

22ND ANNUAL
HEALTH LAW CONFERENCE



April 7*, 8 - 9, 2010

*Optional Wednesday Evening Sessions

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WEDNESDAY EVENING, APRIL 7, 2010

*Optional Concurrent Sessions

Please select on registration form (additional fee).
Each session includes a 15-minute break.

6:00 p.m. Registration Opens

HEALTH LAW PRIMER

7:00 p.m. 2.00 hrs

Health Law Primer

An introduction to basic health law, with emphasis on fraud abuse, managed health care, and Medicare reimbursement issues.

Marie C. Berliner, Lambeth & Berliner, Austin, TX
Kenneth J. Kramer, Texas Health Resources,
Arlington, TX

IN-HOUSE COUNSEL ISSUES

7:00 p.m. 2.00 hrs including .50 hr ethics

In-House Counsel Issues

This session is limited to in-house counsel and is intended to include active discussion between panelists and participants. Topics covered include the impact of federal health care reform, the creation and use of Accountable Care Organizations, the operational impact of new privacy requirements, current medical staff and credentialing issues, and current litigation-related issues.

Moderator:

Michael J. Regier, VHA Inc., Irving, TX

Panelists:

Timothy FitzGerald, Baylor Health Care System,
Dallas, TX

Stephen Gregory Wohleb, Seton Family of Hospitals,
Austin, TX

9:15 p.m. Adjourn

THURSDAY MORNING, APRIL 8, 2010

Presiding Officer:

**Hon. Jimmy Carroll, Scott & White Clinic,
Temple, TX**

7:45 a.m. Registration Opens

Includes continental breakfast.

8:35 a.m. Welcoming Remarks

Jerry A. Bell Jr., Fulbright & Jaworski L.L.P., Austin, TX

8:45 a.m. 1.00 hr including .25 hr ethics

Year-in-Review

An overview of important health care developments in the past year, including regulatory changes, politics and policy initiatives.

Beth Schermer, Coppersmith Schermer &
Brockelman PLC, Phoenix, AZ

9:45 a.m. .75 hr

Health Care Reform, Part I

An overview of the major elements of federal health care reform legislation, including insurance market reform, delivery system reform, Medicare changes, quality initiatives and cost-containment initiatives. The discussion also covers the recent history of the efforts by Congress to act on these matters, alternative proposals that may gain additional traction, the political and market forces at play, and projected timing.

Glen A. Reed, King & Spalding LLP, Atlanta, GA

10:30 a.m. Break

10:45 a.m. .75 hr

Health Care Reform, Part II: Delivery System Reform and the Market Response—How Will It Affect Providers?

This follow-up session focuses further on the specific delivery system reforms likely to be enacted through legislation or regulation, including the advent of the Accountable Care Organization, bundled payments, creation of medical homes, electronic medical record connectivity, GME residency changes, and specific grants and demonstration projects directed at bending the cost curve. How will new payment systems and incentive bonus payments change the manner in which hospitals and physicians interact or structure their arrangements? What laws in Texas may pose impediments to change?

Susan Feigin Harris, Baker & Hostetler LLP,
Houston, TX

Debbi M. Johnstone, Fulbright & Jaworski L.L.P.,
Houston, TX

11:30 a.m. .75 hr ethics

Conflicts about Conflicts

Health care lawyers often represent multiple clients or have matters adverse to former clients. The Supreme Court has posted proposed new rules for comment including new conflict rules. A discussion of what the new rules try to fix and what the dangers are in the old rules.

Thomas H. Watkins, Brown McCarroll, L.L.P., Austin, TX

THURSDAY AFTERNOON

Optional Luncheon Table Topics

Discussion groups with conference faculty and registrants. See registration form to select a Table Topic and purchase a ticket for lunch.

12:30 p.m.

TOPIC A:

Compliance and Regulatory Concerns

TOPIC B:

Health Care Reform Concerns

TOPIC C:

Medical Staff Problems

TOPIC D:

Physician-Hospital Transactions

1:15 p.m. Break

Concurrent Break-Out Tracks

TRACK 1

Presiding Officer:

**Mary M. Bearden, Brown & Fortunato, P.C.,
Amarillo, TX**

1:30 p.m. .75 hr

Practice Tips from the Trenches: Operations and Credentialing

In-house counsel identifies and discusses key provisions in documents that address troublesome operational and credentialing issues for health care entities and practitioners. Important sections from contracts, policies and procedures, bylaws, and forms will be distributed to the audience. The laws relevant to the various documents are also discussed, along with tips for compliance and smooth operations. The handouts may be adapted and used by audience participants.

Moderator:

Mary M. Bearden, Brown & Fortunato, P.C., Amarillo, TX

Panelists:

Rosemaria Levinsky, Hendrick Medical Center,
Abilene, TX

Frankie S. Louis, Texas Children's Hospital, Legal
Department, Houston, TX

2:15 p.m. .75 hr

Recession Special: Two Hot Topics for the Price of One—Managed Care and ZPIC Audits

Why so many flips, flops and other potentially fraudulent activities in Texas? Your ZPIC wants to know. CMS awarded the ZPIC contract for Zone 4 (Colorado, New Mexico, Oklahoma, Texas) to Health Integrity, LLC, on February 1, 2009, and it has not taken them long to get down to business. A number of providers in Texas have already been hit with ZPIC audits on zero-day stays and other billing issues—make sure your organization is prepared if the ZPIC comes knocking! As we await health care reform from Washington, DC, it is safe to assume that managed care will continue to play a large role in the marketplace. An update on managed care issues facing Texas providers—provider tiering, transparency, prompt pay, and developments in out-of-network reimbursement; and managed care issues tied to national health care reform, including payment reform and quality initiatives.

Elizabeth N. Rogers, Vinson & Elkins LLP, Austin, TX
Leah Beth Stewart, Vinson & Elkins LLP, Austin, TX

3:00 p.m. .50 hr

Federally Qualified Health Centers (FQHCs)

As one of the proposed solutions to meeting community health care needs, Federally Qualified Health Centers (FQHCs) have become more and more entrepreneurial by taking advantage of their special legal status in expanding relationships with hospitals and other health care providers. This session addresses the unique attributes of FQHCs and how they are being leveraged through innovative affiliations and other arrangements with hospitals to enhance access for low-income patients to needed health care services.

Sheryl T. Dacso, Brown McCarroll, L.L.P., Houston, TX
Kathy L. Poppitt, Cox Smith Mathews Incorporated, Austin, TX

3:30 p.m. Break – Return to General Sessions

TRACK 2

Presiding Officer:

Susan Feigin Harris, Baker & Hostetler LLP, Houston, TX

1:30 p.m. .75 hr

Medicaid Issues

Acute Care Medicaid in Texas now covers more than 2 million children. Federal health care reform will expand Medicaid to many low-income adults. What are the key implementation issues and challenges in Texas?

Charles Bell, Health and Human Services Commission, Austin, TX
Bryan Sperry, Children's Hospital Association of Texas (CHAT), Austin, TX

2:15 p.m. .75 hr ethics

Protecting 'Protected Health Information': Ethical and Legal Duties of Health Lawyers

A discussion of the ethical and legal duties that apply to lawyers, including health lawyers, who obtain protected health information (PHI) from their covered entity and other health industry clients. Special attention is given to the new duties imposed on lawyers by the Health Information Technology for Economic and Clinical Health Act (HITECH) provisions within the American Recovery and Reinvestment Act (ARRA), as well as HITECH's new implementing regulations.

Stacey Ann Tovino, Drake University Law School, Des Moines, IA

3:00 p.m. .50 hr

Tax-Exemption Issues

An update of current issues faced by tax-exempt health care providers, including the evolving community benefit test and standards for exemption. Developments on the Form 990 reporting front are also addressed.

R. Todd Greenwalt, Vinson & Elkins LLP, Houston, TX

3:30 p.m. Break – Return to General Sessions

Presiding Officer:

Hon. Jimmy Carroll, Scott & White Clinic, Temple, TX

3:45 p.m. .75 hr

Integration: Perhaps Not What the Doctor Ordered!

The health care industry is integrating, with doctor groups consolidating, doctors affiliating with hospitals, and hospitals building large medical groups. This session covers the various structures that are being utilized to integrate, from co-management agreements to physician leasing to physician employment, and the legal problems that are generated by these changes. The session also considers what alternatives there may be for physicians who want to retain their independence. We are witnessing the entire reorganization of an industry and this session helps clarify how this will impact your practice.

David W. Hilgers, Brown McCarroll, L.L.P., Austin, TX
Sidney S. Welch, Arnall Golden Gregory LLP, Atlanta, GA

4:30 p.m. 1.00 hr

All Eyes on Quality: The Increasing Role of Quality in Federal Program Payment and Enforcement Policies

Historically, Medicare payment policy was driven by the costs of services provided, or quantity of health care services. This session addresses the shifting emphasis in Medicare payment policy toward incorporating quality measures into the amount of payment for health care services. In addition, the session addresses the focus of federal enforcement authorities on quality-related issues.

Gregory Nolan Etzel, Baker & Hostetler LLP, Houston, TX

5:30 p.m. Adjourn to Sponsored Reception

FRIDAY MORNING, APRIL 9, 2010

Presiding Officer:

Jerry A. Bell Jr., Fulbright & Jaworski L.L.P., Austin, TX

8:00 a.m. Conference Room Opens

Includes continental breakfast.

8:45 a.m. .75 hr

Operational Impact of Significant Cases

A discussion of key legal developments and significant cases affecting health care operations. The session also covers credentialing and issues impacting hospitals and health care providers. Written materials contain a comprehensive review of recent decisions affecting the liabilities and duties of health care providers.

Yvonne K. Puig, Fulbright & Jaworski L.L.P., Austin, TX

9:30 a.m. 1.00 hr including .25 hr ethics

Stark and Fraud and Abuse Hot Spots: Self-Reporting, Disclosure and Compliance Issues

One of the critical issues facing health care providers is advising clients on Stark and Fraud and Abuse compliance concerns, when and how to self-report noncompliance and the implications of the new federal False Claims Act amendments. The session reviews Stark and Fraud and Abuse compliance issues, self-reporting options and issues, and the potential impact of the FERA provisions.

Donna Schmerin Clark, Baker & Hostetler LLP, Houston, TX
Beth Schermer, Coppersmith Schermer & Brockelman PLC, Phoenix, AZ

10:30 a.m. Break

10:45 a.m. 1.00 hr

Selected Medicare Issues of Current Interest

The session includes: (1) compliance with the new Medicare rule for physician supervision of hospital outpatient services, (2) the emerging Medicare/Medicaid contractor landscape, including developments regarding RACs, MICs, PSCs and ZPICs, and preparedness and strategies for contractor disputes, and (3) the sanction authority of Medicare Quality Improvement Organizations to initiate CMPs and termination of providers for violations of Medicare quality standards, and corresponding provider appeal rights.

Nancy Collier Legros, King & Spalding LLP, Houston, TX

11:45 a.m. 1.00 hr including .25 hr ethics

Self-Disclosure of Health Care Fraud and Abuse: Risks, Benefits and Pitfalls

The session covers assessing the benefits of self-reporting based on the circumstances, maintaining control of the situation after providing a self-disclosure, how to properly prepare a self-disclosure, evaluating the appropriate level of disclosure, deciding who to provide with self-disclosures, and how to evaluate the likelihood of relief in the potential penalties.

Carol A. Poindexter, Shook, Hardy & Bacon L.L.P., Kansas City, MO

12:45 p.m. Adjourn

CONFERENCE FACULTY

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Amarillo, TX

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Health and Human Services Commission
Austin, TX

MARIE C. BERLINER
Lambeth & Berliner
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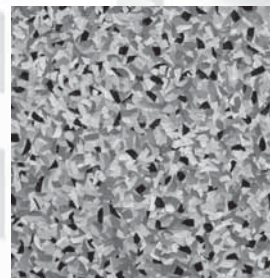
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Mail this registration form to:

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REGISTRATION:

Includes Course Binder and Thursday Afternoon Concurrent Break-Out Tracks

☐ Early Registration Fee due by Tuesday, March 30, 2010\$550.00

☐ Registration Fee after Tuesday, March 30, 2010.....\$600.00

Optional Wednesday Evening Session – Select One:\$75.00

☐ A. Health Law Primer

☐ B. In-House Counsel Issues

Optional Thursday Luncheon Table Topics – Select One\$10.00

☐ A. Compliance and Regulatory Concerns

☐ B. Health Care Reform Concerns

☐ C. Medical Staff Problems

☐ D. Physician-Hospital Transactions

CONFERENCE PUBLICATIONS AND MEDIA

Allow 3–5 weeks from the conference date for delivery.

☐ Course Binder WITHOUT Conference Registration.....\$250.00

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HOUSTON

April 7*, 8 - 9, 2010

CONFERENCE LOCATION



Four Seasons Hotel
1300 Lamar St
Houston, TX 77010
713-650-1300

Special Room Rate: \$215
good through March 24, 2010
(subject to availability)

Valet Parking Only:
\$13 daily; \$27 overnight
(subject to change)

KEY DATES

March 30, 2010, 5 p.m.
last day for early registration
add \$50 for registrations received after this time

April 1, 2010, 5 p.m.
last day for full refund

April 5, 2010, 5 p.m.
last day for partial refunds
\$50 processing fee applied

April 7, 2010, 7 p.m.
optional Wednesday evening sessions begin

April 8, 2010, 8:45 a.m.
Conference begins

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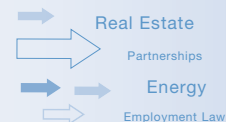


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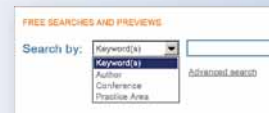
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