

**IN-PERSON OR VIRTUAL**

# Managed Care Compliance Conference

**IN-PERSON • Jan 30 – Feb 1, 2022 • Phoenix, AZ**  
**VIRTUAL • Feb 8–9, 2022 CST**

HCCA's Annual Managed Care Compliance Conference is the perfect event for those who manage compliance at health plan providers. Hear from experienced compliance leaders and explore topics and issues that are pertinent to industry professionals like you.

- Learn the latest practices and share strategies
- Connect with peers and mentors facing similar challenges
- Earn live Compliance Certification Board (CCB)<sup>®</sup> continuing education units (CEUs)

Learn more and register  
[hcca-info.org/2022-managed-care](https://hcca-info.org/2022-managed-care)



Attend the annual education and networking event for those who manage compliance for health plan providers. Learn the latest practices, share strategies, and connect with peers and mentors who work in the industry.

This conference offers live Compliance Certification Board (CCB)<sup>®</sup> continuing education units (CEUs) for participation. Please visit the event page for the latest details.

## Who should attend?

- Compliance officers
- Managers of compliance
- Internal auditors
- Fraud examiners
- Human resource managers
- Privacy officers
- Medicare compliance officers
- Inside and outside counsel

The Certified in Healthcare Compliance (CHC)<sup>®</sup> exam will be offered at the in-person Managed Care Compliance Conference on **Wednesday, February 2, 2022**. CCB also offers the flexibility for candidates to take their exam remotely, at a local testing site, or following certain HCCA conferences. To learn more about our various testing options, visit HCCA's website, [hcca-info.org/certification/become-certified/exam-information](https://hcca-info.org/certification/become-certified/exam-information).

## What will attendees learn?

Explore issues that are pertinent to industry professionals like you.

This year's agenda includes these trending topics:

- Diversity, Equity, and Inclusion in the Compliance Space
- Mental Health Parity and Addiction Equity Act (MHPAEA) Compliance in Action
- Managed Care: OIG Update on Priorities and Risk Areas in Managed Care
- The Dos and Don'ts of Medicare Advantage: Lessons from Recent Enforcement Activity in Medicare Advantage Programs
- Why me? Compliance officers personal risks in Managed Care investigations: Liaison, Witness, Subject, Defendant, Whistleblower
- Managed Care Hot Topics Panel Discussion

## Join the healthcare compliance community

Health Care Compliance Association (HCCA) members receive exclusive educational resources and discounts on conferences, publications, and CCB exams to help support them in their compliance roles. Join today to build your network and continue the growth and success of your compliance program. Learn more at [hcca-info.org/membership](https://hcca-info.org/membership).

## Members save on conference registration!

# Agenda

Managed Care Compliance Conference IN-PERSON • Jan 30 – Feb 1, 2022 • Phoenix, AZ

ALL TIMES LISTED ARE IN MOUNTAIN STANDARD TIME (MST)

## Sunday, January 30 **IN-PERSON**

8:00–9:30 AM	<b>P1</b> Diversity, Equity, and Inclusion in the Compliance Space
9:30–9:45 AM	Networking Break
9:45–11:15 AM	<b>P2</b> Mental Health Parity and Addiction Equity Act (MHPAEA): Compliance in Action
11:15 AM–12:45 PM	Lunch (on your own)
11:30 AM–12:30 PM	SpeedNetworking (Lunch provided only for pre-registered participants)
12:45–2:15 PM	<b>P3</b> Applying the Seven Elements of an Effective Compliance Program for Best Practices in Regulatory Audits
2:15–2:30 PM	Networking Break
2:30–4:00 PM	<b>P4</b> Back to the Future: Leveraging Knowledge and Experiences to Accommodate 2022 CMS Program Audit Protocols
4:00–5:30 PM	Welcome Reception

## Monday, January 31 **IN-PERSON**

SUBJECT AREA: MEDICARE/MEDICAID			
7:00–8:00 AM	Breakfast		
8:00–8:15 AM	Opening Remarks		
8:15–9:15 AM	<b>GENERAL SESSION:</b> Managed Care: OIG Update on Priorities and Risk Areas in Managed Care		
9:15–9:45 AM	Networking Break		
9:45–10:45 AM	<b>101</b> Effective and Compliant Hierarchical Condition Category Capture Auditing	<b>102</b> Surprises in the No Surprises Act: New Requirements for Plans and Providers Regarding Provider Directory Information	<b>103</b> Fraud, Waste and Abuse Updates from the FBI
10:45–11:00 AM	Networking Break		
11:00 AM–12:00 PM	<b>201</b> Best Practices in Establishing a Medicare Drug Management Program to Ensure Quality and Compliance	<b>203</b> Compliance Organization Design	
12:00–1:15 PM	Lunch		
1:15–2:15 PM	<b>301</b> Compliance Issues Under the Purview of Payment Integrity and Fraud, Waste, and Abuse	<b>303</b> The Lifecycle of a CMS Part D Memo from Analysis to CMS Audit	
2:15–2:30 PM	Networking Break		
2:30–3:30 PM	<b>402</b> The Next Big Thing! Maintaining Compliance and Managing Risk with Healthcare Startup Vendors and Providers	<b>403</b> Compliance Considerations in Mergers and Acquisitions	
3:30–3:45 PM	Networking Break		
3:45–4:45 PM	<b>GENERAL SESSION:</b> The Dos and Don'ts of Medicare Advantage and Medicaid Managed Care: Lessons from Recent Enforcement Activity		
4:45–6:00 PM	Networking Reception		

## Tuesday, February 1 **IN-PERSON**

SUBJECT AREA: MEDICARE/MEDICAID			
7:00–7:55 AM	Breakfast		
7:55–8:00 AM	Opening Remarks		
8:00–9:00 AM	<b>GENERAL SESSION:</b> Why Me? Compliance Officer's Personal Risks in Managed Care Investigations: Liaison, Witness, Subject, Defendant, Whistleblower		
9:00–9:30 AM	Networking Break		
9:30–10:30 AM	<b>501</b> The Magic of Universes: Beyond the CMS Audit	<b>502</b> A Deep Dive: Enforcement Trends and Risk Areas in Managed Care	
10:30–10:45 AM	Networking Break		
10:45–11:45 AM	<b>601</b> Preparing MCOs for the IDD Carve-In	<b>602</b> HITRUST CSF: Achieving Certification	
11:45 AM–12:45 PM	Lunch		
12:45–1:45 PM	<b>701</b> Building an Effective Medicare Compliance Risk Assessment	<b>702</b> Audit Readiness: To Infinity and Beyond	
1:45–2:00 PM	Networking Break		
2:00–3:00 PM	<b>801</b> How to Improve Your Medicare Data Validation Audit Process to Enhance Oversight of FDRs and Internal Operations	<b>802</b> Automate Your Compliance Process to Impress Regulators	
3:00–3:15 PM	Networking Break		
3:15–4:15 PM	<b>GENERAL SESSION:</b> Hot Topics Panel		

## Wednesday, February 2 **IN-PERSON**

8:00–8:15 AM	Exam Check-in
8:15–10:15 AM	Certified in Healthcare Compliance (CHC) <sup>®</sup> Exam (optional)

Agenda and times subject to change.

# Agenda

Managed Care Compliance Conference VIRTUAL • Feb 8–9, 2022

ALL TIMES LISTED ARE IN CENTRAL STANDARD TIME (CST)

## Tuesday, February 8 **VIRTUAL**

8:25–8:30 AM	Welcome and Opening Remarks	
8:30–9:30 AM	<b>V1</b> The Impact of HIPAA Regulatory Changes on Managed Care Organizations	<b>V2</b> Applying Principles of Continuous Quality Improvement (CQI) to Your Compliance Program Using Root Cause Analysis (RCA)
9:30–9:45 AM	Break	
9:45–10:45 AM	<b>V3</b> How to Improve Your Medicare Data Validation Audit Process to Enhance Oversight of FDRs and Internal Operations	<b>V4</b> OIG Audits of Diagnosis Codes at High Risk for Being Miscalculated: A Discussion of How We Identify Diagnosis Codes to Audit and What You Can Do to Enhance Your Compliance Procedures
10:45 AM–11:00 PM	Break	
11:00 AM–12:00 PM	<b>V5</b> The Magic of Universes: Beyond the CMS Audit	<b>V6</b> A Deep Dive: Enforcement Trends and Risk Areas in Managed Care
12:00–1:00 PM	Mid-conference break	
1:00–2:00 PM	<b>V7</b> The Next Big Thing! Maintaining Compliance and Managing Risk with Healthcare Startup Vendors and Providers	<b>V8</b> Compliance Organization Design
2:00–2:15 PM	Break	
2:15–3:45 PM	<b>V9</b> Back to the Future: Leveraging Knowledge and Experiences to Accommodate 2022 CMS Program Audit Protocols	<b>V10</b> Creativity in Compliance: A Case Study in Developing Impactful and Action-Oriented Compliance Activities and Trainings

## Wednesday, February 9 **VIRTUAL**

8:30–9:30 AM	<b>V11</b> Compliance Considerations in Mergers and Acquisitions	<b>V12</b> Looking Around the Corner: How to Navigate the Shifting Drug Contracting Landscape
9:30–9:45 AM	Break	
9:45–10:45 AM	<b>V13</b> Compliance Issues Under the Purview of Payment Integrity and Fraud, Waste, and Abuse	<b>V14</b> HITRUST CSF: Achieving Certification
10:45 AM–11:00 PM	Break	
11:00 AM–12:00 PM	<b>V15</b> Building an Effective Medicare Compliance Risk Assessment	<b>V16</b> Best Practices in Establishing a Medicare Drug Management Program to Ensure Quality and Compliance
12:00–1:00 PM	Mid-conference break	
1:00–2:00 PM	<b>V17</b> Surprises in the No Surprises Act: New Requirements for Plans and Providers Regarding Provider Directory Information	<b>V18</b> Effective and Compliant Hierarchical Condition Category Capture Auditing
2:00–2:15 PM	Break	
2:15–3:45 PM	<b>V19</b> CMS Program Audit: What to Do Before and After Your Organization Receives an Audit Notice	<b>V20</b> Applying the Seven Elements of an Effective Compliance Program for Best Practices in Regulatory Audits

Agenda and times subject to change.

## IN-PERSON

### Sunday, January 30

(Pre-Conference)

**8:00 – 9:30 AM**

#### **P1** Diversity, Equity, and Inclusion in the Compliance Space

Level: Intermediate

Cheyenne Ross, Arizona VP of Compliance & Regulatory Affairs, Arizona Complete Health

Kimulet Winzer, Director, SunHawk Consulting

- Increase compliance program engagement by intentionally creating an inclusive environment
- Expand leadership skills by leveraging inclusive language to foster ethical decisions
- Learn to infuse courageous conversations and ongoing training to strengthen your compliance program

**9:30 – 9:45 AM**

#### Networking Break

**9:45 – 11:15 AM**

#### **P2** Mental Health Parity and Addiction Equity Act (MHPAEA): Compliance in Action

Level: Intermediate

Noreen Vergara, Senior Counsel, Husch Blackwell LLP

Zach Davis, Senior Consulting Actuary, Wakely Consulting Group, LLC

Amanda Brown, Vice President, Compliance Solutions, ATTAC Consulting Group LLC

- Quantitative treatment limitations (QTL) and Non-quantitative treatment limitations (NQTL) 101
- Creating a QTL annual testing process, NQTL comparative analysis, and compliance oversight program
- The latest MHPAEA-related regulatory updates and their impact on compliance and the industry

**11:15 AM – 12:45 PM**

**Lunch** (on your own)

**11:30 AM – 12:30 PM**

#### SpeedNetworking

(Lunch provided only for pre-registered participants)

**12:45 – 2:15 PM**

#### **P3** Applying the Seven Elements of an Effective Compliance Program for Best Practices in Regulatory Audits

Level: Intermediate

Kenneth Nuñez, Chief Compliance Officer, Provider Partners Health Plan

Annie Hsu Shieh, Senior Compliance Counsel, Central Health Plan of California

Robert Alfano, U.S. Regulatory Lead, Babylon

- Apply the seven elements into regulatory audit planning to manage toward successful results
- Discuss key regulatory audit prep best practices using the seven elements to guide successful planning, ensure cohesiveness, and organization in audit prep
- This presentation will present best practices from a plan, PBM, and TPA oversight perspective and discuss how this effective planning can help better organize your regulatory audits

**2:15 – 2:30 PM**

#### Networking Break

**2:30 – 4:00 PM**

#### **P4** Back to the Future: Leveraging Knowledge and Experiences to Accommodate 2022 CMS Program Audit Protocols

Level: Intermediate

Annie Hsu Shieh, Senior Compliance Counsel, Central Health Plan of California

Anne Crawford, SVP Compliance Solutions, ATTAC Consulting Group LL

- Hear how recent audit experiences combined with revised CMS program audit protocols can be leveraged
- Key considerations when determining if 2022 protocols require modifications to monitoring activities
- Applying best practices to ensure audit readiness

**4:00 – 5:30 PM**

#### Welcome Reception

## IN-PERSON

### Monday January 31

7:00 – 8:00 AM

Breakfast

8:00 – 8:15 AM

Opening Remarks

8:15 – 9:15 AM

#### GENERAL SESSION:

Managed Care: OIG Update on Priorities and Risk Areas in Managed Care

Megan Tinker, Assistant Inspector General, U.S. Department of Health and Human Services, Office of the Inspector General

- Discussion of recent OIG work in managed care
- Risk areas and enforcement trends
- Upcoming OIG work and priorities in managed care

9:15 – 9:45 AM

Networking Break

9:45 – 10:45 AM

#### SUBJECT AREA: MEDICARE/MEDICAID

**101** Effective and Compliant Hierarchical Condition Category Capture Auditing

Level: Intermediate

Allison Ritchie, Senior Consultant, Protiviti

Kim Pardini-Kiely, Clinical and Operational Excellence Lead, Protiviti

Bryan Beaudoin, Health Information Management Solution Lead, Protiviti

- Receive an overview of hierarchical condition category (HCCs) capture's importance and use
- Learn how to use data analytics to effectively audit HCC capture for accuracy and compliance
- Understand how to oversee a risk-based HCC capture audit as well as integrating internal controls

**102** Surprises in the No Surprises Act: New Requirements for Plans and Providers Regarding Provider Directory Information

Level: Intermediate

Scott Westover, SVP Network and Regulatory Strategy, Quest Analytics

Michael Adelberg, Principal, Faegre Drinker Consulting

- In order to improve the accuracy of provider directories, Congress passed the No Surprises Act
- The No Surprises Act puts new requirements on new health plans and providers
- Health plans and providers have to come into compliance with the law and new regulation

**103** Fraud, Waste and Abuse Updates from the FBI

Level: Intermediate

SSA Joseph S. Parker Jr., FBI, Criminal Investigative Division

- Discussion of the FBI's Health Care Fraud Program initiatives and priorities
- Review of current and emerging health care fraud schemes
- How the FBI works with other Federal agencies and private insurance carriers

10:45 – 11:00 AM

Networking Break

11:00 AM – 12:00 PM

#### SUBJECT AREA: MEDICARE/MEDICAID

**201** Best Practices in Establishing a Medicare Drug Management Program to Ensure Quality and Compliance

Level: Basic

Dawn Becker-Ellison, Sr Clinical Pharmacist, Blue Shield of California

Amy Togonon PharmD, Clinical Pharmacist, Blue Shield of California

- Review Medicare Part D requirements for a Drug Management Program
- Describe case review team membership and process
- Describe how the team and processes ensure compliance with Medicare DMP requirements

## IN-PERSON

### 203 Compliance Organization Design

Level: Intermediate

James Rose, Managing Director, SunHawk Consulting, LLC

- What is organizational design and how it is important to compliance program effectiveness?
- How does my organization's other governance groups impact the compliance organization design?
- What considerations should be made for organization design of the compliance program?

**12:00 – 1:15 PM**

Lunch

**1:15 – 2:15 PM**

**SUBJECT AREA: MEDICARE/MEDICAID**

### 301 Compliance Issues Under the Purview of Payment Integrity and Fraud, Waste, and Abuse

Level: Intermediate

Karen Weintraub, Executive Vice President, Healthcare Fraud Shield

Lori Peters, Sr. Director Special Investigations Unit, Centene Corporation

- How to quickly identify providers and beneficiaries improperly enrolled
- Utilizing analytics to capture providers billing multiple products for the same beneficiaries
- Using public record data in your PI/FWA program to identify exclusions, adverse actions, and more

### 303 The Lifecycle of a CMS Part D Memo from Analysis to CMS Audit

Level: Intermediate

Mark Horowitz, Senior Manager, National Special Investigations Unit, Kaiser Permanente

Tamara Neiman, Executive Director, Nat'l Special Investigations Unit, Kaiser Permanente

- We will describe the process from cradle to grave using an actual I-MEDIC referral that was initiated from a CMS Quarterly Drug Trend Analysis Memo
- We will present how data visualization identified the issue, how clinical review confirmed the issue, and the role played by the SIU in referring the matter to the I-MEDIC
- During a recent CMS audit this case was selected as the Tracer. During the presentation, we will outline our documentation process for the Tracer and discuss the outcome

**2:15 – 2:30 PM**

Networking Break

**2:30 – 3:30 PM**

**SUBJECT AREA: MEDICARE/MEDICAID**

## IN-PERSON

### 402 The Next Big Thing! Maintaining Compliance and Managing Risk with Healthcare Startup Vendors and Providers

Level: Intermediate

Sandra Durkin, Member Attorney, Strategic Health law

Elizabeth Lippincott, Managing Member, Strategic Health Law

- Legal risks of contracting with startup and private equity-backed companies, which can help health plans stay competitive with their innovation but may also pose risks to compliance and overtax your plans legal and compliance resources
- Handling vendor negotiations with a company that lacks expertise in the healthcare legal and regulatory environment, including anti-fraud laws, such as the Anti-Kickback Statute, that can be violated during the negotiation process
- Practical strategies for counseling internal business clients on challenges unique to dealing with healthcare startups, including ongoing compliance monitoring of organizations with limited internal legal and compliance resources

### 403 Compliance Considerations in Mergers and Acquisitions

Level: Intermediate

Jenny O'Brien, SCCE & HCCA Board Member

Steve Lokensgard, Partner, Faegre Drinker Biddle & Reath

- Reviewing pre-delegation and contracting requirements
- Role in due diligence reviews
- Integration strategies

3:30 – 3:45 PM

Networking Break

3:45 – 4:45 PM

### GENERAL SESSION:

The Dos and Don'ts of Medicare Advantage and Medicaid Managed Care: Lessons from Recent Enforcement Activity

Katherine Armstrong, Assistant United States Attorney, United States Attorney's Office

Pamela Brecht, Attorney/Partner, Pietragallo Gordon Alfano Bosick & Raspanti, LLP

Jonathan Ferry, Partner, Government Enforcement & Investigations, Bradley Arant Boult Cummings

- Participants will gain understanding of Medicare Programs and the Risk Adjustment Process
- Participants will gain understanding of Medicaid Managed Care Program Risk
- Participants will gain understanding of the current enforcement environment in Medicare Advantage and Medicaid Managed Care
- Participants will get takeaways from recent enforcement activity to help improve compliance programs

4:45 – 6:00 PM

Networking Reception

## Tuesday, February 1

7:00 – 7:55 AM

Breakfast

7:55 – 8:00 AM

Opening Remarks

8:00 – 9:00 AM

### GENERAL SESSION:

Why Me? Compliance Officer's Personal Risks in Managed Care Investigations: Liaison, Witness, Subject, Defendant, Whistleblower

James Sheehan, Chief, Charities Bureau, NY Attorney General

Lisa Estrada, Senior Vice President and Chief Ethics and Compliance Officer, LifePoint Health

- Understand your potential personal involvement as a compliance officer in government investigations
- Evaluate compliance officer's rights and risks as witness, subject, defendant, or whistleblower
- Learn best practices for addressing involvement in government and whistleblower cases



## IN-PERSON

9:00 – 9:30 AM

Networking Break

9:30 – 10:30 AM

**SUBJECT AREA: MEDICARE/MEDICAID**

### 501 The Magic of Universes: Beyond the CMS Audit

Level: Intermediate

Gabriel Viola, SVP Customer Relationship, Inovaare Corporation

Brenda Wade, Chief Compliance Officer, Inovaare

- Leverage universes for operational performance analysis, not merely for CMS Program Audits
- Monitor universes regularly to proactively address and mitigate issues
- Avoid penalties and delays by sustaining continuous compliance, not reacting to audits

### 502 A Deep Dive: Enforcement Trends and Risk Areas in Managed Care

Level: Advanced

Sheniece Smith, VP General Counsel, Northbay Healthcare

Kirk Ogrosky, Partner, Arnold & Porter

John Kelly, Member, Bass, Berry & Sims PLC

- The panel will discuss in detail lessons learned from past and current enforcement actions
- The panel will identify key risk areas for Medicare managed care organizations and providers
- The panel will discuss compliance program best practices to minimize risk in Medicare Advantage

10:30 – 10:45 AM

Networking Break

10:45 – 11:45 AM

**SUBJECT AREA: MEDICARE/MEDICAID**

### 601 Preparing MCOs for the IDD Carve-In

Level: Intermediate

Antony Fiori, Senior Managing Director, Manatt Health

Justin Frazer, JD, MBA, Director, Healthcare Consulting, Mazars USA LLP

- States are increasingly moving individuals with I/DD needs and LTSS services to MCOs
- Some states are creating specialized MCOs, others are relying on existing MCOs
- I/DD needs must be met: CM, waiver service management, network adequacy, and quality measurement

### 602 HITRUST CSF: Achieving Certification

Level: Basic

Uday Ali Pabrai, CEO, ecfirst

- Walk through how HITRUST CSF maps to and addresses CMMC, ISO 27001, HIPAA, and NIST standards
- Evaluate establishing a compliance program on HITRUST CSF
- Examine key steps to successfully achieve HITRUST certification

11:45 AM – 12:45 PM

Lunch

12:45 – 1:45 PM

**SUBJECT AREA: MEDICARE/MEDICAID**

### 701 Building an Effective Medicare Compliance Risk Assessment

Level: Intermediate

Melissa Whitley, Vice President Client Services, BluePeak Advisors

- Develop effective tools to make tracking and scoring your risks an easier task
- How to collaborate with internal teams to fully identify Medicare risks
- Ensuring effective processes are in place for identifying risks with delegates

## IN-PERSON

### 702 Audit Readiness: To Infinity and Beyond

Level: Intermediate

Kim Gray, Manager, Corporate Compliance, Blue Cross Blue Shield of North Carolina

Elenor Haith, Director and Corporate Compliance Official, Blue Cross Blue Shield of NC

- Integrate an effective compliance risk assessment to reinforce your organization's audit readiness
- Establish compliance mock audits and assessments that align with regulatory requirements
- Evaluate audit preparedness through readiness checklist activities

1:45 – 2:00 PM

Networking Break

2:00 – 3:00 PM

**SUBJECT AREA: MEDICARE/MEDICAID**

### 801 How to Improve Your Medicare Data Validation Audit Process to Enhance Oversight of FDRs and Internal Operations

Level: Intermediate

Derek Frye, Audit & Technology Leader, The Burchfield Group, an Aon Company

- Use the annual data validation audit to more broadly understand organizational risks
- Build your oversight tools by learning how to internally validate vendor data and documentation
- Use data validation to assess your performance and readiness for other CMS reviews

### 802 Automate Your Compliance Process to Impress Regulators

Level: Intermediate

John Tanner, Chief Compliance Officer, Beacon Healthcare Systems

- Learn how automation can improve your ability to distribute and track HPSM memos
- Understand how automated auditing and monitoring helps you see compliance patterns across your plan
- Apply automation to strengthen compliance oversight and compliance program effectiveness in RADV

3:00 – 3:15 PM

Networking Break

3:15 – 4:15 PM

**GENERAL SESSION:**

Hot Topics Panel

Moderator: Carolyn Barton, VP Compliance & Regional Compliance Officer, Ethics and Compliance Office, Kaiser Foundation Health Plan of Washington

Panelists:

Sheila Nishimoto, Vice President of Compliance, Coordinated Care of Washington, Inc.

Cheyenne Ross, Arizona VP of Compliance & Regulatory Affairs, Arizona Complete Health

Jeff Ubben, Vice President of Compliance, Regulatory Affairs, & Special Investigations, Blue Cross Blue Shield of North Dakota

- Recent fraud, waste and abuse and oversight trends
- Addressing challenges of complying with mental health parity requirements
- Highlights of implementing federal No Surprises Act

## Wednesday, February 2

8:00 – 8:15 AM

Exam Check-In

8:15 – 10:15 AM

**Certified in Healthcare Compliance (CHC)<sup>®</sup> Exam** (optional)

You must apply in advance to sit for the exam. The cost is not included in the conference registration fee

# Agenda

Managed Care Compliance Conference VIRTUAL • Feb 8–9, 2022

ALL TIMES LISTED ARE IN CENTRAL STANDARD TIME (CST)

## VIRTUAL

### Tuesday, February 8

**8:25 – 8:30 AM**

Welcome and Opening Remarks

**8:30 – 9:30 AM**

#### **V1** The Impact of HIPAA Regulatory Changes on Managed Care Organizations

Level: Intermediate

Elizabeth Kastner, Attorney At Law, Epstein, Becker & Green

Chris Bennington, Member of the Firm, Epstein Becker & Green PC

- Define the aspects of the HIPAA regulatory changes that are applicable to managed care organizations
- Understand the policy and procedure changes that may be required to remain fully compliant
- Identify the regulatory changes that will require workforce re-training

#### **V2** Applying Principles of Continuous Quality Improvement (CQI) to Your Compliance Program Using Root Cause Analysis (RCA)

Level: Basic

Maggie Perritt, Compliance Officer

- Continuous quality improvement (CQI) is consistent with maintaining a culture of compliance
- CQI and RCA are not about individuals and blame, they're about processes and cause and effect
- CQI and RCA can help demonstrate an effective compliance program

**9:30 – 9:45 AM**

Break

**9:45 – 10:45 AM**

**SUBJECT AREA: MEDICARE/MEDICAID**

#### **V3** How to Improve Your Medicare Data Validation Audit Process to Enhance Oversight of FDRs and Internal Operations

Level: Intermediate

Derek Frye, Audit & Technology Leader, The Burchfield Group, an Aon Company

Kathryn Patterson, Audit Manager, Commonwealth Care Alliance

Jason Hoyme, Audit and Compliance Manager, The Burchfield Group, an Aon Company

- Use the annual data validation audit to more broadly understand organizational risks
- Build your oversight tools by learning how to internally validate vendor data and documentation
- Use data validation to assess your performance and readiness for other CMS reviews

#### **V4** OIG Audits of Diagnosis Codes at High Risk for Being Miscoded: A Discussion of How We Identify Diagnosis Codes to Audit and What You Can Do to Enhance Your Compliance Procedures

Level: Intermediate

Chris Bresette – Director, Medicare Part C Audits, U.S. Department of Health and Human Services, Office of Audit Services

Nicole Hackenmiller, Senior Auditor, U.S. Department of Health and Human Services, Office of Audit Services

- The panel will talk about how the OIG combines data-mining techniques and discussions with medical professionals to identify diagnosis codes to audit
- The panel will discuss how the OIG's audits have evolved
- The panel will discuss how MA organizations can increase their compliance program's effectiveness when detecting and correcting inaccurate diagnosis codes

**10:45 – 11:00 AM**

Break

# Agenda

Managed Care Compliance Conference VIRTUAL • Feb 8–9, 2022

ALL TIMES LISTED ARE IN CENTRAL STANDARD TIME (CST)

## VIRTUAL

11:00 AM – 12:00 PM

### SUBJECT AREA: MEDICARE/MEDICAID

#### V5 The Magic of Universes: Beyond the CMS Audit

Level: Intermediate

Gabriel Viola, SVP Customer Relationship, Inovaare Corporation

Brenda Wade, Chief Compliance Officer, Inovaare

Julie Mason, President, Integritas Medicare

- Leverage universes for operational performance analysis, not merely for CMS Program Audits
- Monitor universes regularly to proactively address and mitigate issues
- Avoid penalties and delays by sustaining continuous compliance, not reacting to audits

#### V6 A Deep Dive: Enforcement Trends and Risk Areas in Managed Care

Level: Advanced

Megan Tinker, Assistant Inspector General, HHS-OIG

Benjamin Singer, Partner, O'Melveny & Myers LLP

John Kelly, Member, Bass, Berry & Sims PLC

- The panel will discuss in detail lessons learned from past and current enforcement actions
- The panel will identify key risk areas for Medicare managed care organizations and providers
- The panel will discuss compliance program best practices to minimize risk in Medicare Advantage

12:00 – 1:00 PM

Mid-conference break

1:00 – 2:00 PM

### SUBJECT AREA: MEDICARE/MEDICAID

#### V7 The Next Big Thing! Maintaining Compliance and Managing Risk with Healthcare Startup Vendors and Providers

Level: Intermediate

Sandra Durkin, Member Attorney, Strategic Health law

Elizabeth Lippincott, Managing Member, Strategic Health Law

- Legal risks of contracting with startup and private equity-backed companies, which can help health plans stay competitive with their innovation but may also pose risks to compliance and overtax your plans legal and compliance resources
- Handling vendor negotiations with a company that lacks expertise in the healthcare legal and regulatory environment, including anti-fraud laws, such as the Anti-Kickback Statute, that can be violated during the negotiation process
- Practical strategies for counseling internal business clients on challenges unique to dealing with healthcare startups, including ongoing compliance monitoring of organizations with limited internal legal and compliance resources

#### V8 Compliance Organization Design

Level: Intermediate

Veronica Moore, Director, Corporate and Medicare Compliance, BCBS of AZ

James Rose, Managing Director, SunHawk Consulting, LLC

- What is organizational design and how it is important to compliance program effectiveness?
- How does my organization's other governance groups impact the compliance organization design?
- What considerations should be made for organization design of the compliance program?

2:00 – 2:15 PM

Break

## VIRTUAL

2:15 – 3:45 PM

### V9 Back to the Future: Leveraging Knowledge and Experiences to Accommodate 2022 CMS Program Audit Protocols

Level: Intermediate

Philip Masser, Medicare Compliance Officer, Geisinger Health Plan

Annie Hsu Shieh, Compliance Counsel, Central Health Plan of California

Anne Crawford, SVP Compliance Solutions, ATTAC Consulting Group LL

- Hear how recent audit experiences combined with revised CMS program audit protocols can be leveraged
- Key considerations when determining if 2022 protocols require modifications to monitoring activities
- Applying best practices to ensure audit readiness

### V10 Creativity in Compliance: A Case Study in Developing Impactful and Action-Oriented Compliance Activities and Trainings

Level: Basic

Jessica VanderZanden, VP, Compliance & Audit, Network Health

Angela M. Keenan, Director, Compliance & Privacy, Network Health

- Learn effective methods to develop trainings and activities utilizing internal partnerships and resources, leading to greater success of your compliance program without adding significant budget
- Acquire techniques for getting your organization excited about compliance trainings and collaboration
- Spend time discussing successful training metrics and collaborative efforts

## Wednesday, February 9

8:30 – 9:30 AM

SUBJECT AREA: MEDICARE/MEDICAID

### V11 Compliance Considerations in Mergers and Acquisitions

Level: Intermediate

Jenny O'Brien, SCCE & HCCA Board Member

Steve Lokensgard, Partner, Faegre Drinker Biddle & Reath

- Reviewing pre-delegation and contracting requirements
- Role in due diligence reviews
- Integration strategies

### V12 Looking Around the Corner: How to Navigate the Shifting Drug Contracting Landscape

Level: Advanced

Rachel Alexander, Partner, Wiley Rein

Dorthula Powell-Woodson, Partner, Wiley Rein

- Prepare for the changing legal landscape of drug contracting from a regulatory and compliance standpoint
- Understand the unique risks of purchasing drugs for Medicare Advantage/PDP programs
- Analyze trends in federal and state regulation of PBMs, drug pricing, and reimbursement

9:30 – 9:45 AM

Break

# Agenda

Managed Care Compliance Conference VIRTUAL • Feb 8–9, 2022

ALL TIMES LISTED ARE IN CENTRAL STANDARD TIME (CST)

## VIRTUAL

9:45 – 10:45 AM

### SUBJECT AREA: MEDICARE/MEDICAID

#### V13 Compliance Issues Under the Purview of Payment Integrity and Fraud, Waste, and Abuse

Level: Intermediate

Karen Weintraub, Executive Vice President, Healthcare Fraud Shield

Lori Peters, Sr. Director Special Investigations Unit, Centene Corporation

- How to quickly identify providers and beneficiaries improperly enrolled
- Utilizing analytics to capture providers billing multiple products for the same beneficiaries
- Using public record data in your PI/FWA program to identify exclusions, adverse actions, and more

#### V14 HITRUST CSF: Achieving Certification

Level: Basic

Uday Ali Pabrai, CEO, ecfirst

- Walk through how HITRUST CSF maps to and addresses CMMC, ISO 27001, HIPAA, and NIST standards
- Evaluate establishing a compliance program on HITRUST CSF
- Examine key steps to successfully achieve HITRUST certification

10:45 – 11:00 AM

### Break

11:00 AM – 12:00 PM

#### V15 Building an Effective Medicare Compliance Risk Assessment

Level: Intermediate

Michelle Turano, Vice President Medicare Compliance, Anthem

Melissa Whitley, Vice President Client Services, BluePeak Advisors

- Develop effective tools to make tracking and scoring your risks an easier task
- How to collaborate with internal teams to fully identify Medicare risks
- Ensuring effective processes are in place for identifying risks with delegates

#### V16 Best Practices in Establishing a Medicare Drug Management Program to Ensure Quality and Compliance

Level: Basic

Dawn Becker-Ellison, Sr Clinical Pharmacist, Blue Shield of California

Amy Togonon PharmD, Clinical Pharmacist, Blue Shield of California

- Review Medicare Part D requirements for a Drug Management Program
- Describe case review team membership and process
- Describe how the team and processes ensure compliance with Medicare DMP requirements

12:00 – 1:00 PM

### Mid-conference break

1:00 – 2:00 PM

#### V17 Surprises in the No Surprises Act: New Requirements for Plans and Providers Regarding Provider Directory Information

Level: Intermediate

Scott Westover, SVP Network and Regulatory Strategy, Quest Analytics

Michael Adelberg, Principal, Faegre Drinker Consulting

- In order to improve the accuracy of provider directories, Congress passed the No Surprises Act
- The No Surprises Act puts new requirements on new health plans and providers
- Health plans and providers have to come into compliance with the law and new regulation

#### V18 Effective and Compliant Hierarchical Condition Category Capture Auditing

Level: Intermediate

Allison Ritchie, Senior Consultant, Protiviti

Kim Pardini-Kiely, Clinical and Operational Excellence Lead, Protiviti

Bryan Beaudoin, Health Information Management Solution Lead, Protiviti

- Receive an overview of hierarchical condition category (HCCs) capture's importance and use
- Learn how to use data analytics to effectively audit HCC capture for accuracy and compliance
- Understand how to oversee a risk-based HCC capture audit as well as integrating internal controls

## VIRTUAL

2:00 – 2:15 PM

Break

2:15 – 3:45PM

### V19 CMS Program Audit: What to Do Before and After Your Organization Receives an Audit Notice

Level: Intermediate

Laurena Lockner, Director, Monitoring and Compliance, HealthPartners

Stephanie Moscetti, Senior Manager, HealthPartners

Steve Bunde, VP Integrity & Compliance & Internal Audit, HealthPartners

- Learn about steps to take before you get the announcement letter
- Understand how to prepare CPE questionnaires, universes, and tracers
- Identify ways to be successful in CDAG, ODAG, and FAs

### V20 Applying the Seven Elements of an Effective Compliance Program for Best Practices in Regulatory Audits

Level: Intermediate

Kenneth Nuñez, Chief Compliance Officer, Provider Partners Health Plan

Annie Hsu Shieh, Compliance Counsel, Central Health Plan of California

Robert Alfano, U.S. Regulatory Lead, Babylon

- Apply the seven elements into regulatory audit planning to manage toward successful results
- Discuss key regulatory audit prep best practices using the seven elements to guide successful planning, ensure cohesiveness, and organization in audit prep
- This presentation will present best practices from a plan, PBM, and TPA oversight perspective and discuss how this effective planning can help better organize your regulatory audits

# Managed Care Compliance Conference



IN-PERSON • Jan 30 – Feb 1, 2022 • Phoenix, AZ | VIRTUAL • Feb 8–9, 2022

## SECTION 1 Attendee Information

Mr  Mrs  Ms  Dr  Other \_\_\_\_\_ Member/Account ID (if known/applicable) \_\_\_\_\_

First Name \_\_\_\_\_ MI \_\_\_\_\_ Last Name \_\_\_\_\_

Credentials (CHC, CCEP, etc.) \_\_\_\_\_ Job Title \_\_\_\_\_

Organization (name of employer) \_\_\_\_\_

Street Address \_\_\_\_\_ City/Town \_\_\_\_\_

State/Province \_\_\_\_\_ Zip/Postal Code \_\_\_\_\_ Country \_\_\_\_\_

Work Phone \_\_\_\_\_ Email (required) \_\_\_\_\_

## SECTION 2 Registration

### In-person Options: Jan 30 – Feb 1, 2022

<input type="checkbox"/> Member (Monday & Tuesday)	\$820
<input type="checkbox"/> Member Pre-conference (Sunday)	\$220
<input type="checkbox"/> Non-Member (Monday & Tuesday)	\$1095
<input type="checkbox"/> Non-Member Pre-conference (Sunday)	\$295
<input type="checkbox"/> Registration + First-Time Membership Offer*	\$1040
<input type="checkbox"/> Member add Virtual Conference Special Offer	\$125
<input type="checkbox"/> Non-Member add Virtual Conference Special Offer	\$175

\*Save by joining today (first-time members only). Dues renew at \$325. See "Acknowledgements" below for details.

### Group Discount

<input type="checkbox"/> Group Discount for 3 or More**	(\$50)
<input type="checkbox"/> Group Discount for 10 or More**	(\$100)

\*\*See "Group Discount Policy" under "Acknowledgements" below for details.

**TOTAL \$** \_\_\_\_\_

### Dietary Needs Request (for in person attendees only)

Dairy Free  Gluten Free  Kosher  Vegetarian  Vegan  Other \_\_\_\_\_

Onsite Cell Phone - for emergency onsite use only \_\_\_\_\_

### Virtual Options: Feb 8–9, 2022

<input type="checkbox"/> Member	\$475
<input type="checkbox"/> Non-Member	\$595
<input type="checkbox"/> Registration + First-Time Membership Offer*	\$695

\*Save by joining today (first-time members only). Dues renew at \$325. See "Acknowledgements" below for details.

### Group Discount

<input type="checkbox"/> Group Discount for 3 or More**	(\$50)
<input type="checkbox"/> Group Discount for 10 or More**	(\$100)

\*\*See "Group Discount Policy" under "Acknowledgements" below for details.

**TOTAL \$** \_\_\_\_\_

**HCCA Membership:** By selecting the Registration + First-Time Membership Offer, you agree to the full membership Terms and Conditions, including the use of your information, viewable at [hcca-info.org/membership/tandc](http://hcca-info.org/membership/tandc). To see the full use of your information or if you wish to opt-out, visit [hcca-info.org/privacy](http://hcca-info.org/privacy).

### Opt-Out: Select if you would like to opt-out of the following:

- Member Magazine Listing: HCCA lists all new members (first and last name, organization, and state or country) in our monthly magazine, *Compliance Today*.
- Online Member Directory: HCCA's member directory lists first and last name, organization, title, address, and phone number.

## SECTION 3 Payment

Online registration at [hcca-info.org/2022-managed-care](http://hcca-info.org/2022-managed-care)

Mail to HCCA, 6462 City West Parkway, Eden Prairie, MN 55344 USA Fax to 952.988.0146

Email to [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org) — Due to PCI compliance, do not provide credit card information via email. Email this form without credit card information, then call HCCA at 888.580.8373 or 952.988.0141 with your payment.

Invoice me  Check enclosed (payable to HCCA)  Wire transfer requested

I authorize HCCA to charge my credit card:  Visa  MasterCard  Discover  American Express

Credit Card Account Number \_\_\_\_\_ Expiration Date \_\_\_\_\_

Cardholder Name \_\_\_\_\_ Cardholder Signature \_\_\_\_\_

## SECTION 4 Acknowledgements

By submitting this registration, you agree to the full event Terms and Conditions, viewable at [hcca-info.org/conference/tandc](http://hcca-info.org/conference/tandc), including the use of your information that may be shared with conference exhibitors, attendees, speakers, affiliates, and partners for promotional and/or networking purposes. To see the full use of your information or if you wish to opt-out, visit [hcca-info.org/privacy](http://hcca-info.org/privacy).

By registering for this event, you also agree that you have read and agree to the Personal Accountability Commitment, the Assumption of Risk, and the Liability Waiver and Release viewable at [hcca-info.org/conference/tandc](http://hcca-info.org/conference/tandc).

Registering for the virtual event allows only the registered attendee to stream, participate, and earn CEUs for the event. If a second person would like to participate, they must register themselves and have their own unique login to participate. No audio or video recording by attendees is allowed.

**Group Discount Policy:** Registration forms must be sent together to ensure that the discount is applied. The group discount is not available through online registration. 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.

**Photo/Video Release:** By registering for this event, you grant HCCA, or anyone authorized by HCCA, the right to use or publish in print or electronic format, any photographs or video containing your image or likeness for educational, news, or promotional purposes, without compensation.

**New Members:** By selecting the Registration + First-Time Membership Offer, you agree to the full membership Terms and Conditions, including the use of your information, viewable at [hcca-info.org/conference/tandc](http://hcca-info.org/conference/tandc).

Questions? Call 888.580.8373 or 952.988.0141 or email [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org)



## Frequently Asked Questions

### I'm attending in-person: Where will the conference take place?

Conference sessions & activities will take place at:

**Sheraton Grand at Wild Horse Pass,  
5594 West Wild Horse Pass Blvd.,  
Phoenix, AZ 85226**

Online Reservations: <https://book.passkey.com/event/50207934/owner/24587/home>

A reduced rate of \$255 for Standard room with single/double occupancy per night, plus a \$15 daily resort fee and applicable taxes (currently 13%, subject to change) have been arranged for this program.

Make reservations online or call 602.225.0100 and ask for the HCCA Managed Care Compliance Conference group rate or HCCA. All reservations must be guaranteed and accompanied by a first night room deposit or guaranteed with a major credit card. The cutoff date to receive this event rate is 5:00 PM MST on Monday, January 3, 2022.

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 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 HCCA at 952.988.0141 or 888.580.8373.

### I'm attending in-person: What COVID-19 safety precautions will be implemented?

HCCA considers the health and safety of all those at in-person programs a top priority. Although participants should recognize that there is risk involved in attending, HCCA will follow the safety recommendations/guidelines provided by the CDC and other state and local government agencies in place at the time of the event. Additionally, HCCA will follow the venue requirements and work with the venue to provide a safe and enjoyable environment for all participants.

### I'm attending virtually: What software is required to attend this event?

We use a variety of platforms based on the needs of each conference, but they are all web-based platforms and require a strong and stable internet connection. We highly recommend testing the platform once the access email is received to confirm you can access the platform, view the video player, and utilize the chat feature. Occasionally, those who access these digital platforms over a VPN can experience technical difficulties. Zoom will be utilized for small group discussions at applicable events, but downloading Zoom is not necessary, as they have a web-based version as well.

### Can I see what sessions will be presented before I arrive on-site?

Yes, program information is posted on the conference website.

### Will I receive a recording of this conference?

In-Person Conference: Registered paid in-person attendees will not receive complimentary access to session recordings. The virtual conference sessions will be recorded and available for purchase at a discounted rate. Virtual conference: Registered paid virtual attendees will receive complimentary access for 60 days to session recordings approximately two weeks after the conference. No audio or video recording by attendees is allowed.

### Is there a group discount—if so, what is it?

Yes, we offer discounts for groups of three or more from the same organization for all our live in-person and virtual events (excluding webinars). Please send all group registration forms together to [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org) for processing. A separate registration form is required for each registrant. The group discount is NOT available through online registration. 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. For groups of 10 or more, please call +1 952.988.0141 or 888.580.8373 or email [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org).

### What do I get with "Registration + First Time Membership?"

If you've never been an HCCA member, you can register as a First-Time Member. This gives you HCCA membership at a discounted rate for your first year. You also receive the member rate for the conference. As a member you receive all HCCA member benefits (discounts, *Compliance Today*® magazine, *Ethikos*® digital quarterly newsletter, member-exclusive webinars, and more). A full list of benefits can be viewed at [hcca-info.org/membership](http://hcca-info.org/membership). Your membership will begin once payment is received.

### How do I use the credit on my account for this event?

You can complete the registration online and select the "Invoice Me" payment option at check out. Once you receive your confirmation, email [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org) or call at +1 952.988.0141 or 888.580.8373 to request your credit be applied toward the registration fee.

### Can I get the member rate if I am an SCCE member instead of HCCA or vice versa?

Yes. As a member of SCCE or HCCA, you can receive the membership discount for both organizations' conferences, but this cannot be done online. Please send your registration form via email to [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org) to complete your registration.

### How can I cancel my registration?

If you need to cancel your participation (or send a substitute), your request must be submitted by email to [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org). A conference credit will be issued for all registration fees paid (minus any cancellation fee) and will expire 12 months from the date of the original canceled event. Conference credits will not be issued if you do not attend the event and have not requested cancellation prior to the event start date. If sending a substitute, an additional fee may apply depending upon the membership status of the substitute.

### Who can I notify of special needs or concerns prior to the conference?

Please call HCCA at +1 952.988.0141 or 888.580.8373 or email [helpteam@hcca-info.org](mailto:helpteam@hcca-info.org) if you have a special need and/or require an accommodation to participate.

## Continuing Education

### Can I earn continuing education units (CEUs) for attending this conference?

Yes. This conference offers live Compliance Certification Board (CCB)<sup>®</sup> continuing education units (CEUs) for participation as well as other external credit types.

For virtual attendees seeking external credit types, you must participate in the conference using the online virtual conference format (not just using the dial-in) for attendance monitoring purposes.

To see the most up-to-date CEU approval information, go to [hcca-info.org/2022managedcare](http://hcca-info.org/2022managedcare) and choose the Continuing Education option on the left-hand menu.

### How many CEUs will I earn from attending?

CEUs are assessed based on actual attendance and credit type requested. Should the overall number of education hours you attend or that the conference offers decrease or increase, the maximum number of CEUs available will be changed accordingly.

### How do I request CEUs following this conference?

Following this conference, you will be provided the Application for Continuing Education Units (CEUs). To receive CEUs, you must submit this completed application following the conference to [ccb@compliancecertification.org](mailto:ccb@compliancecertification.org). Only registered attendees are eligible to request CEUs for participation.

### When will I receive my CEU certificate for participation?

Once your completed Application for Continuing Education Units (CEUs) has been received by our staff, your CEU account will be updated within 2–4 weeks. To view your CCB CEUs and access your certificate, you can login to your online [hcca-info.org](http://hcca-info.org) account, go to your Account Dashboard, and scroll down to View My CEUs.

### I would like to sit for one of the Compliance Certification Board (CCB)<sup>®</sup> exams following this conference; will I qualify?

In order to qualify for a CCB certification exam, you must review the applicable Candidate Handbook found at [hcca-info.org/candidate-handbooks](http://hcca-info.org/candidate-handbooks) to ensure you meet the CEU requirement as well as the work experience requirement.

### I have reviewed the Candidate Handbook and want to sit for the exam as soon as the conference concludes; what's next?

In order to qualify for a CCB certification exam, you must review the applicable Candidate Handbook found at [hcca-info.org/candidate-handbooks](http://hcca-info.org/candidate-handbooks) to ensure you meet the CEU requirement as well as the work experience requirement.

### Can I take my exam remotely?

Yes, CCB offers the flexibility for candidates to take their exam remotely, at a local testing site, or following certain HCCA conferences. To learn more about our various testing options, visit HCCA's website, [hcca-info.org/certification/become-certified/exam-information](http://hcca-info.org/certification/become-certified/exam-information).

### I have more questions about exams and seeking certification; who can help me?

For more questions about CCB certifications, call to speak to a Certification Specialist at +1 952.988.0141 or 888.580.8373 or email [ccb@compliancecertification.org](mailto:ccb@compliancecertification.org).

## Event Terms and Conditions for In-person Attendees

**Personal Accountability Commitment:** Any public space where other people are present holds an inherent risk of exposure to COVID-19 and other communicable diseases. I will take necessary precautions while at the event, including but not limited to, personal hygiene and hand sanitization, adherence to pathway signage, and self-monitoring and self-reporting.

You are asked to contact HCCA at [april.kiel@corporatecompliance.org](mailto:april.kiel@corporatecompliance.org) if you experience symptoms of COVID-19 within 10 days after participating in the HCCA event. Any private health or personal data that may be received by HCCA in connection with such measures and precautions will be treated as confidentially as possible. You should not attend an HCCA event if you are experiencing, or within the 10 days prior to the program have experienced, symptoms associated with the flu or COVID-19. You also should not attend if you believe that you may have been exposed to a confirmed or suspected case of COVID-19 or have been diagnosed with COVID-19 and are not yet cleared as non-contagious by state or local public health authorities or the healthcare team responsible for your treatment.

**Assumption of Risk:** By submitting this registration, I acknowledge the contagious nature of COVID-19 and other communicable diseases, and voluntarily assume the risk that I may be exposed to or infected by COVID-19 or other communicable disease by attending this HCCA event and the consequences of such exposure. It is my choice

to participate in this event, knowing that attending this event may increase the risk of becoming exposed to and infected by COVID-19 or other communicable disease. I voluntarily agree to assume the risk of contracting COVID-19 or other communicable disease, and I accept sole responsibility for any injury or illness to myself or others.

**Liability Waiver and Release:** In consideration of being permitted to participate in the SCCE event, I hereby waive, release from liability, assume all risks, and covenant not to sue SCCE & HCCA or its officers, board members, employees, agents, and representatives (the "SCCE & HCCA Parties") for any expense, loss, damage, personal injury (including loss of life, disability, or serious harm), property damage or theft, negligence, or actions (each, a "Loss") resulting from or arising in connection with my travel to, attendance at, or participation in the HCCA event and any related activities unless said Loss is caused by the sole, gross negligence of HCCA. I further hereby release, agree not to sue, discharge, and hold harmless SCCE & HCCA, its officers, board members, employees, agents, and representatives, from all Losses relating to COVID-19 or other communicable diseases. I understand and agree that this release includes any and all claims based on the actions, omissions, or negligence of SCCE & HCCA, its officers, employees, agents, or representatives.

This assumption of risk and waiver applies even if the undersigned asserts that SCCE & HCCA was at fault for not taking greater precautions to manage exposure or infection from COVID-19 and other communicable diseases. I agree that this waiver and release shall bind me and my personal representatives, shall be enforceable to the fullest and broadest extent of the law, and, if any portion is held invalid, the remainder should continue in full legal force and effect.