



# Annual Compensation & Operations Improvement Meeting

September 11–13, 2024 | CAESARS PALACE | LAS VEGAS, NV

*Expand Your Line of Sight*



AMGA Consulting’s Annual Compensation & Operations Improvement Meeting is tailored for medical group physician and administrative leaders charged with driving operational efficiency and financial performance at their organization. Over two days, attendees will gain insights into the most current market trends around provider compensation, external market forces, and practice operations. Hear from peer organizations across the country about their strategies for performance improvement and walk away with real-world solutions to create and maintain a high performing physician enterprise.

## Program Objectives:

1. Gain insight into the future of physician enterprises
2. Learn how to leverage internal data and predictive modeling to mitigate no-shows
3. Explore ways in which survey data is interrelated and can be used in various combinations to drive improvement
4. Discover the latest political updates impacting medical groups and physicians/providers
5. Understand the importance of legal safeguards in compensation models
6. Gain insight into how physician compacts can create a winning culture
7. Learn what to do, and what not to do, when negotiating risk-based contracts
8. Explore ways to leverage a strategic framework towards reimagining APP compensation
9. Discover best practices for prior authorization and contracting strategies
10. Become equipped with the knowledge and tools to combat operational and finance issues brought on by the rise in partial FTE clinicians

## Wednesday, September 11


5:00pm – 7:00pm	<b>Welcome Reception</b>
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## Thursday, September 12

8:00am – 9:00am	Networking Breakfast
9:00am – 9:30am	<b>Welcome and State of the Union</b> <i>Fred Horton, MHA, President, AMGA Consulting</i>
9:30am – 10:15am	<b>SESSION 1</b> <b>Keynote Address</b> <i>David Carlson, DO, South King County CMO, Virginia Mason Franciscan Health</i> Reflection on where physician enterprises’ have been and what is in store for the future.

10:15am – 11:00am	<p><b>SESSION 2</b>  <b>A Patient Centered Approach to Predicting and Mitigating No Shows</b>  <i>Karen Hoskins, MHS, Medical Specialty Operations Director; and Nolan Seithel, BS, Business Relationship Manager, St. Elizabeth Physicians</i></p> <p>Learn how a large medical group improved template utilization, provider satisfaction, and patient satisfaction by operationalizing an in-house no-show predictive model with a patient-centered lens.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Develop a no show predictive rate using their own data.</li> <li>• Implement a process to impact no shows utilizing their own predictive rate.</li> <li>• Measure template utilization and appointment completion for success instead of decreased no shows.</li> </ul>
11:00am – 11:15am	Refreshment Break
11:15am – 12:00pm	<p><b>SESSION 3</b>  <b>Unpublished Insights: 2024 AMGA Surveys</b>  <i>Kelsi O'Brien, MHSA, Senior Director, AMGA Consulting and Matt Wells, PhD, Director, AMGA Consulting</i></p> <p>AMGA surveys provide a wealth of benchmarks and insight, but not all findings make it into our published surveys. Hear about a number of findings that impact compensation and operations never before discussed.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Understand ways in which survey data is interrelated and can be used in various combinations to drive improvement.</li> <li>• Explain insights on staffing with data from ProSat.</li> <li>• Further understand the relationship between wRVUs and compensation especially at the highest and lowest levels.</li> </ul>
12:00pm – 12:30pm	<p><b>Session 4</b>  <b>Policy Overview: The Latest Updates from Washington, D.C.</b>  <i>Darryl Drevna, MA, Senior Director, Regulatory and Public Policy, AMGA</i></p> <p>This session will provide the latest political updates from legislative to regulatory on topics impacting medical group and physicians/providers.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Describe CMS' proposed 2025 Physician Fee Schedule proposal, AMGA's response, and next steps.</li> <li>• Understand end of year regulatory and congressional priorities.</li> <li>• Explain what the Election means for next year.</li> </ul>
12:30pm – 1:30pm	Networking Lunch
1:30pm – 2:30pm	<p><b>SESSION 5</b>  <b>Legal Safeguards: Integrating Legal Counsel Early and Often in Building your Physician Compensation Models to Avoid Legal and Regulatory Pitfalls</b>  <i>Brandon Robinson, JD, Director, Legal Services, BJC HealthCare</i></p>

	<p>Engaging legal counsel early and as part of physician compensation planning process is crucial to avoiding legal and regulatory issues later. This presentation will discuss how both in-house and outside legal counsel can guide key decisions in shaping compliant compensation models, emphasizing common areas of concern, and offer strategies to effectively mitigate legal and regulatory risks.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Understand how early legal involvement is not just about risk management but also streamlines physician compensation planning, reduces administration’s burden, and enhances operational efficiency.</li> <li>• Gain knowledge of the Stark law, Anti-Kickback Statute, and other regulatory requirements and the best practices for designing compliant compensation models.</li> <li>• Learn effective contract management and collaborative risk mitigation strategies that effectively partner the legal, operational, and financial teams.</li> </ul>
2:30pm – 4:00pm	<p><b>SESSION 6</b>  <b>Transparency, Fairness and Physician Inclusion: Compacts and Cautionary Tales</b>  <i>Mark Hallett, MD, MBOE, FAAFP, Chief Clinical Officer, St. Charles Healthcare; Jack Silversin, DMD, DrPH, President; and Mary Jane Kornacki, MS, Partner, Jack Silversin Healthcare Consulting</i></p> <p>Disgruntled, burnt-out, and – in some cases – traumatized physicians are at risk of exacerbating turnover, disengagement and, increasingly, unionization. This session explores how addressing physicians’ needs for transparency, fairness and inclusion via a physician-organization compact process can increase trust and build functional partnerships. A case study of one organization’s unionization challenges will illustrate how trust can begin to be built preparing the ground for deeper compact work. Engagement of participants will deepen their understanding of the strengths and potential limitations of partnership through compacts in their own medical groups.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Describe how implicit expectations (compact) held by physicians and reinforced by management have led to frustration in the evolving environment and how efforts to make expectations explicit and fair can build constructive relationships.</li> <li>• Identify emerging issues around physician disengagement and distrust, why physicians view unionization as a solution, and the leadership required to offer a compelling alternative.</li> <li>• Articulate how a compact process or compact principles might be applicable to their own medical group’s challenges and what’s needed in their context for that work to be productive.</li> </ul>
4:00pm – 4:15pm	Networking Break

4:15pm – 5:00pm	<p><b>SESSION 7</b>  <b>Trends in Managed Care Contracting Strategies</b>  <i>Richelle Marting JD, MHSA, RHIA, CPC, CEMC, CPMA, CPC-I, Healthcare Reimbursement Attorney, Marting Law, LLC</i></p> <p>While medical groups may focus their managed care contracting efforts on rates, the negotiating rates is only part of the picture. This session will focus on trends in managed care contracting strategies, using case studies and specific examples that can play a significant role in the success of a group's arrangement with managed care plans.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Understand changes in legal/regulatory landscape impacting managed care agreements.</li> <li>• Describe the relationship between managed care contracts and value-based arrangements.</li> <li>• Identify current trends in managed care contracting that can be addressed in individualized arrangements.</li> </ul>
5:00pm – 5:15pm	<p><b>Day 1 Wrap-Up &amp; Preview of Day 2</b>  <i>Fred Horton, MHA, President, AMGA Consulting</i></p>
5:30pm – 7:15pm	<p><b>Happy Hour Reception sponsored by Ludi Inc.</b>  </p>

## Friday, September 13

7:30am – 8:30am	Networking Breakfast
8:30am – 9:30am	<p><b>SESSION 8</b>  <b>Navigating Compensation Strategies for APPs: A Health System's Journey and Assessment</b>  <i>Lara West, MHSc, PA-C; Assistant Vice President, Advanced Clinical Providers; and Stacey Rapacki, Vice President, Head of Compensation, Business Leader Services, Human Resources, Northwell Health</i></p> <p>The healthcare industry is facing unique workforce and human resource challenges that impact recruitment, retention, amongst other critical items. In this presentation, we will explore one health system's path through compensation strategy deployed to the APP workforce and lessons learned.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Describe a health system's journey through APP compensation strategy.</li> <li>• Review observations and lessons learned from the initiatives.</li> <li>• Discuss current and future considerations.</li> </ul>
9:30am – 10:00am	Networking Break / Hotel Checkout
10:00am – 11:00am	<p><b>SESSION 9</b>  <b>Quality, Patient Experience and Eliminating Waste Reduction: Adventures in Payer Contracting</b>  <i>Matt Swafford, Senior Vice President and Chief Financial Officer, St. Charles Health System</i></p>

	<p>Charles Health System took a bold stance on Medicare Advantage contracting and terminated three out of seven. Prior authorizations and denials were delaying or denying care to patients while overburdening providers and caregivers. St. Charles used its own Cancer Service Line quality data to create an Instant Authorization process as a beginning to the continuous effort to reduce the wasteful practice of prior authorizations and denials. This presentation will describe the contract negotiations, the quality data used and the Instant Authorization process St. Charles put into place. It will also provide lessons learned in the negotiating strategy and tactics, provider and community messaging and impact on patient care.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Understand how to prioritize patient and provider experience in payer negotiations.</li> <li>• Describe how to use quality data to drive specific waste reduction and process improvement.</li> <li>• Explain the “why,” and impact, of terminating payer agreements.</li> </ul>
11:00am – 11:45am	<p><b>SESSION 10</b>  <b>Maximizing Efficiency: Understanding the Impact of Partial Clinical FTEs on Medical Groups</b>  <i>Will Holets, MHA, MBA, Senior Director AMGA Consulting</i></p> <p>In today's healthcare landscape, optimizing resources and personnel allocation is essential for medical groups to thrive. This presentation delves into the intricacies of Partial Clinical Full-Time Equivalents (FTEs) and their profound influence on medical practices. Attendees will gain insights into how fractional FTEs affect operational efficiency, patient care quality, and financial viability within medical groups.</p> <p>Upon completion of this session, participants should be able to:</p> <ul style="list-style-type: none"> <li>• Explain valuable market insights into the overall changes in the clinician FTE landscape.</li> <li>• Describe the tools to combat operational and finance issues, brought on by the rise in partial FTE clinicians.</li> <li>• Interact with other key medical group leaders to understand how they mitigate issues.</li> </ul>
11:45am – 12:00pm	<p><b>Final Comments &amp; Adjourn</b></p>

**CONTINUING EDUCATION:**

**Disclosures:** None of the planners for any of the accredited activities have relevant financial relationships to disclose with any ineligible company whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.

**Physicians, Nurse Practitioners, Registered Nurses, and Physician Assistants (CME Credit):** AMGA is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians. AMGA designates this live educational activity for up to **8.75** AMA PRA Category 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity. For the purpose of recertification, the American Nurses Credentialing Center (ANCC) and the National

Commission on Certification of Physician Assistants (NCCPA) accept AMA PRA Category 1 Credit™ issued by organizations accredited by the ACCME. With respect to individual states' requirements for continuing education, State Boards have final authority of the acceptance.

**American College of Healthcare Executives (ACHE) Qualified Credit:** By attending this AMGA program, participants may earn up to **8.75** American College of Healthcare Executives (ACHE) Qualified Education hours toward initial certification or recertification of the Fellow of the American College of Healthcare Executives (FACHE) designation. Participants of this program who wish to have their attendance considered for ACHE Qualified Education hours should list it when they apply to the ACHE for advancement or recertification. Participants are responsible for maintaining a record of their ACHE Qualified Education hours.

**CPAs (CPE Credit):** This group live activity is designated to provide continuing professional education credits in the field of “specialized knowledge”. No prerequisite requirements are necessary for this event. By attending this program, participants may earn up to **10.5** CPE credits. In accordance with the standards of the National Registry of CPE Sponsors, CPE credits are granted based on a 50-minute hour. AMGA is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. (NASBA Sponsor ID: 112939)