

HL7® PAYER SUMMIT

Thursday – Friday, September 18-19, 2014

DAY ONE

9:00 – 9:45 am

What is HL7 and Why Payers Should Care

This session introduces payers to the HL7 organization, provides a high-level overview of the organization's operations, highlights the standards developed by HL7 and explains the uses and resulting benefits of using HL7 standards. This session will also highlight the value proposition for payer participation in the development and evolution of HL7 standards that are part of interoperability and improving healthcare delivery.

Speakers:

Charles Jaffe, MD, PhD, CEO, HL7 International

Pat Van Dyke, Delta Dental Plans Association; HL7 Board of Directors

9:45 – 10:30 am

Industry Adoption and Use of HL7 Standards and Transactions

There are common HL7 standards being used by the provider community. This session explores how these standards can now be used as part clinical exchange initiatives to improve healthcare delivery and support Accountable Care Organizations' efforts to improve outcomes and reduce costs. These standards and transactions include ADT, OBR, OBX, ORU and CDA®-based standards around CCD® and Discharge Summary.

Speakers:

Craig Knier Director of Product Management, McKesson Health Solutions

Dave Shaver, CorePoint Health

Keith Boone, GE Healthcare; HL7 Board of Directors

10:30 – 11:00 am **Break**

11:00 – 11:45 am

ADT Case Study

Ambulatory care physicians are often unaware that their patients have been admitted or discharged until they show up in their offices. Also, Medicare has begun imposing payment penalties on hospitals that have excessive re-admissions. This session shows how payers use hospital admission-discharge-transfer (ADT) systems to send admission and discharge notices via HL7 ADT messages to help improve care Coordination between providers and to minimize re-admission penalties.

Speakers:

Dan Lee, Product Solution Expert, Availity

Frank Ingari, President and CEO, NaviNet

11:45 – 12:30 pm

HL7 Clinical Exchange, Quality and Population Health Challenges

A session that focuses specifically on key implementation areas that directly affect/relate to health plans, provider adoption & usage and their practical applicability—highlighting C-CDA, Version 2, Quality Reporting and Population Health.

Speakers:

Floyd Eisenberg, MD, President, iParsimony LLC, Co-Chair, HL7 Clinical Quality Information Work Group

Austin Kreisler, Co-Chair, HL7 Structured Documents Work Group

Bob Yench, President, RTY LLC, Member, HL7 Orders and Observations Work Group (invited)

12:30 – 1:45 pm **Focus Group Lunch**

1:45 – 2:30 pm

Panel Session on Care Coordination, Patient Centered Medical Homes, and ACOs

This interactive session will cover common themes payers encounter as the demand for clinic data permeates the health insurance industry.

Speakers:

Virginia Riehl, Moderator

Sharon Haft, Managing Director, National Programs, Blue Cross and Blue Shield Association

Brian Ahier, Director of Standards & Government Affairs, Medicity

Fred Borho, Director, Provider Engagement, Certify Data Systems, Humana, Inc.

2:30 – 3:15 pm

Payer Challenges in the New Patient Centered World of Health Information Exchange

This payer led session will focus on identifying payer challenges in a variety of areas including information/data exchange problems, ACO issues, consent management and consumers' access to information.

Speakers:

Durwin Day, Supervisor, Health Care Service Corporation

Dan Lee, Product Solution Expert, Availity

Michael Toomey, Technical Solutions Manager, Meddecision

3:15 – 3:30 pm **Break**

3:30 – 5:00 pm

One Tree, Many Branches: Making Sense of Today's Growing Regulatory Environment

Regulation and legislation situated at the intersection of payer interests, standards and interoperability continues to expand. Keeping up can be challenging. This session will offer a helpful overview of some key regulatory issues of concern to payers including Affordable Care Act compliance, intelligence on Meaningful Use and what to expect next, state and federal regulatory developments affecting telemedicine and telehealth, the upcoming HIPAA attachments rule and a detailed discussion of pay for performance versus pay for service.

Speakers:

Ticia Gerber, Director of Global Partnerships and Policy, HL7 International

Speaker, CMS (invited)

Kevin Chaney, Program Manager, HIT Program, AHRQ

Doug Fridsma, MD, PhD, Chief Science Officer, Director, Office of Science and Technology, Office of the National Coordinator for HIT

Jonathan Neufeld, PhD, HSPP, Clinical Director, Upper Midwest Telehealth Resource Center

5:30 pm – 7:00 pm

Networking Reception

DAY TWO

9:00 – 10:30 am

The Mobile Revolution

“The mobile revolution is about to start.” Providers and EHR vendors are now partnering to provide data to mobile devices to enable telemedicine. This session focuses on HL7’s activities to develop new standards and maximize the use of existing industry standards as part of improving patient engagement and better healthcare outcomes. This session will also include information on telehealth resource centers available to payers and their network providers to enable efficient telehealth programs and services.

Speakers:

Gora Datta, Co-Chair, HL7 Mobile Health Work Group, Moderator and Speaker

Kenneth Russo, Director - Enterprise Architecture, Independence Blue Cross

Becky Sanders, Program Director, Upper Midwest Telehealth Resource Center

10:30 – 11:00 am **Break**

11:00 – 12:15 pm

Why All the Buzz About HL7[®] FHIR[®]

What is FHIR and why you should care? A new generation framework, FHIR can help speed implementation and use of HL7 standards. This session offers insights as to why the payor community should be involved in its early inception. FHIR connectathon attendees will share their experiences working with these new standards.

Speakers:

Lloyd McKenzie, Co-Chair, HL7 FHIR Management Group

Dr. David Hay, Product Strategist, Orion Health; Co-Chair, HL7 FHIR Management Group

Craig Parker, MD, Medical Informaticist, Intermountain Healthcare