

**Educational teleconferences/webinars  
on topics that are at the forefront  
of hospital and healthcare  
industry needs**



**HEALTHCARE EDUCATION  
FOUNDATION OF WEST VIRGINIA**

*a subsidiary of the* **WEST VIRGINIA HOSPITAL ASSOCIATION**

***Programs for August 2010***

# The ED Pay-For-Call Issue: What Hospital Executives Need to Know

DATE: August 3, 2010

TIME: 1:00pm—2:00 pm EST

## Overview

This program will assist hospital executives who are:

- Already paying their physicians for call but are seeking to revamp their compensation methodology
- Currently not paying their physicians for call but who want to be ready to address this emerging issue

In recent years, clinical call coverage agreements between hospitals and physicians have fundamentally changed due to a variety of demographic, strategic, and operational trends. The end result is that physicians are becoming less willing to provide coverage unless they are compensated for the time and inconvenience of being on call. Hospitals that resist physician demands to be paid risk the loss of coverage in critical specialties, as well as significant damage to medical staff relationships. On the other hand, if a hospital agrees to pay for on-call coverage in one specialty, the demand for payment can spread rapidly to other specialties. The call coverage issue is one that is often cited by hospital CEOs as a top emerging concern and one that has the potential to significantly reduce the bottom lines of their hospitals. However, because on-call payment issues are relatively new to hospitals, no clear standards exist regarding the types of coverage that should be compensated and how much compensation is appropriate. Further, most hospitals lack an effective call coverage strategy.

This presentation will outline the underlying drivers of increasing call coverage compensation pressures, discusses the results of several recent surveys, and describes several case studies of innovative approaches that hospitals should consider using to address their call coverage pressures.

## Who Should Participate

CEO, COO, CFO, CMO, HR Director, Physician Services, and Financial Services

## Objectives

At the completion of this program, the participant will have:

1. Reviewed the causes of increasing demands for call coverage compensation
2. Discussed the range of payment models and amounts currently being paid by hospitals around the country, including case studies of relevant approaches
3. Identified innovative approaches that can address legitimate hospital and physician needs while minimizing call coverage expenses
4. Discussed core principles that hospitals should adhere to when designing a call coverage compensation plan
5. Key compliance risks associated with pay-for-call arrangements and the implication of the Office of Inspector General's (OIG's) call coverage related advisory opinions

## Faculty

**Leonard J. Henzke** has multiple years of experience as a health-care consultant. His experience has focused on hospital/physician relationships, financial analysis, business development, and physician compensation planning. Mr. Henzke is a frequent speaker to state hospital associations and physician organizations on issues related to call coverage and hospital/medical staff relationships. Also, he has co-authored articles on topics such as physician call coverage.

**James R. Dutro's** law practice focuses on regulatory matters. James has extensive experience in structuring, negotiation, and implementing integrated health care delivery systems and other hospital-physician business transactions. He is listed in the *Best Lawyers in America* (2009) survey in the health care law category and in the *Chambers USA: America's Leading Lawyers* (2007) and (2008) as a leading attorney in healthcare.

CEUs Offered: 1.2

## Driving Profitable Surgery Growth

DATE: August 10, 2010

TIME: 2:30 pm—4:00 pm EST

### Overview

This webinar will profile how top performing hospitals have been driving profitable surgical growth in contradiction to national trends. This session is specifically designed for organizations searching for effective ways to fully leverage their existing OR capacity to maximize bottom line impact.

### Who Should Participate

Chief Financial Officers, Chief Operating Officers, Heads of Surgical Services, OR Directors, Materials Managers/Purchasing and Procurement Staff

### Objectives

At the completion of this program, the participants will have:

1. Discussed how to manage perioperative operations with the goal to become the “provider of choice” for surgeons in their competitive market
2. Discussed how to make informed investments to drive profitable growth
3. Reviewed the leverage procedural level benchmarks to proactively identify improvement opportunities and build the case for change
4. Discussed how to enfranchise physicians through self service access to scorecards profiling block performance, supply cost, and referral trends
5. Reviewed hardware efficiency gains to smooth the OR schedule, create usable prime-time capacity, and optimize block performance

### Faculty

#### Graham McLaughlin

Graham McLaughlin is the Partnership Director for the Advisory Board’s Clinical Operations vertical. In this capacity, he is focused on educating members on current research trends and opportunities for operational and financial improvements in the surgical terrain.

During his tenure at the Advisory Board, Mr. McLaughlin has also served as the Global Partnership Director for Surgery Compass members in the United Kingdom and Australia, as well as the Dedicated Advisor Team Lead for domestic Spend Compass membership.

CEUs Offered: 1.8

## Medical Records: Ensuring Compliance with the CMS CoP Requirements

DATE: August 12, 2010

TIME: 10:00 am—11:30 am EST

### Overview

Every hospital in America that accepts Medicare and Medicaid reimbursement must be in compliance with the CMS Conditions of Participation. The final interpretive guidelines were issued on October 17, 2008 with amendment on June 5, 2009. There have been many changes to these since the last publication. Compliance continues to be problematic. Don’t be unprepared if the state department of health or CMS shows up for a complaint or validation survey. Joint Commission has also recently changed many of their standards to comply with the CMS CoP requirements.

Note: That Critical Access Hospitals (CAH) have a separate set of hospital CoPs and there are some difference in the medical record section although there is a lot of similarity. CAH hospitals that are in systems should know the differences in the two sets of CoPs and may find the program of interest for that reason.

### Who Should Participate

CEO, COO, CFO, CMO, CNO, Lab Director, Radiology Director, ED Manager, OR Director, ICU/CCU Director, Outpatient Director, Medical and Surgical Nurse Managers, Staff Nurses, The Joint Commission Coordinators, Performance Improvement Directors, Risk Managers, Safety Officers, HIM Director, and Compliance Officer

### Objectives

At the completion of this program, the participants will have:

1. Discussed why the same level of care is required whether the hospital provides the services directly or through contracted services
2. Reviewed that CMS requires that the Board makes sure that contract services are reviewed as part of the QAPI process

### Faculty

**Sue Dill Calloway** is a nurse attorney and consultant. She was the director of hospital patient safety for The Doctors’ Company. She has done many educational programs for nurses, physicians, and other health care providers. Sue has authored over 100 books and numerous articles. She is a frequent speaker and is well known across the country in the area of healthcare law, risk management, and patient safety.

**The speaker has no real or perceived conflicts of interest that relate to this presentation and there will be no discussion of unlabeled uses of drugs/devices.**

CEUs Offered: 1.8

# *CEU Information*

WVHA is authorized to award pre-approved Category II (non-ACHE) continuing education credit for this seminar towards advancement, recertification or reappointment in the American College of Healthcare Executives (ACHE). Participants in this program wishing to have the continuing education hours applied toward Category II credit should list their attendance when applying for advancement, recertification, or reappointment in ACHE.

The West Virginia Hospital Association is approved as a provider of continuing education for registered professional nursing in West Virginia, #WV2001-0339RN.

WVHA/HEF is approved as a provider of continuing education for licensed practical nursing in West Virginia, #WVBPN170.

WVHA/HEF is approved as a provider of continuing education for respiratory practitioners in West Virginia, #BORC04-06-072.

All participants will receive a Certificate of Attendance at the conclusion of the seminar. Many national, state and local licensing boards and professional organizations will grant continuing education credit for attendance at this seminar when you submit the course outline (save the brochure) and your Certificate of Attendance. It is recommended you contact your own board or organization to find out what is required.

**NOTE:** *Full attendance for the entire session(s) is a prerequisite for receiving full continuing education credits. If a participant needs to leave early, his or her continuing education credits will be reduced.*



# Registration Form

Name \_\_\_\_\_

Title \_\_\_\_\_

Facility \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ FAX \_\_\_\_\_

E-Mail \_\_\_\_\_

*Materials for programs will be sent via e-mail*

To register for this seminar, please complete the form above and return with remittance to Tamra Goodall CPS/CAP, 100 Association Drive, Charleston, WV 25311. Please make all checks payable to **HEF**.

**Credit Card Information (please check one):**

\_\_\_\_ VISA \_\_\_\_ MasterCard \_\_\_\_ Discover \_\_\_\_ American Express

Card Number \_\_\_\_\_ Exp Date \_\_\_\_\_

Cardholder's Name \_\_\_\_\_

Signature \_\_\_\_\_

You may fax your registrations to 304/344-9745 or 304/353-9755 or e-mail tgoodall@wvha.org. All fax/e-mail registrations must be accompanied by a credit card payment.

**Cancellation Policy**

All cancellations are subject to a \$25 non-refundable processing fee. There will be no refunds on or after **two weeks prior to the program**, but substitutions are permitted. HEF has the right to change presenters for this program. Also, HEF reserves the right to postpone or cancel this program for which registrants will be fully refunded. If you register late, please contact HEF at 304/344-9744 prior to the program to confirm your reservation.

August 2010 Programs

Circle each for which you are registering, and total all lines

AMOUNT

The ED Pay-For Call Issue August 3, 2010	Member: \$149	Non-Member: \$214	_____
Driving Profitable Surgery Growth August 10, 2010	Member: \$149	Non-Member: \$214	_____
Medical Records-CMS Requirements August 12, 2010	Member: \$149	Non-Member: \$214	_____

**ALL 3 PROGRAMS**

Member	\$390	_____
Non-Member	\$636	_____

**TOTAL OF ALL LINES** \$ \_\_\_\_\_