

Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

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Fourth Annual

Medical Informatics World Conference 2016

Improving Outcomes and Delivering Value with IT Innovation

CONCURRENT TRACKS

- Value-Based Delivery Models and Cross-Industry Data Collaboration
- Coordinated Care, Patient Engagement and Connected Health
- Population Health Management, Risk Modeling and Patient Stratification
- Achieving Global Interoperability in Healthcare Datasets and Systems

DINNER WORKSHOP: Root Cause Analysis in Healthcare Informatics and Analytics

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April 4 - 5, 2016

Seaport World Trade Center
Boston, MA

KEYNOTE SPEAKERS



Nicholas Marko, M.D.
Chief Data Officer
Geisinger Health System



Adrienne Boissy, M.D.
Chief Experience Officer
Cleveland Clinic



Micky Tripathi
President & CEO,
Massachusetts eHealth
Collaborative



Jason Burke
Senior Advisor for
Innovation and
Advanced Analytics
UNC Health Care and
School of Medicine

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Conference-at-a-Glance

MONDAY, APRIL 4

Day 1

Medical Informatics World Opening Keynotes

TRACK #1

Value-Based Delivery Models and Cross-Industry Data Collaboration

TRACK #2

Coordinated Patient Care, Engagement and Empowerment

TRACK #3

Population Health Management, Risk Modeling and Patient Stratification

TRACK #4

Achieving Global Interoperability in Healthcare Datasets and Systems

NEW!

Interactive Breakout Discussion Groups

Medical Informatics World Welcome Reception in the Exhibit Hall

Dinner Workshop*

*Separate registration required

TUESDAY, APRIL 5

Day 2

TRACK #1

Value-Based Delivery Models and Cross-Industry Data Collaboration

TRACK #2

Coordinated Patient Care, Engagement and Empowerment

TRACK #3

Population Health Management, Risk Modeling and Patient Stratification

TRACK #4

Achieving Global Interoperability in Healthcare Datasets and Systems

NEW!

Join Bio-IT World Keynote at 4:00 PM and Reception in the Bio-IT World Exhibit Hall at 5:00 PM

ABOUT THE EVENT:

Now in its fourth year, **Medical Informatics World** has become a must-attend industry event, uniting senior-level executives and industry leaders representing all the major contributors to a new era of healthcare. More than 400 providers, payers, technology vendors, biomedical scientists, academic researchers, informaticists and national health organizations come together to discuss emerging trends and collaborations in health IT for improved outcomes in the healthcare ecosystem. Focused tracks allow the community to delve into the most pressing topics of cross-industry data sharing, population health, patient engagement, and clinical decision support.

Keeping pace with the evolving industry, coverage has expanded to include predictive analytics and interoperability.

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Cover

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Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

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KEYNOTE SESSION

Obtaining Insights and Improving Outcomes with IT Innovation

MONDAY, APRIL 4

8:00 Organizer's Welcome & Chairperson's Remarks



Micah Lieberman, Executive Director, Conferences, Cambridge Healthtech Institute (CHI) & Medical Informatics World



Gowtham Rao, M.D., Ph.D., Chief Medical Informatics Officer, BlueCross BlueShield of SC

8:10 Step Away from the EHR and Innovate!



Nicholas Marko, M.D., Chief Data Officer (CDO), Geisinger Health System

Mass adoption of electronic health records (EHRs) was an important first step toward unlocking the potential for discovery and innovation that was previously trapped in mountains of paper. Unfortunately, somewhere along the path to a data-driven revolution in healthcare, many decided that this digital platform for recording and aggregating data should also become the hub of analytics and informatics. Rather than continuing to coerce a digital record-keeping system into a robust analytics platform, isn't it time that we focus on getting data out of the EHR and into the vast world where data-driven innovation can truly thrive? Come along on a journey through this landscape as we explore the present and future of analytics in an environment unbounded by the inherent constraints of electronic health records.

8:40 Unlocking Patient and Provider Experience: What's Technology Got to Do With It?



Adrienne Boissy, M.D., Chief Experience Officer, Director, Center for Excellence in Healthcare Communication, Cleveland Clinic; Editor in Chief, Journal of Patient Experience

Healthcare organizations across the country are thinking about how to maximize patient outcomes, engage their clinicians, and leverage technology. Truth of the matter is that new ways of thinking about our practice and appropriate use of technology can have an enormous impact. Key to this, however, is bringing clinicians to the table to use it, build it, and know when old fashioned methods are actually the most effective. We'll talk about our patient experience initiatives, innovations to drive performance of our caregivers and patient outcomes, and key tactics for engaging experienced clinicians.

9:10 Designing Health Systems that Learn



Jason Burke, Senior Advisor, Innovation and Advanced Analytics, UNC Health Care and School of Medicine

Many health industry leaders and practitioners acknowledge the desire to become more data driven. Though most organizations lack a strategy – or even a definition – of a “learning health system,” the concept of capturing real-world experiences in order to improve the quality and cost of care resonates equally with providers and payers. Research has demonstrated that most forms of learning share attributes such as being process-driven, contextual, time-sensitive, and iterative. These attributes among others suggest that the next generation of health transformation requires disruption to the current reliance on department-level workflow, discrete software applications, and historical reporting in favor of new processes for collecting, analyzing, and institutionalizing medical experiences.

9:40 The Future of Interoperability



Micky Tripathi, President & CEO, Massachusetts eHealth Collaborative

2016 is a pivotal year for interoperability. With a delay in Meaningful Use Stage 3 and new economic imperatives to share data for coordinated care, the private sector has taken back the innovation that has been co-opted by regulation for several years. From accelerated standards making to novel application program interfaces, the efforts of 2016 will shape the future of the way we share healthcare data. In this keynote, the speaker will share the five great enablers and the five remaining barriers to data liquidity among patients, providers, and payers.

“Medical Informatics is the only venue committed to not only bringing together leaders from across healthcare - providers, payers, regulators, researchers - but having space for dialogue, challenging participants to lead from where they are. We all have opportunities to help evolve our industry from where we are. This is a rare place that enables change.”

- Vice President, Enterprise Intelligence, Catholic Health Initiatives

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Bio-IT World
CONFERENCE & EXPO '16

April 5 - 7, 2016



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DINNER WORKSHOP*

MONDAY, APRIL 4

6:15 - 8:45 pm

W1: Root Cause Analysis in Healthcare Informatics and Analytics – Putting All That Data to Good Use!



Patricia Ingerick, MBA,
MSHS, Director, The Geneia
Institute

Data seems to be everywhere, but it can be overwhelming – EMRs, EHRs, spreadsheets, claims reports, billing systems, pharmacy claims, etc.! How can you make the best use of all this healthcare data to discover the root causes behind drivers of cost and utilization – or other areas of interest? Much like the yellow brick road, you need a place to start and a path to follow to understand the root cause. This learning event will provide insights on the process of data-driven root cause analysis. With a data-driven root cause analysis process, the need for process or workflow change can be supported visually and concretely. Leaders focused on the transformation of healthcare processes to improve cost and utilization will benefit from this application-focused event.

*Separate registration required

INTERACTIVE BREAKOUT DISCUSSION GROUPS

MONDAY, APRIL 4 | 4:10 - 5:10 PM

TABLE 1: Creating an Achievable Path to True Interoperability and Continuous Healthcare IT Improvement

Moderators: Stanley Huff, M.D., Chief Medical Informatics Officer, Intermountain Information Systems
Charles Jaffe, M.D., Ph.D., Chief Executive Officer, HL7
Oscar Diaz, Chief Executive Officer, Healthcare Services Platform Consortium (HSPC)

TABLE 2: Analytics, Big Data, and the Role of Chief Data Officer / Chief Analytics Officer

Moderators: Liz Rubin, Senior Director, Analytics, Horizon Blue Cross Blue Shield of New Jersey
Eric Glazer, MBA, CEO, Shared Purpose Connect; Board Member, Society for Participatory Medicine
Professor J. Bryan Bennett, MBA, Executive Director, Healthcare Center of Excellence
Dominique Morgan-Solomon, Morgan-Solomon Consulting

TABLE 3: Leveraging the Cloud and Knowledge Sharing for Clinical Decision Support and Analytics

Moderators: Blackford Middleton, M.D., Chairman of the Board of Directors, AMIA; Chief Informatics & Innovation Officer, Apervita, Inc.
Milenko Tanasijevic, M.D., MBA, Vice Chair for Clinical Pathology, Director of Clinical Laboratories, Brigham and Women's Hospital and Dana Farber Cancer Institute

TABLE 4: Improving Health and Reducing Costs through Traditional and Innovative Approaches to

Coordinated Care and Patient Engagement

Moderators: David Muntz, Senior Vice President & CIO, GetWellNetwork
Patricia Ingerick, MBA, MSHS, Director, The Geneia Institute
Regina Au, Strategic Marketing Consultant, New Product Planning/Marketing, BioMarketing Insight
Adrian Gropper, M.D., CTO, Patient Privacy Rights
Nick van Terheyden, M.D., Chief Medical Officer, Dell

TABLE 5: Healthcare Provider-Payer Financial Management: Using the Power of Analytics for Value-Based Purchasing and Risk Contracting

Moderators: Evon Holladay, Professor, Executive in Residence, Analytics, Denver University; former Vice President, Enterprise Intelligence, Catholic Health Initiatives
Joel Reich, M.D., Chief Medical Officer, Medical Affairs, Eastern Connecticut Health Network
Bruno Nardone, Vice President, Health Information Technology Practice, Health Advances
Juliana Hart, Director, Provider Solutions, Verisk Health

TABLE 6: Business Intelligence (BI) and Healthcare Analytics: Making Information Timely, Consumable and Impactful

Moderators: Dipti Patel-Misra, Ph.D, Chief Data and Analytics Officer, CEP MedAmerica
Dov Marocco, Chief Innovation and Improvement Officer, Santa Clara Valley Health and Hospital System
James Colbert, MD, Senior Medical Director, Population Health, Verisk Health

"There are many conference venues out there...but precious few where you can be part of the conversation about where the health care system is going. The **Medical Informatics World** agenda offers a rich mix of presentations, panels, small group roundtables, and coffee chats that enable discussion among leaders and rising stars from health care, biotech, and pharma that touch on virtually all aspects of health care delivery and policy, informatics, and evolving technologies."

- Chief Medical Officer, Eastern Connecticut Health Network



See videos and photos
from last year's event

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CHI's Intro-Net offers you the opportunity to set up meetings with selected attendees before, during and after this conference, allowing you to connect to the key people that you want to meet. This online system was designed with your privacy in mind and is only available to registered session attendees of this event.

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Value-Based Delivery Models and
Cross-Industry Data Collaboration

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Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

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Healthcare Datasets and Systems

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Hotel & Travel Information

Past Participants

Registration Information

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Value-Based Delivery Models and Cross-Industry Data Collaboration

Integrating Data Analysis to Manage Costs and Improve Outcomes in the Health Care Ecosystem

The shift away from fee-for-service toward value-based care, bundled payments and ACOs is the new reality. As healthcare information exchange amongst all players across the healthcare continuum becomes the key driver of value, there is an overwhelming need for collaboration—from provider to payer to pharma to lab to EMR vendors to pharmacy—on data collection, exchange and analysis. Data collaboration is essential for lowering costs and improving clinical outcomes and ultimately achieving the Triple Aim. Cambridge Healthtech Institute and Clinical Informatics News' 4th Annual **Value-Based Delivery Models and Cross-Industry Data Collaboration**, taking place April 4-5, 2016 at the Seaport World Trade Center in Boston, MA, will bring together executives and thought leaders from the provider, payer, pharma and academic communities for engaging, innovative discussions.

MONDAY, APRIL 4

7:00 am Registration and Morning Coffee

KEYNOTE SESSION: OBTAINING INSIGHTS AND IMPROVING OUTCOMES WITH IT INNOVATION

See Page 3 for full details.

10:10 Coffee Break in the Exhibit Hall with Poster Viewing

HEALTHCARE OUTCOMES AND COST: SHIFTING TO VALUE AND RISK SHARING WITH DISRUPTIVE ANALYTICS

10:55 Chairperson's Remarks

Evon Holladay, Professor, Executive in Residence, Analytics, Denver University; former Vice President, Enterprise Intelligence, Catholic Health Initiatives

11:00 Leap Before You Look: Fee-for-Service to Value-Based Purchasing

Joel Reich, M.D., CMO, Medical Affairs, Eastern Connecticut Health Network

What is the shape of the curve from FFS to Shared Savings to real risk? How does risk contracting improve quality? What are the types of risk: Commercial Insurance Shared Savings; Medicare Shared Savings (MSSP); Medicare Advantage; Medicaid Shared Savings. If we tried this once before in the 90's why would it work now? Matching health information technology with care management/coordination. What is the infrastructure cost? What data do we need to succeed?

11:30 The Role of Specialty Medical Societies in Facilitating Data Collaboration and the Move to Value-based Delivery Models

Paul Pomerantz, Chief Executive Officer, American Society of Anesthesiologists (ASA)

As the industry moves to increasingly adopt Value-based delivery models, Specialty Medical Societies are taking a key role in defining measures of quality and value for their specialty and leading the charge in establishing clinical data registries that can foster data collaboration, support quality improvement initiatives and enable regulatory reporting to CMS. This talk focuses on the work the ASA has done in establishing the industry-leading NACOR registry and their efforts to support members in the transition to Value-based delivery models. Paul's talk covers critical success factors, key pitfalls to avoid while standing up a data registry and his vision for the role of NACOR in supporting their members in future where reimbursement is primarily value-based.

12:00 pm Disruptive Analytics Part II: The Struggle with the Truth

Steve Allegretto, Vice President, Strategic Analytics/Financial Planning, Yale New Haven Health System

The Healthcare Outcomes and Cost Story is being told by many organizations outside of providers. But organizations struggle with the truth. What do we do well and where do we need to improve? How do we use integrated EMR data, cost accounting data and patient outcomes data to tell our story? And as we tell our story how do we see ourselves improving as we try to identify, predict and provide transparency relating to specific patient outcomes and costs? This proposal will demonstrate a multi-year journey of partnership and collaboration between clinicians and finance as we celebrate what we do well while being honest with ourselves on areas of improvement.

12:30 Sponsored Presentation (Opportunity Available)

12:45 Luncheon Presentation (Sponsorship Opportunity Available) or Lunch on Your Own

1:30 Session Break

USING DATA BEYOND MEDICAL CARE TO IMPROVE POPULATION HEALTH AND MANAGE HEALTH ASSETS

2:05 Chairperson's Remarks

Liz Rubin, Senior Director, Analytics, Horizon Blue Cross Blue Shield of New Jersey

2:10 Is it Time to Look at Health Assets Across the Community? Mapping Populations to Understand Access and Manage Chronic Disease

Evon Holladay, Professor, Executive in Residence, Analytics, Denver University; former Vice President, Enterprise Intelligence, Catholic Health Initiatives

Learn how community leaders from healthcare, civic and businesses are coming together to map their assets - health care and health maintenance. It will enable leaders to answer tough questions about: Health Insurance Access (map populations to provider based on insurance coverage); and Chronic Disease Management (map populations to medical and wellness services). This presentation will share a real world problem solving approach to using data beyond medical care to improve population health and to identifying a 'common resource pool'.



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Cover

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Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

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Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

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Healthcare Datasets and Systems

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Hotel & Travel Information

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Registration Information

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Integrating Data Analysis to Manage Costs and Improve Outcomes in the Health Care Ecosystem

2:40 Efficiency Networks: Linking the Doctor and Hospital

Simon Henderson, Healthcare Actuary, Risk Solutions, Metropolitan Health

We have developed a model to assess the efficiency gains that can be achieved by linking the performance and clinical metrics of a provider and associated hospital to ensure cost saving and good outcomes for the patient. This results in savings to the funder. Three main aspects of the behavior of the provider are taken into account which includes their admission practices, costs and outcomes. The audience will see the considerations and wins and fails that we have experienced in the development and implementation of the modeling.

3:10 Do Your Customers Know Your Data Better?

Larry Pickett, Vice President & Chief Information Officer, Purdue Pharma L.P.

Imagine a future where you are negotiating managed care contracts and you are at a disadvantage because your customers know more about your data than you know. This future is closer than you might expect due to the explosion of data at the intersection of healthcare and technology. Pharma companies are going to have to become more knowledgeable about big data and data science in order to compete in the future. This involves creating a data strategy that includes data stewardship, data governance, technology and talent. This session will describe how one pharma company has created a data strategy to address future challenges.

3:40 Refreshment Break in the Exhibit Hall with Poster Viewing

INTERACTIVE BREAKOUT DISCUSSION GROUPS

4:10 Find Your Table and Meet Your Moderators: Interactive Breakout Discussion Groups

(See Page 4 for details.)

5:10 Welcome Reception in the Exhibit Hall with Poster Viewing

6:10 Close of Day

6:15 - 8:45 DINNER WORKSHOP*

W1: Root Cause Analysis in Healthcare Informatics and Analytics

*(*Separate registration required; see page 4 for details.)*

TUESDAY, APRIL 5

7:30 am Morning Coffee

ANALYTICAL APPROACHES TO COST TREND MONITORING AND COST CONTAINMENT

8:05 Chairperson's Remarks

Blackford Middleton, M.D., Chairman of the Board of Directors, AMIA; Chief Informatics & Innovation Officer, Apervita, Inc.

8:15 Establishing Comprehensive Best Practice Initiatives within Hospitals Combined with the Effective Costing of Clinical Pathways

Henry Glennie, M.D., CMO and Senior Medical Advisor, Business Intelligence, Medilink Australia

Hospitals often have difficulty getting their clinicians to combine best practice pathways with accurate costing information to provide statistically valid models so that every clinician in each department can be benchmarked against his/her colleagues in terms of quality of care and resource utilization. This case study will focus on a system and approach used for accurate costing of episodes involved in patient health care within participating hospitals over defined time periods. The goal is to ensure resource utilization does not exceed the revenue from their various allocations and other income streams.

8:45 Case Study: Enhanced Personal Health Care: Putting the Consumer First by Empowering Providers

Patrick McIntyre, Senior Vice President, Health Care Analytics, Anthem, Inc.

This session will demonstrate the power of collaborating with providers around value-based models to drive change in health care delivery, and the potential for this collaboration to lead to more patient-centered care, lower cost and increased flexibility. Ensuring providers have the tools necessary to transform their practices, including flexible contract options to assume risk over time, can drive innovation, transformation and tangible change for the industry. The shift from volume to value is driving better alignment of financial and clinical incentives with enhancements in quality and outcomes.

9:15 Co-Presentation: Successful Management of Accountable Care Organizations

*James Colbert, MD, Senior Medical Director, Population Health, Verisk Health
Juliana Hart, BSN, MPH, Director Provider Solutions, Verisk Health*

The Affordable Care Act ushered in sweeping reforms that change how providers will be paid, how they are organized as a gateway to the healthcare system, and how care is ultimately delivered. With the increase of providers engaging in value based contracts and the recent announcement that HHS has set goals to expand new health care payment models, providers are building and refining their strategies to effectively engage with payers in new ways. With these innovative payment models comes the need to account for differences in illness burden to accurately assess appropriate cost and utilization and ensure fair payment is critical. Additionally, the success of provider organizations rests on their understanding the health risk and medical needs of the population and managing how they receive care.

9:45 Coffee Break in the Exhibit Hall with Poster Viewing

Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

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Healthcare Datasets and Systems

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Integrating Data Analysis to Manage Costs and Improve Outcomes in the Health Care Ecosystem

10:30 Big Bets on Value-Based Care: Building Confidence in Investments to Meet the Demands of an Evolving Market

Bruno Nardone, Vice President, Health Information Technology Practice, Health Advances

A lot is being invested on Value-Based Care (VBC) planning and readiness, but not all organizations need advanced capabilities to manage contracts today. By planning for maturing capabilities as the market matures, organizations can optimize resources for their most pressing needs, while laying a foundation for success in the future. With the hype around VBC, all stakeholders in healthcare need to be mindful of the opportunity cost of investments because it is easy to overextend finances and talent on capabilities that will not be needed in the near term.

11:00 Shifting to Value and Risk Sharing with Disruptive Analytics

Richard Popiel, M.D., MBA, Executive Vice President, Healthcare Services & CMO, Cambia Health Solutions & Regence Health Insurance Company

How are we as a healthcare system going to improve healthcare outcomes and reduce cost by shifting to value and risk sharing? This presentation will share some ideas on how disruptive analytics and analytical approaches to cost trend monitoring and containment can be part of the solution.

11:30 Luncheon Presentation (Sponsorship Opportunity Available) or Lunch on Your Own

12:15 pm Session Break

ACHIEVING VALUE-BASED CARE THROUGH INTEGRATED DATA AND ANALYSES Special Shared Session

12:55 Chairperson's Remarks

Joel Reich, M.D., CMO, Medical Affairs, Eastern Connecticut Health Network

1:00 Powering Collaborative and Value-Based Care through Integrated Data and Analyses

Liz Rubin, Senior Director, Analytics, Horizon Blue Cross Blue Shield of New Jersey

The transformation of health care delivery from fee-for-service to fee-for-value is well underway. Health care payers and providers are continuing to work collaboratively to achieve the triple aim: improving quality of care and outcomes, improving the health care experience for patients and reducing the total cost of care. Information exchange and advanced analytics are cornerstones to collaborative success and execution of these goals.

1:30 Connected Care: From New England to England

Larry Garber, M.D., Medical Director for Informatics, Reliant Medical Group

Reliant has created interfaces to automatically update their EHR with clinical information for patients wherever they receive care. This connected care has allowed Reliant to achieve high quality ratings and lower cost of care. The ability to convey actionable information for transitions of care and care coordination can help improve the quality, safety and efficiency of care. But patients don't just stay within their country. People traveling between Europe and the US alone account for over a half million emergency department visits each year. Learn about the Trillium Bridge project which showed that it is possible to transform medical summaries between the languages and formats of various countries.

2:00 Achieving Value with Health IT: Crossing the Chasm of Clinical Knowledge Engineering

Blackford Middleton, M.D., Chairman of the Board of Directors, AMIA; Chief Informatics & Innovation Officer, Apervita, Inc.

Why is it so hard to transform care with even the best health IT? Simply put: the chasm between published knowledge and clinical experience, and implemented knowledge artifacts in health IT is too wide for the average clinician or healthcare delivery organization to manage. This talk will describe current experience and future directions for both domestic and global sharing of knowledge and analytics to transform care. Attendees will learn the importance of clinical decision support and analytics in health IT at the point of care for decision-making, and the benefits of rapid knowledge engineering and sharing to achieve the value potential of health IT.

2:30 pm Closing Remarks

Join the Bio-IT World Community Plenary Keynote Session & Reception

4:00 – 5:00 Bio-IT World Plenary Keynote Presentation

Heidi L. Rehm, Ph.D., FACMG, Chief Laboratory Director, Laboratory for Molecular Medicine, Partners Healthcare Personalized Medicine; Clinical Director, Broad Institute Clinical Research Sequencing Platform; Associate Professor of Pathology, Brigham & Women's Hospital and Harvard Medical School

5:00–7:00 pm Networking Reception in the Bio-IT World Exhibit Hall

“Medical Informatics World is an energetic, thought-provoking event. Being in an exciting part of Boston is a bonus.”

- Co-Founder, Society for Participatory Medicine



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Engagement and Connected Health

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Modeling and Patient Stratification

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Coordinated Care, Patient Engagement and Connected Health

Delivering Care to Patients and Consumers in all Settings to Improve Outcomes

Growing use of remote monitoring, telemedicine and mobile technology platforms has made it possible to transform the delivery of care by engaging and empowering patients outside the traditional clinical setting. Engaging and empowering patients in their own care reduces costs and improves health outcomes. Cambridge Healthtech Institute and Clinical Informatics News' 4th Annual **Coordinated Care, Patient Engagement and Connected Health**, taking place April 4-5, 2016 at the Seaport World Trade Center in Boston, MA, will bring together thought leaders from the payer, provider, patient, technology development, POC Dx and vendor communities for cutting-edge discussions on the evolving patient empowerment and engagement movement and development and utilization of patient-centered tech to improve healthcare.

MONDAY, APRIL 4

7:00 am Registration and Morning Coffee

KEYNOTE SESSION: OBTAINING INSIGHTS AND IMPROVING OUTCOMES WITH IT INNOVATION

See Page 3 for full details.

10:10 Coffee Break in the Exhibit Hall with Poster Viewing

PATIENT-PROVIDER COLLABORATION, PATIENT- FAMILY ENGAGEMENT & COORDINATED CARE

10:55 Chairperson's Remarks

Milenko Tanasijevic, M.D., MBA, Vice Chair for Clinical Pathology, Director of Clinical Laboratories, Brigham and Women's Hospital and Dana Farber Cancer Institute

11:00 Patient and Family Engagement - Some Practical Solutions

David Muntz, Senior Vice President & CIO, GetWellNetwork

Patient and family engagement is often misunderstood, and often addressed with ineffective approaches. In this session, David Muntz will use his experiences in the private and public sector to discuss how to change the way we think and talk about partnering with patients and families. Patient centered care is not enough. Too often, we talk about the patient, but most of our efforts are really directed at providers. A wide range of real world practical tools for transforming your organization's mind set and culture will be delivered in an effort to improve outcomes for patients and families.

11:30 Innovation Beyond the Molecule: Digital Tools to Support Providers, Physicians and Patients

Naomi Fried, Ph.D., Digital Health and Innovation Leader; former Vice President, Medical Information, Innovation and External Partnerships, Biogen

Digital Health is changing the face of pharma and biotech. Learn what digital health is and about the opportunities and barriers are. Examine the future of digital health and the areas of greatest innovation needs.

12:00 pm Evidence in Action: Integrated Clinical Decision Support for Coordinated Chronic Healthcare

Albert Villarin, M.D., CMIO, Associate CIO, Director, Quality Analytics, Clinical Information Systems, Staten Island Univ Hospital-NSLIJ Healthcare System

The next step in healthcare IT beyond "real-time" analytics is moving beyond retrospection and into predictive modeling to identify and treat patients helping them to avoid chronic disease states. A system that can auto-identify and combine modality predictions can reduce risk to patients. This is a priority for healthcare and will also be tied to a financial incentive for those institutions that are focused on national patient safety concerns and quality measure protocols.

12:30 Sponsored Presentation (Opportunity Available)

12:45 Luncheon Presentation (Sponsorship Opportunity Available) or Lunch on Your Own

1:30 Session Break

CASE STUDIES IN DIGITAL HEALTH AND DECISION SUPPORT TO MONITOR AND MANAGE HEALTHCARE

2:05 Chairperson's Remarks

Seth Feuerstein, M.D., Chief Medical/Innovation Officer, Magellan Health; Center for Biomedical and Interventional Technology, Yale University

2:10 Co-Presentation: Electronic Prescribing of Controlled Substances - A Triple Benefit

*Marie Kozel, Director, Clinical Informatics, Nebraska Methodist Health System
Michele Higgins, Pharmacy Informatics Coordinator, Nebraska Methodist Health System*

Implementation of Electronic Prescribing of Controlled Substances (EPCS) is one electronic medical record (EMR) application that has a triple win; it benefits the patient, the provider and all other clinical staff. It is rare to find any other EMR application that benefits more than 1 or 2 of those groups. While there are multiple benefits, the legal and technical requirements to implement this functionality are quite complicated and provide challenges to most organizations. Being the first system to implement EPCS with our EMR vendor and being the first in our region to implement resulted in many recommendations for implementation as well as lessons learned to share.



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Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

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Coordinated Care, Patient Engagement and Connected Health

Delivering Care to Patients and Consumers in all Settings to Improve Outcomes

2:40 Digital Health Inspired Decision Support Eco-System to Monitor & Manage Chronic Patients at Primary Care Level

*Syed Sibte Raza Abidi, Ph.D., Professor, Computer Science and Medicine,
Director, Health Informatics, Dalhousie University*

We will present an innovative chronic disease management eco-system that provides coordinated, standardized, proactive and personalized monitoring and management of patients with chronic diseases at the primary care level. Our eco-system features the translation of clinical guidelines to computerized clinical decision support for primary care physicians and patient engagement through self-management strategies delivered through mobile devices.

3:10 Case Study: Steward Health Care Diagnoses Application Issues Using Wire Data

Sponsored by
 ExtraHop

*Adam Hanson, Senior Director, Enterprise Infrastructure
and Solutions Engineering, Information Technology, Steward Health Care
Terry Shaver, Technical Marketing Manager, Healthcare, ExtraHop Networks*

The Steward Health Care IT team manages over 200 different applications, including several for EHRs. Ensuring consistency of patient-centric applications and overall system performance is critical for both productivity and the quality of patient care. Learn how Steward improved their ability to quickly pinpoint the cause of the slowdown ensuring better application performance, improving revenues and reducing costs.

3:40 Refreshment Break in the Exhibit Hall with Poster Viewing

INTERACTIVE BREAKOUT DISCUSSION GROUPS

4:10 Find Your Table and Meet Your Moderators: Interactive Breakout Discussion Groups

(See Page 4 for details.)

5:10 Welcome Reception in the Exhibit Hall with Poster Viewing

6:10 Close of Day

6:15 - 8:45 DINNER WORKSHOP*

W1: Root Cause Analysis in Healthcare Informatics and Analytics

(*Separate registration required; see page 4 for details.)

TUESDAY, APRIL 5

7:30 am Morning Coffee

THE QUANTIFIED SELF, BEHAVIORAL EPIGENETICS AND THE PATIENT AS CONSUMER

8:05 Chairperson's Remarks

David Muntz, Senior Vice President & CIO, GetWellNetwork

8:15 Behavioral Epigenetics: Big Data and Little Data Coming Together in Chronic Disease

Bonnie Feldman, M.D., MBA, Chief Growth Officer, DrBonnie360

With the growth of the quantified-self movement, the rise of citizen science and the emergence of patient communities, an increasing number of people with chronic diseases are tracking their lives to better understand their symptoms, guide treatment and prevent acute episodes. Using predictive modeling, artificial intelligence, and machine learning algorithms we can track and create personal recommendations to improve patient compliance. Case studies in autoimmune disease include; Arivale, Jiyo, MyNutritionHealth, and Open Medicine Institute.

8:45 The Age of the Consumer: Adapting to a Rapidly Changing Healthcare Industry

Robin Gelburd, President, FAIR Health, Inc.

Gaining insight into how consumers choose health plans, select doctors, manage benefits, and choose venues for healthcare services can help medical practices, hospitals and other healthcare facilities, and health plans design effective strategies to inform consumer engagement and decision-making. This presentation will deliver results of national consumer healthcare surveys, provide a window into the nation's largest healthcare claims repository, and share analytics from a consumer engagement tool in order to reveal new trends in utilization and peel back the curtain on this new economic paradigm which places the consumer front and center.

9:15 Computerized Clinical Decision Support Toolkit for Laboratory Tests: The Brigham and Women's Hospital Experience

*Milenko Tanasijevic, M.D., MBA, Vice Chair Clinical Pathology, Director of Clinical
Lab, Brigham and Women's Hospital and Dana Farber Cancer Institute*

The lecture provides an overview of innovative CDS interventions developed by our group, including redundant test reminders, auto-alerting system for paging of critical values, appropriateness guidelines for frequently ordered tests, accurate timing of therapeutic drug levels and the newly implemented Positive Patient Identification System for blood draws embedded within the EPIC / eCARE system. The impact on optimized laboratory utilization, improvement in quality and care and patient safety will be discussed as well as the potential for future developments.

9:45 Coffee Break in the Exhibit Hall with Poster Viewing

10:30 Patient Care as Collaboration: Why Episodic Care Fails and How IT Can Maintain the Connection

*Daniel Sands, M.D., MPH, Assistant Clinical Professor of Medicine, Harvard
Medical School; Co-Founder, Society for Participatory Medicine*

How can we think differently about how we deliver healthcare? How can we connect with patients between visits and manage larger populations at lower costs? We know that patient and physician engagement creates better outcomes, but we have to embrace new models of patient-physician collaboration.

Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

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Coordinated Care, Patient Engagement and Connected Health

Delivering Care to Patients and Consumers in all Settings to Improve Outcomes

11:00 Co-Presentation: Healthcare Strategies to Enable Patient Empowerment and Engagement

Emil Chiauzzi, Ph.D., Research Director, PatientsLikeMe

Mikele Bunce, Ph.D., FACHE, Lead, Quality of Care, Genentech

Improving outcomes and managing value in healthcare are increasingly reliant on patient engagement and empowerment. PatientsLikeMe and Genentech jointly executed a study on the factors associated with patient empowerment and engagement in healthcare, across a cohort of 4000+ patients with serious and chronic medical conditions. This presentation will provide the audience with practical, patient-centered and objective data on the state of patient engagement and empowerment based on these results.

11:30 Luncheon Presentation (Sponsorship Opportunity Available) or Lunch on Your Own

12:15 pm Session Break

MANAGING POPULATIONS THROUGH INTEGRATED CARE COORDINATION AND PREDICTIVE ANALYTICS

Special Shared Session

12:55 Chairperson's Remarks

Adrian Zai, M.D., Clinical Director of Population Informatics, Laboratory of Computer Science, Massachusetts General Hospital

1:00 Achieving Success in a Capitated Pediatric Population through Integrated Care Coordination

Kimberly Conkol, RN, CCM, MSN, Director, Care Coordination, Partners for Kids, Nationwide Children's Hospital

Partners for Kids (PFK) holds the financial risk for 330,000 Medicaid children in Ohio. To achieve the triple aim of improving costs, experience and health, the organization entered into delegated relationships with managed care plans in which care coordination is provided on their behalf. This presentation will describe the informatics process, tools, and resources that resulted in decreases in emergency room visits, inpatient admissions and length of stay. Participants will learn about implementing a successful care coordination model combining process and technology to provide a high quality, integrated patient experience within an accountable care organization.

1:30 Improving Utilization and Care Coordination Using RealTime Predictive Analytics

Dev Culver, CEO, HealthInfoNet

Through the Maine Health Information Exchange, health systems, ACOs, Medicaid, and physician practices use real time predictive risk scores within their daily work flows to target high risk patients for proactive care management. The real time scores allow clinicians and care managers to start the post discharge care management as soon as the patient presents for care. Organizations have been successful in reducing unnecessary readmissions, improving the appropriateness of emergency room utilization, and proving better care coordination for the at risk population.

2:00 INTERACTIVE CAPSTONE PANEL: Leveraging Analytics to Create a Personalized Approach to Population Health: The Psychology of Patient Engagement

Moderator: Eric Glazer, MBA, CEO, Shared Purpose Connect; Host, Population Health Executive Roundtable; Board Member, Society for Participatory Medicine

When it comes to patient engagement population, health leaders often focus on clinical variables and predictors but ignore a human being's motivations for doing things. If organizations were able to leverage analytics to understand people's motivations more, they could then design appropriate engagement tactics to leverage this motivation and in turn improve outcomes of their population health initiatives. During our roundtable we will discuss approaches various organizations are taking, challenge traditional thinking and explore the potential impact you can make when properly combining great technology and psychology. Questions we will explore

- Why are most predictive models not as effective as they need to be?
- Which data sets have you used successfully to better understand patient behavior (psychology)?
- Which approaches have you deployed to better leverage the motivation of your patients?
- How are organizations taking lifestyle variables into consideration when measuring risk?
- What is example of how lifestyle based analytics is being out into practice?
- How long do patient engagement programs typically stay impactful?
- What are the different ways you are you measuring patient engagement?

2:30 pm Closing Remarks

Join the Bio-IT World Community Plenary Keynote Session & Reception

4:00 – 5:00 Bio-IT World Plenary Keynote Presentation

Heidi L. Rehm, Ph.D., FACMG, Chief Laboratory Director, Laboratory for Molecular Medicine, Partners Healthcare Personalized Medicine; Clinical Director, Broad Institute Clinical Research Sequencing Platform; Associate Professor of Pathology, Brigham & Women's Hospital and Harvard Medical School

5:00–7:00 pm Networking Reception in the Bio-IT World Exhibit Hall



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Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

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Population Health Management, Risk Modeling and Patient Stratification

Using Technology and Analytics to Predict Outcomes, Target High-Risk Populations and Improve Quality

With the growing availability of health data, healthcare delivery is moving beyond individual care to population health management. Using technology and analytics, population health management shifts care from immediate treatment to predictive and preventative care. Cambridge Healthtech Institute and Clinical Informatics News' 4th Annual **Population Health Management, Risk Modeling, and Patient Stratification** taking place April 4-5, 2016 at the Seaport World Trade Center in Boston, MA, will bring together thought leaders from the payer, provider, healthcare finance, analyst, technology platform and vendor communities for insightful discussions on implementing a population health management strategy.

MONDAY, APRIL 4

7:00 am Registration and Morning Coffee

KEYNOTE SESSION: OBTAINING INSIGHTS AND IMPROVING OUTCOMES WITH IT INNOVATION

See Page 3 for full details.

10:10 Coffee Break in the Exhibit Hall with Poster Viewing

POPULATION HEALTH MANAGEMENT: TURN DATA INTO A STRATEGIC ASSET

10:55 Chairperson's Remarks

Eric Glazer, MBA, CEO, Shared Purpose Connect; Host, Population Health Executive Roundtable; Board Member, Society for Participatory Medicine

11:00 Preparing to Thrive in Healthcare's Upcoming Information Era - Lessons Learned from the Frontline

Leonard D'Avolio, Ph.D., President, Co-Founder, Cyft; Director, Informatics, Ariadne Labs

The digitization of health records, low cost biological testing, and a growing demand for evidence-based practice will soon create a healthcare industry of haves and have nots. Those that are able to turn data into a strategic asset will thrive. Those unable to think beyond storage, security, and "meaningful use" will not. Practical lessons learned will be shared from a decade of applying cutting edge informatics in government, industry, non-profit, and in the developing world.

11:30 Population Health Management and Quality Improvement: Analytics from an At-Risk-Health System's Perspective

Gowtham Rao, M.D., Ph.D., Chief Medical Informatics Officer, BlueCross BlueShield of SC

ACOs and Integrated Delivery Networks (IDNs, IDSs) are at financial risk for achieving high value healthcare, where value is defined as the highest quality healthcare for a population of patients at the lowest possible cost. There is a spectrum of risk for these ACOs/IDNs when managing various populations and it is important for them to understand how to use data to better identify

these risks. If these organizations manage their populations well, they will come ahead financially (a win-win). The presentation will share some examples and share an approach to: 1) identify patterns, 2) create rules, 3) identify opportunities to educate providers, and 4) implement change.

12:00 pm Population Health Management, Risk Modeling and Patient Stratification

Henry Chung, M.D., Vice President, Chief Medical Officer, Montefiore Health System

This presentation will provide 5 steps to develop a successful population health management program, using real-world examples from a successful care management program. A unique approach was used in order to achieve a more "industrialized" approach to population health management, harnessing commoditized processes to create automated, data-driven, and scalable cross-team workflows that enabled the organization to refocus their efforts on the art and creativity of healthcare.

12:30 Clinical NLP to Support ACOs, Clinical Risk Monitoring and Population Health

Simon Beaulah, Director, Healthcare Strategy, Linguamatics

Sponsored by
 Linguamatics

As the ACOs model grows, it's more important to extract detailed patient information from free-text documents to provide the insights necessary for changing healthcare. Patient narratives, pathology and radiology reports are powerful because they communicate the uniqueness of each patient; NLP is therefore key to understanding patient- and population-level risk.

12:45 Luncheon Presentation: Stress Index and Population Health Management: Will the Integration of Medical/Rx Data & Socioeconomic Data Help in Identifying Hidden Pockets of Future Risk?

Ogi Asparouhov, Ph.D., Chief Data Scientist, Clinical Solutions, LexisNexis Risk Solutions

Sponsored by
 LexisNexis Risk Solutions | Healthcare

Life events certainly impact health outcomes. To prove that, LexisNexis® embarked on a journey to prove the value of integrating Medical/Rx claim-based data and Socio-economic (SE) in predicting the level of future stress and the impact of stress on adverse outcomes. This session will review the methodology leveraged to measure stress as well as exclusions, to identify socioeconomic data attributes with direct correlation to health outcomes, and ultimately the results of this integration in terms of improved predictive power related to identifying high risk members who have near-term future savings potential that cannot be captured by other standard industry predictions.



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Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

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Population Health Management, Risk Modeling and Patient Stratification

Using Technology and Analytics to Predict Outcomes, Target High-Risk Populations
and Improve Quality

1:30 Session Break

RISK MODELING AND PATIENT STRATIFICATION

2:05 Chairperson's Remarks

Leonard D'Avolio, Ph.D., President, Co-Founder, Cyft; Director, Informatics, Ariadne Labs

2:10 Patient Stratification: And Then What? Managing High Risk Populations

John Minichiello, MBA, Executive Director, Accountable Care Solutions, Steward Health Care Network

This talk will share practical provider experience in managing high risk populations, beginning with the initial risk stratification, to enrolling patients in care management programs, then ultimately measuring an ROI, including both metrics on staff processes and patient utilization outcomes. Populations include ACO, Medicare Advantage, Commercial, Bundled Payment and Employer sponsored plans. Attendees will understand: How to leverage risk stratification data; infrastructure to care manage high risk populations; metrics of measurement and ROI; what to look for in technology/systems; and methods of patient and provider engagement.

2:40 Precision Oncology in a Learning Healthcare System at the VA

Valmeek "Vick" Kudesia, M.D., Director, Clinical Informatics, Massachusetts Veterans Epidemiology Research and Information Center (MAVERIC), Boston VA Healthcare System

The Department of Veteran Affairs has recognized the need to balance patient-centered care with responsible creation of generalizable knowledge on safety and effectiveness of Precision Medicine treatments. The VISN 1 clinical network and MAVERIC have created a new Precision Medicine-focused rapid learning healthcare system program called the Precision Oncology Program (POP), with an initial focus on lung cancer. The VA POP is a Precision Medicine initiative at scale that incorporates many of the pieces of a "future" informatics solution for our Healthcare system. POP includes patient insights and engagement, population management, and discovery of new knowledge. The knowledge and data generated by the POP will be a unique, continually growing, and vertically integrated repository.

3:10 The Value of Adherence Prescriptive Analytics – Targeting Specific Behaviors and Avoiding the PDC Blind Spot

Craig Schilling, Pharm.D., Vice President, Patient Programs, Optum

Organizations that target the most "obvious" patients for their medication adherence programs are missing out on a huge cost saving opportunity. Surprisingly, focusing on members just above and just below the 80% PDC threshold omits a significant number of individuals who would benefit from intervention, and without intervention, end up costing the health plan significant health care dollars. Learn about advancements in predictive modeling and prescriptive analytics to efficiently improve quality measures of adherence.



Sponsored by

3:40 Refreshment Break in the Exhibit Hall with Poster Viewing

INTERACTIVE BREAKOUT DISCUSSION GROUPS

4:10 Find Your Table and Meet Your Moderators: Interactive Breakout Discussion Groups

(See Page 4 for details.)

5:10 Welcome Reception in the Exhibit Hall with Poster Viewing

6:10 Close of Day

6:15 - 8:45 pm DINNER WORKSHOP*

W1: Root Cause Analysis in Healthcare Informatics and Analytics

*(*Separate registration required; see page 4 for details.)*

TUESDAY, APRIL 5

7:30 am Morning Coffee

IDENTIFYING HIGH UTILIZERS TO MANAGE RISK AND IMPROVE QUALITY

8:05 Chairperson's Remarks

John Minichiello, MBA, Executive Director, Accountable Care Solutions, Steward Health Care Network

8:15 Co-Presentation: Population Health Management: Empowering the Patient and Improving Outcomes through Innovative Patient Engagement

Dipti Patel-Misra, Ph.D., Chief Data and Analytics Officer, CEP MedAmerica

Joshua Tamayo-Sarver, M.D., Ph.D., CMIO, CEP America

With recent changes in healthcare around improving costs, interventions are becoming more patient centric. What can we in healthcare leverage from other industries in terms of patient engagement? What works and what does not? How do you lower costs and improve outcomes, while improving patient satisfaction? Let's have a conversation around specific patient engagement data needs, models, and expected outcome.

8:45 Merging Data Across Systems to Identify High Utilizers and Impactful Interventions

Dov Marocco, Chief Innovation and Improvement Officer, Santa Clara Valley Health and Hospital System

The Santa Clara Valley Health and Hospital System uses an Epic-based data warehouse to merge records from multiple systems to identify patients most in need of care coordination or other transitional needs. As a result, we are able to identify the patients who use our system the most frequently, are most in

Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

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and Improve Quality

need of intervention, and identify patients “upstream” that could potentially become high utilizers by segmenting the population according to risk factors and intervening earlier.

9:15 Driving Insight into Patient Health Risks, Costs and Outcomes with Big Data Analytics

Sponsored by
 Knowledgegent

Matt Arellano, Managing Partner, Knowledgegent
Bill Reynolds, Healthcare Partner, Knowledgegent

The concepts of Population Health Management (PHM) have long been a goal of many healthcare organizations with the primary barrier being the necessary investment, data sharing and risk modeling that is necessary to delivery upon the vision. Given the introduction of new technology and risk sharing agreements with other organizations in the healthcare ecosystem, Provider groups now have the incentive to invest in the necessary capabilities to deliver upon PHM. Come explore the ways organizations are driving better disease specific risk scoring and other analytical opportunities to enhance the PHM process.

9:30 Behavioral Based Analytics: The Evolution of Risk Stratification and Patient Engagement in Population Health

*Dominique Morgan-Solomon, Morgan-Solomon Consulting; former Chief
Operating Officer, Steward Medical Group*

This session will challenge traditional predictive models and risk stratification approaches as the basis for population health programs. As the requirements and needs of patients, providers and health care delivery systems become more complex, analytic tools will have to become more specific in identifying behavioral, social and other non-bio/medical determinants of health as opportunities to better target patient populations to drive outcomes in a value based health care paradigm.

9:45 Coffee Break in the Exhibit Hall with Poster Viewing

10:30 The Foundational Approach to Population Health Analytics

Professor J. Bryan Bennett, MBA, Executive Director, Healthcare Center of Excellence

The shift from a fee for service business model to one based on population health requires healthcare organizations to not only understand the health of the patients in their portfolio but also, predict potential future health challenges. This presentation will help organizations understand the building blocks that must be in place to effectively compete using healthcare analytics. Guidelines for analytics implementation will be reviewed as well as presenting how it can be used to compete using healthcare analytics.

11:00 Population Health Strategy, Infrastructure, and Technology: Results at Partners Healthcare

*Adrian Zai, M.D., Clinical Director of Population Informatics, Laboratory of
Computer Science, Massachusetts General Hospital*

Dr. Adrian Zai will share his experience at Partners Healthcare implementing a successful Population Health Management strategy in Boston's Massachusetts General Hospital and Brigham and Women's Hospital. Dr. Zai will provide a general overview of technology strategies, infrastructures, and PHM results achieved at Partners Healthcare in 2014. Specifically, he will focus on the IT strategies and tools that were used in the PHM implementation including its demonstrated impact on outcomes. Topics covered will include 1) clinically relevant metrics, 2) areas of divergence of data, 3) centrally vs. federated implementations, and 4) key takeaways for successful change.

11:30 Luncheon Presentation (Sponsorship Opportunity Available) or Lunch on Your Own

12:15 pm Session Break

MANAGING POPULATIONS THROUGH INTEGRATED CARE COORDINATION AND PREDICTIVE ANALYTICS Special Shared Session

12:55 Chairperson's Remarks

*Adrian Zai, M.D., Clinical Director of Population Informatics, Laboratory of
Computer Science, Massachusetts General Hospital*

1:00 Achieving Success in a Capitated Pediatric Population through Integrated Care Coordination

*Kimberly Conkol, RN, CCM, MSN, Director, Care Coordination, Partners for Kids,
Nationwide Children's Hospital*

Partners for Kids (PFK) is a physician hospital organization and an affiliate of Nationwide Children's Hospital that holds the financial risk for 330,000 Medicaid children in Ohio. To achieve the triple aim of improving costs, experience and health, the organization entered into delegated relationships with managed care plans in which care coordination is provided on their behalf. This presentation will describe the informatics process, tools, and resources that resulted in decreases in emergency room visits, inpatient admissions and length of stay. Participants will learn about implementing a successful care coordination model combining process and technology to provide a high quality, integrated patient experience within an accountable care organization.



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Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

Click Here to
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Population Health Management, Risk Modeling and Patient Stratification

Using Technology and Analytics to Predict Outcomes, Target High-Risk Populations
and Improve Quality

1:30 Improving Utilization and Care Coordination Using Real Time Predictive Analytics

Dev Culver, CEO, HealthInfoNet

Through the Maine Health Information Exchange, health systems, ACOs, Medicaid, and physician practices use real time predictive risk scores within their daily work flows to target high risk patients for proactive care management. The real time scores allow clinicians and care managers to start the post discharge care management as soon as the patient presents for care. Organizations have been successful in reducing unnecessary readmissions, improving the appropriateness of emergency room utilization, and proving better care coordination for the at risk population.

2:00 INTERACTIVE CAPSTONE PANEL: Leveraging Analytics to Create a Personalized Approach to Population Health: The Psychology of Patient Engagement

*Eric Glazer, MBA, CEO, Shared Purpose Connect; Host, Population Health
Executive Roundtable; Board Member, Society for Participatory Medicine*

When it comes to patient engagement population health leaders often focus on clinical variables and predictors but ignore a human being's motivations for doing things. If organizations were able to leverage analytics to understand people's motivations more, they could then design appropriate engagement tactics to leverage this motivation and in turn improve outcomes of their population health initiatives. During our roundtable we will discuss approaches various organizations are taking, challenge traditional thinking and explore the potential impact you can make when properly combining great technology and psychology. Questions we will explore are:

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- How are organizations taking lifestyle variables into consideration when measuring risk?
- What is example of how lifestyle based analytics is being out into practice?
- How long do patient engagement programs typically stay impactful?
- What are the different ways you are you measuring patient engagement?

2:30 pm Closing Remarks

Join the Bio-IT World Community Plenary Keynote Session & Reception

4:00 – 5:00 Bio-IT World Plenary Keynote Presentation

*Heidi L. Rehm, Ph.D., FACMG, Chief Laboratory Director, Laboratory for
Molecular Medicine, Partners Healthcare Personalized Medicine; Clinical Director,
Broad Institute Clinical Research Sequencing Platform; Associate Professor of
Pathology, Brigham & Women's Hospital and Harvard Medical School*

5:00–7:00 pm Networking Reception in the Bio-IT World Exhibit Hall

Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

Sponsor & Exhibit Opportunities

Hotel & Travel Information

Past Participants

Registration Information

Click Here to
Register Online!

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Achieving Global Interoperability in Healthcare Datasets and Systems

Delivering Data-Driven Infrastructures to Support Clinical and Financial Transformation

There are great demands on today's Healthcare CIOs, CMIOs, CFOs, IT Heads, Network Managers, Medical Informaticists, System Architects, Development Managers and all members of the "interface team" involved in purchasing interface engines at a company to simultaneously plan for the future to ensure business continuity while also being asked to derive improvements from their current data and systems. In a world of multiple clinical and financial systems and limited resources, how do you transition from a siloed organization with siloed systems, from a single Hospital Information System or CDSS to Data-Driven Enterprise Architectures? How do you, at a practical level, achieve interoperability? Cambridge Healthtech Institute and Clinical Informatics News' 2nd Annual **Achieving Global Interoperability in Healthcare Datasets and Systems: Delivering Data-Driven Infrastructures to Support Clinical and Financial Transformation**, taking place April 4-5, 2016 at the Seaport World Trade Center in Boston, MA, will bring together CIOs, CMIOs, CFOs, IT Heads, Network Managers, Medical Informaticists, System Architects, Development Managers and all members of the "interface team" from providers, payers, integrated delivery networks (IDN) and integrated delivery systems (IDS) for key discussions on improving interoperability with improved systems and analytics.

MONDAY, APRIL 4

KEYNOTE SESSION: OBTAINING INSIGHTS AND IMPROVING OUTCOMES WITH IT INNOVATION

See Page 3 for full details.

10:10 Coffee Break in the Exhibit Hall with Poster Viewing

REAL-WORLD EFFORTS TO TRANSFORM INFORMATION EXCHANGE AND HEALTHCARE DELIVERY

10:55 Chairperson's Remarks

Cara Babachicos, CIO, Community Hospitals and Post Acute Care, Partners Healthcare

11:00 CO-PRESENTATION: The Healthcare Services Platform Consortium: An Opportunity to Foster Truly Interoperable Health Care Applications

Stanley Huff, M.D., Chief Medical Informatics Officer, Intermountain Information Systems

Oscar Diaz, CEO, Healthcare Services Platform Consortium (HSPC)

After more than a year of planning, the Health Services Platform Consortium (HSPC) has been incorporated as a non-profit entity consisting of providers and vendors that are dedicated to fostering the development and use of interoperable applications in health care. The primary strategy is to establish a middle tier of standards-based services for data access, privacy and role-based authentication of users along with other capabilities to support business process management and decision support. The HSPC has adopted the HL7 FHIR model for data access. It enables the EHR integration of SMART apps and also applications with additional functionality enabled by the expanded range of middle-tier services to be available.

11:45 CO-PRESENTATION: Accelerating Vendor Neutral Interoperability to Transform Information Exchange and Healthcare Delivery: HL7, FHIR, Argonaut and Beyond

Charles Jaffe, M.D., Ph.D., CEO, HL7

Jon White, M.D., Deputy National Coordinator for Health Information Technology, Office of the National Coordinator for Health Information Technology (ONC)

In an effort to accelerate true interoperability stakeholders from providers, payers, government, the EHR and health IT vendor community must work together in a vendor neutral approach on realistic approaches to improve the delivery of healthcare and the access of information. Argonaut represents a "code sprint" aimed at delivering something that could prove the utility of the new HL7 Fast Healthcare Interoperability Resources (FHIR) technology that aims to make sharing healthcare data more like sharing data on the Internet.

12:45 Luncheon Presentation (*Sponsorship Opportunity Available*) or Lunch on Your Own

1:30 Session Break

INNOVATION AND INVESTMENT TO ACHIEVE GLOBAL INTEROPERABILITY IN HEALTHCARE

2:05 Chairperson's Remarks

Matthew Burton, M.D., Lead Clinical Informatician, Office of Information and Knowledge Management, Mayo Clinic



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Cover

Conference-at-a-Glance

Keynote Sessions

Dinner Workshop &
Discussion Groups

Value-Based Delivery Models and
Cross-Industry Data Collaboration

Coordinated Care, Patient
Engagement and Connected Health

Population Health Management, Risk
Modeling and Patient Stratification

Achieving Global Interoperability in
Healthcare Datasets and Systems

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Achieving Global Interoperability in Healthcare Datasets and Systems

Delivering Data-Driven Infrastructures to Support Clinical and Financial Transformation

2:10 EU-US Interoperability: Practical Learning from Recent Experience

Jamie Ferguson, Vice President, Health IT Strategy & Policy, Kaiser Permanente

What can work today, what remains to be solved, and what next steps are planned for transatlantic interoperability? In a recent EC research project multiple European health systems proved they can exchange useful patient summaries with US providers through the eHealth exchange network which serves 40% of US hospitals and over 13,000 medical groups today. This presentation will focus on the practical experience of Kaiser Permanente as a US provider participant in this exchange. Real world semantic and technical interoperability with current systems on a multinational basis may be more achievable than many people recognize.

2:40 Combining Healthcare Applications with the Economical Benefits of a Cloud-based Archive

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Tony Barbagallo, Vice President, Product Marketing, Caringo

As your health care organization grows, managing your data becomes more and more of a concern. How can you meet the needs of patients, comply with industry regulations such as HIPAA, and keep up with the rapid growth of data? We will describe how you can consolidate all data on one public/private or hybrid cloud storage solution while continuing to run your existing applications.

2:55 Sponsored Presentation (Opportunity Available)

3:10 INTERACTIVE PANEL: The Current State and Future of Healthcare Information Exchange and Interoperability: Action Items for Today and Tomorrow

Moderator: Nick van Terheyden, M.D., Chief Medical Officer, Dell

Panelists: Stanley Huff, M.D., Chief Medical Informatics Officer, Intermountain Information Systems

Charles Jaffe, M.D., Ph.D., CEO, HL7

Cara Babachicos, CIO, Community Hospitals and Post Acute Care, Partners Healthcare
Jamie Ferguson, Vice President, Health IT Strategy & Policy, Kaiser Permanente

In today's rapidly changing healthcare landscape, it is more important than ever for information to be shared in a very timely manner; both patient and process centric. The investment in interoperability provided by ARRA/HITECH has only been able to go so far in the establishment of the requirements/structure for the information to be appropriately and securely shared. In the absence of one established method and/or process, several approaches are moving forward to fill the void; EMRs, FHIR, HIEs, etc. Do these approaches, compete or complement each other? Topics to be discussed include: How do you believe that ARRA/HITECH/MU has helped or hindered interoperability; do you believe there is one method that we should consider for secure data sharing or is there room for different approaches; do you believe that the secure sharing of patient records can be legislated into being or is this something that should be accomplished in concert with the private sector?

3:40 Refreshment Break in the Exhibit Hall with Poster Viewing

INTERACTIVE BREAKOUT DISCUSSION GROUPS

4:10 Find Your Table and Meet Your Moderators: Interactive

Breakout Discussion Groups

(See Page 4 for details.)

5:10 Welcome Reception in the Exhibit Hall with Poster Viewing

6:10 Close of Day

6:15 - 8:45 pm DINNER WORKSHOP*

W1: Root Cause Analysis in Healthcare Informatics and Analytics

*(*Separate registration required; see page 4 for details.)*

TUESDAY, APRIL 5

7:30 am Morning Coffee

FLEXIBLE APPROACHES TO SOURCING HEALTH INFORMATION TECHNOLOGY TOOLS

8:05 Chairperson's Remarks

Oscar Diaz, CEO, Healthcare Services Platform Consortium (HSPC)

8:15 Driving Innovation in Health Systems through an Apps-Based Information Economy

Kenneth Mandl, M.D., Professor and Chair, Biomedical Informatics and Population Health, Harvard Medical School; Director, Computational Health Informatics Program (CHIP), Boston Children's Hospital

This presentation will discuss the smarthealthit.org project – essentially an “App Store” for health. SMART apps can be added to or deleted from the electronic medical record as easily as iPhone apps can be downloaded or deleted. The goal of SMART is audacious and can be expressed concisely: an innovative app developer can write an app once, and expect that it will run anywhere in the health care system.

8:45 Case Study: FHIRing Up Your Data: A Key Step Toward Seamless Interoperability

Viet Nguyen, M.D., Chief Medical Information Officer, Health and Life Sciences, Systems Made Simple, a Lockheed Martin Company

Fast Healthcare Interoperability Resources (FHIR) is a catalyst for transforming and accelerating healthcare data interoperability, building on existing standards to streamline data exchange and incorporate diverse information into a single clinical view. This presentation will detail the framework's value, nuances and challenges, and offer real-world examples of how FHIR is taking data sharing to the next level. Any organization looking to participate in population health management and care coordination must have a good understanding of the standards framework in order to enable smooth data exchange—an essential element in realizing improved cross-continuum care.



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Cover

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Delivering Data-Driven Infrastructures to Support Clinical and Financial Transformation

9:00 Healthcare Disruption: Market and Regulatory Forces Driving Change

Nick van Terheyden, M.D., Chief Medical Officer, Dell

The In 2005, Blockbuster dominated video rentals. By 2010, the company filed for bankruptcy, its business model disrupted by Netflix and Redbox and other virtual markets that offered responsive service and convenience. Healthcare faces a similar turning point, in which the delivery of healthcare is radically changing. With the emergence of disruptive technologies like telehealth and retail express clinics, consumers want a different healthcare experience, one in which they have greater control, engagement and convenience. This talk will discuss the cultural, market and regulatory forces that are driving these changes, and how we are actively enhancing development, implementation and adopting novel technologies, services, and applications that will revolutionize information-driven care, that results in improved patient outcomes and overall cost savings worldwide.

9:30 Sponsored Presentation (*Opportunity Available*)

9:45 Coffee Break in the Exhibit Hall with Poster Viewing

INNOVATION IN DATA INTEGRATION AND EXCHANGE

10:30 Emerging Trends and Efforts for Integrating Latest Best Practice Knowledge into Workflow: Innovation in Clinical Informatics at Mayo Clinic

Matthew Burton, M.D., Lead Clinical Informatician, Office of Information and Knowledge Management, Mayo Clinic

11:00 Global Health and Life Science Innovation Ecosystems for Multi-National Virtual Research Teams Powered by Open Source-Open Science Technology Frameworks

Kimberly Harding, President, Monarch Innovation Partners

Chronic technology and business process disparities between High, Low Middle, and Low Income (HIC, LMIC, LIC) research collaborators, directly prevents the growth of sustainable partnerships in Global Health innovation for infectious and rare diseases for high risk population groups. There is a need for an Open Source-Open Science Architecture Framework to bridge this divide. We are proposing such a framework to support clinical innovation efforts.

11:30 Luncheon Presentation (*Sponsorship Opportunity Available*) or
Lunch on Own

12:15 pm Session Break

ACHIEVING VALUE-BASED CARE THROUGH INTEGRATED DATA AND ANALYSES Special Shared Session

12:55 Chairperson's Remarks

Joel Reich, M.D., CMO, Medical Affairs, Eastern Connecticut Health Network

1:00 Powering Collaborative and Value-Based Care through Integrated Data and Analyses

Liz Rubin, Senior Director, Analytics, Horizon Blue Cross Blue Shield of New Jersey

The transformation of health care delivery from fee-for-service to fee-for-value is well underway. Health care payers and providers are continuing to work collaboratively to achieve the triple aim: improving quality of care and outcomes, improving the health care experience for patients, and reducing the total cost of care. Information exchange and advanced analytics are cornerstones to collaborative success and execution of these goals.

1:30 Connected Care: From New England to England

Larry Garber, M.D., Medical Director for Informatics, Reliant Medical Group

Reliant has created interfaces to automatically update their EHR with clinical information for patients wherever they receive care. This connected care has allowed Reliant to achieve high quality ratings and lower cost of care. The ability to convey actionable information for transitions of care and care coordination can help improve the quality, safety and efficiency of care. But patients don't just stay within their country. Learn about the Trillium Bridge project which showed that it is possible to transform medical summaries between the languages and formats of various countries.

2:00 Achieving Value with Health IT: Crossing the Chasm of Clinical Knowledge Engineering

Blackford Middleton, M.D., Chairman of the Board of Directors, AMIA; Chief Informatics & Innovation Officer, Apervita, Inc.

Why is it so hard to transform care with even the best health IT? Simply put: the chasm between published knowledge and clinical experience, and implemented knowledge artifacts in health IT is too wide for the average clinician or healthcare delivery organization to manage. This talk will describe current experience and future directions for both domestic and global sharing of knowledge and analytics to transform care. Attendees will learn the importance of clinical decision support and analytics in health IT at the point of care for decision-making, and the benefits of rapid knowledge engineering and sharing to achieve the value potential of health IT.

2:30 pm Closing Remarks

Join the Bio-IT World Community Plenary Keynote Session & Reception

4:00 – 5:00 Bio-IT World Plenary Keynote Presentation

Heidi L. Rehm, Ph.D., FACMG, Chief Laboratory Director, Laboratory for Molecular Medicine, Partners Healthcare Personalized Medicine; Clinical Director, Broad Institute Clinical Research Sequencing Platform; Associate Professor of Pathology, Brigham & Women's Hospital and Harvard Medical School

5:00–7:00 pm Networking Reception in the Bio-IT World Exhibit Hall



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Cover

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Engagement and Connected Health

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Development Manager
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kfitzgerald@healthtech.com

Companies L-Z



Terry Manning
Business
Development Manager
781-972-1349

tmanning@healthtech.com

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200 Seaport Boulevard
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Conference Hotel:

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Discounted Room Rate: \$269 s/d

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Cover

Conference-at-a-Glance

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Dinner Workshop &
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April 4-5, 2016

Track 1: Value-Based Delivery Models and Cross-Industry Data Collaboration

Track 2: Coordinated Care, Patient Engagement and Connected Health

Track 3: Population Health Management, Risk Modeling and Patient Stratification

Track 4: Achieving Global Interoperability in Healthcare Datasets and Systems

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April 4, 2016 | 6:15-8:45 pm

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