The economic reality of reform has already caused major change in the healthcare industry. An increasing number of hospital, physician, and health plan leaders see a burning platform that necessitates the movement from volume to value. Provider and payor organizations in all markets of the country are undergoing extensive planning efforts to establish thoughtful and diligent strategies to move toward a more value-based system. Many organizations are already executing on these strategies. The major challenge that providers face, however, is determining what the end state vision should be, how that end state will need to evolve over time, and what the transitional steps are for getting there. The pacing and priorities may be different depending on the type of provider organization (e.g., multi-hospital system, acute care hospital, critical access hospital, medical group, etc.) and the specific dynamics of the market. These dynamics are driving increased emphasis on the need to establish transitional strategic and tactical plans that will move provider organizations and their markets toward improved value and more accountable care. This presentation provides an industry review of the critical transitional steps required to move from volume to value and the importance of the pacing of that movement.

Target Audience: CEO, COO, CFO, CMO, Board Members, Business Development and Strategic Planning Leadership, Managed Care Directors, Physician Services, and Financial Services

Faculty:
Terri L. Welter, MHA
Principal, Contracting and Reimbursement Practice
ECG Management Consultants
Washington, DC

Terri L. Welter leads the firm’s Contracting and Reimbursement practice. She has extensive experience in the area of managed care and provider payment, including strategy development, reimbursement, contract negotiations, and operations. She has recently been closely involved with assisting health systems, hospitals, medical groups, PHOs, and IPAs with developing and executing the types of arrangements needed to successfully react to healthcare reform and to establish contracting structures that facilitate hospital/physician alignment and clinical integration. Ms. Welter is a frequent national speaker on the topics of evolving provider payment vehicles and ACO development. She holds a master of science degree, concentrating in healthcare administration, from Villanova University and a bachelor of arts degree in pre-professional studies from the University of Notre Dame.

Program Topics:
• End state models of a value-based delivery system and the important considerations for different provider types
• Examples of what other health systems are doing to move from volume to value
• Consideration of the pacing of the movement from volume to value as it relates to the financial, operational, cultural, and strategic implications to the organization
• Critical transitional steps for moving from a volume-based to a value-based care delivery and payment system

Registration: There is a site fee of $185 for this course. Advance registration is required by March 31 to ensure delivery of instructional materials. Register online at http://secure.kyha.com/meetingregistration.asp or use the attached form and fax as indicated. For additional information contact Carol Walters at 502-992-4344 or cwalters@kyha.com.
VALUE-BASED REIMBURSEMENT: THE MOVEMENT FROM VOLUME TO VALUE—HOW DO WE GET THERE?
APRIL 8, 2014 – 1:00PM-2:00PM

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