



3rd Annual

Healthcare Enforcement Compliance Institute

October 29-November 1, 2017 Capital Hilton | Washington, DC

- Go beyond legal analysis
- Learn how to implement processes to stay within the law
- Gain practical advice in this one-of-a-kind forum for attorneys and compliance officers



Learn more at hcca-info.org/heci

About the Healthcare Enforcement Compliance Institute

HCCA's Healthcare Enforcement Compliance Institute covers the most current topics in healthcare fraud enforcement.

The Institute is designed to bring together enforcement representatives, relators and defense counsel, compliance professionals, consultants, and other healthcare industry professionals in a setting encouraging education and candid discussion of the most current enforcement topics.

The topics and speakers are selected to ensure expert substantive discussion and important educational opportunities for attendees.



HERE'S WHAT PAST ATTENDEES SAID:

"This was one of the best conferences I have attended. It was great to hear directly from so many government speakers and experts in the field."

"I really appreciated the expertise and insight from the enforcement officials."

"Excellent updates on several timely topics with a good balance of experts."

Who attends the Healthcare Enforcement Compliance Institute?

- Healthcare compliance professionals
- Relators counsel, defense attorneys and consultants
- Healthcare regulators
- Government enforcement personnel
- Risk managers
- Privacy officers
- Coding and billing specialists
- Nurse managers and executives
- Staff educators and trainers
- Health information management specialists
- Institutional chief information officers
- Healthcare senior executives and leaders
- Members of the board and management of healthcare organizations
- Healthcare professionals
- Media representatives
- Researchers and policy makers



Sunday, October 29: Pre-Conference

9:00–10:30 AM Pre-Conference Breakout Sessions	P1 Anatomy of False Claims Act Case — Craig Holden, Shareholder, Baker Donelson (Moderator); Amy Easton, Phillips and Cohen LLP; Tamara Forys, Senior Counsel, OIG-U.S. Department of HHS; Natalie Waites Priddy, Civil Fraud Branch, U.S. Department of Justice	P2 Health Information Privacy & Security: Recent Developments & Enforcement Actions — Joan Podleski, Chief Privacy Officer, Children's Health Dallas; R. Brett Short, Chief Compliance Officer, UK Healthcare, University of Kentucky	P3 Are We Ineffective at Assessing Compliance Program Effectiveness or Are Industry and Government Using Different Standards? — Thomas Beimers, Partner, Hogan Lovells; Judy A. Ringholz, VP of Compliance & Ethics and Chief Compliance Officer, Jackson Health System; Sara Kay Wheeler, Partner, King & Spalding; Laura Ellis, Senior Counsel, HHS Office of Inspector General		
10:30-10:45 PM	Networking Break				
10:45 – 12:15 PM Pre-Conference Breakout Sessions	P4 Litigating a False Claims Act Case — John T. Boese, Of Counsel, Fried, Frank, Harris, Shriver & Jacobson LLP; Robert Vogel, Partner, Vogel, Slade & Goldstein, LLP; Latour Lafferty, Partner, Holland & Knight LLP; David Wiseman, Civil Fraud Branch, U.S. Department of Justice	P5 Kickback and Stark Law Developments — Daniel Melvin, Partner, McDermott Will & Emery, LLP; Charles Oppenheim, Partner, Hooper Lundy Bookman, PC; Kevin McAnaney, Law Office of Kevin G. McAnaney	P6 Enforcement, Compliance and Long Term Care: Home Health, Hospice and Nursing Homes — Nicole Martin, Director of Quality & Compliance; Samaritan Healthcare & Hospice; Adam Schwartz, Shareholder, Carlton Fields; Eva Gunasekera, Of Counsel, Finch McCranie LLP		
12:15-1:30 PM	Lunch (on your own)				
12:30 – 1:15 PM	SpeedNetworking – Pre-registration is require	ed. Space is limited. A boxed lunch will be provi	ded to session participants.		
1:30 – 3:00 PM Pre-Conference Breakout Sessions	P7 Negotiating False Claims Act Settlements — Charles Graybow, Assistant US Attorney, US Attorney's Office-District of NJ; Jack Wenik, Partner, Epstein Becker & Green PC; Andrea Treese Berlin, Senior Counsel, OIG- U.S. Department of HHS	P8 Handling a Criminal Healthcare Fraud Case — Michael E. Clark, Special Counsel, Duane Morris LLP; Ralph Caccia, Partner, Wiley Rein LLP; Sally B. Molloy, Trial Attorney, Fraud Section, U.S. Department of Justice, Criminal Division	P9 Options and Strategies for Self-Disclosure: Why, When, Where and How? — Gabriel Imperato, Managing Partner, Broad and Cassel; Tony Maida, Partner, McDermott Will & Emery; Tamar Terzian, Senior Counsel, Administrative and Civil Remedies Branch, Office of Counsel to the Inspector General, U.S. Department of Health and Human Services		
3:00-3:15 PM	Networking Break				
3:15-4:45 PM	P10 Avoiding Criminal and Civil Liabilities for Overpayments — David Glaser, Shareholder, Fredrikson & Byron PA; Sanford Teplitzky, Shareholder, Baker Donelson	P11 Federal Administrative Sanctions: Exclusion & Civil Money Penalities – Edgar Bueno, Partner, Morris, Manning & Martin LLP; David Blank, Senior Counsel, OIG-U.S. Department of HHS	P12 Damages & Liability to Federal Health Programs — Tim Renjilian, FTI Consulting; R. Joseph Burby IV, Partner, Bryan Cave		
4:45-5:45 PM	Welcome Reception				

Monday, October 30: Conference

7:15 AM-8:15 AM	Continental Breakfast (provided)				
8:15-8:30 AM	Opening Remarks				
8:30-9:00 AM	Department of Justice Update on Criminal Health Care Fraud Enforcement – Joseph Beemsterboer, Chief, Healthcare Fraud Unit, Fraud Section, Criminal Division, US Department of Justice				
9:00-9:30 AM	Department of Justice Update on Civil False Claims Act Enforcement – Michael Granston, Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. Department of Justice				
9:30-10:30 AM	The Future of Enforcement: Ten Issues to Bring Home for Your 2018 Compliance Program – James G. Sheehan, Chief, Charities Bureau, NY Attorney General				
10:30-11:00 AM	Networking Break				
11:00 AM – 12:00 PM Breakout Sessions	101 Best Practices for Life Sciences Companies Repeatedly Targeted in Whistleblower Lawsuits — Gejaa Gobena, Partner, Hogan Lovells LLP; David Schumacher, Partner, Hooper Lundy & Bookman, PC; Matthew L. Stennes, Senior Legal Director of Healthcare Law & Investigations, Medtronic, Inc.	102 Tips and Tools for Mitigating CMS Enforcement Actions — Sean McKenna, Shareholder, Greenberg Traurig, LLP; David Wright, Director, Survey and Certification Group, CMS	103 Managing the Consultant Relationship in the Landscape of Self-Disclosure and FCA Investigations — Lester J. Perling, Partner, Broad and Cassel; Jean Acevedo, Senior Consultant, Acevedo Consulting Inc		
12:00-1:00 PM	Networking Lunch (provided)				
1:00 – 2:00 PM Breakout Sessions	201 Using Data and Statistics to Defend Against Health Care Enforcement — Christopher Haney, Managing Director, Forensus Group, LLC; Daniel M. Tardiff, Chief Legal Counsel & Corporate Secretary, AllianceRx Walgreens Prime	202 Conducting Internal AKS and Stark Investigations and Managing Resolution Risks – Joseph Hudzik, Counsel, Latham & Watkins, LLP; Alex Krouse, Attorney, Parkview Health; Steven W. Ortquist, Managing Director, Aegis Compliance & Ethics Center, LLP	203 Best Practices for Internal Investigations — Hannah Levinson, Associate, Nelson Mullins Riley θ Scarborough; Shachi Mankodi, Assistant General Counsel (Regulatory), Davita Medical Group		



Monday, October 30: Conference

2:00-2:30 PM	Networking Break				
2:30-3:30 PM Breakout Sessions	301 An Ounce of Prevention: The Role of Compliance Programs in False Claims Act Investigations and Litigation — Scott Grubman, Partner, Chilivis, Cochran, Larkins & Bever; Lena Amanti, Assistant United States Attorney, U.S. Attorney's Office, Northern District of Georgia; Renee Brooker, Of Counsel, Finch McCranie LLP; Lauren Marziani, Senior Counsel, OIG-U.S. Department of HHS	302 Program Integrity in the State Medicaid Program: Best Practices for Coordination between the Compliance Officer and the State Medicaid Inspector General – Ryan T. Lipinski, CountyCare Compliance Officer, Cook County Health; Bradley Hart, Inspector General, State of Illinois Department of Healthcare and Family Services; Cathy Bodnar, Chief Compliance and Privacy Officer, Cook Cty Hlth and Hosp System	303 Corporate Integrity Agreements: Living Under a CIA or using CIAs to Shape Legal/Compliance Programs — Robert A. Wade, Partner, Barnes & Thornburg, LLP; Laura Ellis, Senior Counsel, OIG-U.S. Department of HHS		
3:30-4:00 PM	Networking Break				
4:00–5:00 PM Breakout Sessions	401 Responding to Government Investigations and Enforcement: Managing the Crisis and Communicating with Key Constituencies — Richard Westling, Epstein Becker & Green, P.C.; Molly Cate Jarrard, Phillips, Cate & Hancock	402 Three Competing Perspectives on Federal Health Care Enforcement Trends: Federal Prosecutor, In-House Counsel, Outside Counsel – Scott McBride, Partner, Lowenstein Sandler, LLP; Joseph Mack, Senior Compliance Counsel, Bayer U.S.; Bernard Cooney, Assistant United States Attorney, Office of the United States Attorney, District of New Jersey	403 "Just Say No!" Avoiding Addiction Treatment Fraud and Abuse: What You Need to Know to Get and Stay in Compliance – Benton Curtis, Senior Counsel, Broad and Cassel; Zachary Rothenberg, Partner, Nelson Hardiman LLP		
5:00-6:00 PM	Networking Reception				

Tuesday, October 31: Conference

7:15 0:15 ***	Continue to Description (consider)				
7:15 – 8:15 AM	Continental Breakfast (provided)				
8:15-8:30 AM	Opening Remarks				
8:30-9:30 AM	Handling an Investigation in the Spotlight	– Michael Horowitz, Inspector General, U.S. D	epartment of Justice		
9:30-10:30 AM	CMS Update —Kimberly Brandt, Principal Deput	ry Administrator for Operations, CMS			
10:30-11:00 AM	Networking Break				
11:00 AM – 12:00 PM Breakout Sessions	501 Medicare Enrollment: Appeals, Compliance, and Collateral Consequences Under CMS's Expanded Revocation Authority — Andrew Wachler, Partner, Wachler & Associates, PC; Richard R. Burris, Shareholder, Polsinelli PC	502 Complex Health Care Organization Relationships and the Impact of OCR HIPAA Enforcement Actions — Blaine A. Kerr, Chief Privacy Officer, Jackson Health System; Ryan Meade, Partner, Meade, Roach; Gregory V. Kerr, Director, Aegis Compliance & Ethics Center LLP	503 Effective Compliance with I.M.P.A.C.T.™ — Gurujodha Khalsa, Chief Deputy County Counsel, Kern County; Kristen Lilly, Healthcare Consultant, PYA		
12:00-1:00 PM	Networking Lunch (provided)				
1:00 – 2:00 PM Breakout Sessions	601 Your Company Has Been Served with a Civil Investigative Demand: Now What? — Candice M. Deisher, Assistant Attorney General, Virginia Attorney General's Office; Marc S. Raspanti, Partner, Pietragallo, Gordon, Alfano, Bosick & Raspanti, LLP	602 Security & Cyber Risk: Breach & Compliance — Bob Chaput, CEO, Clearwater Compliance; Sheetal Sood, Senior Executive Corporate Compliance Officer, New York City Health + Hospitals	603 Clinical Trial Fraud & Enforcement – F. Lisa Murtha, Senior Managing Director, Ankura Consulting, Inc.; Kelly M. Willenberg, CEO, Kelly Willenberg & Associates		
2:00-2:15 PM	Networking Break				
2:15 – 3:15 PM Breakout Sessions	701 The Government Official & Chief Compliance Officer: Learned Experiences on Proactive Inititatives to Mitigate and Minimize Risk — Bret S. Bissey, Healthcare Compliance Executive; Alec Alexander, Partner, Breazeale, Sachse & Wilson	702 State Civil Enforcement Updates — George Codding Sr., Assistant Attorney General, State of Colorado; Kathleen Von Hoene, Bureau Chief, MFCU-Complex Civil Enforcement Bureau, Office of the Attorney General, State of FL	703 Ask the Stark Law Professionals: Q & A Session — Bob A. Wade, Partner, Barnes & Thornburg LLP; Lester J. Perling, Partner, Broad and Cassel; Kevin McAnaney, Law Office of Kevin McAnaney		

Wednesday, November 1: Post-Conference

8:30-10:00 AM	W1 Whistleblower Case Study – Gabriel	W2 Managed Care Fraud Enforcement	W3 Opioid Crisis: Drug Diversion &	
Post-Conference	Imperato, Managing Partner, Broad and	& Compliance – Christopher Horan, VP	Enforcement — Gary Cantrell, Deputy	
Breakout Sessions	Cassel; Lesley Ann Skillen, Attorney, Getnick	Compliance Investigations, Wellcare Health	Inspector General for Investigations,	
	& Getnick LLP	Plan, Inc.; David Leviss, Partner, O'Melveny &	OIG HHS; Michael Cohen, DHSc, JD,	
		Meyers LLP	PA-C,Operations Officer, HHS OIG Office of	
			Investigations	



Wednesday, November 1: Post-Conference

10:00-10:15 AM	Networking Break				
10:15–11:45 AM Post-Conference Breakout Sessions	W4 Criminal & Civil Enforcement & Compound Pharamacies — Daniel Bernstein, AUSA, United States Attorney's Office, Southern District of Florida; Samuel Sheldon, Partner, Quinn Emanuel	W5 Medical Necessity and the False Claims Act: Investigating, Proving, and Defending FCA Cases Involving Issues of Medical Necessity — JD Thomas, Waller; Jeffrey Dickstein, Partner, Phillips & Cohen LLP; Robert McAuliffe, Assistant Director, U.S. Department of Justice, Civil Division, Commercial Litigation Branch (Frauds)	W6 Private Payer Activities in Addressing Fraud and Abuse and Compliance Issues in the Health Care Industry — Lou Saccoccio, CEO NHCAA (Moderator); Rick Munson, Vice President, Investigations, UnitedHealthcare; Nicholas Messuri, VP Fraud Prevention & Recovery, DentaQuest; Thomas J. Daly, Acting Unit Chief, U.S. Dept. of Justice, Federal Bureau of Investigation		
11:45 AM-12:30 PM	Lunch (on your own)				
12:30-12:45 PM	CHC Exam Check-in				
12:45-4:00 PM	Certified in Healthcare Compliance (CHC)® exam (optional)				

EARN YOUR CERTIFICATION

Certified in Healthcare Compliance (CHC)®

Learn more about the CHC certification at compliancecertification.org

Take the CHC Certification Exam on-site after the conference

Wednesday, November 1 | 12:30 PM \$250 HCCA MEMBERS OR \$350 NON-MEMBERS You must be pre-registered to sit for the exam. To apply, download the CHC exam application from hcca-info.org/heci. Questions? Email ccb@compliancecertification.org. Twenty CCB CEUS are required to sit for the exam. For Healthcare Enforcement Compliance Conference sessions, one clock hour equals 1.2 CCB/CHC hours. Attending the entire Healthcare Enforcement Compliance Conference provides sufficient CEUs to qualify to sit for the exam.

CONTINUING EDUCATION UNITS

HCCA is in the process of applying for additional external continuing education units (CEUs). Should overall number of education hours decrease or increase, the maximum number of CEUs available will be changed accordingly. Credits are assessed based on actual attendance and credit type requested.

Approval quantities and types vary by state or certifying body. For entities that have granted prior approval for this event, credits will be awarded in accordance with their requirements. CEU totals are subject to change

Upon request, HCCA may submit this course to additional states or entities for consideration. If you 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, www.hcca-info.org, for up-to-date information

AAPC: This program has the prior approval of the AAPC for 20.0 continuing education hours. Granting of prior approval in no way constitutes endorsement by AAPC of the program content or the program sponsor.

ACHE: The Health Care Compliance Association is authorized to award 24.0 clock hours of pre-approved ACHE Qualified Education credit for this program toward advancement, or recertification, in the American College of Healthcare Executives. Participants in this program who wish to have the continuing education hours applied toward ACHE Qualified Education credit must self-report their participation. To self-report, participants must log into their MyACHE account and select ACHE Qualified Education Credit.

AHIMA: This program has been approved for 20.0 continuing education unit(s) for use in fulfilling the continuing education requirements of the American Health Information Management Association (AHIMA). Granting prior approval from AHIMA does not constitute endorsement of the program content or its program

Compliance Certification Board (CCB)®: CCB has awarded a maximum of 24.0 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)®

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 Alabama State Bar, the Florida Bar, the Rhode Island Supreme Court, and 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 for these states, along with Minnesota, North Carolina, and Ohio. Upon request, HCCA may submit this course to additional states for consideration. All CLE credits will be assessed based on actual attendance and in accordance with each state's requirements.

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)

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).

Sunday, October 29 PRE-CONFERENCE

9:00-10:30 AM

PRF-CONFFRENCE BREAKOUTS

P1 Anatomy of False Claims Act Case



Craig Holden, Shareholder, Baker Donelson (Moderator)



Amy Easton, Phillips and Cohen LLP

Tamara Forys, Senior Counsel, OIG-U.S. Department of HHS

Natalie Waites Priddy, Civil Fraud Branch, U.S. Department of Justice

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

P2 Health Information **Privacy & Security:** Recent Developments & **Enforcement Actions**



Joan Podleski, Chief Privacy Officer, Children's Health Dallas



R. Brett Short, Chief Compliance Officer, UK Healthcare, University of Kentucky

- Review of 2016 and 2017 OCR enforcement actions
- Trends to watch: what are the common themes in recent actions
- Breaking news: what are the new issues that have been cited recently

P3 Are We Ineffective at **Assessing Compliance Program Effectiveness or Are Industry** and Government Using **Different Standards?**



Thomas Beimers, Partner, Hogan Lovells



Judy A. Ringholz, VP of Compliance & Ethics and Chief Compliance Officer, Jackson Health System



Sara Kay Wheeler, Partner, King & Spalding

Laura Ellis, Senior Counsel, HHS Office of Inspector General

- The essential elements of an effective compliance program including the more recent focus on Individual accountability and its impact on compliance programs
- Potential consequences for failing to have an effective compliance program
- Strategic considerations to help attendees better understand if their program would satisfy these new industry expectations and ideas for enhancement, if warranted

10:30-10:45 AM **Networking Break**

10:45-12:15 PM

PRE-CONFERENCE BREAKOUTS

P4 Litigating a False Claims Act Case



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

Robert Vogel, Partner, Vogel, Slade & Goldstein, LLP



Latour Lafferty, Partner, Holland & Knight LLP

David Wiseman, Civil Fraud Branch, U.S. Department of Justice

- Common motions in FCA litigation
- Proving/disproving falsity, knowledge and damages after Escobar
- Discovery and trial issues in intervened vs. non-intervened cases
- · Role of individual defendants in FCA litigation

P5 Kickback and Stark Law **Developments**



Daniel Melvin, Partner, McDermott Will & Emery, LLP



Charles Oppenheim, Partner, Hooper Lundy Bookman, PC



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

P6 Enforcement, Compliance and Long Term Care: Home Health, Hospice and **Nursing Homes**



Nicole Martin, Director of Quality & Compliance, Samaritan Healthcare & Hospice



Adam Schwartz, Shareholder, Carlton Fields



Eva Gunasekera, Of Counsel, Finch McCranie LLP

- OIG Workplan for 2017
- identified vulnerabilities for hospice providers
- quality of care issues

12:15-1:30 PM **Lunch on Own**

12:30-1:15 PM SpeedNetworking

Pre-registration is required. Space is limited. A boxed lunch will be provided to session participants.



1:30-3:00 PM

PRF-CONFFRENCE BREAKOUTS

P7 Negotiating False Claims **Act Settlements**

Charles Graybow, Assistant U.S. Attorney, U.S. Attorney's Office-District of NJ



Jack Wenik, Partner, Epstein Becker & Green PC



Andrea Treese Berlin, Senior Counsel, OIG-U.S. Department of HHS

- Current trends in False Claims Act settlements, including the effect of Universal Health Services v. United States ex rel. Escobar
- Negotiating False Claims Act settlements including special situations such as reverse false claims
- Drafting False Claims Act settlement agreements from the defense and government perspectives

P8 Handling a Criminal **Healthcare Fraud Case**



Michael E. Clark, Special Counsel, Duane Morris LLP



Ralph Caccia, Partner, Wiley Rein LLP

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

P9 Options and Strategies for Self-Disclosure: Why, When, Where and How?



Gabriel Imperato, Managing Partner, Broad and Cassel



Tony Maida, Partner, McDermott Will & Emery

Tamar Terzian, Senior Counsel, Administrative and Civil Remedies Branch, Office of Counsel to the Inspector General, U.S. Department of Health and Human Services

- Is it voluntary or obligated?
- Report and repayment rule
- Resolution and releases

3:00-3:15 PM **Networking Break**

3:15-4:45 PM PRE-CONFERENCE BREAKOUTS

P10 Avoiding Criminal and Civil **Liabilities for Overpayments**



David Glaser, Shareholder, Fredrikson & Byron PA



Sanford Teplitzky, Shareholder, Baker Donelson

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

P11 Federal Administrative Sanctions: Exclusion & Civil **Money Penalities**



Edgar Bueno, Partner, Morris, Manning & Martin LLP



David Blank, Senior Counsel, OIG-U.S. Department of HHS

- Affirmative Exclusions and CMPs - Enforcement Trends and Recent Settlements
- Intersection with DOJ Investigations, CMS Audits, and Other Parallel Proceedings
- Compliance Measures that Mitigate Against Liability

P12 Damages & Liability to **Federal Health Programs**



Tim Renjilian, FTI Consulting



R. Joseph Burby IV, Partner, Bryan Cave

- Discuss key concepts in the calculation of damages related to Federal health care programs
- Address ongoing issues and debates involving damage calculations
- Analyze newly emerging damage theories from recent settlements and what their implications are

4:45-5:45 PM **Networking Reception**

Monday, October 30 CONFERENCE

7:15-8:15 AM **Continental Breakfast**

8:15-8:30 AM **Opening Remarks**

8:30-9:00 AM

Department of Justice Update on Criminal Health Care Fraud Enforcement

Joseph Beemsterboer, Chief, Healthcare Fraud Unit, Fraud Section, Criminal Division, U.S. Department of Justice

9:00-9:30 AM

Department of Justice Update on Civil False Claims Act Enforcement



Michael Granston, Director, Commercial Litigation Branch, Fraud Section, Civil Division, U.S. Department of Justice

9:30-10:30 AM

The Future of Enforcement: Ten Issues to Bring Home for Your 2018 Compliance **Program**



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

10:30-11:00 AM **Networking Break**





11:00 AM – NOON BREAKOUT SESSIONS

101 Best Practices for Life Sciences Companies Repeatedly Targeted in Whistleblower Lawsuits



Gejaa Gobena, Partner, Hogan Lovells LLP



David Schumacher, Partner, Hooper Lundy & Bookman, PC



Matthew L. Stennes, Senior Legal Director of Healthcare Law & Investigations, Medtronic, Inc.

- The panel will explore the hows, whys, and consequences that large life sciences companies face as they are targeted by whistleblowers who see deep pockets
- We'll focus on each of those three areas, and how strong compliance programs and appropriate remediation can act as a shield against the normal consequences of being considered a repeat player or "recidivist" due to multiple investigations

102 Tips and Tools for Mitigating CMS Enforcement Actions



Sean McKenna, Shareholder, Greenberg Traurig, LLP



David Wright, Director, Survey and Certification Group, CMS

- Recognizing red flags that lead to enforcement matters
- Using transparency and data to enhance the quality of Medicare providers
- Overview of best practices, tools, and resources to limit surveys and avoid enforcement actions

103 Managing the Consultant Relationship in the Landscape of Self-Disclosure and FCA Investigations



Lester J. Perling, Partner, Broad and Cassel



Jean Acevedo, Senior Consultant, Acevedo Consulting Inc

- Attendees will learn strategies for managing consultant relationships in the context of auditing for possible self-disclosure in order to attempt to preserve attorney client privilege
- Attendees will learn how to determine when to bring in a consultant in a government investigation and how to manage that relationship
- Attendees will learn how to utilize consultants in the context of a government investigation—dos and don'ts

12:00-1:00 PM Networking Lunch (Provided)

1:00-2:00 PM BREAKOUT SESSIONS

201 Using Data and Statistics to Defend Against Health Care Enforcement



Christopher Haney, Managing Director, Forensus Group, LLC



Daniel M. Tardiff, Chief Legal Counsel & Corporate Secretary, AllianceRx Walgreens Prime

- Trends in the government's use of data including statistical sampling and extrapolation
- Affirmatively using your own, routinely gathered data to reduce exposure
- Pairing data and statistical analyses with internal investigations

202 Conducting Internal AKS and Stark Investigations and Managing Resolution Risks



Joseph Hudzik, Counsel, Latham & Watkins, LLP



Alex Krouse, Attorney, Parkview Health



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

- Conducting appropriate internal investigations of AKS and Stark Law violations in an era new regulatory obligations and heightened enforcement activity
- Managing disclosure and resolution challenges when disclosing noncompliance through the OIG and CMS protocols or directly to DOJ
- Assessing the individual enforcement risk associated with self-disclosure

203 Best Practices for Internal Investigations



| Hannah Levinson, | Associate, Nelson Mullins | Riley & Scarborough



Shachi Mankodi, Assistant General Counsel (Regulatory), Davita Medical Group

- Responding to reports of potential non-compliance and setting up an investigation
- Managing investigations internally and with outside counsel
- Decision-making factors regarding potential corrective action and disclosures

2:00-2:30 PM Networking Break



301 An Ounce of Prevention: The Role of Compliance **Programs in False Claims Act Investigations and Litigation**



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

Lena Amanti, Assistant United States Attorney, U.S. Attorney's Office, Northern District of Georgia



Renee Brooker, Of Counsel, Finch McCranie LLP

Lauren Marziani. Senior Counsel. OIG-U.S. Department of HHS

- What the government looks for in a corporate compliance program, including guidance from the OIG regarding an effective compliance program
- Tips on how to build and implement an effective compliance program, as well as common pitfalls to avoid
- How corporate compliance programs play a role in government investigations and litigation, including how the government takes the existence and effectiveness of such a program into account in connection with such matters



302 Program Integrity in the State Medicaid Program: **Best Practices for Coordination** between the Compliance Officer and the State Medicaid **Inspector General**



Ryan T. Lipinski, CountyCare Compliance Officer, Cook County Health

Bradley Hart, Inspector General, State of Illinois Department of Healthcare and Family Services



Cathy Bodnar, Chief Compliance and Privacy Officer, Cook Cty Hlth and Hosp System

- Overview of a State Medicaid Program Integrity Official's Role in Preventing and Investigating Fraud, including coordination with State Medicaid Fraud Control Unit (MFCU). Presentation will highlighting priority areas for States in 2017
- Examples of collaboration and coordination among State agencies and private sector partners, to strengthen the State's efforts to address fraud, waste, and abuse in State-administered health care programs
- Focus on Managed Care: How a Health Plan's Special Investigation Unit can advance the State's efforts in detecting aberrant billing patterns, conduct medical record reviews to ensure proper reimbursement and perform Provider education

303 Corporate Integrity Agreements: Living Under a CIA or using CIAs to Shape Legal/Compliance Programs



Robert A. Wade, Partner, Barnes & Thornburg, LLP

Laura Ellis, Senior Counsel, OIG-U.S. Department of HHS

- Key elements of a CIA
- Potential negotiable terms for a CIA
- How to use recent CIAs to shape an organization's legal/compliance functions

3:30-4:00 PM **Networking Break** 4:00-5:00 PM **BREAKOUT SESSIONS**

401 Responding to Government **Investigations and Enforcement:** Managing the Crisis and Communicating with Key Constituencies



Richard Westling, Epstein Becker & Green, P.C.



Molly Cate Jarrard, Phillips, Cate & Hancock, Chicago, IL

- Coordinating your compliance and legal response with your communications strategy
- What to tell the board, employees and medical providers
- How and what to communicate with patients and the community

402 Three Competing Perspectives on Federal Health **Care Enforcement Trends:** Federal Prosecutor, In-House Counsel, Outside Counsel



Scott McBride, Partner, Lowenstein Sandler, LLP



Joseph Mack, Senior Compliance Counsel, Bayer U.S.



Bernard Cooney, Assistant United States Attorney, Office of the United States Attorney, District of New Jersey

- Panel will discuss, from the competing perspectives of a federal prosecutor, in-house counsel, and outside counsel, current enforcement trends in the federal health care arena
- Subjects will include First Amendment law in the off-label marketing space, as well as anti-kickback and related safe harbor developments
- The panel will additionally explore other potential new hot enforcement areas



403 "Just Say No!" Avoiding **Addiction Treatment Fraud** and Abuse: What You Need to Know to Get and Stay in Compliance



Benton Curtis, Senior Counsel, Broad and Cassel



Zachary Rothenberg, Partner, Nelson Hardiman LLP

- · Current trends in Federal- and Statelevel fraud and abuse enforcement in the addiction treatment industry, and a realistic look at what those trends mean for compliance professionals in the industry.
- "Hot topics" in enforcement for addiction treatment, including: (1) drug treatment marketing, (2) urine drug testing, (3) problematic relationships between outpatient programs and sober living facilities; (4) "step-down" billing, and (5) co-pay waivers.
- Practical, "real world" strategies for getting (and staying!) in compliance.

5:00-6:00 PM **Networking Reception**

Tuesday, October 31 CONFERENCE

7:15-8:15 AM Continental Breakfast

8:15-8:30 AM **Opening Remarks**

8:30-9:30 AM Handling an Investigation in the Spotlight



Michael Horowitz, Inspector General, U.S. Department of Justice

9:30-10:30 AM **CMS Update**



Kimberly Brandt, Principal Deputy Administrator for Operations, CMS

10:30-11:00 AM **Networking Break**

11:00 AM-12:00 PM **BREAKOUT SESSIONS**

501 Medicare Enrollment: Appeals, Compliance, and **Collateral Consequences Under CMS's Expanded Revocation Authority**



Andrew Wachler, Partner, Wachler & Associates, PC



Richard R. Burris, Shareholder, Polsinelli PC

- Identify key enrollment risk areas that all current and prospective providers need to be aware of, including the heightened reporting requirements and CMS's expanded authority to deny or revoke provider enrollments under recent CMS rulemaking
- Practical compliance tips for avoiding adverse enrollment actions, and strategic approaches for navigating through the enrollment appeals process
- The interplay between provider enrollment, claims audits, and False Claims Act liability in today's Medicare landscape

502 Complex Health Care **Organization Relationships** and the Impact of OCR HIPAA **Enforcement Actions**



Blaine A. Kerr, Chief Privacy Officer, Jackson Health System



Ryan Meade, Partner, Meade, Roach



Gregory V. Kerr, Director, Aegis Compliance & Ethics Center LLP

- A discussion of Organized Health Care Arrangements (OHCA's), Affiliated Covered Entities (ACE's) and Hybrid **Entities**
- How complex organizational changes may impact privacy investigations, breach liability responsibilities and the enforcement actions of the OCR
- Methods to review and revise HIPAA strategies to more effectively address the complexities encountered by many health care organizations

503 Effective Compliance with I.M.P.A.C.T.TM



Gurujodha Khalsa, Chief Deputy County Counsel, Kern County



Kristen Lilly, Healthcare Consultant, PYA

- I.M.P.A.C.T is an acronym that stands for: Intention, Meditation, Projection, Action, Commitment and Trust
- The communication and team building skills necessary to set Specific, Measurable, Achievable, Realistic, and Time-Bound Goals
- Using breath meditation and visualization as a means to get the compliance team on the same page and working with "directional harmony"; using Affirmation and Visual Reminders to reinforce goals
- Designing an action plan consistent with the Intention, Meditation, and Projection; nurturing consistency and commitment to achieve the stated goals of the team; refining communication and building rapport to enhance trust and build team efficacy

12:00-1:00 PM **Networking Lunch (Provided)**

1:00-2:00 PM **BREAKOUT SESSIONS**

601 Your Company Has Been Served with a Civil Investigative **Demand: Now What?**



Candice M. Deisher, Assistant Attorney General, Virginia Attorney General's Office



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

- · What is a civil investigative demand and who has the power to issue one?
- What does it mean if your company has received a civil investigative demand?
- What to expect after receipt of a civil investigative demand and some best practice considerations when responding



602 Security & Cyber Risk: **Breach & Compliance**



Bob Chaput, CEO, Clearwater Compliance



Sheetal Sood, Senior Executive Corporate Compliance Officer, New York City Health + Hospitals

- Clean the house: Cyber-hygiene to safeguard patient information and ensure patient safety
- Practical tips on how to practice effective and good cyber-hygiene. Learn about current cybersecurity landscape in healthcare, including recent and emerging trends, and their impact on compliance programs
- Learn how to conduct a comprehensive risk identification and assessment exercise that covers all connected devices
- Connecting the dots: Patient Information and Patient Safety-yes, they are connected

603 Clinical Trial Fraud & **Enforcement**



F. Lisa Murtha, Senior Managing Director, Ankura Consulting, Inc.



Kelly M. Willenberg, CEO, Kelly Willenberg & Associates

- Preparation tools for an audit or investigation
- Analyzing your risks for non compliance
- Validating poor record keeping and lack of training

2:00-2:15 PM **Networking Break**

2:15-3:15 PM **BREAKOUT SESSIONS**

701 The Government Official & Chief Compliance Officer: **Learned Experiences on Proactive Inititatives to** Mitigate and Minimize Risk



Bret S. Bissey, Healthcare Compliance Executive



Alec Alexander, Partner, Breazeale, Sachse & Wilson

- The negotiation activities which surround a CIA or Settlement Agreement can be stressful and potentially result in an agreement which contains flaws or inaccuracies. What elements is the government looking for? Who is best to negotiate for providers?
- Every investigation/settlement has a history of something that could have been done differently or maybe in a more proactive manner. Hear from the speakers about applicable cases, settlements and investigations where proactive actions were missed
- Board Governance is a key element of a compliance program. Learn of proactive activities that can be taken to demonstrate that this is working as recommended by OIG-DHHS including making sure the Board is always involved and aware of their obligations

702 State Civil Enforcement **Updates**



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

Kathleen Von Hoene, Bureau Chief, MFCU-Complex Civil Enforcement Bureau, Office of the Attorney General, State of FL

- Understand what areas and entities are being investigated by the states
- Learn how the recent Escobar "materiality" decision is influencing state enforcement
- Discuss what you can do to avoid being the object of unwanted attention from state enforcement authorities

703 Ask the Stark Law Professionals: Q & A Session



Bob A. Wade, Partner, Barnes & Thornburg LLP



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



Kevin McAnaney, Law Office of Kevin McAnaney

- Very brief overview of the Stark Law
- Respond to pre-submitted & live questions regarding case examples of the application of the Stark Law

Wednesday, November 1 POST-CONFERENCE

8:30-10:00 AM POST-CONFERENCE BREAKOUTS

W1 Whistleblower Case Study



Gabriel Imperato, Managing Partner, Broad and Cassel



Lesley Ann Skillen, Attorney, Getnick & Getnick LLP

- Whistleblowers; Who are they and why do they file Qui Tam cases?
- Are there strategies for health care organizations to manage the whistleblower risk and what are the key features?
- How important is an organizational anti-retaliation policy and what are important tips for compliance program effectiveness?

W2 Managed Care Fraud **Enforcement & Compliance**



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



David Leviss, Partner, O'Melveny & Meyers LLP

- Recent False Claims Act enforcement trends affecting managed care organizations
- Navigating regulatory challenges in a managed care environment
- Role of an SIU (or Compliance Dept.) in managed care



W3 Opioid Crisis: **Drug Diversion & Enforcement**



Gary Cantrell, Deputy Inspector General for Investigations, OIG HHS

Michael Cohen, DHSc, JD, PA-C, Operations Officer, HHS OIG Office of Investigations

- Overview of the HHS's work to protect beneficiaries from opioid abuse and diversion
- Criminal enforcement case studies
- Highlights from OIG's analysis of Medicare spending on opioids

10:00-10:15 AM **Networking Break**

10:15-11:45 AM POST-CONFERENCE BREAKOUTS

W4 Criminal & Civil Enforcement & **Compound Pharamacies**

Daniel Bernstein, AUSA, United States Attorney's Office, Southern District of Florida



Samuel Sheldon, Partner, Quinn Emanuel

- Government enforcement lawyers will describe the magnitude, scope and nature of the compounding pharmacy fraud scheme against the Tricare program from 2013-2015
- Prosecutors and defense lawyers will offer their perspective on several different schemes that have been aggressively investigated by the government including doctor kickbacks in the form of research fees and medical director fees, patient kickbacks in the form of clinical research participation fees, and various medical necessity issues
- Prosecutors and defense lawyers will discuss enforcement trends, defense theories, and recent cases

W5 Medical Necessity and the False Claims Act: Investigating, Proving, and Defending FCA Cases Involving Issues of **Medical Necessity**



JD Thomas, Waller



Jeffrey Dickstein, Partner, Phillips & Cohen LLP



Robert McAuliffe, Assistant Director, U.S. Department of Justice, Civil Division, Commercial Litigation Branch (Frauds)

- Medical necessity, from the validity of inpatient admissions to the amount of rehab provided to patients, increasingly dominates FCA cases. This panel of experienced attorneys from the government, defense, and relator's bar will examine these issues
- We will consider legal issues around medical necessity cases, including post-Escobar questions of materiality, as well as regulations typically in play in common questions of medical necessity
- We will discuss factual issues that arise in medical necessity cases, including investigating, proving, and defending against allegations of the lack of medical necessity, as well as designing and implementing statistically valid medical

W6 Private Payer Activities in Addressing Fraud and Abuse and Compliance Issues in the **Health Care Industry**



Lou Saccoccio, CEO NHCAA (Moderator)



Rick Munson, Vice President, Investigations, UnitedHealthcare



Nicholas Messuri, VP Fraud Prevention & Recovery, DentaQuest

Thomas J. Daly, Acting Unit Chief, U.S. Dept. of Justice, Federal Bureau of Investigation

The panel will discuss:

- The analytical and other tools being used by private payers and government agencies to identify and prevent fraud, along with the importance of pre-pay review and the elimination of fraudsters from the system
- The critical role that private-public partnerships are playing to increase information sharing and collaboration between private payers and law enforcement in the fight against health
- The close alignment between private payer SIUs and Compliance to ensure there is oversight of FWA programs that meet the expectations of regulators

12:30-12:45 PM CHC Exam Check-In

12:45-4:00 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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Demographic Informati	on				
What is your functional job title	e? Please select one.	What is your	primary health ca	are entity?	
☐ Academic/Professor	☐ Consultant	☐ Academic		☐ Long-Term	Care
☐ Administration	☐ Controller	☐ Ambulance	e/Transportation	☐ Managed C	are
☐ Asst Compliance Officer	☐ Ethics Officer	☐ Behavioral	Health	☐ Medical De	vice Manufacturer
☐ Attorney (In-House Counsel)	☐ Executive Director	☐ Consulting	ı Firm	☐ Medical/Cl	inical Research
☐ Attorney (Outside Counsel)	☐ General Counsel	☐ Durable M	edical Equipment	□ Nursing	
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☐ Audit Manager/Officer	☐ HIPAA/Privacy Officer	☐ Health Sys	tem	Products to	Health Care Entities
☐ Billing Manager/Officer	☐ Human Resources	☐ Health Sys	tem/Teaching	☐ Payor/Insu	rance
☐ Charger Master	☐ Medical Director	☐ Home Care	e/Hospice	☐ Pharmaceu	tical Manufacturer
☐ Chief Compliance Officer	□ Nurse	☐ Hospital		☐ Physician F	ractice
☐ CEO/President	☐ Nurse Manager	☐ Hospital/T	eaching	☐ Rehabilitati	on
☐ Chief Financial Officer	☐ Patient Safety Officer	☐ Integrated	Delivery System	☐ Retail Phar	macy
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☐ Compliance Coordinator	☐ Research Analyst				
☐ Compliance Director	☐ Risk Manager	_			_
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☐ Compliance Officer	☐ Vice President	14/1		1261 . 11.11 .	
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Select only ON SUN, OCT 29 BREAKOUTS PRE-CONFERENCE (MORNING) \$\frac{1}{2}\frac{5}{2	MON, OCT 30 BREAKOUTS 11:00 AM-12:00 PM 101 102 103 1:00-2:00 PM 201 202 203 2:30-3:30 PM 301 302 303		WED, NOV 1 BREAKOUTS	Special Request for Dietary Accommodation Gluten Free Kosher-Style (no shellfish, pork or meanor Kosher (Hechsher certified) Vegetarian Veganor 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 MasterC Due to PCI Compliance, please do not provide any credit card informy You may email this form to helpteam@hcca-info.org (without credit cand call HCCA at 888-580-8373 or 952-988-0141 with your credit cand Credit Card Account Number	Card OVisa Mation via email. Card information)
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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. 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.

5 or more: \$100 discount for each registrant 10 or more: \$150 discount for each registrant

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Dress Code: Business casual dress is appropriate

Hotel & Conference Location

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

Phone reservations: 1-800-HILTONS (use the group code "HCCA" to book at the group rate)

Online reservations:

https://aws.passkey.com/go/ HCCAHealthcareEnforcement2017

A reduced rate of \$293 per night for single/ double occupancy plus applicable taxes has been arranged for this program. This group rate is good through Friday, October 6, 2017, or until the group room block is full, whichever comes first. The group rate includes complimentary Internet in auestrooms.

Hotel accommodations are not included in your conference registration fee. Reservation requests received after the listed cut-off date or after the group block is filled (whichever comes first) will be accepted on a space and rate availability basis only.

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