C.A., F.H.F.M.A., F.A.C.M.P.E., C.P.C., senior vice president, client success, Global Healthcare Resource

In the past several years medical practices have partnered with third-party vendors to support their revenue cycle processes. Most of these vendors offer a combination of technology and services with the intent of eliminating the burden of collecting what is owed the practice. Unfortunately, practice executives struggle with finding the right approach to manage these relationships and find themselves spending more time handling non-sensical interactions than they originally did completing the processes themselves. This session will equip attendees with tools to better manage these relationships and build partnerships that deliver optimal results. The speaker will also discuss real-life challenges that are commonly identified during these engagements. This session will provide you with the knowledge to:

1. Identify the top challenges managing revenue cycle resources
2. Review strategies to support continuous process improvement initiatives
3. Give examples of useful tools to monitor progress and deliver results

200 SERIES

12:50 PM – 1:40PM ET

Tuesday, June 7

CON203 | Launch a High-Performance Culture with a Workload System

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Traditional | Basic | Comprehension

Operational Excellence

Speakers: Adrienne P. Lloyd, M.H.A., F.A.C.H.E., chief executive officer, Optimize Healthcare, L.L.C.; independent consultant, MGMA

One of the most common reasons employees leave organizations is a feeling of workload imbalance or unfairness in their work unit. Without consistent accountability, organizations are at risk for both inefficient flow and losing their high-performing staff, creating a detrimental impact on their entire practice. By establishing a system with clear expectations and measures for individual and team performance, you can increase engagement, teamwork and productivity, laying the basis for optimal clinical flow. This session will help attendees learn key strategies to hardwire and improve processes and build an engaged team-based

culture, while reducing the frequency of workload imbalance and intensity of training new staff.

This session will provide you with the knowledge to:

1. Recognize the importance of an accountability culture and how to launch one through Day Zero Conversations™ and a workload system
2. Review how to use Lean and Six Sigma tools to refine processes, training, and expectations
3. Discuss how to design a clinical staff productivity monitoring system and incorporate it in establishing a culture of accountability across all roles

200 SERIES

12:50 PM – 1:40PM ET

Tuesday, June 7

CON204 | Switching to a Virtual Front Desk and Seeing the Cost Savings

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Operational Excellence

Traditional | Intermediate | Analysis

Speaker: Petria McKelvey, chief executive officer, Precision Medical Billing

Practices all over the country are learning the innovative steps needed to run an efficient, paperless practice. By virtually handing off your front desk duties and eliminating the cost of associated with having a front desk, this session will show you how to see significant savings for your practice. This session will provide you with the knowledge to:

1. Discover the seven platforms needed to acquire a truly virtual front desk
2. Point out which key staff positions are vital for a virtual operation
3. Calculate the savings of shifting from a traditionally manned front desk to a virtual front desk

200 SERIES

12:50 PM – 1:40PM ET

Tuesday, June 7

CON205 | Business Intelligence for Revenue Cycle Management

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Business Intelligence

Intermediate | Interactive | Analysis

Speaker: Nate Moore, C.P.A., M.B.A., F.A.C.M.P.E., president, Moore Solutions, Inc.

Is your revenue cycle running as efficiently as it should? How do you know? What do you measure? Revenue cycle reporting is so much more than simply tracking charges, payments and A/R. Too many revenue cycle reports are backward-looking metrics that simply report problems instead of solving them. This session will take a unique, innovative approach to learning together. The speaker will provide examples of custom dashboards, reports and spreadsheets that practices are using to optimize their revenue cycle, from scheduling appointments to appealing denied claims. He will facilitate a discussion on revenue cycle topics and examples the group is most interested in talking about. Get insight from top performers to think differently about how patients and dollars flow through your practice. Join an interactive discussion with practice managers nationwide to talk about how to measure, monitor, and master your revenue cycle.

This session will provide you with the knowledge to:

1. Analyze examples of reports from practices to visualize and improve revenue cycle management
2. Outline examples of revenue cycle reports that go beyond historical reporting of charges and payments
3. Prepare a report your practice could adopt to gain fresh insight into your revenue cycle

Main Stage Session | 2:00 - 3:00 PM ET | Tuesday, June 7 People First: Creating Environments That Engage the Best of All Your People

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1
Traditional |Intermediate |Application
Staffing and Human Resources

Speaker: Amy Lafko, M.S.P.T., M.B.A., founder, Cairn Consulting Solutions

A people-first workplace creates a culture of connection by using communication techniques that improve collaboration and produce better outcomes. Achieving a people-first workplace always begins with an open dialogue asking their people, "What do you need, and how can we create it together?" This question may scare some leaders because it feels like it will open a can of worms, but there is a surprising level of breathing room that comes from simply starting the conversation this way. Join this session to help grow your mindset and intentions as a leader to become a people-first organization. This session will provide you with the knowledge to:

1. Discover best practices for sharing information and gathering feedback
2. Apply procedures and processes that put people first
3. Use smart strategies that allow you to move your organization together quickly in the direction you want to go

SPEED SESSIONS – SPONSORED

3:15 – 3:40 PM

Tuesday, June 7

S06 | Expand Language Access at Your Practice with Virtual Interpretation Solutions

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Operational Excellence

Traditional | Basic | Comprehension

Speakers: Merrie Wallace, Boostlingo

Philip Allard, chief operations officer, Urban Health Plan

Ivy Spadone, MS, PA-C, chief operations officer, Northern Nevada HOPES

According to the Center for the Study of Health System Change, 97% of doctors in America reported treating limited English proficiency (L.E.P.) patients. To provide the best care possible, bridging the language gap with these patients. Additionally, under Title VI of the Civil Rights Act and Section 1557 of the A.C.A., language support from a qualified medical interpreter is compulsory for certain providers in communities with high L.E.P. patients. In 2021 Urban Health brought virtual and on-demand interpretation to their patients in the New York City area. This virtual interpretation technology platform allowed providers to use over-the-phone interpreting (O.P.I.) and video remote interpreting (V.R.I.) to communicate with L.E.P. patients. This model of medical language support has allowed the practice to serve diverse communities in the South Bronx, Queens, Central Harlem, and more. This session will provide you with the knowledge to:

1. Identify opportunities to increase operational efficiencies.
2. Discuss language access to more of your limited English proficiency (L.E.P.) patients.
3. Describe legal obligations to support LEP patients.

SPEED SESSIONS – SPONSORED

3:15 – 3:40 PM

Tuesday, June 7

SP07 – Becoming an MGMA Better Performer: The Revenue Cycle

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Traditional | Basic | Comprehension

Revenue Cycle Management

Speaker: Kathleen Moritz, expert solutions specialist, Allscripts

MGMA's practice data programs allow an industry-wide look into how medical practices perform financially and operationally. These data enable MGMA to compare and recognize practices that perform better than the industry standards. Learn how Clinics of North Texas, a multi-specialty organization in Wichita Falls, TX, achieved the MGMA Better Performer status in 2021. Join this session to see how this organization used best practices and new workflows to improve denial management and stabilized its revenue cycle operations.

Learning Objectives:

1. Discuss the effectiveness of your organization's current revenue cycle processes
2. Identify gaps in your organization's operations

300 Series

3:55 - 4:45 PM

Tuesday, June 7

CON301 | Building the Blueprint to Support Risk- Based Contracts

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Payer Contract Analysis and Negotiation

Intermediate | Traditional | Application

Speaker: Dan Marino, MBA, MHA, Managing Partner, Lumina Health Partners

Medical groups are under increasing pressure to engage in risk-based contracts with payers. As organizations engage in pay-for-performance and shared savings contracts, they face challenges in creating the infrastructure necessary to assume risk for a population. Organizations that have been successful in risk-based contracts have established partnerships with payers in a way that shares risk and collectively builds the appropriate infrastructure that's crucial for success. This presentation provides insights from payer and provider perspectives, providing a blueprint for building key elements, including contract terms, infrastructure, data sharing, and care management. Several case studies will be presented in a shared learning environment geared toward building competencies in risk-based contracting. This session will provide you with the knowledge to:

1. Discover the elements vital to building a risk-based contract and in working with payers
2. Manage key elements for achieving success within shared savings and risk-based contracts
3. Produce a value-based payer strategy and appropriate infrastructure within a risk-based environment.

300 Series

3:55 - 4:45 PM

Tuesday, June 7

CON302 | Preparing for Risk: Intersection of Value-Based Care and Data Science

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Compensation and Productivity

Intermediate | Traditional | Analysis

Speakers: Maria Nikol, MJ, Closed Loop AI
Mike Gizzi, senior consultant, Sullivan Cotter

Entering any value-based contract changes the way your practice operates. Including the way, physician compensation plans are designed and executed. Practices must now expect to go well beyond the RVU models. In this session, the speakers will discuss compensation design and planning, performance management, and optimizing implementation timing.

This session will provide you with the knowledge to:

1. Rearrange incentives between healthcare organizations and payers
2. Outline value-based care compensation design and planning considerations
3. Leverage Artificial Intelligence & Machine Learning in Value-Based Care for initiative implementation

300 Series

3:55 - 4:45 PM

Tuesday, June 7

CON303 | Say What?!?: How Our Emotions Impact What We Say and Do

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Traditional | Basic | Comprehension

Staffing and Human Resources

Speaker(s): Katie Lawrence, MHA, CMPE, director ambulatory optimization, Prisma Health

Just when we think we have seen it all, an employee or patient will surprise us. We might roll our eyes or even feel as if we have lost control of reality. We often forget that, in the mind of that other individual, what they have said or done made complete sense. The best leaders can take such interactions in stride. They navigate an ever-changing industry while inspiring employee engagement and fostering an environment of both high productivity and high-quality care. How? By leveraging emotional intelligence. In this session, leaders will explore the four aspects of emotional intelligence. Recognizing and responding to emotions in a healthy way is a learned skills. Attendees will learn how emotions and thought patterns impact their leadership style, participating in activities to enhance the ability to recognize a variety of emotions in ourselves and others. Leaders will walk away with skills and activities they can bring back to their team members to enhance emotional intelligence in their workplace. The session will explore what motivates different individuals and how understanding one another can drive teams to the next level of performance and achievement. This knowledge helps leaders to better coach their team and results in team members who more fully trust one another, leading to stronger engagement and a greater sense of pride in one's work.

This session will provide you with the knowledge to:

1. Explain how the emotions we feel influence our actions and perceptions of others
2. Recognize emotions in others and respond in a manner that fosters growth rather than reinforcing barriers
3. Discuss how different individuals perceive the world and are motivated by stimuli to enhance their leadership and interpersonal skills

300 Series

3:55 - 4:45 PM

Tuesday, June 7

CON304 | Amplify Your Front Office MVP and Improve Practice Revenue

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Traditional |Intermediate |Application

Patient Access

Speaker: Marie Stacks, MHSA, PMP, president, Clinic-ology (a part of Boost Midwest)

For each claim your billing team works, there is an opportunity to collect sooner by improving your clinic's operational workflows on the front end. This interactive session will explore the value of each employee at every step in the patient's journey and develop an understanding of their impact on the life cycle of the claim. Attendees will receive actionable tools and tips that can be implemented immediately (without the fatigue of change) on how to identify areas for amplifying the MVPs in your practice's current front office and billing teams. Attendees will be able to build on the best practices that have been used by clinics nationwide

to increase cash flow with long term sustainable results. This session will provide you with the knowledge to:

1. Discover how each team member impacts a practice's life cycle of the claim
2. Produce actionable steps that can improve front office workflows and increase efficiency and cash flow
3. Manage your clinic's revenue cycle with monitoring of best practices, from scheduling through final billing

300 Series

3:55 - 4:45 PM

Tuesday, June 7

CON305 The Proof Is in the Data: Get the Most Out of Your Practice Marketing

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Operational Excellence

Traditional |Intermediate |Analysis

Speakers: Ty Allen, president and chief executive officer, SocialClimb

Data-driven marketing has arrived for medical practices. Attendees will see how two medical practices use the latest predictive technology and measurement strategies to grow their revenue and thrive through automated marketing. For years, marketers outside of healthcare have been able to track the results of their efforts down to market segments and actual customers. HIPAA regulations and security concerns have prevented healthcare marketers from using those same tools and tactics. That has now changed, and this presentation will share details on how medical practices can use these cutting-edge tools and attribution processes. Their use of social media, increased online visibility, highly targeted ads, predictive analytics, and detailed tracking down to individual patients — including the revenue generated from those patients — will be highlighted and shared. Attendees will receive a checklist/cheat sheet on implementing data-driven marketing tactics, as well as case study summaries and contact information for the highlighted practices. The principles and solutions shared in this presentation apply to any practice that spends marketing dollars and wants to truly understand the value and effectiveness of that investment. This session will provide you with the knowledge to:

1. Breakdown how to track your marketing campaigns down to patient name
2. Examine ROI to determine marketing spend
3. Compare your patient acquisition costs to local and national numbers.

DISCUSSION GROUPS 5:00 – 5:30 PM ET Tuesday, June 7

DG01: Financial Discussion Group

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Interactive | Basic | Comprehension

Financial Management

Moderator: Craig Wiberg, Sr. Editor, MGMA

Some of the best ideas and education comes from your peers. Join this facilitated interactive session to talk more about the revenue cycle and cost containment trends and challenges that are important to practice executives. Take advantage of this time with your peers to brainstorm solutions and get a pulse on what other practices are doing to solve some of your most pressing issues.

Learning Objectives:

Discuss new strategies to address revenue issues in your practice

Identify colleagues whom you can contact after the conference to continue problem-solving

DG02: Operations Discussion Group

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Interactive | Basic | Comprehension

Operational Excellence

Moderator: Andrew Hajde, assistant director Association Content, MGMA

Some of the best ideas and education comes from your peers. Join this facilitated interactive session to talk more about the operational issues, trends and challenges that are important to practice executives. Take advantage of this time with your peers to brainstorm solutions and get a pulse on what other practices are doing to solve some of your most pressing issues.

Learning Objectives:

Discuss new strategies to address operations in your practice

Identify colleagues whom you can contact after the conference to continue problem-solving

DG03: Data Discussion Group

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Business Intelligence

Interactive | Basic | Comprehension

Moderator: Chris Harrop, Sr. Editorial Manager, MGMA

Some of the best ideas and education comes from your peers. Join this facilitated interactive session to talk more about the data needs and challenges to practice executives. Take advantage of this time with your peers to brainstorm solutions and get a pulse on what other practices are doing to solve some of your most pressing issues.

Learning Objectives:

Discuss new strategies to address how data is collected and used in your practice

Identify colleagues whom you can contact after the conference to continue problem-solving

WEDNESDAY JUNE 8

10:00-10:15 AM | Good Morning and Welcome to Day 2 Medical Practice Excellence: Pathways Digital Experience!

Join Craig Wiberg, Senior Editor, Industry Insights in a brief Day 2 welcome to get the learning started. Day 2 tricks and highlights to help you create the best experience for you and your organization in the platform. Hear about cutting-edge educational content that dozens of industry thought leaders will be offering, and learn how to identify and optimize networking opportunities and interactions with valuable partners. Make sure you stick around for the end of the day Engagement Winner Giveaway!

400 Series

10:30 - 11:20 AM

Wednesday, June 8

CON401 | 2022 Washington Policy Outlook with MGMA Government Affairs

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content Type: Government Affairs

Traditional | Basic | Comprehension

Speakers: Kelsey Haag, associate director, government affairs, MGMA

In this Session, MGMA Government Affairs staff will provide an update on current and potential policy developments impacting medical group practices. The speakers will discuss the latest legislative and regulatory issues covering topics such as Medicare reimbursement, telehealth, quality reporting, and surprise medical billing. This session will provide you with the knowledge to:

1. Identify key regulatory developments
2. Discuss legislative issues impacting medical groups
3. Describe MGMA advocacy initiatives

400 Series

10:30 - 11:20 AM

Wednesday, June 8

CON402 | Uncovering Data to Improve Payer Accounts: A Case Study

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Traditional | Basic | Comprehension

Revenue Cycle Management

Speakers: Kem Tolliver, CMPE CPC CMOM, president and chief executive officer, Medical Revenue Cycle Specialists

Michael Kenney, MBA, vice president, sales, Inovalon

Collecting payments for patient accounts 90-120 days past due is a challenge for all practices. There is a reason these accounts often end up with a collection agency, but did you know that up to 25% of revenue recovered by collection agencies comes from payers? How can they receive payments on bills that have been

submitted several times to payers? Join this session to see what tools and workflows collection agencies use to quickly find the most likely accounts and cases to get paid. This session will provide you the knowledge to:

1. Identify common issues for payment denials
2. Discuss methods to improve collection on denied claims.
3. Describe solutions to identify primary, secondary, and tertiary coverage for patients.

400 Series

10:30 - 11:20 AM

Wednesday, June 8

CON403 | Building Your Bench: DIY Leadership Training to Promote from Within

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Staffing and Human Resources

Traditional | Advanced | Synthesis

Speaker(s): Mike Lyons, PHR, human resources director, Austin Retina Associates
Megan Odell, CMPE, MHHR, director of patient satisfaction, Austin Retina Associates
Melissa Hartig, COE, director of finance and compliance, Austin Retina Associates

What is the business case for doing leadership development at the frontline level? How do you prepare non-managerial staff for future promotion into management? In this session, attendees will learn how one medical practice built a leadership development program for staff to improve its pipeline of internal management candidates. Presenters will explore the cost and organizational culture reasons for doing leadership development in-house. The presenters will share the business case for providing this training to staff. We will review the content areas to cover with your frontline staff to build their emotional intelligence as leaders. We will review specific topics like feedback, building trust, creating a culture of fun, and how to customize communication for personality. Participants will learn how to translate these topics into engaging exercises that will reinforce knowledge. Attendees will get slides and content they can implement immediately in their own organizations. This session will provide you with the knowledge to:

1. Develop the business case for an engaging DIY training
2. Design an engaging training program for emerging and first-time leaders
3. Assemble education for the foundational skills that all leaders need

SPEED SESSIONS – SPONSORED

11:35 AM - 12:00 PM

Wednesday, June 8

SP11 | Title: Using In-office RT-PCR to Increase Practice Efficiency and Profitability While Achieving Higher Patient Satisfaction and Better Clinical Care

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Traditional | Basic | Comprehensive

Content area: Operational Excellence

Speaker: Dov Shapiro, MD Associated Pediatric Partners

The COVID pandemic has disrupted the practice of medicine more than any other challenge in the past 50 years. But with all challenges comes opportunity. By adopting RT-PCR testing for COVID-19, influenza, RSV, and Group A strep, one practice has improved care efficiencies, clinical accuracy, patient satisfaction, and practice profitability. This session will take you through one practice's journey and advise you on how you can adopt similar technology in your practice. This session will provide you with the knowledge to:

1. Seamlessly integrate RT-PCR into your everyday practice
2. Improve practice efficiency, especially during yearly flu seasons and the COVID pandemic

SPEED SESSIONS – SPONSORED

11:35 AM - 12:00 PM

Wednesday, June 8

SP12 | Achieve Operational Efficiencies with Ambient Clinical Intelligence

Eligible for ACMPE : 0.5 | CEU : 0.5

Traditional | Basic | Comprehensive

Operational Excellence

Speakers: Reid Conant, MD, chief medical information officer, Nuance Communications

Kristy Gleaton, LDO, ABOC, NCLE, vice president, operations, Thomas Eye Group

Medical practice administrators face pressure from multiple stakeholders: patients demanding an improved experience and high quality of care, organizations looking to optimize productivity, and providers competing at their breaking point. The needs of these stakeholders are often seemingly in conflict. Are there solutions that can help move an organization toward all three of these goals? Join this case study to see how one practice implemented an ambient clinical intelligence that helped streamline clinic workflows to improve productivity and access, and free clinicians of administrative burdens. This session will provide you the knowledge to:

1. Discuss how to improve clinician efficiency while simultaneously increasing quality of care
2. Identify how to decouple scribes from a physician with no changes to existing workflows
3. Describe how improved efficiency helped achieve financial performance goals

Visit the Solution Center 12:20 - 12:50 PM | Wednesday June 8 Visit the Solution Center 12:20 - 12:50 PM | Wednesday June 8

Go explore the Solution Center. These industry experts have partnered with MGMA to bring solutions to your everyday problems. Access the Solution Center from the home page navigation or these tiles on the platform

EXPLORE LEARN AND EARN!

Earn “click by click” engagement points as you visit the solution providers in the platform and engage in their content to learn more about their services. Each button you click to text a booth staff member or to watch a video will be tallied for our Engagement Prize drawing at the end of Day 2 before the mainstage session kicks off! Make sure you are there to hear your name! Cash and other prizes just for learning more about these crucial partners in the march for medical practice excellence!

Be present to win in session MS01: Wednesday, June 8, 3:45pm ET where we will draw and announce the winners!

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500 Series

12:50 – 1:40 PM

Wednesday, June 8

CON501 | Increasing Revenues by Ancillary Services Qualification

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Revenue Cycle Management

Intermediate | Traditional | Application

Speaker: Mehmet Kazgan, MSc, MBA, founder and chief executive officer, cliexa; chairman, NHS Pain Treatment Center

The majority (80%) of patient data practices collect today are unstructured and do not provide actionable insight to clinicians, let alone adding value to quality and compliance. While 50% of providers' time during visits is spent in the EHR, denial and rejections for claims are high mostly because of lack of clinical documentation and justification. There is also lack of transparency on financial responsibility from patients' point of view, and payers are missing data related to patients' treatment adherence across time. As RCM is

done retroactively, implementing a tailored technology can provide clinical justification for ancillary services and qualify patients for ancillary services during onboarding. Treatment guidelines can be included in the patient onboarding process as "Clinical Algorithms as a Service (CaaS)," which can collect automated clinical and administrative justification and increase quality and compliance while decreasing reimbursements. With an end-to-end patient engagement platform, the speaker's organization was able to demonstrate revenue increases of more than 15% by implementing clinical onboarding before visits and decreasing denials and rejections by more than 10%. This session will provide you with the knowledge to:

1. Solve interoperability challenges with automated systems integration within onboarding process
2. Discover how clinical guidelines can be applied to onboarding processes that increases efficiency
3. Demonstrate how to prevent claims rejections and denials by automating clinical justification tailored to practices

500 Series

12:50 – 1:40 PM

Wednesday, June 8

CON502 From Idea to Implementation: Successful Strategic Planning

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Interactive | Intermediate | Analysis

Operational Excellence

Speaker(s): Blair Bisher, MHA, chief operating officer and adjunct professor, Sturdy Memorial Hospital and Suffolk University, Sawyer Business School

In the healthcare setting, taking a great idea and turning it into a reality can be daunting. In this session, the speaker will walk you through his experience converting an academic medical center's primary care section away from a volume-based model to a value-based model. Attendees will learn how to perform successful strategic planning, start to finish, including the best structure for meetings; how to engage key stakeholders to build consensus and approval; what data is needed; how to fund a population health based primary care model in an AMC setting; how to convert to value-based care and charter workgroups; and how to assess performance in real-time. Attendees will learn a working model for strategic planning process and execution and receive a template to convert a volume-based practice to value, with information on which subgroups are needed to bring to fruition. Attendees will be asked to propose workgroups they would need to charter to convert their own respective practices. They will also be asked what barriers they have faced in attempts made prior. This session will provide you with knowledge to:

1. Analyze structure, meeting cadence, engagement methods, data and more for successful strategic planning, start to finish
2. Outline the funding of a population health-based primary care model in an AMC setting
3. Examine crucial areas for a successful conversion to value-based care

500 Series

12:50 – 1:40 PM

Wednesday, June 8

CON503 | A Road Map for Compliance Planning

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Operational Excellence

Traditional | Basic | Comprehension

Marcia L. Brauchler, MPH, CPC-I, FACMPE, CPHQ, president and founder, Physicians' Ally, Inc.

When healthcare providers sign contracts for payments by third-party payers, they agree to comply with a whole host of federal laws and regulations that pertain to medical practices. This talk provides a valuable roadmap on the important steps a practice administrator can set to become compliant. Explore more with the author of the MGMA Compliance Toolkit, and the MGMA HIPAA Policies and Procedures for Outpatient Providers, and the author of the OSHA Compliance Manual, which has been updated for Covid regulations. Learn about the probability of getting caught for violating a federal regulation and the severity of the fines under the law. The result will be peace of mind that an essential item for your practice has been addressed. This session will provide you with the knowledge to:

1. Learn to answer every provider's question: "What can I go to jail for?"
2. Understand the high-risk areas of federal laws, such as the False Claims Act, HIPAA, OSHA and Human Resource regulations.
3. Gain take-aways that illustrate the importance for providers of having an effective compliance plan.

500 Series

12:50 – 1:40 PM

Wednesday, June 8

CON504: How Do You Measure up?: Dive Into Benchmarking Data

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Traditional | Basic | Comprehension

Operational Excellence

Speakers: Liz Gurley, data strategist, member services, MGMA
Lauren Jones, senior account manager, member services, MGMA

Interpret the industry on a national scale with data that helps deliver answers. MGMA's DataDive platform is the industry-leading source for healthcare management data, including compensation, revenue, operations, and more. Once inside the platform, users can carve up data to gain invaluable insights, ultimately helping them understand the industry beyond their practice. In this session, attendees can expect a detailed walk-through of the updated platform, multiple use cases and an open forum to address specific questions. This session will provide you with the knowledge to:

1. Describe the DataDive platform and filtering options
2. Discuss how to create reports from DataDive
3. Identify use cases for data in day-to-day operations

Speed Sessions – Sponsored

1:55 - 2:20 PM

Wednesday, June 8

SP16 | Using Technology to Eliminate Delays in Providers Credentialing

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Financial Management

Traditional | Basic | Comprehension

Speakers: Neeraj Sharma, Santech

Andres Buitrago, Santech

Siddharth Chawda, Santech

To ensure smooth provider management, healthcare providers must keep up with the constantly evolving requirements surrounding provider enrolment and credentialing processes. While credentialing forms and agreements may appear to be a basic regulatory undertaking, the absence of consistency in the procedures utilized by payers, clearinghouses and other outsiders opens doors for errors and delays. Join this session to see how practices can shorten the credentialing process by using technology to manage the process to allow providers to deliver care and get reimbursed for those services sooner. This session will provide you with the knowledge to:

1. Identify how to sync recruitment, provider data collection and management, data standardization and exchange with payors.
2. Discuss how to eliminate manual document tracking and follow up – predict the data need and schedule outreach.
3. Describe how to avoid payor denial and network dropouts caused by inaccurate or incorrect provide data.

Speed Sessions – Sponsored

1:55 - 2:20 PM

Wednesday, June 8

SP17 | How Practices are Solving Staffing Shortages During The Pandemic

Eligible for ACMPE : 0.5 | AAPC : 0.5 | ACHE : 0.5 | CME : 0.5 | CEU : 0.5 | PDU: 0.5 | PDC: 0.5

Traditional | Basic | Comprehensive

Staffing and Human Resources

Speaker: Ahmed Danawala, Edge Health

Conventional strategies for recruiting and retaining employees aren't seeing the same results anymore, resulting in practices facing major under-staffing problems. Instead, medical practices are using innovative ways to fill openings, including remote employees, both domestically and internationally. This session will help you gain key insights into how practices are filling their staffing needs during the pandemic while being cost-effective and increasing profits for the medical practices. This session will provide you with the knowledge to:

1. Discuss how to minimize staffing shortages
2. Describe how to quickly hire recruit, train, manage and retain employees while increasing productivity and profits for your practice.

600 Series

2:35 – 3:25 PM ET

Wednesday, June 8

CON601 | Practical Insights in Evaluating and Optimizing Payer Contracts

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Content area: Payer Contract Analysis and Negotiation

Intermediate | Traditional | Analysis

Speakers: Judy Nichols, data and collaboration consulting director, Dean Dorton
Eric Riley, healthcare consulting director, Dean Dorton

For successful medical group leaders, developing a broader knowledge to prepare your practice to navigate and succeed under payment reform and payer contracting is an essential skill. This session will help attendees identify practical building blocks to create an enterprise-wide payer contract management and data analytics strategy. By effectively utilizing this data, organizations of any size can define processes that will drive informed decision-making. This session will provide you with the knowledge to:

1. Examine payer contract language
2. Distinguish pre-negotiation assessments, payer performance assessments, and benchmarking financial assessments
3. Breakdown actionable tactics for process management

600 Series

2:35 – 3:25 PM ET

Wednesday, June 8

CON602 | Going Beyond Your Numbers: Real-time and Comparative Data Analytics

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Traditional | Basic | Comprehension

Operational Excellence

Speakers: Liz Parker, healthcare data strategist, member services, MGMA

Obtaining data is only one piece of the puzzle. Interpreting data is the next step that leaders must prioritize to guide impactful change. DataDiscovery, MGMA's newest analytics tool, collects practice data, compares it against benchmarking data from the industry-leading platform, DataDive, and delivers prescriptive insights on trends allowing real-time interpretations. Attendees will be given an in-depth demo, walk-through scenario-based application, and the opportunity to participate in discussion. This session will provide you with the knowledge to:

1. Discuss how to interpret real-time data
2. Identify key benchmarks that can be used as key performance indicators
3. Describe various benchmarks and dashboards as compared to industry data

600 Series

2:35 – 3:25 PM ET

Wednesday, June 8

CON603 | What Physicians Want: How to Retain Physicians and Avoid the Turnover Epidemic

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Staffing and Human Resources

Traditional | Intermediate | Application

Speaker: Tony Stajduhar, president, Jackson Physician Search

The great challenge for healthcare administrators is to develop effective physician retention programs that reduce turnover, increase physician engagement, mitigate burnout, and contribute to a positive workplace culture. The speaker's organization surveyed physicians and administrators at the end of 2020 to better understand their views on these issues. The results suggest that administrators are attempting to address them, but many physicians are unaware or are not yet positively influenced. Additionally, our data shows that the intense strain of COVID-19 on physicians is leading a surprisingly large percentage to consider leaving the practice of medicine entirely or retiring early. During this interactive session, we'll dive into the survey findings, outline actionable steps that medical groups can implement to communicate and improve their physician retention programs, and discuss why it's critical to anticipate and address future staffing needs earlier to overcome the downside of lengthy vacancies. This session will provide you with the knowledge to:

1. Outline effective physician retention programs
2. Discover methods to mitigate burnout by learning how and when to include your physicians in the long-term solution
3. Analyze the qualities that physicians value most in an employer

600 Series

2:35 – 3:25 PM ET

Wednesday, June 8

CON604 | IT Demystified: Case Studies on Ransomware, Data Security and the Cloud

Eligible for: ACMPE : 1 | AAPC : 1 | ACHE : 1 | CME : 1 | CPE : 1.2 | CEU : 1 | PDU: 1 | PDC: 1

Health IT

Traditional | Basic | Comprehension

Speaker(s): Reggie Stevens, MBA, MS, chief executive officer, IRIS Solutions

Thoughtful IT design can exponentially improve your practice's efficiency, increase profitability, and improve patient outcomes. With the rapid pace of technological advancement, it is imperative for top practices to maintain a competitive technological edge. This means investing in tools and programs that provide increased value for your practice and your patients. This also means staying informed about the latest technological threats and opportunities. This talk will provide healthcare decision-makers a timely update on the state of play within healthcare IT using real-life case studies. We will also discuss defensive and offensive IT strategies deployable in select scenarios. This session will provide you with the knowledge to:

1. Discuss the hidden costs of a ransomware attack
2. Describe how practices benefit in three key areas using cloud applications and infrastructure
3. Explain the NIST layered security framework and how it should be implemented within healthcare practices

Break to visit the Solution Center 3:25 – 3:40 PM | Wednesday June 8

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