



**38+
sessions
& 90+
speakers**

Healthcare Enforcement Compliance Institute

October 23–26, 2016 | Washington, DC

**Learn best and leading-edge practices
for the compliance lawyer.**

Go beyond legal analysis, learn how to implement systems that ensure the law is followed, and gain practical advice from experts in a one-of-a-kind forum where lawyers and compliance officers work together.

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Questions? jennifer.parrucci@corporatecompliance.org

Sunday, October 23: Pre-Conference

9:00–10:30 AM Pre-Conference Breakout Sessions	P1 Anatomy of False Claims Act Case: Investigation, Negotiation, Resolution – Moderator: Craig Holden, Chair and CEO, OBERKALER; Amy Easton, Phillips and Cohen LLP; Edgar Bueno, Partner, Morris, Manning & Martin LLP; Eva Gunasekera, Trial Attorney, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. DOJ	P2 Health Information Privacy and Security Standards – Adam Greene, Partner, Davis Wright Tremaine, LLP; Ilana Peters, Senior Advisor for HIPAA Compliance and Enforcement, HHS Office for Civil Rights; Marti Arvin, Vice President of Audit Strategy, CynergisTek
10:30–10:45 PM	Networking Break	
10:45–12:15 PM Pre-Conference Breakout Sessions	P3 Litigating a False Claims Act Case – John T. Boese, Of Counsel, Fried, Frank, Harris, Shriver & Jacobson LLP; Janet Goldstein, Partner, Vogel, Slade & Goldstein, LLP; Enu Mainigi, Williams & Connolly LLP; Michael D. Granston, Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. DOJ	P4 Kickback and Stark Law Developments – Daniel Melvin, Partner, McDermott Will & Emery, LLP; Kevin McAnaney, Law Office of Kevin G. McAnaney
12:15–1:30 PM	Lunch (on your own)	
12:30–1:15 PM	SpeedNetworking	
1:30–3:00 PM Pre-Conference Breakout Sessions	P5 Negotiating False Claims Act Settlements – Moderator: Steve Altman, Principal, Altman Dispute Resolution Services; Paul Weidenfeld, Attorney, Law Offices of Paul Weidenfeld; Marlan Wilbanks, Senior Partner, Wilbanks & Gouinlock, LLP; Lisa Re, Assistant Inspector General for Legal Affairs, OIG/HHS; Colin M. Huntley, Assistant Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. DOJ	P6 Federal Administrative Sanctions: Exclusion and Civil Money Penalties – Julie Kass, Lawyer, Ober, Kaler, Grimes & Shriver; Katie Fink, Senior Counsel, Administrative and Civil Remedies Branch, HHS/OIG
3:00–3:15 PM	Networking Break	
3:15–4:45 PM	P7 Handling a Criminal Healthcare Fraud Case – Benton Curtis, Senior Counsel, Broad and Cassel; Sam Sheldon, Quinn Emanuel; Sally B. Molloy, Trial Attorney, Fraud Section, U.S. Department of Justice, Criminal Division	P8 Managed Care Fraud Enforcement and Compliance – Craig Smith, Hogan & Lovells; Christopher Horan, VP Compliance Investigations, Wellcare Health Plan, Inc.
4:45–6:00 PM	Welcome Reception	

Monday, October 24: Conference

7:15 AM–8:15 AM	Continental Breakfast (provided)		
8:15–8:30 AM	Opening Remarks		
8:30–9:30 AM	GENERAL SESSION: Influencing Decision-Making 2.0 Moving the Meteor – Jenny O'Brien, Chief Compliance Officer, UnitedHealthcare; Roy Snell, CEO, SCCE/HCCA		
9:30–10:00 AM	GENERAL SESSION: CMS Update – Jerry Mulcahy, Director Program Compliance and Oversight, Centers for Medicare & Medicaid Services		
10:00–10:30 AM	GENERAL SESSION: OIG Update – Robert DeConti, Assistant IG for Legal Affairs, OIG		
10:30–11:00 AM	Networking Break		
11:00 AM–12:00 PM Breakout Sessions	101 Preparing your Organization for an HHS-OIG Information Security Audit – David Holtzman, VP Compliance, CynergisTek, Inc.; Brian Johnson, Acting Director, IT Audit, U.S. Department of Health and Human Services OIG	102 Negotiating & Surviving a Corporate Integrity Agreement – Laura Laemmle-Weidenfeld, Partner, Jones Day; Regina G. Morano, SVP-Chief Regulatory Affairs & Compliance Officer, True Health Diagnostics; Caitlin McCormick, Counsel, Akin Gump	103 Medicare Enrollments: Revocation, Appeal and Remedies – Ross Burris, Attorney, Polsinelli; Andrew Wachler, Owner/Principal, Wachler & Associates, P.C.
12:00–1:00 PM	Networking Lunch (provided)		
1:00–2:00 PM Breakout Sessions	201 Criminal & Civil Enforcement and Compliance Program Effectiveness – Steven W. Ortquist, Managing Director, Aegis Compliance & Ethics Center LLP; Carolyn F. McNiven, Shareholder Litigation, Greenberg Traurig; David Rosenbloom, Partner, McDermott Will & Emery LLP	202 Best Practices for Dealing with the States in False Claims Act Investigations, Litigation and Settlement – Candice M. Deisher, Assistant Attorney General, Virginia Attorney General's Office; Marc S. Raspanti, Pietragallo Gordon Alfano Bosick & Raspanti, LLP	203 Stark, False Claims and the Transition to Outcome-Based Reimbursement – JD Thomas, Waller; Andrew A. Bobb, Deputy Chief-Civil Division, Civil Health Care Fraud Coordinator, AUSA, Southern District of Texas; Stephen Page, VP, Associate General Counsel, RegionalCare Hospital Partners, Inc.
2:00–2:30 PM	Networking Break		
2:30–3:30 PM Breakout Sessions	301 State False Claims & Medicaid Fraud Enforcement Update – Jack Wenik, Partner, Epstein Becker & Green PC; George Codding, Sr. Assistant Attorney General, State of Colorado	302 Overpayment and Self Disclosure – Tony Maida, Partner, McDermott Will & Emery; Matthew Edgar, Health Insurance Specialist, CMS; David Fuchs, Associate Counsel, Administrative and Civil Remedies Branch, HHS/OIG	303 Board and Management: Compliance Accountability – Katherine Matos, Senior Counsel, U.S. Dept. HHS, OIG; James Sheehan, Chief, Charities Bureau, NY Attorney General; Christopher Ideker, Managing Director, Alvarez & Marsal Disputes and Investigations

Monday, October 24: Conference

3:30–4:00 PM	Networking Break		
4:00–5:00 PM Breakout Sessions	401 Advanced Discussion: Kick-Back, Stark & False Claims Act – Daniel Melvin, Partner, McDermott Will & Emery, LLP; Kevin McAnaney, Law Office of Kevin G. McAnaney; Marlan Wilbanks, Senior Partner, Wilbanks & Gouinlock, LLP; Scott Withrow, Partner, Withrow, McQuade & Olsen, LLP	402 Advanced Discussion: Government Enforcement Official & Chief Compliance Officer – Bret S. Bissey, Sr VP, Compliance Services, MediTract, Inc.; Alec Alexander, Partner, Breazeale, Sachse & Wilson, L.L.P.	403 Telehealth & Compliance – Deborah A. Randall, Health Law Attorney, Deborah Randall Consulting
5:00–6:00 PM	Networking Reception		

Tuesday, October 25: Conference

7:15–8:15 AM	Continental Breakfast (provided)		
8:15–8:30 AM	Opening Remarks		
8:30–9:00 AM	GENERAL SESSION: Health Care Fraud Prosecutions and Data Analytics – Andrew Weissmann, Chief, Fraud Section, Criminal Division, Department of Justice		
9:00–10:30 AM	GENERAL SESSION: Enforcement and Compliance: Strategies for Organizational Counsel and Compliance Professionals – Gabriel Imperato (Moderator), Managing Partner, Broad and Cassel; Nancy Guller Hayt, Chief Corporate Responsibility Officer, Adventist Health System; Lesley Skillen, Getnick & Getnick LLP; Nicholas E. Surmacz, U.S. Department of Justice, Criminal Division, Fraud Section; Richard Westling, Partner, Waller Lansden Dortch & Davis, LLP		
10:30–11:00 AM	Networking Break		
11:00 AM–12:00 PM Breakout Sessions	501 Organizational Compliance and Excluded Individuals and Entities – Ryan Meade, Director of Regulatory Compliance Studies, Loyola University Chicago School of Law; Tamara Forys, Senior Counsel, Office of Counsel to the Inspector General, U.S. Department of Health and Human Services	502 Enforcement and Compliance: Home Health and Hospice – Wade Miller, Partner, Alston & Bird LLP; Kathleen A. Hessler, Director, Compliance & Risk, Simone Healthcare Consultants; Laura Ellis, Senior Counsel, HHS/OIG; Sara McLean, Assistant Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. Dept. of Justice	503 Recent CIAs & Compliance Effectiveness – Thomas Beimers, Partner, Hogan Lovells; Steven W. Ortquist, Managing Director, Aegis Compliance & Ethics Center LLP; Susan Gillin, Deputy Branch Chief, Administrative and Civil Remedies Branch, Office of Counsel to the Inspector General
12:00–1:00 PM	Networking Lunch (provided)		
1:00–2:00 PM Breakout Sessions	601 Stark Law and SRDP – Robert A. Wade, Partner, Krieg DeVault LLP; Joseph Hudzik, Counsel, Latham & Watkins, LLP	602 Enforcement and Compliance for Physician Related Fraud – Anna M. Grizzle, Partner, Bass, Berry & Sims PLC; Jerry Williamson, Healthcare Consultant/Adjunct Professor of Law, Loyola University Chicago School of Law	603 Public Disclosure, Original Source and First to File Under the False Claims Act – Peter Chatfield, Partner, Phillips & Cohen LLP; Robert McAuliffe, Assistant Director, Civil Fraud Section, U.S. DOJ
2:00–2:30 PM	Networking Break		
2:30–3:30 PM Breakout Sessions	701 Enforcement and Compliance; Medical Necessity and Quality of Care – Sean R. McKenna, Shareholder, Greenberg Traurig, LLP; David Wright, Director, Survey and Certification Group, Centers for Medicare & Medicaid Services; CJ Wolf, Senior Compliance Executive, Healthicity	702 Application of Privilege and Internal Investigations – Sara Kay Wheeler, Partner, King & Spalding; David Douglass, Sheppard Mullin, LLP	703 Recent Developments in Contractor Audits & Investigations – Jill Wright, Special Counsel, Foley & Lardner LLP; Lester J. Perling, Partner, Broad and Cassel

Wednesday, October 26: Post-Conference

8:30–10:00 AM Post-Conference Breakout Sessions	W1 Criminal and Civil Liabilities for Overpayments – David Glaser, Shareholder, Fredrikson & Byron PA; Sanford Teplitzky, Principal, O B E R K A L E R	W2 Enforcement, Compliance and Long Term Care: Nursing Homes – Amy Easton, Phillips and Cohen LLP; Sally Blinken, Special Assistant Attorney General, Office of the Attorney General of the State of NY; Andy Mao, Assistant Director/ Elder Justice Initiative Coordinator, US Department of Justice
10:00–10:15 AM	Networking Break	
10:15–11:45 AM Post-Conference Breakout Sessions	W3 Increased Focus on Individual Liability for Criminal & Civil Healthcare Fraud – Scott Grubman, Partner, Chilivis, Cochran, Larkins & Bever; Charles Mulaney, Assistant US Attorney, US Attorney's Office Southern District of Georgia; Kirk Ogrosky, Partner, Arnold & Porter LLP; Holly Pierson, Pierson Law LLC	W4 Damages and Liability to Federal Health Programs – Tim Renjilian, FTI Consulting; Katherine Lauer, Partner, Latham & Watkins, LLP
11:45 AM–12:30 PM	Lunch (on your own)	
12:30–1:00 PM	CHC Exam Check-in	
1:00–3:30 PM	Certified in Healthcare Compliance (CHC) [®] exam (optional)	

Hear what others say

about HCCA's Healthcare Enforcement Compliance Institute

"A pleasant alternative to the general Compliance '101' conferences. The enforcement type format was like a Compliance '201.'"

—Stephen Surgrue

"I found this three-day conference very informative. It was great to hear from the experts themselves. Compliance/HIPAA Officers receive daily notifications from the top entities about regulations and laws, breaches, hackers and fraud, but to see that these are real people, willing to share their knowledge was impressive. Thank you HCCA for this opportunity!"

—Betty Heinfeld

"I always learn something new at HCCA events but the Enforcement Institute in DC was especially helpful. The speakers were excellent and spoke about relevant and timely issues. Because many of the speakers were from the government the information came directly from 'the horse's mouth'. I will definitely attend again and am grateful to HCCA."

—Shirlene Meernik

"I always soak up the knowledge at these conferences and especially enjoyed this Healthcare Enforcement conference. Enabled me to have an immersion on incredibly important subject matter that is a foundation to the Compliance program. Program offered as always a lot of takeaways and awesome networking. Appreciate the efforts of the HCCA staff in pulling this together! Excellent!"


—Patricia Sautel Slater

Sunday, October 23 PRE-CONFERENCE

9:00–10:30 AM

P1 Anatomy of False Claims Act Case: Investigation, Negotiation, Resolution

 *Moderator: Craig Holden, Chair and CEO, O B E R | K A L E R*

 *Amy Easton, Phillips and Cohen LLP*

 *Edgar Bueno, Partner, Morris, Manning & Martin LLP*


 *Eva Gunasekera, Trial Attorney, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. DOJ*

- The Investigation Phase: subpoenas/ CIDs, data analysis, witness interviews and more
- The Negotiation Phase: initiation, ADR, scope of release, monetary and other issues
- The Resolution Phase: settlement agreements, individual liability, CIAs/ OIG and relator issues

P2 Health Information Privacy and Security Standards

 *Adam Greene, Partner, Davis Wright Tremaine, LLP*

 *Iliana Peters, Senior Advisor for HIPAA Compliance and Enforcement, HHS Office for Civil Rights*

 *Marti Arvin, Vice President of Audit Strategy, CynergisTek*


- How OCR is addressing HIPAA non-compliance through complaint and breach investigations and the audit program
- Lessons learned from recent resolution agreements
- Practical tips for preparing for OCR audits, responding to breaches, and working with OCR during investigations and settlement discussions

10:30–10:45 AM

Networking Break

10:45 AM–12:15 PM

P3 Litigating a False Claims Act Case

 *John T. Boese, Of Counsel, Fried, Frank, Harris, Shriver & Jacobson LLP*

 *Janet Goldstein, Partner, Vogel, Slade & Goldstein, LLP*

 *Enu Mainigi, Williams & Connolly LLP*

 *Michael D. Granston, Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. DOJ*

- Common motions in FCA litigation.
- Developing issues in proving falsity, knowledge and damages
- Discovery and trial issues in intervened and non-intervened cases.
- Role of individual defendants in FCA litigation

P4 Kickback and Stark Law Developments

 *Daniel Melvin, Partner, McDermott Will & Emery, LLP*

 *Kevin McAnaney, Law Office of Kevin G. McAnaney*

- Overview of key statutory terms and exceptions for anti-kickback statute
- Overview of key statutory terms and exceptions for Stark law
- Overview of enforcement trends and recent noteworthy decisions

12:15–1:30 PM

Lunch on Own

12:30–1:15 PM

Speed Networking

1:30–3:00 PM

P5 Negotiating False Claims Act Settlements

 *Moderator: Steve Altman, Principal, Altman Dispute Resolution Services*

 *Paul Weidenfeld, Attorney, Law Offices of Paul Weidenfeld*

 *Marlan Wilbanks, Senior Partner, Wilbanks & Gouinlock, LLP*

 *Lisa Re, Assistant Inspector General for Legal Affairs, OIG/HHS*


Colin M. Huntley, Assistant Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. DOJ

The vast majority of FCA cases are resolved through a settlement. This session will help identify:

- When is the case best situated for negotiations—before intervention, after discovery, after motions?
- What do the parties really care about—the Department of Justice, the client agency, the defendant and the relator?
- When and why is it helpful to use a mediator?
- How do you most effectively argue the merits? the damages?
- What terms are open for negotiation and when should you raise them?

P6 Federal Administrative Sanctions: Exclusion and Civil Money Penalties

 *Julie Kass, Lawyer, Ober, Kaler, Grimes & Shriver*

 *Katie Fink, Senior Counsel, Administrative and Civil Remedies Branch, HHS/OIG*

3:00–3:15 PM

Networking Break

3:15–4:45 PM

P7 Handling a Criminal Healthcare Fraud Case



Benton Curtis, Senior Counsel, Broad and Cassel



Sam Sheldon, Quinn Emanuel

Sally B. Molloy, Trial Attorney, Fraud Section, U.S. Department of Justice, Criminal Division

- Investigative interviewing techniques
- The use of Big Data
- Emerging trends in criminal healthcare fraud

P8 Managed Care Fraud Enforcement and Compliance



Craig Smith, Hogan & Lovells



Christopher Horan, VP Compliance Investigations, Wellcare Health Plan, Inc.

- Understanding and developing an SIU in a managed care environment
- Understanding regulatory challenges for a managed care SIU
- Managed care SIU and law enforcement—same goals, but how to get there?

4:45–6:00 PM

Welcome Reception

Monday, October 24 CONFERENCE

7:15–8:15 AM

Continental Breakfast (provided)

8:15–8:30 AM

Opening Remarks

8:30–9:30 AM

GENERAL SESSION: Influencing Decision-Making 2.0: Moving the Meteor



Jenny O'Brien, Chief Compliance Officer, UnitedHealthcare



Roy Snell, CEO, SCCE/HCCA

9:30–10:00 AM

GENERAL SESSION: CMS Update



Jerry Mulcahy, Director Program Compliance and Oversight, Centers for Medicare & Medicaid Services

10:00–10:30 AM

GENERAL SESSION: OIG Update



Robert DeConti, Assistant IG for Legal Affairs, OIG

10:30–11:00 AM

Networking Break

11:00 AM–12:00 PM

BREAKOUT SESSIONS

101 Preparing your Organization for an HHS-OIG Information Security Audit



David Holtzman, VP Compliance, CynergisTek, Inc.



Brian Johnson, Acting Director, IT Audit, U.S. Department of Health and Human Services OIG

- Learn how OIG develops & executes projects assessing security of information & information systems of HHS programs & participants, including Medicare, Medicaid, Insurance Marketplaces, HIPAA covered entities, and recipients of CMS EHR incentive payments
- Explore the key areas that are the focus of an audit engagement, as well as the criteria, processes, and tools that are used to measure the effectiveness of safeguards for information assurance as well as steps to prepare for an OIG performance audit
- Using risk-based frameworks to empower organizations in identifying threats and vulnerabilities to information assurance. Learn how compliance pros assess an organization for meeting regulatory requirements and industry best practices

102 Negotiating & Surviving a Corporate Integrity Agreement



*Laura Laemmle-Weidenfeld,
Partner, Jones Day*



*Regina G. Morano, SVP-Chief
Regulatory Affairs & Compliance
Officer, True Health Diagnostics*



*Caitlin McCormick,
Counsel, Akin Gump*

- Year 1: Setting the tone with your relationships and compliance structure (implementing the CIA; Crisis management and public image; working with OIG; Finding the right IRO; Gaining corporate buy-in; Hiring and managing an effective compliance team)
- Years 2-4: A Roadmap of Common Issues That Arise During a CIA (including reportable events, “substantial” overpayments, annual IRO review and optimizing your entity’s response, annual reports, and turning competitive threats on their heads)
- Years 4-5: Preparing for a Post-CIA World (culture check, changing relationship with outside counsel, striking the right balance, communication with the Board, the business and providers, and CIA close-out)

103 Medicare Enrollments: Revocation, Appeal and Remedies



*Ross Burris,
Attorney, Polsinelli*



*Andrew Wachler,
Owner/Principal,
Wachler & Associates, P.C.*

- Experienced healthcare compliance attorneys will discuss how Medicare enrollments can go wrong, and use real life examples of what providers can do to fix the problem
- Presenters will also be discussing options and strategies for requesting reconsideration and appealing adverse enrollment decisions to the ALJ through the DAB and beyond, including sample appeal arguments
- Finally, when enrollment problems can’t be fixed or appealed, the presenters will instruct how improperly billed claims may be refunded and provide a timeline for compliance under the 60 Day Rule

12:00–1:00 PM Networking Lunch (provided)

1:00–2:00 PM BREAKOUT SESSIONS

201 Criminal & Civil Enforcement and Compliance Program Effectiveness



*Steven W. Ortquist, Managing
Director, Aegis Compliance
& Ethics Center LLP*



*Carolyn F. McNiven, Shareholder
Litigation, Greenberg Traurig*



*David Rosenbloom, Partner,
McDermott Will & Emery LLP*

- Factors that Can Make or Break a Compliance Programs Ability to Serve as an Effective Defense
- How the Yates Memo and the Trend Toward Individual Responsibility Should Inform Your Compliance Program Efforts
- What Boards and Management Should be Doing Now

202 Best Practices for Dealing with the States in False Claims Act Investigations, Litigation and Settlement



*Candice M. Deisher, Assistant
Attorney General, Virginia
Attorney General’s Office*



*Marc S. Raspanti, Pietragallo
Gordon Alfano Bosick
& Raspanti, LLP*

Two seasoned false claims act practitioners provide their respective views on the following:

- Differences between state and federal false claims act cases
- How to attract a state to your case. What a state looks for when evaluating a qui tam. As a plaintiff, what can you do to capture a state’s interest?
- How state and federal litigation under the respective false claims acts differs. Issues that states may face when considering litigation. As a plaintiff, how can you help?

203 Stark, False Claims and the Transition to Outcome-Based Reimbursement

*JD Thomas,
Waller*



*Andrew A. Bobb, Deputy Chief–
Civil Division, Civil Health Care
Fraud Coordinator, AUSA,
Southern District of Texas*

*Stephen Page, VP, Associate
General Counsel, RegionalCare
Hospital Partners, Inc.*

- Government, in-house and outside counsel perspectives on Stark law compliance in physician contracting arrangements in an era of increased False Claims Act enforcement
- The panelists will provide an analysis of recent False Claims Act settlements and decisions involving alleged Stark violations and a discussion of key factors of those cases
- Practical takeaways to increase Stark compliance and avoid False Claims Act liability with regard to common physician compensation models will be provided

2:00–2:30 PM

Networking Break

2:30–3:30 PM

BREAKOUT SESSIONS

301 State False Claims & Medicaid Fraud Enforcement Update



Jack Wenik, Partner, Epstein Becker & Green PC



George Codding, Sr. Assistant Attorney General, State of Colorado

- Understand and de-mystify the role of state enforcement authorities, and understand how and why state investigations take place
- Current trends in state Medicaid enforcement including areas of emphasis going forward
- Discuss examples of state enforcement efforts and demands, with practical suggestions from both the defense and prosecution perspective as to how to work with these authorities to ensure minimum disruption and the best outcome

302 Overpayment and Self Disclosure



Tony Maida, Partner, McDermott Will & Emery



Matthew Edgar, Health Insurance Specialist, CMS



David Fuchs, Associate Counsel, Administrative and Civil Remedies Branch, HHS/OIG

- Best practices and tips in deciding whether an issue is appropriate and ready for disclosure
- Discuss the differences between overpayments, Stark-only issues, and potential fraud liability
- Learn about the OIG and CMS self-disclosure protocols, the contractor refund process, and DOJ disclosures

303 Board and Management: Compliance Accountability



Katherine Matos, Senior Counsel, U.S. Dept. HHS, OIG



James G. Sheehan, Chief, Charities Bureau, NY Attorney General



Christopher Ideker, Managing Director, Alvarez & Marsal Disputes and Investigations

This session reviews literature and best practices from government agencies and thought leaders on five aspects of compliance for boards and managers:

- Compliance as a risk: the identification and mitigation of key risk areas
- Compliance as a legal duty: roles and duties for directors and officers
- Compliance as a performance metric: benchmarks and scorecards
- Compliance as remediation: appropriate corrective, follow up, disciplinary actions
- Compliance and Audit: Management Representations to auditors about programs and controls to prevent and detect fraud, and allegations of suspected fraud

3:30–4:00 PM

Networking Break

4:00–5:00 PM

BREAKOUT SESSIONS

401 Advanced Discussion: Kick-Back, Stark & False Claims Act



Daniel Melvin, Partner, McDermott Will & Emery, LLP



Kevin McAnaney, Law Office of Kevin G. McAnaney



Marlan Wilbanks, Senior Partner, Wilbanks & Gouinlock, LLP



Scott Withrow, Partner, Withrow, McQuade & Olsen, LLP

402 Advanced Discussion: Government Enforcement Official & Chief Compliance Officer



Bret S. Bissey, Sr VP, Compliance Services, MediTract, Inc.



Alec Alexander, Partner, Breazeale, Sachse & Wilson, L.L.P.

- Every investigation settlement has a history of something that could or should have been done proactively. Hear of investigations, settlements and other compliance experiences from the speakers about could have been done different
- The negotiation process surrounding a Settlement Agreement or CIA can result in agreements which contain flaws or inaccuracies. Who should be negotiating CIAs? What elements does the government mandate in these agreements how does a provider comply
- What is the government looking for from a provider? What approach should the provider take in dealing with a government inquiry? How important is the Board Governance in this regard? What can a compliance officer do to assure the board is on-target?

403 Telehealth & Compliance



Deborah A. Randall, Health Law Attorney, Deborah Randall Consulting

- Licensure and Quality of Care standards will be enforcement focus points for telehealth
- Privacy and security concerns in telehealth yield potential audit enforcement issues
- Partnering in telehealth delivery: How to make contracts workable and enforceable

5:00–6:00 PM

Networking Reception

Tuesday, October 25 CONFERENCE

7:15–8:15 AM

Continental Breakfast (provided)

8:15–8:30 AM

Opening Remarks

8:30–9:00 AM

GENERAL SESSION: Health Care Fraud Prosecutions and Data Analytics



*Andrew Weissmann, Chief,
Fraud Section, Criminal Division,
Department of Justice*

9:00–10:30 AM

GENERAL SESSION: Enforcement and Compliance: Strategies for Organizational Counsel and Compliance Professionals



*Gabriel Imperato
(Moderator), Managing
Partner, Broad and Cassel*



*Nancy Guller Hayt, Chief
Corporate Responsibility Officer,
Adventist Health System*



*Lesley Skillen,
Getnick & Getnick LLP*

*Nicholas E. Surmacz,
U.S. Department of Justice,
Criminal Division, Fraud Section*



*Richard Westling,
Partner, Waller Lansden
Dortch & Davis, LLP*

10:30–11:00 AM

Networking Break

11:00 AM–12:00 PM

BREAKOUT SESSIONS

501 Organizational Compliance and Excluded Individuals and Entities



*Ryan Meade, Director of
Regulatory Compliance
Studies, Loyola University
Chicago School of Law*

*Tamara Forys, Senior
Counsel, Office of Counsel
to the Inspector General,
Office of Inspector General,
U.S. Department of Health
and Human Services*

- Review mandatory versus permissive exclusion
- Discuss self-disclosure of exclusion compliance issues
- Examine scenarios of potential liability and resolutions

502 Enforcement and Compliance: Home Health and Hospice



*Wade Miller, Partner,
Alston & Bird LLP*



*Kathleen A. Hessler, Director,
Compliance & Risk, Simone
Healthcare Consultants*

*Laura Ellis, Senior
Counsel, HHS/OIG*



*Sara McLean, Assistant Director,
Commercial Litigation Branch,
Fraud Section, Civil Division,
U.S. Dept. of Justice*

- Discuss key elements of the hospice and home health benefits including eligibility, diagnosis, election, levels of care, medical necessity and homebound status
- Enforcement trends and current case law for hospice eligibility and home health services
- Practical tips for internal and external auditing and monitoring

503 Recent CIAs & Compliance Effectiveness



*Thomas Beimers, Partner,
Hogan Lovells*



*Steven W. Ortquist, Managing
Director, Aegis Compliance
& Ethics Center LLP*



*Susan Gillin, Deputy Branch
Chief, Administrative and Civil
Remedies Branch, Office of
Counsel to the Inspector General*

- Current enforcement priorities of relevant agencies (DOJ, OIG, FDA, CMS, MFCUs, State AGs)
- Landscape of traditional sources of compliance guidance, with focus on OIG's occasional formal publications in the Federal Register
- Examples of enhanced provisions in Corporate Integrity Agreements that cut across provider types and discussion of why these provisions are as important as the more formal compliance guidance

12:00–1:00 PM

Networking Lunch

1:00–2:00 PM

BREAKOUT SESSIONS

601 Stark Law and SRDP



*Robert A. Wade, Partner,
Krieg DeVault LLP*



*Joseph Hudzik, Counsel,
Latham & Watkins, LLP*

- Key cases and settlements, including Halifax Health, Tuomey, Adventist, Broward Health, and Columbus Regional—what have we learned?
- What does “take into account” the volume or value of referrals really mean?
- History and regulatory guidance regarding self-reporting Stark issues—key learning points from the SRDP both from the perspective of the government and private practice

602 Enforcement and Compliance for Physician Related Fraud



*Anna M. Grizzle, Partner,
Bass, Berry & Sims PLC*



*Jerry Williamson, Healthcare
Consultant/ Adjunct Professor
of Law, Loyola University
Chicago School of Law*

- Analysis of lessons learned from recent enforcement actions and government enforcement priorities related to physician compensation arrangements, leading to increased compliance risk and liability for physicians and entities contracting with physicians
- Use of case studies to explore regulatory and legal risks related to quality of care, medical record documentation, electronic medical records, and quality related incentive programs
- Effective strategies and best practices for navigating compliance and enforcement issues in referral source relationships

603 Public Disclosure, Original Source and First to File Under the False Claims Act



*Peter Chatfield, Partner,
Phillips & Cohen LLP*



*Robert McAuliffe, Assistant
Director, Civil Fraud
Section, U.S. DOJ*

2:00–2:30 PM

Networking Break

2:30–3:30 PM

BREAKOUT SESSIONS

701 Enforcement and Compliance; Medical Necessity and Quality of Care



*Sean R. McKenna, Shareholder,
Greenberg Traurig, LLP*



*David Wright, Director, Survey
and Certification Group, Centers
for Medicare & Medicaid Services*



*CJ Wolf, Senior Compliance
Executive, Healthicity*

- Hear from a current Regional Administrator about CMS priorities
- Learn from a former federal prosecutor how DOJ, the OIG, and CMS work together
- Understand the latest CMS trends in enforcement matters

702 Application of Privilege and Internal Investigations



*Sara Kay Wheeler,
Partner, King & Spalding*



*David Douglass,
Sheppard Mullin, LLP*

- The role of counsel and compliance officer in internal investigations
- Striking the right balance between transparency and privilege
- Impact of the DOJ’s “Yates Memo” on Compliance Officers

703 Recent Developments in Contractor Audits & Investigations

*Jill Wright, Special Counsel,
Foley & Lardner LLP*



*Lester J. Perling, Partner,
Broad and Cassel*

- The right way and the wrong way to approach contractor audits and investigations—yes, they do investigate
- Strategies for appealing contractor actions—overpayments, revocations, suspensions, etc
- The future: what can we expect (or hope for)?

Wednesday, October 26 POST CONFERENCE & EXAM

8:30–10:00 AM

POST-CONFERENCE SESSIONS

W1 Criminal and Civil Liabilities for Overpayments



*David Glaser, Shareholder,
Fredrikson & Byron PA*



*Sanford Teplitzky, Principal,
OBERKALER*

- Analyze why insufficient documentation doesn't create a Medicare overpayment
- Discuss strategies for handling audits by private payors
- Examine common mistakes made when making a voluntary disclosure and suggest language for refund letters

W2 Enforcement, Compliance and Long Term Care: Nursing Homes



*Amy Easton,
Phillips and Cohen LLP*



*Sally Blinken, Special Assistant
Attorney General, Office
of the Attorney General
of the State of NY*

*Andy Mao, Assistant
Director/Elder Justice
Initiative Coordinator,
US Department of Justice*

- Failure of Care/Abuse and Neglect cases
- RUGs and other types of cases
- Elder Justice Task Forces and other enforcement trends

10:00–10:15 AM

Networking Break

10:15–11:45 AM

POST-CONFERENCE SESSIONS

W3 Increased Focus on Individual Liability for Criminal & Civil Healthcare Fraud



*Scott Grubman, Partner, Chilivis,
Cochran, Larkins & Bever*



*Charles Mulaney, Assistant US
Attorney, US Attorney's Office
Southern District of Georgia*



*Kirk Ogrosky, Partner,
Arnold & Porter LLP*



*Holly Pierson,
Pierson Law LLC*

- A discussion of the government's recent focus on individual liability in healthcare fraud and abuse matters, including a recent OIG fraud alert directed at physicians and the DOJ's new policy on individual responsibility
- A discussion of how the government's new focus on individual responsibility has and will affect healthcare providers in investigations and litigation under the False Claims Act, Stark law, and Anti-Kickback Statute
- What steps healthcare providers can take now to minimize the risk of a costly investigation later, including arrangements review, implementation of a compliance program, and properly responding to employee concerns related to compliance

W4 Damages and Liability to Federal Health Programs



*Tim Renjilian,
FTI Consulting*



*Katherine Lauer, Partner,
Latham & Watkins, LLP*

- Discuss key concepts in the calculation of damages related to Federal health care programs
- Understand emerging issues and debates involving damage calculations
- Consider the impact of recent cases and settlements on the calculation of damages

11:45 AM–12:30 PM

Lunch on Own

12:30–1:00 PM

CHC Exam Check-in

1:00–3:30 PM

Certified in Healthcare Compliance (CHC)® exam (optional)

The CHC exam is optional. You must register in advance to sit for the exam. The cost of the exam is not included in the conference registration fee. To register for the exam, complete the date-specific exam application and mail or fax as directed on the application. For a link to the exam application, visit hcca-info.org/heci.

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Healthcare
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healthcare
compliance
knowledge and
experience**



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Why do people add JD, MBA, or CPA after their name? They know those initials add credibility.

Become Certified in Healthcare Compliance (CHC)[®], Certified in Healthcare Privacy Compliance (CHPC)[®], Certified in Healthcare Research Compliance (CHRC)[®] or a Certified in Healthcare Compliance-Fellow (CHC-F)[®].

Applying to become certified is easy.

To learn what it takes to earn the CHC, CHRC, CHPC, or CHC-F designation, visit **compliancecertification.org**.

CHC[®]
Certified in Healthcare Compliance

CHRC[®]
Certified in Healthcare Research Compliance

CHPC[®]
Certified in Healthcare Privacy Compliance

CHC-F[®]
Certified in Healthcare Compliance Fellow

Full name _____
please type or print

Sharing your demographic information with HCCA will help us create better networking opportunities for you.
Thank you for taking a moment to fill out the following information.

Demographic Information

What is your functional job title? Please select one.

- | | |
|--|--|
| <input type="checkbox"/> Academic/Professor | <input type="checkbox"/> Consultant |
| <input type="checkbox"/> Administration | <input type="checkbox"/> Controller |
| <input type="checkbox"/> Asst Compliance Officer | <input type="checkbox"/> Ethics Officer |
| <input type="checkbox"/> Attorney (In-House Counsel) | <input type="checkbox"/> Executive Director |
| <input type="checkbox"/> Attorney (Outside Counsel) | <input type="checkbox"/> General Counsel |
| <input type="checkbox"/> Audit Analyst | <input type="checkbox"/> HIM Professional |
| <input type="checkbox"/> Audit Manager/Officer | <input type="checkbox"/> HIPAA/Privacy Officer |
| <input type="checkbox"/> Billing Manager/Officer | <input type="checkbox"/> Human Resources |
| <input type="checkbox"/> Charger Master | <input type="checkbox"/> Medical Director |
| <input type="checkbox"/> Chief Compliance Officer | <input type="checkbox"/> Nurse |
| <input type="checkbox"/> CEO/President | <input type="checkbox"/> Nurse Manager |
| <input type="checkbox"/> Chief Financial Officer | <input type="checkbox"/> Patient Safety Officer |
| <input type="checkbox"/> Chief Information Officer | <input type="checkbox"/> Pharmacy Director |
| <input type="checkbox"/> Chief Medical Officer | <input type="checkbox"/> Physician |
| <input type="checkbox"/> Chief Operating Officer | <input type="checkbox"/> Quality Assurance/
Quality of Care |
| <input type="checkbox"/> Clinical | <input type="checkbox"/> Regulatory Officer |
| <input type="checkbox"/> Coder | <input type="checkbox"/> Reimbursement Coordinator |
| <input type="checkbox"/> Compliance Analyst | <input type="checkbox"/> Research Analyst |
| <input type="checkbox"/> Compliance Coordinator | <input type="checkbox"/> Risk Manager |
| <input type="checkbox"/> Compliance Director | <input type="checkbox"/> Trainer/Educator |
| <input type="checkbox"/> Compliance Fraud Examiner | <input type="checkbox"/> Vice President |
| <input type="checkbox"/> Compliance Officer | <input type="checkbox"/> Other (please list below) |
| <input type="checkbox"/> Compliance Specialist | |

List others not listed here:

**Registration continues on
next page (turn over)**

What is your primary health care entity?

- | | |
|---|--|
| <input type="checkbox"/> Academic | <input type="checkbox"/> Long-Term Care |
| <input type="checkbox"/> Ambulance/Transportation | <input type="checkbox"/> Managed Care |
| <input type="checkbox"/> Behavioral Health | <input type="checkbox"/> Medical Device Manufacturer |
| <input type="checkbox"/> Consulting Firm | <input type="checkbox"/> Medical/Clinical Research |
| <input type="checkbox"/> Durable Medical Equipment | <input type="checkbox"/> Nursing |
| <input type="checkbox"/> Government Provider | <input type="checkbox"/> Other Provider of Services/
Products to Health Care Entities |
| <input type="checkbox"/> Health System | <input type="checkbox"/> Payor/Insurance |
| <input type="checkbox"/> Health System/Teaching | <input type="checkbox"/> Pharmaceutical Manufacturer |
| <input type="checkbox"/> Home Care/Hospice | <input type="checkbox"/> Physician Practice |
| <input type="checkbox"/> Hospital | <input type="checkbox"/> Rehabilitation |
| <input type="checkbox"/> Hospital/Teaching | <input type="checkbox"/> Retail Pharmacy |
| <input type="checkbox"/> Integrated Delivery System | <input type="checkbox"/> Third-Party Billing |
| <input type="checkbox"/> Integrated Health System | <input type="checkbox"/> Other (please list below) |
| <input type="checkbox"/> Laboratory | |
| <input type="checkbox"/> Law Firm | |

List others not listed here:

What certifications do you hold? Select all that apply.

- | | | | |
|--------------------------------|-------------------------------|--------------------------------|-------------------------------|
| <input type="checkbox"/> BA | <input type="checkbox"/> CHE | <input type="checkbox"/> FHFMA | <input type="checkbox"/> MSN |
| <input type="checkbox"/> BBA | <input type="checkbox"/> CHP | <input type="checkbox"/> JD | <input type="checkbox"/> MT |
| <input type="checkbox"/> BS | <input type="checkbox"/> CHPC | <input type="checkbox"/> LLM | <input type="checkbox"/> NHA |
| <input type="checkbox"/> BSN | <input type="checkbox"/> CHRC | <input type="checkbox"/> MA | <input type="checkbox"/> PhD |
| <input type="checkbox"/> CCEP | <input type="checkbox"/> CIA | <input type="checkbox"/> MBA | <input type="checkbox"/> RHIA |
| <input type="checkbox"/> CEM | <input type="checkbox"/> CPA | <input type="checkbox"/> MHA | <input type="checkbox"/> RHIT |
| <input type="checkbox"/> CCS | <input type="checkbox"/> CPC | <input type="checkbox"/> MPA | <input type="checkbox"/> RN |
| <input type="checkbox"/> CCS-P | <input type="checkbox"/> CPHQ | <input type="checkbox"/> MPH | |
| <input type="checkbox"/> CFE | <input type="checkbox"/> DDS | <input type="checkbox"/> MS | |
| <input type="checkbox"/> CHC | <input type="checkbox"/> ESQ | <input type="checkbox"/> MSHA | |

List others not listed here:

CONTACT INFORMATION

☐ Mr ☐ Mrs ☐ Ms ☐ Dr

HCCA Member ID (if applicable)

First Name MI

Last Name

Credentials (CHC, CCEP, etc.)

Job Title

Name of Employer

Street Address

City/Town State/Province

Country Zip/Postal Code




Phone

Email (required for registration confirmation & conference information)

SESSION SELECTION

Please select your sessions to assist us in room planning.
Select only ONE session per time slot.

ADDITIONAL FEES MAY APPLY if you select Pre-Conference (Sunday), or Post-Conference (Wednesday) sessions. Please select the appropriate checkboxes when choosing your Registration Options (above right).

SUN, OCT 23 BREAKOUTS	MON, OCT 24 BREAKOUTS	TUE, OCT 25 BREAKOUTS	WED, OCT 26 BREAKOUTS
PRE-CONFERENCE (MORNING)  \$125 9:00–10:30 AM <input type="radio"/> P1 <input type="radio"/> P2 10:45–12:15 PM <input type="radio"/> P3 <input type="radio"/> P4 PRE-CONFERENCE (AFTERNOON)  \$125 1:30–3:00 PM <input type="radio"/> P5 <input type="radio"/> P6 3:15–4:45 PM <input type="radio"/> P7 <input type="radio"/> P8	11:00 AM–12:00 PM <input type="radio"/> 101 <input type="radio"/> 102 <input type="radio"/> 103 1:00–2:00 PM <input type="radio"/> 201 <input type="radio"/> 202 <input type="radio"/> 203 2:30–3:30 PM <input type="radio"/> 301 <input type="radio"/> 302 <input type="radio"/> 303 4:00–5:00 PM <input type="radio"/> 401 <input type="radio"/> 402 <input type="radio"/> 403	11:00 AM–12:00 PM <input type="radio"/> 501 <input type="radio"/> 502 <input type="radio"/> 503 1:00–2:00 PM <input type="radio"/> 601 <input type="radio"/> 602 <input type="radio"/> 603 2:30–3:30 PM <input type="radio"/> 701 <input type="radio"/> 702 <input type="radio"/> 703	POST-CONFERENCE  \$125 8:30–10:00 AM <input type="radio"/> W1 <input type="radio"/> W2 10:15–11:45 AM <input type="radio"/> W3 <input type="radio"/> W4

REGISTRATION OPTIONS Registration fees are as listed and considered net of any local withholding taxes applicable in your country of residence.

- ☐ HCCA Members..... \$799
☐ Non-Members \$899
☐ HCCA Membership & Registration \$999
NEW MEMBERS ONLY / DUES REGULARLY \$295 ANNUALLY
☐ Pre-Conference Registration: SUNDAY MORNING \$125
☐ Pre-Conference Registration: SUNDAY AFTERNOON \$125
☐ Post-Conference Registration: WEDNESDAY MORNING..... \$125
☐ Discount for 5 or more from same organization..... (\$50)
☐ Discount for 10 or more from same organization..... (\$100)

TOTAL \$ _____

Special Request for Dietary Accommodation

- ☐ Gluten Free ☐ Kosher-Style (*no shellfish, pork or meat/dairy mixed*)
☐ Kosher (*Hechsher certified*) ☐ Vegetarian ☐ Vegan
☐ Other _____

PAYMENT OPTIONS

- ☐ Invoice me
☐ Check enclosed (payable to HCCA)
☐ I authorize HCCA to charge my credit card (choose below)
 Credit Card: ☐ American Express ☐ Discover ☐ MasterCard ☐ Visa

Due to PCI Compliance, please **do not provide any credit card information via email**. You may email this form to helpteam@hcca-info.org (without credit card information) and call HCCA at 888-580-8373 or 952-988-0141 with your credit card.

Credit Card Account Number

Credit Card Expiration Date

Cardholder's Name

Cardholder's Signature

HRI1016

WAYS TO REGISTER

MAIL to HCCA, 6500 Barrie Road, Suite 250, Minneapolis, MN 55435-2358

ONLINE at hcca-info.org/heci

FAX to 952-988-0146 (*include completed registration form with payment*)

EMAIL helpteam@hcca-info.org (*without credit card information*)

By submitting this registration form you agree to the Terms and Conditions as stated on page 15.

Terms and Conditions

Payment terms: Please make your check payable to HCCA, enclose payment with your registration, and return it to the HCCA office, or fax your credit card payment to 952-988-0146. If your total is miscalculated, HCCA will charge your card the correct amount. All expenses incurred to maintain or improve skills in your profession may be tax deductible, including tuition, travel, lodging, and meals. Please consult your tax advisor.

Cancellations/Substitutions: You may send a substitute in your place or request a conference credit. Refunds will not be issued. Conference credits are issued in the full amount of the registration fees paid, and will expire 12 months from the date of the original cancelled event. Conference credits may be used towards any HCCA service or product, except *The Health Care Compliance Professional's Manual*. If a credit is applied towards an event, the event must take place prior to the credit's expiration date. If you need to cancel your participation, notification is required by email at helpteam@hcca-info.org, prior to the start date of the event. Please note that if you are sending a substitute, an additional fee may apply.

Group Discounts: Discounts take effect the day a group reaches the discount number of registrants. Please send registration forms together to ensure that the discount is applied. A separate registration form is required for each registrant. Note that discounts will NOT be applied retroactively if more registrants are added at a later date, but new registrants will receive the group discount.

5 or more: \$50 discount for each registrant
10 or more: \$100 discount for each registrant

Agreements & Acknowledgements: I agree and acknowledge that I am undertaking participation in HCCA events and activities as my own free and intentional act, and I am fully aware that possible physical injury might occur to me as a result of my participation in these events. I give this acknowledgement freely and knowingly and assert that I am, as a result, able to participate in HCCA events, and I do hereby assume responsibility for my own well-being. I agree and acknowledge that HCCA plans to take photographs at the HCCA Healthcare Enforcement Compliance Institute and reproduce them in HCCA educational, news, or promotional material, whether in print, electronic, or other media, including the HCCA website. By participating in the HCCA Healthcare Enforcement Compliance Institute, I grant HCCA the right to use my name, photograph, and biography for such purposes.

Dress Code: Business casual dress is appropriate.

Special Needs/Concerns: Prior to your arrival, please call HCCA at 888-580-8373 if you have a special need and require accommodation to participate.

Hotel & Conference Location

Capital Hilton
1001 16th Street, NW
Washington, DC 20036

Capital Hilton has limited availability at the discounted group rate. Higher rates are available. For most up-to-date hotel information please visit hcca-info.org/heci.

A reduced rate of \$279.00 per night for single/double occupancy plus applicable taxes has been arranged for this program. The cut-off date to receive the group rate is Friday, September 23, 2016 or once the group room block is full, whichever comes first. Hotel accommodations are not included in your conference registration fee. The group rate includes complimentary internet in guestrooms. Reservations can be made by calling 1-800-HILTONS and use the group code "HCCA" to book at the group rate or book online at <https://resweb.passkey.com/go/HCCAHEALTHCARE2016>.

PLEASE NOTE: Neither HCCA nor any hotel it is affiliated with will ever contact you to make a hotel reservation. If you receive a call soliciting reservations on behalf of HCCA or the event, it is likely from a room poacher and may be fraudulent. We recommend you make reservations directly with the hotel using the phone number or web link in this brochure. If you have concerns or questions, please contact 888-580-8373. Recording: No unauthorized audio or video recording of HCCA Conferences is allowed.

Continuing Education Units

HCCA is in the process of applying for additional credits. If you do not see information on your specific accreditation and would like to make a request, please contact us at 952-988-0141 or 888-580-8373 or email ccb@compliancecertification.org. Visit HCCA's website, hcca-info.org for up-to-date information.

ACHE: The Health Care Compliance Association is authorized to award 20.0 hours of pre-approved ACHE Qualified Education credit (non-ACHE) for this program toward advancement, or recertification in the American College of Healthcare Executives. Participants in this program wishing to have the continuing education hours applied toward ACHE Qualified Education credit should indicate their attendance when submitting and application to the American College of Healthcare Executives for advancement or recertification.

Compliance Certification Board (CCB): CCB has awarded a maximum possible CEU award of up to 24.9 CCB CEUs, for these certifications: Certified in Healthcare Compliance (CHC)[®], Certified in Healthcare Compliance–Fellow (CHC-F)[®], Certified in Healthcare Privacy Compliance (CHPC)[®], Certified in Healthcare Research Compliance (CHRC)[®], Certified Compliance & Ethics Professional (CCEP)[®], Certified Compliance & Ethics Professional–Fellow (CCEP-F)[®], Certified Compliance & Ethics Professional–International (CCEP-I)[®].

Maximum CCB CEUs per day:

SUNDAY: 7.2 CCB CEUs
 MONDAY: 7.2 CCB CEUs
 TUESDAY: 6.0 CCB CEUs
 WEDNESDAY: 3.6 CCB CEUs

Possible additional 0.9 CCB CEUs for participation in the SpeedNetworking session (max of 1.5 per year).

CLE: The Health Care Compliance Association is a State Bar of California Approved MCLE provider, a Pennsylvania Accredited Provider, and is an accredited sponsor, approved by the State Bar of Texas, Committee on MCLE. An approximate maximum of 20.0 clock hours of CLE credit will be available to attendees of this conference. All CLE credits will be awarded based on individual attendance.

NASBA/CPE: The Health Care Compliance Association 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, Sponsor Identification No: 105638. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: www.learningmarket.org. A recommended maximum of 24.0 credits based on a 50-minute hour will be granted for this activity. This program addresses topics that are of a current concern in the compliance environment and is a group-live activity in the recommended field of study of Specialized Knowledge and Application. For more information regarding administrative policies such as complaints or refunds, call (888) 580-8373 or (952) 988-0141.

Nursing Credit: The Health Care Compliance Association is preapproved by the California Board of Registered Nursing, Provider Number CEP 14593, for a maximum of 24.0 contact hour(s). The following states will not accept CA Board of Nursing contact hours: Delaware, Florida, New Jersey and Utah. Massachusetts and Mississippi nurses may submit CA Board of Nursing contact hours to their state board, but approval will depend on review by the board. Please contact the Accreditation Department at ccb@compliancecertification.org with any questions you may have. Oncology Nurses who are certified by ONCC may request CA Nursing Credit (check box or indicate "Nursing" on the CEU form).

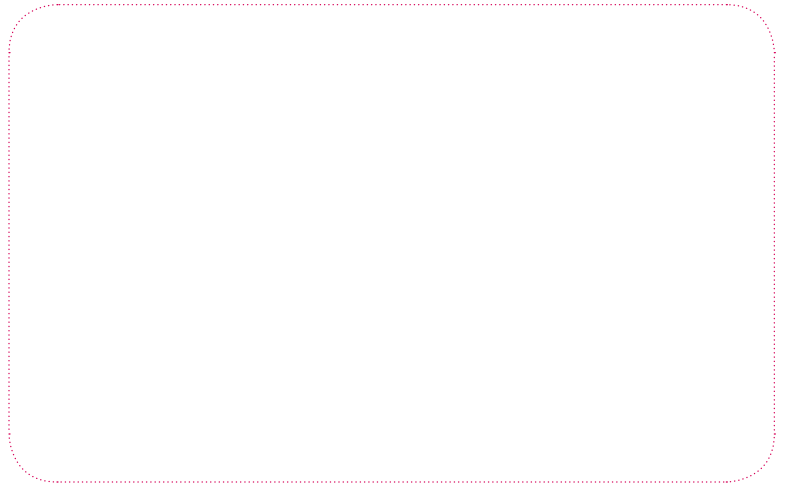
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