DAY 1 ·
MONDAY, FEBRUARY 5

7:00–8:00 A.M.   **REGISTRATION AND CONTINENTAL BREAKFAST**

8:00–9:00 A.M.   **KEYNOTE**

Sally Pelletier, Carol Cairns, Todd Sagin, Mark Smith
Our veteran faculty are known for opening the CRC Symposium with skits, props, and humor. See what lively means they use this year to engage the audience and set the stage for two full days of world-class training.

9:15–10:30 A.M.   **BREAKOUT SESSION 1**

Tackling Challenging Medical Staff Applications: Credentialing Practices That Support Risk Management

Sally Pelletier, Carol Cairns

With negligent credentialing suits on the rise, MSPs and medical staff leaders face more pressure than ever to protect patients from poor outcomes and providers from costly legal proceedings through stringent application review and expedient identification of red flags.

In this session, our expert faculty will zero in on some of the biggest risk areas on medical staff applications, arming attendees with actionable strategies for identifying, addressing, and curbing these issues before they spiral into damaging legal snares.

Ambulatory Assessment Strategies: Credentialing, Privileging, and Peer Review in Outpatient Environments

Todd Sagin, Mark Smith

As mergers and acquisitions continue to unite hospitals and ambulatory facilities, formalized credentialing, privileging, and competence assessment are picking up speed across the care continuum, leaving MSPs and physician leaders scrambling to retool processes originally developed for acute care practice. Our expert faculty will provide guidance on the most common ambulatory practice vetting and assessment conundrums, including what competency monitoring mechanisms to use, how frequently to conduct assessments, and who to enlist to conduct collegial interventions with outpatient practitioners.

10:30–11:00 A.M.   **NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)**

11:00–12:15 P.M.   **GENERAL SESSION 1**

Rapid Fire: Competency Conundrum Edition

Sally Pelletier, Carol Cairns, Todd Sagin, Mark Smith

This year, our expert faculty center this classic session around competence assessment, providing attendees with an interactive platform for discussing chronic compliance headaches, emerging trends and best practices, and other hot topics in the FPPE, OPPE, and peer review arena. Attendees will receive high-level overviews and quick tips for evaluating the performance of low-volume physicians, advanced practice professionals, telemedicine providers, and practitioners based in ambulatory environments. Want to help steer the FPPE/OPPE conversation? Audience members are invited to submit questions ahead of the conference.

12:15–1:15 P.M.   **NETWORKING LUNCH--PROVIDED (EXHIBIT HALL OPEN)**

1:15–2:15 P.M.   **BREAKOUT SESSION 2**

Accreditation Survey Crash Course: Avoiding Today's Top Speed Bumps

Barbara Warstler, Heather Johnson

Across healthcare settings and accreditors, credentialing, privileging, and peer review standards consistently rank among the highest deficiency areas. In this panel-based session, expert faculty will share highlights—and lowlights—from their recent survey experiences, summarize salient standards, and provide relevant best practices. Attendees will come away with new insight into what may be coming down the survey pike, how to shore up processes in anticipation, and how to account for major accreditation focus areas in long-term compliance strategies.

Implications for Credentialing, Privileging, and Peer Review

Todd Sagin, Mark Smith

As ever-rising merger and acquisition rates drive consolidation among and within healthcare organizations, medical staffs must determine how—and to what extent—to align distinctive medical staffs and governance approaches. Considerations include whether to create a unified medical staff, what peer review information to share across member facilities, and how to bring together varying credentialing and privileging processes. Through candid discussion of their trials and triumphs in the trenches, our expert faculty will provide helpful context, compliance considerations, and practical strategies for systemizing peer review and privileging and for fostering cohesion among medical staff cultures.

Health System Mergers and Acquisitions: Health

2:30–3:15 P.M.   **BREAKOUT SESSION 3**

Winning Presentation: 2018 CRC Symposium Case Study Competition

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During this special presentation, the winners of the 2018 CRC Symposium Case Study Competition will take the podium to share their expert-selected success story from the field. The second annual Case Study Competition invited pioneering MSPs and physician leaders to pitch a symposium session covering a recent organizational triumph propelled by MSPs and/or medical staff leaders. Attendees will have the opportunity to ask targeted questions of their peers and will walk away with creative solutions to implement in their own organization.

Dealing With Disruptive Physicians

Todd Sagin

As a medical staff leader, it can be uncomfortable to confront a colleague who is causing disruption on your medical staff. However, tolerating unprofessional behavior can undermine trust in the medical staff leadership, upend key governance processes, and erode morale throughout the organization. In this session, attendees will learn how to train and support medical staff leaders in effective management of disruptive conduct, how to protect patients and other physicians from any fallout, and how to defuse tense situations before they escalate into systemic issues.

3:15–3:45 P.M.   **NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)**

3:45–5:00 P.M.   **BREAKOUT SESSION 4**

Telemedicine: Credentialing, Privileging, and Competence Assessment for Remote Practitioners

Catherine Ballard

As physician shortages grow and patients' care needs intensify, more and more healthcare institutions will fortify their ranks with telemedicine practitioners. While distance doesn't diminish a hospital's responsibility to thoroughly vet and assess affiliated practitioners, it can throw a wrench in conventional approaches. Regardless of whether your organization credentials telemedicine practitioners in-house, uses a proxy, or is still weighing the options, this session will provide practical, compliance-minded guidance on vetting and assessing competence in remote practice.

System CVOs: Implementation, Management, and Expansion Tips From the Trenches

Heather Johnson

As mergers and acquisitions proliferate, newly aligned facilities are increasingly streamlining their credentialing workflows by forming system wide credentials verification organizations (CVO). Presented by an expert speaker with firsthand experience conceptualizing, launching, and expanding an in-house CVO, this session will provide audience members with a clear roadmap for gaining buy-in, getting the new department off the ground, recasting credentialing as a revenue-generating service, and sustaining strategic growth.

Employed Physicians and the Traditional Medical Staff

Todd Sagin

As physician employment picks up speed in hospitals across the country, medical staffs face new challenges and incentives in adapting traditional processes for a diversifying membership and leadership pool. In this session, attendees will learn how to quash conflicts of interest and turf battles created by physician employment, to execute effective peer review and corrective action for employed practitioners, and to coordinate medical staff services and HR vetting processes.

DAY 2 · TUESDAY, FEBRUARY 6,

7:00–8:00 A.M.   **REGISTRATION AND CONTINENTAL BREAKFAST**

8:00–9:15 A.M.   **GENERAL SESSION 1**

Addressing Conflicts of Interest and Ethics

Catherine Ballard

Clashing interests and ethics can fuel turf wars among medical staff members, incite financial disputes between a healthcare institution and the physicians who practice there, disrupt key governance processes, cause other rifts that jeopardize patient care and, in extreme cases, instigate costly legal action. In this session, our expert faculty will walk attendees through long-standing and emerging internal and external conflicts that can undermine medical staff stability, providing practical strategies for addressing these issues and articulating resolution tactics in governance documents.

9:30–10:45 A.M.   **BREAKOUT SESSION 1**

Bring Your Most Challenging Credentialing and Privileging Problems

Sally Pelletier, Carol Cairns

In the true spirit of the CRC Symposium, this open-panel forum invites audience members to ask questions and share ideas with our expert faculty and each other, collaborating to overcome today's top credentialing, privileging, and medical staff services management challenges.

Medical Staff Leadership Crash Course

Todd Sagin, Mark Smith

Our physician leaders will cover topics such as board of director orientation and education, reviewing governing documents, the role of physician leaders in the privileging process, creation of criteria, and more.

10:45–11:15 A.M.   **NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)**

11:15–12:30 P.M.   **GENERAL SESSION 2**

Advanced Practice Professionals: Contemporary Approaches to Credentialing, Privileging, Appointment, and Practice Scope Expansion

Advanced practice professionals (APP) are increasing in number and significance across the healthcare continuum. However, varying state laws and organizational cultures can make it difficult for medical staffs to develop an action plan and acquire the necessary tools for APP privileging, peer review, and practice scope expansion. In this session, attendees will learn how to create a mechanism that supports legal expansion of an APP's scope of practice and privileges and gain insight into the potential benefits of an APP interdisciplinary committee.

12:30–1:30 P.M.   **NETWORKING LUNCH--PROVIDED (EXHIBIT HALL OPEN)**

1:30–2:45 P.M.   **BREAKOUT SESSION 2**

The Aging Physician: Strategies to Protect Patients and Support the Practitioner

Carol Cairns, Sally Pelletier

In 2016, 25% of actively licensed physicians were age 60 or older. Clinical data related to the effects of aging support reason for caution. Medical staff leaders are obligated to assess each practitioner's capacity to perform all requested privileges. As physicians and other practitioners age, both the natural aging process as well as specific diseases have the potential to adversely impact these clinicians' capacity to perform some or all of their requested privileges. Therefore, medical staffs are obligated to establish an approach to assessing the impact of aging on all practitioners' capacity to perform requested privileges. Learn how to approach this issue through policy development by serving as a credentials committee member.

Going Paperless

Barbara Warstler

How many stacks of paper are on your desk right now? How much time do you spend filing, printing materials, and preparing binders for meetings? Don't waste time searching through mounds of paper looking for a specific document. Make the move to a paperless medical staff services department and feel the freedom wash over you! In this session, presented by an MSP leader who has successfully transformed her department into a paperless environment, attendees will gain tools and techniques for making the switch as they learn how to create a step-by-step action plan, identify the necessary resources, increase departmental efficiency, and define the metrics that will demonstrate their success.

OPPE & FPPE: The Physician Leader's Role

Mark Smith

OPPE and FPPE pose unique challenges for the medical staff leaders charged with shaping myriad data into meaningful evaluation frameworks and assessing peers across increasingly specialized fields and numerous practice locations. Our accomplished medical staff leaders shed light on today's top clinical evaluation pain points, including ways to conduct a productive peer evaluation, requirements for employed physicians, indicator selection and scoring modalities, and strategies for discussing less-than-stellar assessment outcomes with practitioners.

2:45–3:15 P.M.	NETWORKING REFRESHMENT BREAK (EXHIBIT HALL OPEN)
3:15–4:30 P.M.	GENERAL SESSION 3

Carol Cairns, Todd Sagin

Miller v. Huron: **Lessons Learned**

What better way to culminate two days of leading-edge professional training than with an exclusive insider's look at *Miller v. Huron,* the credentialing industry's latest noteworthy court case for which CRC's very own Carol Cairns served as an expert witness. Best practices and themes shared throughout the symposium are thrown into sharp relief by this cautionary tale from the real world, where failings at virtually every level of medical staff and institutional leadership dismantled a physician's career and cost a hospital hundreds of thousands of dollars in legal fees and payouts from the practitioner's ensuing negligent credentialing suit.

Cairns, aided by legal expert Todd Sagin, will share highlights she observed from the trial floor and enumerate the case's many takeaways for professionals in the trenches, including the responsibility of medical staff leaders to safeguard individual practitioners against unfounded accusations and the potentially disastrous consequences of unresolved conflicts of interest. Plus, Cairns and Sagin discuss their experiences as expert witnesses, explaining how MSPs and medical staff leaders should prepare for depositions and trial testimony.

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This conference was excellent and timely to the issues that my organization is dealing with around unifying medical staffs. The faculty were terrific!"

—2016 CRC SYMPOSIUM ATTENDEE

HCPro GO GREEN

PLEASE NOTE that the program materials will be available via download and the conference app only. *A download link will be provided prior to the event, but a printed book of the presentations will not be available on-site.*

AT THE CONCLUSION OF THE 2018 CRC SYMPOSIUM YOU WILL BE ABLE TO:

* Create an OPPE process that accommodates difficult competence evaluation scenarios, renders audit-ready documentation, and promotes compliance with regulatory and accreditation standards

* Learn strategies for integrating the OPPE and FPPE processes

* Address pink flags on medical staff applications before they turn bright red

* Identify the similarities and differences in best-practice vetting for employed and contracted physicians

* Custom-fit scopes of practice, OPPE, FPPE, and related medical staff processes for advanced practice professionals

* Develop full-bodied credentialing and privileging processes for healthcare entities beyond the traditional hospital, such as health systems, health plans, CVOs, and ambulatory centers

* Outfit standard medical staff processes for the expanding presence of telemedicine providers

* Streamline credentialing processes and diminish duplicative medical staff governance work to maximize efficiency, uphold quality, and invigorate the revenue cycle

* Avoid negligent credentialing lawsuits by identifying common triggers and developing solid policies