In alignment with value-based payment (VBP) metrics and ‘triple-aim’ principles, this program brings you in-demand speakers covering the most pressing topics at the powerful intersection of quality outcomes, technologies and program designs.

We’ll help solidify your understanding of the new Interpretive Guidelines for the Home Health CoPs – an area of near-daily technical inquiry from home care providers, and a topic where we know you and your team need answers.

You’ll also learn process improvements to overcome costly and wasteful fragmentation in your clinical teams’ workflow from one of HCA’s highest-rated presenters, along with: tips for population health management; telehealth strategies; insights on interdisciplinary pharmacist support for medically complex patients; and new resources to identify and prevent elder-abuse.
AGENDA

Wednesday, November 14, 2018

8:30AM
Registration and Light Breakfast

9:00 – 9:15AM
HCA Welcoming Remarks

9:15 – 10:30AM
Best Practices & Value of Modern Telehealth Programs
Rich Curry, Health Recovery Solutions

Learn from organizations who are revamping their care and producing outstanding results for patients by developing best practices and innovative care models. These modern, innovative approaches are expanding their businesses and reducing costs while moving from basic chronic disease management to real-time prevention, population health management and proactive wellness programs at a time when value-based payments and other program models demand it. You will learn their secrets for how your agency can grow and reduce costs.

10:30 – 11:45 AM
Filling the Gaps and Patching the Cracks – Connected Care for Home Health Care Agencies
Barbara Katz, RN, MSN, BK Health Care Consulting

Spotty communication, task-oriented case management, inadequate teamwork and work silos all conspire to fuel poor outcomes, higher costs and staff and patient dissatisfaction. This session describes a powerful system of evidence-based strategies for reducing fragmentation and achieving quadruple-aim goals derived from the recently published book Connecting Care for Patients: Interdisciplinary Care Transitions and Collaboration. The session will offer assessment tools and specific techniques for implementing connected care, including: patient self-management support, improved care transitions, case management, communication, collaboration, teamwork and optimal technology use that clinician leaders can bring back to their agencies for practical implementation.

11:45 AM – 12:15 PM
Exhibitor Networking & Book Signing with Barbara Katz, author of Connecting Care for Patients: Interdisciplinary Care Transitions and Collaboration

12:15 – 1:15PM
Lunch

1:15 – 2:15PM
Advancing Better Patient Outcomes through Pharmacy-Home Care Collaboration
John Croce, RPh, Upstate-NY Community Pharmacy Enhanced Services Network

Medication management, adherence and risk-assessment are vital to the care of medically complex home care patient populations. This session will provide insights on the role pharmacists can play in supporting patient health and highlight ways to build successful collaborations that synchronize with many of the state and federal government provider partnership models, value based payments, and other care-coordination initiatives.

2:15 – 4:30PM
Deep Dive into the Final Home Health Interpretive Guidelines
Trish Tulloch, RN, BSN, MSN, HCS-D, Senior Consultant, RBC Limited

The U.S. Centers for Medicare and Medicaid Services (CMS) has released the long-awaited final Interpretive Guidelines (IGs) for the home health Conditions of Participation (CoPs) that took effect January 13, 2018. These final IGs are intended to clarify the CoPs for both providers and surveyors, addressing ambiguities or the need for clarity in the regulations.

This program will highlight these clarifications in the final IGs, and discuss examples of how your peers have modified policies and processes to meet these clarified CoPs.

Upon completion of this program, participants will be able to:

1. Detail the final IGs that clarify several Home Health Conditions of Participation (CoPs);
2. Discuss key changes in the final guidance;
3. List strategies to successfully implement the revised CoPs.

4:30PM
Day 1 – Wrap Up and Adjourn
Thursday, November 15, 2018

8:00AM
Light Breakfast

8:30-9:45AM
**Strategies for Ramping Up Your Agency’s Population Health Management**
Carol Durham, RN, BS, PCC, Managing Director-Population Health, Selfhelp Community Services, Inc.

Is your agency using multiple software platforms that lack interoperability? Are your systems still not connected to a RHIO for real-time patient data exchange with network providers? Learn about the strategies one agency is employing to create a more comprehensive approach to tackling population health management across their various service lines to promote client health and wellness and support the quality measures of MLTCs and other payors.

9:45-10:45AM
**Elder Abuse Screening Tool for Healthcare Settings**
John Cochran, Deputy Director, NYS Office for the Aging

Recently passed New York State legislation called for the development of guidelines for the identification and reporting of elder abuse in health care settings. The New York State Office for the Aging has developed a host of screening tools and tip sheets for use across health care field disciplines including home care. Hear more about these new screening tools for how to recognize elder abuse and recommended actions for home care workers.

10:45 – 11:00AM Break

11:00AM – 12:15PM
**HHQI-VBP Metrics Crosswalk**
Cindy Sun, MSN, RN, HHQI Lead Project Coordinator
Quality Insights

The Home Health Quality Improvement (HHQI) National Campaign has been dedicated to improving the quality of care provided to America’s home health patients since 2007. HHQI has a growing repository of evidence-based tools, timely data reports and a wealth of ongoing educational opportunities to support home healthcare providers. These tools and resources target the latest value-based performance metrics for MLTCs established by the NYS Department of Health. This session will provide a crosswalk of available HHQI resources to the target metrics including the six Potentially Avoidable Hospitalizations (PAHs).

12:15pm – Adjournment

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**Hotel Information**
A small block of rooms has been secured at the **Crowne Plaza Hotel**, 3 Executive Blvd., Suffern, NY 10901 for the evenings of November 13 and November 14 at a discounted rate of $119.

To make your overnight accommodations, call the hotel directly at 1-800-227-6963 before October 23rd and ask for the group code HCN.
Thanks to our Sponsors!

Be sure to visit our Exhibitors!
Connecting Care for Patients
Interdisciplinary Care Transitions and Collaboration

Connecting Care for Patients: Interdisciplinary Care Transitions and Collaboration addresses practical strategies for creating connected, seamless, and transparent health care for patients in settings outside of the hospital. It presents antidotes to healthcare fragmentation caused by inefficient care, patient safety problems, patient dissatisfaction, and higher costs. The text focuses on clinical case management, interdisciplinary referrals and conferencing, cross functional team meetings, tracking patients in value-based purchasing programs, inpatient liaison visits, structured collaboration with physician groups, and referral sources and development of clinical community networking groups. Further, it explores tools for patient self-management support, effective integration of technology, family caregiver engagement, and techniques for addressing health disparities and other high-risk care gaps.

A unique resource, this text blends conceptual information with practical tools and strategies for connecting care for patients by describing research and evidence-based techniques while translating them into actionable tools. Also included are chapter objectives, review questions, explanations of key terms, case studies, self-assessments, scripts, trigger questions, and detailed descriptions of each tool and technique.

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Source Code: HCA2018
Registration
Registration Deadline: November 6

Please check one:

☐ HCA Member Rate $279 per person
☐ Prospective HCA Member Rate $379 per person

*Please complete this form for each additional registrant.*

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Authorized Signature

Cancellation Notice
Cancellations received in writing via email to info@hcanys.org by November 7 are refundable less a 25% administrative fee. No refunds are permitted after this date or for no shows. Substitutions are permitted.

PLEASE FAX THIS COMPLETED REGISTRATION TO
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