

70TH ANNUAL CONFERENCE

YOUR SURVIVAL GUIDE TO EMERGING ISSUES IN HEALTHCARE: What to Expect & How to Prepare

Earn up to 15.3 CME credits

- Payor Incentives—bundled payments, population health management and capitated payments
- Commercial Reasonableness of Physician Compensation Arrangements
- From fee-for-service to value-based reimbursements—real world success stories
- Employment Contracting Workshop—Did I Get What I Bargained For?
- MACRA Made Easy

THE INTERCONTINENTAL

JUNE 8–9, 2017

CHICAGO, ILLINOIS

PROGRAM ORGANIZERS



CHICAGO
MEDICAL
SOCIETY

IN CONJUNCTION WITH



PROGRAM DETAIL

TARGET AUDIENCE & SCOPE OF PROFESSIONAL PRACTICE:

This CME and CLE conference is targeted towards all physicians and attorneys who work with healthcare related matters. Whether you are an experienced healthcare lawyer or a physician in any practice setting or simply entering the field of healthcare, this conference will provide valuable insight and strategies that can improve your practice.

DESCRIPTION:

Physicians continue to face challenging odds in a rapidly evolving healthcare market—whether remaining independent, adapting to “employment” by an integrated system, or addressing consolidated payer markets with little or no negotiating power. When confronted with aggressive hospital systems, lower reimbursement, and daily practice challenges, physicians are learning to adapt and survive in very innovative ways.

This unique conference offers physicians, attorneys and their administrative partners an opportunity to hear how these issues are being addressed by physicians and how physicians can succeed at maintaining viable medical practices that offer quality services at their core. As a combined educational program with the American Bar Association, Health Law Section, the Chicago Medical Society and the American Association for Physician Leadership, physicians and their legal counsel will have access to national speakers and will be educated on key issues affecting employer and hospital relationships, business and industry responses to payer consolidation and market control, and every day “survival” techniques in hospital and private practice settings.

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<https://70th-annual-mcc.eventbrite.com>

GLOBAL LEARNING OBJECTIVES

- Examine recent payment models and initiatives in the insurance marketplace and discuss how the ACA has affected payor alignment and marketplace strategies.
- Discuss key policies for implementing clinical integration and the need for physician leadership.
- Identify how high-performing networks play a vital role in the evolution of provider delivery payment from fee-for-service to value-based reimbursement.
- Examine the promise and limitations of federal healthcare reform and identify which risks need to be considered.
- Review current trends in recent False Claims Act cases and provide practical, real-world ideas for physicians to address and prevent False Claims Act exposure.
- Provide an overview on how to minimize the risks in prescribing controlled substances.
- Implementing alternative concierge medicine practice models and strategies which can be rewarding for physicians and very satisfying for patients.
- Provide insight and practical advice on how to treat the client or patient struggling in addiction while offering a front-row seat to the state of current and proposed public policy on addiction issues.
- Discuss the impact of the Quality Payment Program, including MIPS and Advanced APMs, on physicians as well as how physicians can act today to avoid a payment penalty in 2019
- Equip providers and legal counsel with the tools to analyze commercial reasonableness of physician compensation considering the evolving healthcare delivery system.
- Explain potential changes resulting from healthcare reform legislation and other initiatives that will impact practicing physicians.
- Address key issues when facing an audit and successful strategies for appeals.
- Review and discuss the practical implications of the revisions and clarifications to the Stark regulations in the 2016 Medicare Physician Fee Schedule.
- Provide an overview of employment contracting and guidance on hospital contract negotiations.
- Address ways to combat physician burn-out and promote physician health.
- Grasp the challenges presented by advances in technology that may result in professional responsibility concerns for both physicians and attorneys.

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The InterContinental
Chicago, IL



SCHEDULE AT A GLANCE

THURSDAY, JUNE 8, 2017

7:30 am–5:00 pm	Registration and Information
7:30–8:30 am	Continental Breakfast
8:00–8:15 am	Opening Remarks <ul style="list-style-type: none"> > C. Joyce Hall, Chair, Health Law Section, Watkins & Eager PLLC, Jackson, MS > Clarence Brown, MD, President, Chicago Medical Society, Chicago, IL
8:15–9:00 am	KEYNOTE SPEAKER > Paul H. Keckley, PhD, The Keckley Report, Chicago, IL Health Reform: What to Expect and How to Prepare
9:00–10:00 am	Payor Initiatives with Physicians and Payment Models in the Insurance Marketplace: A Changing Landscape
10:00–10:15 am	Break
10:15–11:15 am	Overcoming Common Barriers to Clinical Integration
11:15 am–12:15 pm	Turning Networks into Assets—From Broad to High-Performing Networks
12:15–1:00 pm	LUNCH SPEAKER: Everything You Always Wanted to Ask a Lawyer (But Were Afraid to Ask)
1:00–2:00 pm	Not Your Grandfather's False Claims Act: Trends in the Identification and Pursuit of Aberrant Physician Practices
CONCURRENT SESSIONS	
2:00–3:00 pm	1. Potential False Claims Act and Other Regulatory Exposure with Ineffective Peer Review 2. Minimizing the Risks in Prescribing Controlled Substances
CONCURRENT SESSIONS	
3:00–4:00 pm	1. Anti-Kickback and Beneficiary Inducement Statutes: Current Trends and New Regulations 2. Evolving Healthcare Delivery: Concierge Medicine
4:00–4:15 pm	Break
4:15–5:00 pm	The Addict's Perspective: Three Truths Every Doctor and Lawyer Should Know about Addiction
5:30–6:30 pm	Networking Reception

FRIDAY, JUNE 9, 2017

7:30 am–5:00 pm	Registration and Information
7:30–8:30 am	Continental Breakfast
8:00–9:15 am	The Quality Payment Program: What It Is and Why You Should Care
9:15–10:15 am	Commercial Reasonableness of Physician Compensation: Analytical Update with MACRA
10:15–10:30 am	Break
10:30–11:30 am	An Update on the Future of Healthcare
CONCURRENT SESSIONS	
11:30 am–12:30 pm	1. Your Practice is Being Audited: Complying, Fighting and Winning 2. Contracting Workshop Part I: Negotiating Employment Agreements for Residents and New Physicians
12:30–1:30 pm	Lunch on Your Own
CONCURRENT SESSIONS	
1:30–2:30 pm	1. The Stark Law: What Has Changed, What Remains the Same, and What Might Come Next 2. Contracting Workshop Part II: Five+ Years Later—Did I Get What I Bargained For? What Are My Options?
CONCURRENT SESSIONS	
2:30–3:30 pm	1. Healthcare Compliance and Enforcement Investigations: Leading Practices for Outside and In-house Counsel 2. MACRA Made Easy
3:30–3:45 pm	Break
CONCURRENT SESSIONS	
3:45–4:45 pm	1. The Physician/Attorney/Consultant Relationship: Challenges Posed by the 60-Day Overpayment Disclosure Rule 2. Physician Wellness: Promoting a Culture of Physician Well-Being
4:45–5:45 pm	My Attorney Said It Was OK: Legal Ethics and the Advice-of-Counsel Defense for Doctors
5:45 pm	CLE Program Adjourns



PROGRAM AGENDA

THURSDAY, JUNE 8, 2017

7:30 am–5:00 pm	Registration and Information
7:30–8:30 am	Continental Breakfast
8:00–8:10 am	Opening Remarks > Clarence Brown, MD , President, Chicago Medical Society, Chicago, IL > C. Joyce Hall , Chair, Health Law Section, Watkins & Eager PLLC, Jackson, MS
8:15–9:00 am	KEYNOTE SPEAKER > Paul H. Keckley, PhD , The Keckley Report, Chicago, IL Health Reform: What to Expect and How to Prepare While the Trump administration and the GOP-led Congress work to replace the ACA, capital markets are shifting, demand for health services is increasing, and budget cuts are looming. Elements of the new, “new normal” are unclear. This session will provide an up-to-the-minute update with time for discussion.
9:00–10:00 am	Payor Initiatives with Physicians and Payment Models in the Insurance Marketplace: A Changing Landscape Commercial health insurance payors are experimenting with value-based payment models, such as bundled payments, population health management, and capitated payments, that shift risk to healthcare delivery organizations in order to increase their accountability for the cost and quality of the care they provide. The Center for Medicare and Medicaid Innovation has created several bundled payment initiatives that are intended to better coordinate care by providing a bundled Medicare payment for an episode of care involving one or more providers. Other approaches by payors include using particular networks of providers and targeting certain coverage populations. This session offers an opportunity to hear from both commercial health insurers and CMMI representatives on products and other initiatives in the marketplace. Topics include: <ul style="list-style-type: none"> • Recent payment models and initiatives in the insurance marketplace • How the ACA has affected payer alignment and marketplace strategies • Discussion of payment programs and initiatives with physicians > Julian Harris, MD, MBA , President, CareAllies, Piscataway, NJ > Tina R. Shah, MD, MPH , U.S. Department of Veterans Affairs, Veterans Health Administration, CMMI Representative, Washington, DC > Moderator: Denise E. Hanna, JD , Locke Lord, Washington, DC

THURSDAY, JUNE 8, 2017, CONTINUED

10:00–10:15 am	Break
10:15–11:15 am	Overcoming Common Barriers to Clinical Integration This session will focus on the evolution of clinical integration networks, the key legal issues associated with their development, and the cultural changes necessary for both physicians and administrators to make such endeavors successful. The panelists will discuss: <ul style="list-style-type: none"> • Common road blocks, such as funding and governance, EHR interfacing, data downloads and physician “skin in the game” • The transition of existing payor contracts to different types of value-based contracts • The need for physician leadership • Key policies for implementing clinical integration > George Mayzell, MD, MBA , Chief Clinical Officer, Vizient Southeast, Tampa, FL > April E. Schweitzer, JD , Nixon Peabody LLP, Chicago, IL
11:15 am–12:15 pm	Turning Networks into Assets—From Broad to High-Performing Networks Marketshare is king as commercial payor volume is being replaced with government program growth, and acquisition of other providers isn’t the only answer. High-performing networks are critical and play a vital role in the evolution of provider delivery payment from fee-for-service to value-based reimbursement. In this session panelists will review various alternatives including real-world success stories including: <ul style="list-style-type: none"> • MACRA (Medicare Access and CHIP Reauthorization Act) APM (Alternative Payment Model) Options • Super-Clinically Integrated Network (CIN) Formation and Risk-Based Venture Options • High-Performing Physician Hospital Organizations (PHOs)/Independent Physician Associations (IPAs)/Accountable Care Options (ACOs)/CIN Formation Risk-Based Reimbursement Options > Ellen Brown , Orlando, FL > Mark E. Rust, JD , Barnes & Thornburg LLP, Chicago, IL

THURSDAY, JUNE 8, 2017, CONTINUED

12:15–1:00 pm	<p>LUNCH Everything You Always Wanted to Ask a Lawyer (But Were Afraid to Ask) Join your colleagues for an interactive peer-learning session featuring a panel of attorneys on the hot seat to answer all of your burning questions. > William W. Horton, JD, Jones Walker LLP, Birmingham, AL</p>
1:00–2:00 pm	<p>Not Your Grandfather’s False Claims Act: Trends in the Identification and Pursuit of Aberrant Physician Practices In this timely discussion of current trends in False Claims Act cases involving physicians, an expert panel will:</p> <ul style="list-style-type: none"> Analyze options available to the government for identifying “high-risk” physicians Examine the government’s use of data analytics to scrutinize aberrant physician referral and prescribing patterns Review recent False Claims Act cases involving potentially abusive physician practices Provide practical, real-world ideas for physicians to address and prevent False Claims Act exposure <p>> A. G. (Alec) Alexander III, JD, Breazeale Sachse and Wilson LLP, Baton Rouge, LA > Michael Granston, JD, United States Department of Justice, Civil Fraud Division, Washington, DC</p>

THURSDAY, JUNE 8, 2017, CONTINUED

2:00–3:00 pm	<p>CONCURRENT SESSION: Potential False Claims Act and Other Regulatory Exposure with Ineffective Peer Review Compliance pitfalls can result if healthcare organizations fail to conduct effective physician peer review. This session will examine the key issues lawyers and physicians face when addressing and conducting physician peer review to reduce regulatory exposure. The discussion will include:</p> <ul style="list-style-type: none"> Hospital and medical staff legal obligations to conduct effective peer review Examples of False Claims Act, Stark Law, Anti-Kickback Statute, HIPAA, EMTALA, and federal research civil and criminal exposure associated with ineffective peer review Effective physician peer review strategies, including coordination with compliance personnel where appropriate Practical examples of lessons learned from ineffective physician peer review <p>> Kathleen L. DeBruhl, JD, DeBruhl Haynes–The Health Law Group, New Orleans, LA > Terri D. Keville, JD, Davis Wright Tremaine LLP, Los Angeles, CA</p>
	<p>CONCURRENT SESSION: Minimizing the Risks in Prescribing Controlled Substances This session will provide an overview of DEA registration, suspension or revocation of registration, DEA inspections and enforcement proceedings, and minimizing the risk of investigation and prosecution. In addition, the panel will discuss:</p> <ul style="list-style-type: none"> Developments in e-prescribing and telehealth: DEA’s new proposed relaxed standards State prescription drug monitoring program (PDMP) laws and their effects on physicians Medical and recreational marijuana dilemmas for physicians <p>> U.S. Senator Dick Durbin, U.S. Senator for Illinois, Chicago, IL (Invited) > Natalia Mazina, JD, Klein, Hockel, Iezza & Patel PC, San Francisco, CA > Dennis A. Wichern, Drug Enforcement Agency, Chicago Field Division, Chicago, IL</p>

PROGRAM AGENDA

THURSDAY, JUNE 8, 2017, CONTINUED

3:00–4:00 pm	<p>CONCURRENT SESSION: Anti-Kickback and Beneficiary Inducement Statutes: Current Trends and New Regulations</p> <p>This panel will review the federal anti-kickback statute and the beneficiary inducement provisions of the civil monetary penalties law and examine recent developments and common compliance issues for physicians. This discussion will include:</p> <ul style="list-style-type: none">• An overview of the statutes' scope and requirements, particularly OIG's new safe harbors and regulatory changes• Recent enforcement actions and settlements• OIG guidance and compliance resources• Best practices and tips to avoid or mitigate risk <p>> Tony R. Maida, JD, McDermott, Will & Emery, New York, NY > Heather L. Westphal, JD, Office of Counsel to the Inspector General, Department of Health and Human Services, Washington, DC</p>
	<p>CONCURRENT SESSION: Evolving Healthcare Delivery: Concierge Medicine</p> <p>Concierge medicine continues to develop as a promising practice alternative that can be professionally rewarding for physicians and satisfying for patients. This session addresses key issues for both lawyers and physicians concerning concierge practice, including:</p> <ul style="list-style-type: none">• The flexibility that physicians have in setting up a concierge practice• The clinical and professional advantages for physicians practicing concierge medicine• Legal issues that should be considered when structuring and operating a concierge practice <p>> Angelo Costas, MD, Michigan Avenue Internists, Chicago, IL > Matthew Zimmerman, JD, MDVIP, Inc., Boca Raton, FL</p>
4:00–4:15 pm	Break

THURSDAY, JUNE 8, 2017, CONTINUED

4:15–5:00 pm	<p>The Addict's Perspective: Three Truths Every Doctor and Lawyer Should Know about Addiction</p> <p>Nearly everyone will face addiction in their practice this year. This session will provide insight and practical advice on how to treat the client or patient struggling with addiction while offering a front-row seat to the state of current and proposed public policy on addiction issues. Topics include:</p> <ul style="list-style-type: none">• Mechanics of addiction: the problem and solution• Promise and pitfalls of medically assisted treatment• State of current and proposed addiction law and policy <p>> Craig DeRoche, Former Speaker of the House, Michigan, Novi, MI</p>
5:30–6:30 pm	<p>Networking Reception</p> <p>Come enjoy a chance to relax and network with colleagues over drinks and hors d'oeuvres. You will have the opportunity to meet our speakers, as well as members of the American Bar Association Health Law Section, the Chicago Medical Society, and the American Association for Physician Leadership.</p>

FRIDAY, JUNE 9, 2017

7:30–8:30 am	Continental Breakfast
8:10–9:15 am	<p>The Quality Payment Program: What It Is and Why You Should Care</p> <p>The Quality Payment Program (QPP) will impact the way most health care practitioners are reimbursed by CMS. This session will discuss the alphabet soup of the QPP, including MIPS and Advanced APMs, as well as how physicians can take action today to avoid a payment penalty in 2019. Panelists will also address:</p> <ul style="list-style-type: none"> • The impact of the QPP on solo and small group practitioners, large medical groups and non-patient facing practitioners • The status of bundled payment programs and CMS' plans going forward • The consequences of doing nothing <p>> Kristin M. Bohl, JD, Baker Donelson, Baltimore, MD > Centers for Medicare & Medicaid Services Speaker TBD</p>
9:15–10:15 am	<p>Commercial Reasonableness of Physician Compensation: Analytical Update with MACRA</p> <p>With recent healthcare reform initiatives, a major paradigm shift is taking place in the healthcare delivery system. This session will focus on the potential impact of MACRA and other reform initiatives on determining the commercial reasonableness of physician compensation arrangements, and equip providers and legal counsel with the tools to thrive in this paradigm shift.</p> <p>> Jessica Bailey-Wheaton, JD, Health Capital Consultants, St. Louis, MO > John Barakat, MBA, Chief Financial Officer, Cardiac Surgery Associates, S.C., Chicago, IL > Andrea M. Ferrari, JD MPH, Health Care Appraisers, Boca Raton, FL</p>
10:15–10:30 am	Break

FRIDAY, JUNE 9, 2017, CONTINUED

10:30–11:30 am	<p>An Update on the Future of Healthcare</p> <p>Dr. Bill Cassidy is the United States Senator for Louisiana. He co-founded the Greater Baton Rouge Community Clinic, a clinic providing free dental and health care to the working uninsured. He also created a private-public partnership to vaccinate 36,000 greater Baton Rouge area children against Hepatitis B at no cost to the schools or parents. Senator Cassidy is co-author of The Patient Freedom Act of 2017 with Senator Susan Collins of Maine. He will speak on healthcare reform legislation and other initiatives being considered on Capitol Hill, including aspects affecting practicing physicians.</p> <p>> U.S. Senator Bill Cassidy, MD, Louisiana</p>
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PROGRAM AGENDA

FRIDAY JUNE 9, 2017, CONTINUED

11:30 am– 12:30 pm	<p>CONCURRENT SESSION: Your Practice is Being Audited: Complying, Fighting and Winning</p> <p>Given the increasing audit landscape, most physician practices will be subject to a Medicare, Medicaid or other third-party payor audit at some point. Taking the audit seriously and understanding the process is critical to a successful outcome. Failure to handle the audit properly can lead to significant financial exposure and continued scrutiny. This session addresses key issues when facing an audit, including:</p> <ul style="list-style-type: none"> • Appeal processes and auditors' concepts • Considerations affecting the decision to appeal • Successful strategies for appeals • Using the audit to enhance future compliance <p>> H. Rusty Comley, JD, Watkins & Eager PLLC, Jackson, MS > Abby Pendleton, JD, The Health Law Partners PC, Southfield, MI</p>
	<p>CONCURRENT SESSION: Contracting Workshop Part I: Negotiating Employment Agreements for Residents and New Physicians</p> <p>Signing on the dotted line? Not so fast! Make sure you understand what you're being asked to sign, how your contract compares to industry norms, and how to negotiate changes with your future employer. This session will provide physicians, practice administrators and legal counsel with an overview of physician employment contracting, including:</p> <ul style="list-style-type: none"> • Contracting basics • How to analyze key terms (e.g., compensation, benefits, termination rights, non-compete restrictions) • Common pitfalls • Successful negotiation strategies <p>> Amy J. McCullough, JD, Polsinelli PC, Atlanta, GA > Wendi Campbell Rogaliner, JD, Rogaliner Law, Dallas, TX</p>
12:30–1:30 pm	<p>Lunch on Your Own</p>

FRIDAY JUNE 9, 2017, CONTINUED

1:30–2:30 pm	<p>CONCURRENT SESSION: The Stark Law: What Has Changed, What Remains the Same, and What Might Come Next</p> <p>In this session, the expert panelists will review and discuss the practical implications of the revisions and clarifications to the Stark regulations in the 2016 Medicare Physician Fee Schedule. Topics covered will include:</p> <ul style="list-style-type: none"> • Overview of the revised Self-Referral Disclosure Protocol and past settlements • Review of recent government enforcement of False Claims Act cases and settlements based on Stark violations • The interplay between the Stark Law and the evolving CMS payment models • Analysis of what might be next for the Stark Law <p>> Sanford B. Teplitzky, JD, Baker Donelson, Baltimore, MD > Lisa Ohrin Wilson, JD, Senior Technical Advisor, Centers for Medicare & Medicaid Services, Baltimore, MD</p>
	<p>CONCURRENT SESSION: Contracting Workshop Part II: Five+ Years Later—Did I Get What I Bargained For? What Are My Options?</p> <p>This session will provide physicians, practice administrators and legal counsel with practical, real world guidance to anticipate speed bumps in hospital contract renegotiations and to prepare for practice-health system integration opportunities. Panelists will discuss the how's and whys of contract renegotiation and contract integration, including:</p> <ul style="list-style-type: none"> • Compensation/benefits, call coverage, governance/partnership, outside income/personal services/concierge medicine • Contract terms, including termination/non-competes, compensation methodologies, strategic considerations, and unwind provisions <p>> David A. Cranford, CPA, Elliott Davis Decosimo, Chattanooga, TN > Jennifer D. Malinovsky, JD, Nelson Mullins Riley & Scarborough LLP, Atlanta, GA</p>

FRIDAY JUNE 9, 2017, CONTINUED


2:30–3:30 pm	<p>CONCURRENT SESSION: Healthcare Compliance & Enforcement Investigations: Leading Practices for Outside and In-House Counsel</p> <p>Join this session to hear from two former health care fraud AUSAs now serving as in-house and outside counsel who will provide in-house, defense and compliance perspectives on representing and advising clinicians. The panelists will discuss:</p> <ul style="list-style-type: none"> • The current regulatory landscape for provider investigations by the government • Internal investigations from in-house and outside counsel perspectives • Leading practices in responding to compliance and enforcement investigations <p>> Michael J. McCarthy, JD, Cooper Health System, Camden, NJ > Sean McKenna, JD, Greenberg Traurig LLP, Dallas, TX</p>
	<p>CONCURRENT SESSION: MACRA Made Easy</p> <p>The Medicare Access and CHIP Reauthorization Act of 2015 (MACRA) ushered in a whole new Medicare physician payment system and accompanying set of new acronyms, including QPP, MIPS, APM, and others. This session will demystify the choices presented by the Merit-Based Incentive Payment System and Alternative Payment Models. Attendees will learn:</p> <ul style="list-style-type: none"> • The MIPS performance categories for 2017—Quality, Advancing Care Information and Improvement Activities • How Alternative Payment Models fit in • How physicians and other MIPS-Eligible Clinicians can maximize their payment adjustment <p>> Layne S. Gakos, JD, Connecticut State Medical Society, North Haven, CT > Catherine Hanson, JD, Chief Strategic Solutions and National Networks Officer, Quality Value Health Systems, Tulsa, OK</p>
3:30–3:45 pm	Break

FRIDAY JUNE 9, 2017, CONTINUED

3:45–4:45 pm	<p>CONCURRENT SESSION: The Physician/Attorney/Consultant Relationship: Challenges Posed by the 60-Day Overpayment Disclosure Rule</p> <p>The longstanding relationships among physicians, their counsel and compliance/coding consultants are facing significant challenges from the requirement to disclose identified Medicare and Medicaid overpayments within 60 days after identification. This session will explore:</p> <ul style="list-style-type: none"> • New challenges which can have significant impact on liability for the attorney, the consultant and the physician practice • When to conduct audits under attorney-client privilege • When and how to receive preliminary results • The importance of a well thought out audit process to help ensure a positive experience and minimize financial risks <p>> Jean Acevedo, Acevedo Consulting Incorporated, Delray Beach, FL > Lester J. Perling, JD, Broad & Cassel, Fort Lauderdale, FL</p>
	<p>CONCURRENT SESSION: Physician Wellness: Promoting a Culture of Physician Well-Being</p> <p>The practice of medicine has always been a high-stress occupation. Given the increased burdens placed on physicians in today's health care climate, physicians are under more stress than ever. This session will address ways to combat physician burnout and promote physician health. The panelists will also discuss:</p> <ul style="list-style-type: none"> • Identifying impairments that can affect a physician's ability to practice medicine • Methods of intervention • Potential legal implications associated with impaired physicians • Innovative ways healthcare organizations can create an environment that contributes to physician well-being <p>> Manuel Flores, JD, Arnstein & Lehr LLP, Chicago, IL > Martin Guerrero, MD, JD, National Smart Healthcare Services, El Paso, TX</p>

PROGRAM AGENDA

FRIDAY JUNE 9, 2017, CONTINUED

4:45–5:45 pm	My Attorney Said It Was OK: Legal Ethics and the Advice-of-Counsel Defense for Doctors When can a doctor rely on a lawyer's advice? Advances in technology and changes in law can present challenges for physicians and attorneys, including legal ethics challenges. This presentation will address: <ul style="list-style-type: none">• Situations that may raise professional responsibility concerns for attorneys• Cases in which the advice-of-counsel defense has been considered by courts• Cases involving new technology and changing law, such as the Teladoc case in Texas• Applicable Model Rules of Professional Conduct > Jill Wright, JD, Foley & Lardner LLP, Washington, DC	
5:45 pm	CLE Program Adjourns	

SATURDAY, JUNE 10, 2017

1:00–8:00 pm	Third Annual Doctor/Lawyer Golf Classic Ruffled Feathers Golf Club Join us for a memorable golf scramble with members of the ABA and the Chicago Medical Society. Located just 30 minutes from downtown Chicago, Ruffled Feathers' aesthetic beauty is matched only by the genius of its layout. The only Pete Dye designed golf course in Illinois...and a must-play for any devoted golfer. This championship caliber, well-conditioned golf course awaits your arrival with one of the finest sets of par 3's in the Midwest. Ruffled Feathers Golf Club has 18 wonderful holes with tee sets for all skill levels and is your premier place to play golf. <ul style="list-style-type: none">• Ticketed Event: Includes—18 holes, golf cart, box lunch and reception• On or before 5/15/17—\$175; After 5/15/17—\$200• Transportation available for an additional fee.
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PLANNING COMMITTEE

The following planning committee members of the American Bar Association (ABA) Health Law Section have disclosed that they do not have any relevant financial relationships with commercial interest.

Co-Chairs: *Adrienne D. Dresevic, JD and Clay J. Countryman, JD*

Planning Committee: *Monique Anawis, MD, JD, Anthony J. Burba, JD, Anthony H. Choe, JD, Wes M. Cleveland, JD, Tamala Marie Woffenden, JD, Theodore D. Kanellakes, Executive Director, CMS, Haydee Nascimento, JD, Director of Advocacy & Education, CMS, Dawn McKnight, Director, Strategic Collaborations & Lx Solutions, American Association for Physician Leadership*

CHICAGO MEDICAL SOCIETY PLANNING COMMITTEE

The following planning committee members of the Chicago Medical Society's CME Committee have disclosed that they do not have any relevant financial relationships with commercial interest:

The planning committee members from CMS: *Clarence Brown MD, President, CMS, Christine Bishof, MD, CMS, Theodore D. Kanellakes, Executive Director, CMS*

CME planning committee: *Michael Hanak MD, Chairman, Eric A. Eason, MD, Arjang Khorasani MD, Vemuri S. Murthy MD, and Haydee Nascimento, Esq. Director of Advocacy & Education, CMS*

CME Information and Speaker disclosures are online at <http://www.cmsdocs.org/events/70th-Annual-MCC>

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Bill Cassidy, MD (R-LA)

U.S. Senator for Louisiana

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DeBruhl Haynes—The Health
Law Group
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Craig DeRoche

Former Speaker of the House,
Michigan
Novi, MI

Senator Dick Durbin (D-IL)

U.S. Senator for Illinois (*invited*)

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Andrea M. Ferrari, JD MPH

Health Care Appraisers
Boca Raton, FL

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Chicago, IL

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CONFERENCE INFORMATION

ADVANCE REGISTRATION

To ensure your name is included on the distributed registration list, register by **June 2, 2017**, online or by mail. Registration will be accepted only when accompanied by check, money order, VISA, American Express or MasterCard information. Registrations will not be held without payment.

Online: <https://70th-annual-mcc.eventbrite.com>
U.S. Mail: Chicago Medical Society
515 N Dearborn
Chicago, IL 606544

ON SITE REGISTRATION

Please call 312-988-5146 by **June 8, 2017**, to ensure space availability. On-site registration will only be accepted when accompanied by check, money order, VISA, American Express, or MasterCard information.

CANCELLATION POLICY

Tuition, less a \$50 handling charge for each registration, will be refunded upon written cancellation received no later than **May 23, 2017**. Cancellations received after this date cannot be refunded but substitutions are encouraged. The ABA reserves the right to cancel any program and assumes no responsibility for personal expenses.

REGISTRATION FEE

Registration fee for (Thursday and Friday), your payment will include admission to the program, continental breakfasts, coffee breaks, one lunch, reception, the Physician Law Book, 4th Edition, and electronic course materials.

CONFERENCE LOCATION

The 70th Annual Conference will take place at the InterContinental Hotel in downtown Chicago on Thursday, June 8 from 8 am–7 pm, Friday, June 9, 8 am–5 pm.

HOTEL INFORMATION

A block of rooms has been reserved at The InterContinental Chicago at the rate of \$259 single/double with 17.4% tax. The InterContinental Chicago is located at 505 N Michigan Ave, Chicago, IL. You can

reserve your room by visiting the website at: <https://goo.gl/FmKHg0> or you can call the Hotel directly at 1-800-628-2112 (312-944-4100 for International Calls) and identify yourself as a participant of the ABA Physician Legal Issues Conference 2017 (or group code KFG). **The room block expires on Tuesday May 16, 2017.**

AIRLINE INFORMATION

The hotel is approximately 18 miles (35–60 minutes) from O'Hare International Airport (ORD) and 12 miles (30–40 minutes) from Chicago Midway Airport (MDW). Discounted airfares are available from ABA Orbitz for Business, including ABA negotiated discounts on American, Virgin and United. For details, go to <http://ambar.org/pli2017> and select travel.

ABA NEGOTIATED AIRFARE DISCOUNTS—AVAILABLE ONLINE!

With ABA Agencia[®], you can automatically obtain ABA negotiated airfare discounts for travel to ABA Meetings. ABA Agencia for Business enables you to purchase the best airfare at the time of booking, by providing you with the ability to search for and compare fares from virtually every airline serving the destination.

Reservations with ABA Agencia for Business can be made online or offline. For offline reservations, call 877-833-6285. ABA Agencia is available online via ABA Travel Services[®]. ABA airfare discounts on some carriers may also be obtained by purchasing your tickets under the ABA Discount Codes directly from the airline or through your travel agent.

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Agreement Code: **621691** / Z Code: **ZXDR**
Discount available at www.united.com
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Not for Leisure Travel

DELTA AIRLINES 800-328-1111
ABA File Global Meeting Code: **NMP56**

*A Travel Profile is required when booking airline reservations with ABA Agencia, visit www.americanbar.org/travel for more information

CLE CREDIT

The ABA directly applies for and ordinarily receives CLE credit for ABA programs in AK, AL, AR, AZ, CA, CO, DE, GA, GU, HI, IA, IL, IN, KS, KY, LA, MN, MS, MO, MT, NH, NM, NV, NY, NC, ND, OH, OK, OR, PA, PR, SC, TN, TX, UT, VT, VA, VI, WA, WI, and WV. These states sometimes do not approve a program for credit before the program occurs. This transitional program is approved for both newly admitted and experienced attorneys in NY. Attorneys may be eligible to receive CLE credit through reciprocity or attorney self-submission in other states. For more information about CLE accreditation in your state, visit http://www.americanbar.org/cle/mandatory_cle.html or contact Danielle Daly at Danielle.daly@americanbar.org.

CME INFORMATION

Physicians that attend this conference may earn up to **15.3 CME credits**. For additional information about this CME activity, including any updates regarding faculty members and/or commercial support disclosures, please visit the Chicago Medical Society's (CMS) website at www.cmsdocs.org. You can also contact the Education Department of the CMS Office via email at: cms@cmsdocs.org or via phone at: **312-670-2550**.

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Accreditation Council for Continuing Medical Education (ACCME) through the joint providership of the Chicago Medical Society, the American Bar Association's Health Law Section and the American Association for Physician Leadership. The Chicago Medical Society is accredited by the ACCME to provide continuing medical education for physicians. The Chicago Medical Society designates this live activity for a maximum of 15.3 *AMA PRA Category 1 Credit(s)*[™]. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

HEALTH LAW SECTION MEMBERSHIP

As an added bonus to new members, the member's tuition rate will be available to registrants who become members of the ABA Health Law Section by completing the attached registration form.

Membership dues are not deductible as charitable contributions for federal income tax purposes, but such dues may be deductible as a business expense.

TAX DEDUCTION FOR EDUCATIONAL EXPENSES

An income tax deduction may be allowed for Educational expenses undertaken to maintain or improve professional skills. This includes registration fees, travel, meals, and lodging expenses. (See Treas. Reg. 1.162-5) (Coughlin vs. Commissioners, 203 F 2d 307).

SERVICES FOR PERSONS WITH DISABILITIES

If special arrangements are required for an individual with a disability to attend this program, please submit your request in writing to Health Law Section, American Bar Association, 321 N. Clark St., Chicago, IL 60654.

DRESS CODE

Business and business casual attire are appropriate for the program.

TUITION ASSISTANCE

Financial Assistance to defray tuition expense for ABA Health Law Section programs are available upon application on a program-by-program, case-by-case basis. Preference will be given to public interest lawyers, solo or small firm practitioners of limited means, and unemployed attorneys. Scholarship applications must be received at least two weeks before the program start date. You will be notified prior to the program if your application is approved. A minimal fee may be charged on all approved scholarship applications to defray expenses. For programs with tuition costs of \$500 or more, qualifying attorneys will receive at least a 50% reduction in the course fee(s) only. To apply send a letter outlining the basis for your request of a fee reduction to Nancy Voegtle, Senior Meeting Planner, ABA Health Law Section, 321 N. Clark St., Chicago, IL 60654. **Deadline for receipt: May 5, 2017.** No requests will be considered after the deadline, and all standard registration fee rates will apply after May 5, 2017.

70th Annual Conference 2017 Registration Form

CMS Member (circle): Yes No

ATTENDEE (PLEASE PRINT)

MAILING ADDRESS

CITY, STATE, ZIP

DAYTIME PHONE NUMBER

E-MAIL (REQUIRED)

Member	Non-member		Member	Non-member		Speaker
\$325	\$525	Resident/Fellow	\$25	\$50	Other (Non-MDs)	\$109 \$200

Member Students (Free w/ID) Non-Member Students: \$30

METHOD OF PAYMENT *(if applicable)*

Check enclosed in the total amount due: \$ _____

Charge Total Due: \$ _____

to my: VISA MasterCard American Express

ACCOUNT #

EXP. DATE

CCV

SIGNATURE

BILLING ADDRESS

Make Checks Payable to:

Chicago Medical Society Foundation

515 N. Dearborn St. Chicago, IL 60654

312-670-2550

<https://70th-annual-mcc.eventbrite.com>

