Webinar: Predictive Modeling Web Summit 2013
- a HealthcareWebSummit Event, 1PM Eastern, Thursday June 13th, 2013

Thursday, June 13th, 2013
1:00 p.m. to 2:30 p.m. Eastern (10:00 - 11:30 a.m. Pacific)

- EHR Data Streams, Medication Adherence, Big Data, Readmissions, Risk Adjustment
- Live 90 Minute Webinar, 2 On-Demand Sessions, 3 Months of PM News & More

- Hospital, pharmacy, academic, health plan and actuarial perspectives
- Analytics opportunities, issues and implications from richer data streams via EHR and other sources
- Medication adherence interventions using predictive modeling and risk stratification
- A unified theory for biologic science - in the context of big data in healthcare
- Plus on demand sessions: medication adherence & readmissions; 2014 risk adjustment & HIX-Medicaid

Webinar Faculty:
David Bodycombe, ScD, Johns Hopkins Bloomberg School of Public Health
Michael S. Taitel, PhD, Walgreen Company
William Rice, MD, St. David’s HealthCare, HCA

On-Demand Presentation Faculty:
Brian E. Wolf, MD, BCBS, Rhode Island
Ron G. Yu, PhD, Milliman
Stacey Muller, FSA, MAAA, Milliman

Registration

Individual Registration Fee: $295. webinar flash drive with video syncing slides and recorded audio, plus presentation pdf file: $45 for attendees; $360 for non-attendees after the event.

Corporate Site licensing also available (see inside for details) Use the form on the back page to fax or mail your registration or call 209.577.4888

Online: To register or get detailed information on the web, go to:
www.healthwebsummit.com/pm2013.htm
The confluence and complexities of new information technology and health reform initiatives place predictive modeling topics at the forefront of healthcare for the remainder of this decade. The spectrum of challenges and opportunities include: How to leverage the wider flow of data resulting from EHR-meaningful use and other technology initiatives -- How to crack the holy grail of targeting medication adherence interventions to improve outcomes and resource utilization -- How to advance the application of analytics and big data in healthcare taking into account unique properties of biologic systems as opposed to a paradigm of mathematical modeling and analytics.

The Sixth Annual Predictive Modeling Web Summit features a 90 minute webinar with national experts from academic, pharmacy and hospital system perspectives that tackle the predictive analytics topics of increased data stream opportunities and issues, medication adherence interventions and big data plus more.

The event also includes two on-demand sessions, with expert health plan and actuarial faculty addressing predictive analytics applied medication adherence for readmissions management, and health status and risk adjustment considerations for the formerly uninsured in 2014.

Position your organization for 2014 and beyond in the healthcare predictive analytic landscape. Join us for the Sixth Annual Predictive Modeling Web Summit on Thursday June 13th 2013, and participate in the live ninety-minute national webinar, additional on-demand faculty sessions, predictive modeling e-poll and more, featuring national experts providing key insights, trends, strategic recommendations, actionable intelligence and more on these critical topics.

### Webinar Agenda

**Thursday, June 13th, 2013**

**1:00 p.m. to 2:30 p.m. Eastern (10:00 a.m. - 11:30 a.m. Pacific)**

- **1:00 pm - 1:30 pm** *Predictive Modeling Opportunities, Issues and Implications from Richer Data Streams via EHR and Other Sources* - David Bodycombe, Sc.D., Director of R&D, The Johns Hopkins ACG® System
- **1:30 pm - 2:00 pm** *Medication Adherence Interventions: using predictive modeling and risk stratification to target and improve program efficiency* - Michael S. Taitel, PhD, Senior Director, Clinical Outcomes & Analytic Services, Walgreen Company
- **2:00 pm - 2:30 pm** *Protons Don’t Smoke - A unified theory for biologic science - in the context of big data in healthcare* - William Rice, MD, Senior Vice President, Clinical Innovation, St. David’s HealthCare, Central and West Texas Division, Hospital Corporation of America
On-Demand presentations in Windows Media Video format with audio and synchronized slide advancement:

- **Better Living Through Chemistry - An analytics initiative correlating medication adherence with readmissions, with a targeted intervention program**, by Brian E. Wolf, MD, Senior Medical Director, Health Management Integration, Blue Cross & Blue Shield, Rhode Island
- **2014: The Formerly Uninsured Population - Health Status; Risk Adjustment; Medicaid & HIX Impact**, by Rong Yi, PhD, Director, Risk Adjustment and Predictive Modeling Practice; Senior Consultant, Milliman and Stacey Muller, FSA, MAAA, Actuary, Milliman
- **Plus other Web Summit features** including a Predictive Modeling Article Library, an exclusive Predictive Modeling e-poll, and a three month trial subscription to Predictive Modeling News

**Learning Objectives**

Participants will be able to:

1. Gain an overall sense of the predictive modeling opportunities, issues and implications resulting from richer data streams via EHR and other sources.
2. Examine using predictive modeling and risk stratification to target and improve program efficiency via Medication Adherence Interventions.
3. Understand a unified theory for biologic science in the context of big data in healthcare, and the implications for a predictive analytics approach that provides more consideration to biologic systems than a paradigm relying and mathematical modeling and analytics.
4. Explore predictive analytics topics including analytics initiative correlating medication adherence with readmissions, with a targeted intervention program; and health status; risk adjustment; Medicaid & HIX impact of the formerly uninsured in 2014.
5. Obtain relevant case experience and marketplace intelligence offered by the faculty, and insights offered from pharmacy, actuarial, health care system, health plan and academic perspectives.
6. Experience e-learning at the attendees’ convenience, with on-demand sessions, article library, and other online Summit features available 24/7.
7. Engage in interactive learning through live webinar providing online question submission, attendee surveys, feedback and opportunity for follow up questions, and networking with attendees, faculty and other professionals through dedicated LinkedIn group.
Who Should Attend

Interested attendees would include:

- C-Suite Executives
- Analytics and Informatics Executives and Staff
- Actuarial and Underwriting Executives and Staff
- Statisticians and Data Analysts
- Planning and Strategic Executives and Staff
- Medical Directors
- Clinical Executives
- Care Management Executives
- Pharmacy Benefit Executives
- Health Benefit Managers
- Innovation and Transformation Executives
- Business and Market Intelligence Staff
- Health Care Economists
- Other Interested Parties

Attendees would represent organizations including

- Health Plans
- Hospital Systems
- Provider Networks
- Medical Groups
- Care Management Organizations
- Government
- PBM
- Third Party Administrators
- Employers
- Pharmaceutical Organizations
- Consulting Organizations
- Business Processing Organizations
- Solutions Providers
- Associations, Institutes and Research Organizations
- Media
Since 2002, Dr. Bodycombe has provided operational leadership for the ACG System Team. His role on the Team covers three key areas: (1) strategic planning and business management; (2) education and outreach through presentations and the preparation of articles for both professional and peer-reviewed journals; and (3) conduct and support of research related to risk adjustment and the impact of co-morbidity on the management of patient care. Dr. Bodycombe’s current focus is on refinements to the ACG Predictive Model that can be used to prospectively identify cohorts of service eligibles who are at high risk of using extraordinary health care resources.

Prior to joining the Johns Hopkins University faculty, Dr. Bodycombe was the Director of Operational Analytics at Premier Inc., a major group purchasing and performance improvement company that touches approximately 1,600 not-for-profit hospitals nationwide. There he guided the integration of performance measurement in Premier Inc.’s new Clinical Performance Initiatives (CPIs).

Dr. Bodycombe holds a ScD in Health Policy and Management and a Baccalaureate degree in Biology from the Johns Hopkins University, and a MSc in Biostatistics from Georgetown University.

Dr. Michael Taitel is the Director of Health Outcomes & Analytics at Walgreens. He leads a team of analysts responsible for developing outcomes research studies to support Walgreen’s initiatives in the pharmacy, PBM, retail and worksite clinics, and other innovations that provide affordable and convenient access to health and wellness services.

Dr. Taitel previously served as Vice President for the Alere Center for Health Intelligence. He was responsible for research studies on behavior change, health risk assessment, wellness savings, medication adherence and productivity.

Dr. Taitel holds a doctorate in experimental health psychology from Ohio University, a master’s degree in clinical psychology from Bowling Green State University and a bachelor’s degree in psychology and religious studies from Indiana University. He is the author of numerous published articles, a member of the American College of Occupational and Environmental Medicine, the American Psychological Association, and the International Society for Pharmacoeconomics and Outcomes Research.
William H. Rice, M.D., is the senior vice president of clinical innovation for St. David’s HealthCare. Prior to assuming this role, Rice served as chief medical officer of Whiteglove House Call Health, a company he co-founded. Prior to that, Rice was the first full-time physician involved in the development of RevolutionHealth, a leading consumer-centric health company founded to transform how people approach their overall health and wellness.

In addition to his 14 years of experience in clinical emergency medicine, Rice has participated in the formation and initial work of a number of early-stage health care companies. As the founding chairman and chief executive officer of Stat Healthcare, Rice built one of the largest physician management companies in the United States and managed the business from inception to public offering.

Rice holds a patent for a system and method to optimize the care of chronic disease patients. He is the author of a book entitled American Health Care 2008, Opportunities for Disruptive Improvement.

Rice earned a Bachelor of Science degree with high honors from the University of Michigan. He went on to complete his Doctor of Medicine from The University of Texas Medical School at San Antonio and thereafter received postgraduate training in trauma and general surgery at the St. Joseph Medical Center in Houston.

Dr. Brian Wolf is the Senior Medical Director for Health Analytics and Utilization Management, with additional oversight of Physician Profiling and Audit and Recovery, at Blue Cross Blue Shield of Rhode Island. He also serves as Physician Advisor for Wellpoint with responsibility for Utilization Management of the Unicare product.

Previously he was site Chief of Surgery and Surgical Oncologist, as well as Division Chief of General Surgery for the Cambridge Health Alliance from 2002-2007. From 2000-2002 he served as Surgical Oncologist and Director of Surgical Services for Tri-County Medical Associates. From 1989 to 1999 he was Surgical Oncologist and Chairman of Physician Executive Council for Harvard Pilgrim Health Care of New England.

Dr. Wolf received his Doctor of Medicine from Boston University School of Medicine, Boston, Massachusetts and is Board Certified in General Surgery.
Rong is a senior consultant with the New York office of Milliman. She joined the firm in 2009. Rong has extensive experience in risk adjustment and predictive modeling for healthcare, workers’ compensation, and other fields. She has worked with private insurers, providers, employers, government agencies, and researchers in the United States and other parts of the world. She is a frequent speaker at professional and academic conferences.

Rong’s expertise includes risk adjustment for public programs and health reforms and predictive modeling for risk management. She has done pioneering work in the areas of workers’ compensation predictive modeling, risk adjustment for the uninsured population, risk-based provider profiling, risk adjustment for small group underwriting, and models supporting the patient-centered medical home. She also led the adoption of diagnosis-based risk adjustment in the recent German health reforms, and is assisting foreign government organizations in their research and strategy for their future health reforms.

Before joining Milliman, Rong was a major contributor to commercial and governmental risk adjustment systems in wide use today. Ron is a member of the International Health Economics Association and the American Society of Health Economists. She is also a Visiting Research Fellow, National Health Economics Institute, Ministry of Health, China. Ron received her PhD in Economics from Boston University, and BS from Peking University, Beijing, China.

Stacey is an actuary with the Milwaukee office of Milliman. She joined the firm in 1995 and has over 15 years of consulting experience.

Stacey’s area of expertise is group healthcare programs, with an emphasis on HMOs, PPOs, and other managed care systems. She has assisted clients in the areas of pricing, experience analysis, estimation of reserves, and development of capitations. She has experience with commercial, Medicare, and Medicaid populations. Stacey has assisted in developing and pricing health savings account programs for insurance companies and third-party administrators.

Stacey has also worked extensively with employers in designing, evaluating, and implementing health and welfare benefits. Her experience includes work with both private and public entities. She assists in retiree medical valuations, claim estimation and projections, plan design, and employee contribution development.

Stacey is a Fellow, Society of Actuaries; and a Member, American Academy of Actuaries. She received her BBA, Bachelor of Business Administration with a double major in Actuarial Science and in Risk and Insurance, from the University of Wisconsin.
Corporate Pricing, Terms and Conditions

Individual vs. Corporate Site License Pricing

- Individual registrations cover a single phone line.
- Multiple persons may listen via speaker phone for the individual registration fee.
- Each individual receives a unique dial-in ID that is not re-useable.
- Corporate pricing is available when registrations are desired for more than one phone line.

Corporate Site License Attendee Registrations

- Organizations individually register all participants for web access and e-mail delivery unless arranged otherwise with MCOL, but corporate pricing will apply based on the number of employees registered

Eligibility

- Corporate pricing is only available to single organizations, or parent organizations and their affiliates.
- Professional Associations or other groups of separate organizations may not combine for corporate pricing.

Pricing Schedule

Events Priced at $295 Individually: Site License pricing for one of any $295 individual events is based upon the number of covered phone lines, according to the following table

<table>
<thead>
<tr>
<th>Covered Phone Lines /Logins</th>
<th>Total Price</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 10</td>
<td>$870.00</td>
</tr>
<tr>
<td>10-29</td>
<td>$2,005.00</td>
</tr>
<tr>
<td>30-74</td>
<td>$4,425.00</td>
</tr>
<tr>
<td>75-174</td>
<td>$9,230.00</td>
</tr>
<tr>
<td>175-249</td>
<td>$12,525.00</td>
</tr>
<tr>
<td>250+</td>
<td>Call for quote</td>
</tr>
</tbody>
</table>

Equivalent Price per employee and total savings compared to individual $295.00 price*:

<table>
<thead>
<tr>
<th>Covered Phone Lines /Logins</th>
<th>Price per Line</th>
<th>Total Savings</th>
</tr>
</thead>
<tbody>
<tr>
<td>Under 10</td>
<td>$174.00</td>
<td>$605.00</td>
</tr>
<tr>
<td>10-29</td>
<td>$100.25</td>
<td>$3,895.00</td>
</tr>
<tr>
<td>30-74</td>
<td>$88.50</td>
<td>$10,325.00</td>
</tr>
<tr>
<td>75-174</td>
<td>$73.84</td>
<td>$27,645.00</td>
</tr>
<tr>
<td>175-249</td>
<td>$59.64</td>
<td>$49,425.00</td>
</tr>
</tbody>
</table>

* based upon the midpoint of employees in each range