



2024 NATIONAL CONFERENCE AGENDA AT A GLANCE

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**NOTE: **OCTOBER 17, 1:30PM- 2:30PM,
CLOSING CONFERENCE NETWORKING EVENT****

**Stay with us following the final session as we celebrate the end of the conference with
great raffle prizes**

Friday, October 11, 2024

WEDI Workgroup Meetings, 10:00am – 3:00pm (VIRTUAL)

We invite all attendees (WEDI Members & Non-Members) to participate in our workgroup meetings during the national conference, as workgroup members provide thoughtful leadership and common-sense approaches that enhance the exchange of clinical and administrative healthcare information.

- *Provider Information, 10:00am – 11:00am*

- *Payment Models, 10:00am – 11:00am*
- *Genomics, 11:00am – 12:00pm*
- *Remittance Advice & Payment, 11:00am – 12:00pm*
- *Health Equity, 12:00pm – 1:00pm*
- *No Surprises Act Task group, 1:00pm – 2:00pm*
- *Dental, 1:00pm – 2:00pm*
- *Claims, 2:00pm – 2:30pm*
- *Privacy & Security, 2:00pm – 3:00pm*

Tuesday, October 15, 2024

12:00pm – 1:00pm, Conference Welcome Lunch

1:15pm – 1:45pm, Karen Ignagni, Chief Executive Officer, Emblem Health

Karen Ignagni serves as President and CEO of EmblemHealth, one of the nation's largest non-profit health insurers. EmblemHealth provides quality, affordable health care coverage and administrative services to more than 3.1 million people in the New York tristate area. Since joining EmblemHealth in 2015, Ms. Ignagni has led an enterprise transformation to improve the consumer health care experience and expand the company's presence and reach across the greater tristate area. EmblemHealth's family of companies includes ConnectiCare, a leading Connecticut-based health plan, and AdvantageCare Physicians, a multispecialty medical group with more than 36 locations across New York City.

1:45pm – 2:15pm, Jon Blum, Principal Deputy Director and Chief Operating Officer, Centers for Medicare & Medicaid Services (CMS)

Jonathan (Jon) Blum currently serves as the Principal Deputy Administrator and Chief Operating Officer at the Centers for Medicare & Medicaid Services (CMS). In this dual role, Jon oversees CMS's program policy planning and implementation and day-to-day operations of the entire agency. CMS's programs provide health coverage to more than 150 million individuals, spending more than \$1.7 trillion in annual benefits with an annual operating budget of more than \$7 billion.

2:15pm – 2:30pm, Afternoon Stretch Break

2:30pm – 3:15pm, Updates from NCVHS Standards Subcommittee

- *Tammy Banks, Co-Chair, NCVHS Subcommittee on Standards*
- *Steven Wagner, Co-Chair, NCVHS Subcommittee on Standards*

The Subcommittee on Standards monitors and makes recommendations to the Full Committee on health data standards, including implementation of the Administrative Simplification provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Medicare Modernization and Improvement Act of 2006 (MMA), the Affordable Care Act and associated areas of focus such as interoperability.

3:15pm – 3:45pm, A Unified Gateway for FHIR and EDI for CMS-0057-F and Beyond.

Presented by



- *Anirban Mukherjee, Director Solution Consulting, Edifecs*

The Interoperability and Prior Authorization mandate (CMS-0057-F) has further established a need for interoperability standards to be...well...interoperable. See first-hand how Edifecs

Unified Gateway creates interoperability between interoperability standards, FHIR and EDI, to comply with CMS-0057-F and beyond.

3:45pm – 4:30pm, Enhancing the Patient Experience through Technology; The Voice of the Patient,

- *Anna Hyde, Vice President of Advocacy and Access, Arthritis Foundation*
- *Brooke McSwain, Senior National Policy Research Analyst, Digital Health, Public Health Infrastructure, American Heart Association*
- *Michael Phillips, Director of Technology Strategy and Partnerships, AARP*

Join us for an insightful panel discussion featuring patient representatives from the American Heart Association, Arthritis Foundation, and other leading health organizations as they explore how emerging technology is transforming the patient experience. Discover firsthand accounts of how telemedicine, wearable devices, mobile health apps, and advanced data analytics are making healthcare more accessible, personalized, and efficient. Engage with our panelists as they share success stories and challenges and discuss the future of technology-driven patient care.

4:30pm – 5:15pm, WEDI Workgroup Presentation

Every day, WEDI members volunteer their time and talent to WEDI workgroups to provide thoughtful leadership and common-sense approaches that enhance the exchange of clinical and administrative healthcare information. They collect input, exchange ideas, and make recommendations that inspire impactful and far-reaching change in our industry. We welcome WEDI workgroup leadership as they offer the audience information about their workgroups, their products and how you can get involved.

5:15pm – 6:15pm, WEDI Welcome Reception

Grossman Hall, American University Washington College of Law

Wednesday, October 16, 2024

8:30am – 9:15am, Fireside Chat; Bridging Policy and Technology to Reshape the Healthcare IT Ecosystem.

- *Ashley Thompson, Senior Vice President for Public Policy & Development, American Hospital Association*
- *Lori Prestesater, Senior Vice President of Health Solutions, American Medical Association*

Ashley Thompson is senior vice president, public policy analysis & development for the American Hospital Association (AHA), a position she has held since 2015. In this role, Ashley provides leadership, strategic direction and management in the development, articulation and advocacy of the association's policy positions. Additionally, she leads AHA's formal policy development process, which solicits input from key hospital leaders on issues related to advocacy, public policy and field leadership. Ashley has held various policy roles in the association over her 20-year tenure.

As Senior Vice President of the American Medical Association's (AMA's) Health Solutions (HS) business unit, Lori Prestesater leads the AMA division responsible for delivering customer-centric, authoritative, dynamic, and indispensable data and solutions that drive transformation in

the health care ecosystem by providing the foundation for many critical areas in health care, including interoperability, research, innovation, and equitable care.

9:15am – 10:00am, Policy Updates from the HHS Office for Civil Rights

- Timothy Noonan, Deputy Director for Health Information Privacy, Data, and Cybersecurity, Office for Civil Rights (OCR), United States Department of Health & Human Services.

The Department of Health and Human Services law enforcement agency, the Office for Civil Rights (OCR) ensures compliance with our nation's health information privacy and security, civil rights, and conscience and religious freedom laws. OCR investigates complaints and conducts compliance reviews, promulgates policy and regulations, and provides technical assistance and public education.

- *The potential of HIPAA Security Rule updates incorporating HHS Cyber Goals, impacting CMS reimbursement, and integrating HHS 405(d) practices*
- *How OCR addresses cybersecurity threats, supports the industry, and aligns with federal agencies under the National Cybersecurity Strategy to streamline security requirements, impacting HIPAA/HITECH rules and OCR audits*
- *How OCR is addressing the issue of the patient's right to access their health information*
- *How can OCR better educate the industry on privacy/security requirements and how OCR can communicate lessons learned from the OCR audit program*

10:00am – 10:15am, Morning Stretch Break

10:15am – 10:45am, Unlocking the Power of EDIs for Private Exchanges: How Standardizing Data Can Drive ICHRAs

Presented by

SOFTHEON

Eugene Sayan, CEO, Softheon

10:45am – 11:30am, HIPAA Security and Cybersecurity Panel

A panel of cybersecurity professionals weigh in on the latest policies regarding health care data cybersecurity and offer insight on the road ahead with emerging technology.

- *Lesley Berkeyheiser, Co-Chair, WEDI Privacy & Security Workgroup, Senior Assessor, DirectTrust*
- *Greg Garcia, Executive Director, Cyber Security, Health Sector Coordinating Council*
- *Lee Barrett, Commission Executive Director, DirectTrust*
- *Bezawit Sumner, Chief Information Security Officer and Senior Director of Security & Compliance, CRISP Shared Services*

10:45am – 11:30am, Strategic Interoperability: How did we get here and where are we going?

Presented by

edifecs®

Matthew Spielman, Senior Director, Product Management, Edifecs

As an interoperability leader in healthcare for more than 25 years, we know that there is more to interoperability than simply meeting the mandates set forward by CMS and ONC. Requirements from programs such as 9115-F, 0057-F, and 21st Century Cures establish a baseline for

interoperability but that isn't the whole story. We believe in Strategic Interoperability as the means to pivot the regulatory burden of compliance into a strategic driver of improvement within healthcare. This means taking a holistic and realistic approach to interoperability as it exists today but also position organizations for success in the evolving world of value-based care. We'll review how interoperability has evolved to get us to where we are now and then talk about where we think things are headed in the future as rules and use cases evolve.

11:30am – 12:00pm, Updates on X12 Proof of Concept Initiative

Andrew Fitzpatrick, Operations and Licensing, X12

Recognizing the need for pilot testing, X12 solicited its licensing partners, looking for volunteers to participate in a Proof of Concept program (PoC or pilot) testing the versions of its transactions put forward for adoption under HIPAA. We welcome X12 to offer updates on the program.

12:00pm – 12:45pm, Conference Luncheon

Special Address on Cybersecurity Guidance and the Path Ahead (recorded)

LaMonte Yarborough, Chief Information Security Officer (CISO), Department of Health and Human Services

12:45pm – 1:30pm, Harmonizing State Claims Collection and Reducing Burden: Understanding the All-Payer Claims Data Common Data Layout (APCD-CDL)

The National Association of Health Data Organizations oversees and manages a common data layout for the submission of All-Payer Claims Data, the APCD-CDL™. During this presentation, we will introduce the layout, and two NAHDO leaders will discuss their experience implementing it.

- *Norm Thurston, PhD, Executive Director, National Association of Health Data Organizations*
- *Kyle Russell, CEO, Virginia Health Information*
- *Janice Bourgault, Senior Consultant, Freedman HealthCare*

12:45pm – 1:30pm, Prioritizing Value in the Journey to Compliance: Navigating Real-Time Challenges in Prior Authorization Interoperability

Presented by  **m**cg
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HEARST HEALTH NETWORK

Rajesh Godavarthi, AVP of Technology & Interoperability, MCG Health

In this presentation, MCG Health's AVP of Technology & Interoperability and ONC HITAC Member, Rajesh Godavarthi, will explore the practice of prioritizing value in the journey toward compliance and interoperability in prior authorization. As emerging standards like HL7® FHIR take shape, Mr. Godavarthi will examine the real-time challenges encountered across three distinct implementations and share successful strategies for adapting these evolving standards to deliver short-term ROI for payers and providers. By sharing insights from both his work in the HL7® Da Vinci Project as well as non-standard approaches, Mr. Godavarthi will highlight how to (1) modernize platforms, (2) overcome complexities in heterogeneous systems, and (3) deliver measurable value throughout the implementation process - thus offering practical guidance for other health IT professionals and organizations on a similar path.

1:30pm – 2:15pm, Health Care Vendor Compliance with Federal Rules

- *Hans Buitendijk, Senior Director, Interoperability Strategy, Oracle Health*
- *Mark Scrimshire, Chief Interoperability Officer, Onyx Health*

- TBA, Optum

2:15pm – 2:30pm, Afternoon Stretch Break

2:30pm – 3:15pm, Maximizing Provider Directory Data to Improve Care Access and Quality

- Michelle Barry, Director, Expert Health Plan Provider Data Management, Availity
- Tammy Weaver, Vice President, Masterfile Products, American Medical Association
- Melissa Speck, Senior Director, Public Affairs, CAQH

2:30pm – 3:15pm, Understanding the FDA Unique Device Identifier: Compliance and Implementation Strategies

Indira Konduri, Deputy Director and UDI Program Lead, Center for Device & Radiological Health, US Food & Drug Administration

Deborah Fellhauer, RN, BSN, Policy Analyst, US Food & Drug Administration

The Unique Device Identifier is required for all devices regulated by the FDA and provides a means to track device performance by type, manufacturer, and specific lot. This session will explain how the UDI can be used by providers, patients, health plans, and researchers along with how the agency is identifying high risk implantable devices for use in the proposed update to the HIPAA claims standard.

3:30pm – 5:00pm, No Surprises Act Panel (GFE, AEOB) and Small Group Exercise

- WEDI No Surprises Act Task Group Co-Chairs
- Vanessa Candelora, HL7 Da Vinci Project Patient Cost Transparency Co-Lead and Senior Consultant, Point-of-Care Partners
- Cathy Sheppard, Chief Executive Officer, X12
- Elissa Dines, Director, Division of Consumer Protection Policy Consumer Support Group, Centers for Medicare & Medicaid Services
- Emily Ames, Health Insurance Specialist, Center for Consumer Information and Insurance Oversight, Centers for Medicare & Medicaid Services

Thursday, October 17, 2024

8:00am – 8:30am, WEDI Workgroup Welcome: Remittance Advice & Payment

The Remittance Advice & Payment workgroup resolves issues related to the inconsistent use of the ERA/EFT transactions. Find the most effective solutions to the ERA/EFT issues.

- Pam Grosze, Workgroup Co-Chair, Vice President, Senior Product Manager, PNC Bank
- Pat Wijtyk, Workgroup Co-Chair, Senior Associate, BPO, EDI Team, Cognizant

8:30am – 9:30am, Mission 2030: A Discussion on Value-Based Care, the Present and the Future

Sponsored by  **InterSystems**
Creative data technology

An all-star, multi-stakeholder lineup of healthcare professionals discuss the evolution of value-based care, the importance of data and standards, the importance of collaboration and the how artificial intelligence is shaping how we view the move from fee for service.

- Anna Taylor, Associate Vice President of Population Health and Value Based Care, Multi Care Connected Care

- *Semira Singh, Director, Population Health Informatics, Providence*
- *Mark Friedberg, MD, Senior Vice President, Performance Measurement and Improvement, BCBS Massachusetts*
- *Steve Berkow, Senior Advisor, Value-Based Markets, InterSystems*
- *(Moderator) Michael Pattwell, Co-Chair, WEDI Payment Models Workgroup, Principal Business Advisor, Edifecs*

9:30am – 10:00am, Lessons from the Mass Collaborative, Sponsored by Optum

- *Denny Brennan, CEO, Executive Director, Massachusetts Health Data Consortium*
- *Karen Granoff, Senior Director - Managed Care, Massachusetts Health and Hospital Association*
- *Michael Katzman, Director of Government and Regulatory Affairs, Blue Cross Blue Shield of Massachusetts*
- *Liz Leahy, Senior Vice President of Advocacy and Engagement and Chief of Staff, Massachusetts Association of Health Plans*
- *Yael Miller, Executive Director-Practice Solutions and Strategic Planning, Massachusetts Medical Society*
- *Tara Rose, Capability Manager, Optum (moderator)*

Join five strategic leaders from the Mass Collaborative as they delve into the journey of this unique, voluntary alliance of health plan, provider, and technology leaders. Since its inception in 2009, the Collaborative has tackled some of the most pressing administrative challenges in Massachusetts' healthcare system, driving transactional efficiency and standardization across the industry.

In this dynamic session, panelists will explore the Collaborative's origins, highlight key successes, and discuss how they've navigated major industry disruptions. With insights into the collaborative model's strengths and the enduring obstacles it faces, this session offers practical takeaways for healthcare leaders seeking to reduce burden, enhance efficiency, and foster innovation in their own organizations.

10:00am – 10:15am, AM Break

10:15am – 11:00am, The New Chapter in Health IT: Updates from the Assistant Secretary for Technology Policy and ONC

Micky Tripathi, PhD, Assistant Secretary for Technology Policy, National Coordinator for Health IT

ONC has become ASTP/ONC. Hear from Assistant Secretary Dr. Micky Tripathi about the reorganization, recent regulatory activity, and future opportunities for a unified public-private partnership for health IT collaboration. Dr. Tripathi leads the formulation of the federal health IT strategy and coordinates federal health IT policies, standards, programs, and investments. Dr. Tripathi has over 20 years of experience across the health IT landscape.

11:00am – 11:45am, Advancing Healthcare Connectivity: A TEFCA QHIN Panel

- *Dave Cassel, Chief Customer Officer, Health Gorilla*
- *Jay Nakashima, President, eHealth Exchange*
- *Matthew Doyle, R&D Team Lead, Epic*
- *Laura McCrary, President and CEO, Konza*

The Trusted Exchange Framework and Common Agreement (TEFCA) is a framework that establishes a set of principles, terms, and conditions to support the exchange of electronic health information (EHI) across health information networks (HINs).

11:45am – 12:45pm, Standards Development Organization (SDO) and Operating Rules Updates

- *Charles Jaffe, MD, Chief Executive Officer, HL7*
- *Cathy Sheppard, Chief Executive Officer, X12*
- *Robert Bowman, Principal, Interoperability and Standards, CAQH CORE*
- *Margaret Weiker, Vice President of Standards Development, National Council for Prescription Drug Program*

SDOs are member-supported organizations, often accredited by the American National Standards Institute (ANSI), who develop and maintain standards to meet industry needs. Members include health care providers, insurers, health IT software developers, patients, care givers, and others.

12:45pm – 1:15pm, Closing Session: Building Healthy Communities Through Community Investment and Being “More than a Plastic Card”

John Baackes, CEO, LA Care Health Plan

John Baackes, of LA Care was recently awarded the Excellence in Health Care Award for his outstanding leadership of the largest health plan in Los Angeles County. WEDI welcomes John to offer his insight on how health care can evolve to be a fixture in the community by investing in organizations and projects that address the non-medical factors that can significantly impact health outcomes.

****1:15PM- 2:00PM, CLOSING CONFERENCE NETWORKING EVENT****

Stay with us following the final session as we celebrate the end of the conference with great raffle prizes