



A WORKSHOP ON
**Analyzing and Negotiating
Managed Care Contracts**

Meeting at William B. Travis Building, 1701 Congress Ave., Room 1-104, Austin

Hotel Room Block Only – Hampton Inn & Suites Austin at The University/Capitol
1701 Lavaca Street | Austin | 78701 | (512) 499-8881

JANUARY 10–11, 2019



Workshop Registration is Free, Register by January 4, 2019

Co-hosted by the State Office of Rural Health and TORCH



Analyzing and Negotiating Managed Care Contracts Workshop Agenda

THURSDAY, JANUARY 10

8:00 - 8:30 am	Registration
10:00 - 10:30	Break
Noon - 1:00 pm	Lunch
2:30 - 3:00	Break
5:00	Adjourn for the day

FRIDAY, JANUARY 11

8:00 - 10:00 am	Session
Noon - 1:00 pm	Lunch
4:00	Closing Summary

REGISTRATION INFORMATION

The registration form is for hospitals and healthcare organizations only. To help us plan properly and ensure optimal processing of conference materials, please complete and submit your registration as early as possible.

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WORKSHOP DESCRIPTION

Updated for 2019, this Master Class workshop covers an overview of 21 current and evolving MCOs, language analysis and identification of over 150 terms and phrases that increase risk through ambiguity, and how they apply and increase risk in "All-Payer" and "All Product" agreements. Also covers bundled pricing with hands-on exercises and teaches workshop participants how to develop and define bundled case rates and risk mitigation through clearly defined episodes of care, revenue management terms and KPIs help contract analysts push back on troublesome terms related to refunds, chart audits, payment audits, and fee schedule interpretations, complexities of physician reimbursement, capitation, and other issues related to physician contracting and hospital-based physician employment for those new to physician contracting. Physician integration and alignment is addressed for analysts contracting on behalf of IPAs, PHOs, ACOs and MSOs. A new section has been added this year on disintermediation (contracting directly with self-insured employers and labor unions rather than through HMOs and PPOs).

CONTINUING EDUCATION CREDITS

Up to 14 hours of preapproved ACHE Qualified Education Credits can be claimed for this workshop toward advancement or recertification in the American College of Healthcare Executives. Participants in this program wishing to have the continuing education hours applied toward ACHE Qualified Education Credit should indicate their attendance when submitting application to the American College of Healthcare Executives for advancement or recertification.

HOTEL INFORMATION

A block of rooms have been reserved for this workshop at The Hampton Inn & Suites Austin at The University/Capitol on 1701 Lavaca Street. Room rates are \$189 and registration is (512) 499-8881.

WORKSHOP OBJECTIVES

After this seminar, you'll be able to:

- Feel confident in your understanding of 21 different types of third-party contracted reimbursement arrangements, including how to handle reference based pricing requests
- Feel more confident about your negotiation skills, tactics and strategies: what to ask for, how to ask for it, and how to leverage brand strength and differentiation
- Review insurance, HMO, PPO, Medicare Advantage, Managed Medicaid, ERISA and Taft-Hartley plan contracts
- Maximize reimbursement and minimize medical necessity denials and administrative hassle factors that erode margins
- Review contracts faster and paperless through the use of the software application provided with course materials
- Recognize problematic contract terms that impact reimbursement and operations and how to revise and push back with language alternatives from a contract snippet library provided with course materials
- Reduce surprise one-off and continuous discount arrangements, Silent PPO exposures, plan bankruptcy clawbacks, and medical necessity denials

TOOLS AND TAKEAWAYS

Checklists of contracting and negotiation principles, software application that layers on top of MS-Word®, alternative contract language library, USB drive with supplemental reading materials, a sample managed care contract, and a sample direct contract for use in disintermediated negotiations directly with employers and labor unions.

RULES AND REGULATIONS

It is a violation of the antitrust laws to agree not to compete. Therefore, discussions about dividing territories or customers or limiting the nature of business carried on or products sold are not permitted. Similarly, discussions or sharing information of current prices, current price levels, or current price trends are prohibited. And, no discussion is permitted of any element of a company's specific or unique operations which might influence price such as (a) costs of operations, supplies, labor or services, (b) allowances or discounts, (c) terms of sale, including credit and warranty arrangements, (d) profit margins and mark ups, and (e) capacity reductions or expansions, or production quotas or other limitations on either the timing, costs or volume of production.

Analyzing and Negotiating Managed Care Contracts Workshop



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LOCATION OF WORKSHOP:

William B. Travis Building, 1701 Congress Ave., Room 1-104, Austin

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QUESTIONS

For questions regarding registration, confirmation or cancellation, contact Rose at (512) 873-0045 or email at rvalenzuela@torchnet.org. For all other questions, contact Shari Wyatt at the SORH Office at (512) 463-0018.

Please type or print clearly. You may attach your business card with this completed form.

Name to appear on badge _____
Title _____
Hospital/Healthcare Organization _____
Address _____
City/State/ZIP _____
Phone _____ Fax _____
Email _____

ADDITIONAL REGISTRANTS
Name _____
Title _____ Email _____
Name _____
Title _____ Email _____
Name _____
Title _____ Email _____
Name _____
Title _____ Email _____

Biography

Maria Todd, CEO, Mercury Healthcare International

Established in 1983, Maria Todd's consultancy focuses on helping clients plan, launch, grow and thrive in today's chaotic healthcare business environment. Her specialties include: managed care, physician and hospital integration, medical tourism, concierge and direct pay medical practices and healthcare marketing and branding.

Her clients are clinicians, healthcare ancillary service providers, hospital managers and executives, and investors. She brings them the skills, tactics, and strategies and deep market knowledge needed to negotiate better insurance reimbursement contracts, appeal and overturn complicated and high-dollar denied claims, and improve revenue management operations. She's helped develop over 400 integrated physician groups and health systems in the USA and abroad. She helps independent and hospital-employed physicians plan and launch concierge and direct pay medical practices. She also helps hospitals, academic medical centers and independent physicians surgeons and dentists create and execute new medical tourism business strategies.

Maria Todd solves healthcare managed care challenges and boost negotiated rates by teaching clients how to differentiate their brands, articulate their brand strength to insurance companies and third-party payers and present their outcomes data to insurers, employers, and labor and trade unions during pre-contract negotiations. She also helps physicians, practice administrators and hospital managers negotiate physician employment contracts and when necessary, helps them mediate and settle disputes. For physicians who have decided to step away from third-party reimbursement contracts, she helps them set up a truly private pay business model for membership-based concierge medicine practices in primary care, internal medicine subspecialties and functional medicine. Investors seek her opinion and deeply specialized market knowledge to validate claims and business rationale in business plans and merger and acquisition opportunities. Finally, she helps government public health and health finance authorities to source rare and complex healthcare services unavailable in their own country as a medical attaché working closely with Embassy representatives.