



## Day 1 • Monday, February 14, 2022

ALL SESSION TIMES ARE IN EASTERN TIME

**9:00–9:05 AM**  
*General Session*

### Welcome & Introduction

**Stephen W. Kett**  
Senior Program Director  
*The Governance Institute*

**9:05–10:00 AM**  
*General Session*

### Health Assurance in 2030: From COVID to Consumerism

**Stephen K. Klasko, M.D., M.B.A.**  
Executive in Residence, *General Catalyst*  
Chief Global Innovation Officer & North American Ambassador, *Sheba Medical Center*  
Distinguished Fellow, *World Economic Forum*  
Former President & CEO, *Thomas Jefferson University & Jefferson Health*

It's February 2, 2030. A mutant strain of an RNA encapsulated virus has been afflicting people in Australia. Of course, people old enough to remember, especially healthcare workers, the dark days of early 2020 and the COVID-19 crisis immediately panicked...for a second...and then they smiled. Because they knew healthcare had evolved from a broken, fragmented, expensive, inequitable "sick care" system to a "health assurance" system where most of their care happens at home.

We are witnessing healthcare's "Amazon moment." If you are a provider and think you're going back to a business model solely based on hospital revenue and not relevant to people who want care at home, you will be out of business. If you are an insurer and think you can just be the middleman between the hospital and the patient, you'll be irrelevant. If hospitals believe that innovation can just be this cute little thing that they do in the background, but the real business is getting "heads in beds" they will never recover from the pandemic of 2020–2022 losses.

This keynote will highlight several post pandemic strategies, including:

- New creative partnerships between community partners, health systems, and payers as we move from "sick care" to "health assurance"
- How the combination of increased data gathering and artificial intelligence will make the society more resilient to disease spread
- Why how providers handle data today will make or break patient trust in the future
- How technology can start to address health disparities when applied strategically
- Why the most prized skills for physicians will be empathy, communication, and self-awareness in the digital age
- How population health, predictive analytics, and social determinants will move from philosophy to the mainstream of clinical care, payment models and medical education

#### Learning Objectives

At the conclusion of this session, attendees will be able to:

- Define how we move from the "iron triangle of healthcare" to the "patient diamond of healthcare"
- Describe how hospitals and health systems move from a "sick care" to a "health assurance" model

**10:00–10:15 AM**

**Break**

**10:15–11:00 AM**  
*General Session*

## **The Three-Legged Stool of Great Governance: Quality of Healthcare, Health, & the Workforce**

**Maulik S. Joshi, Dr.P.H.**  
President & CEO  
*Meritus Health*

The pandemic has fundamentally changed how we lead and govern healthcare organizations. Quality has taken on additional obligations and the magnitude of the Board's stewardship has multiplied. In terms of the Board's role in quality oversight, quality of healthcare continues to be a steadfast focus, but the pandemic has highlighted even further the importance of understanding, measuring and reducing disparities in care. The Board needs to oversee meaningful reduction of disparities of care for the patients they serve. Population health has been a buzzword for years, but the Board's role has elevated to move beyond understanding community needs to ensuring their organizations are acting on them. And of course, today's environment pushes even further the deep connection between workforce outcomes and healthcare outcomes. Boards must have a renewed engagement in overseeing the quality of the workforce. This session will engage the audience in best practices of the quality oversight of healthcare, health and the workforce with practical examples and questions for a Board's consideration.

### **Learning Objectives**

At the conclusion of this session, attendees will be able to:

- Describe Board practices of overseeing key measures of quality of healthcare, health and workforce with appropriate and aligned goal setting
- Identify potential disparities in care and health
- Define how Boards can hold leadership accountable for healthcare, population health and workforce outcomes

**11:00–11:15 AM**

## **Break**

**11:15 AM–12:00 PM**  
*General Session*

## **Epidemic Leadership: How to Lead Infectiously in the Era of Big Problems**

**Lawrence R. McEvoy II, M.D.**  
President & CEO  
*Epidemic Leadership*

The pandemic has created severe strain on healthcare as a sector, healthcare organizations, and healthcare personnel. The same pandemic has revealed, both in its own action and in human adaptive response, profound lessons for shaping the future of healthcare and health in our world. This session, delivered from the perspective of an emergency physician and former healthcare CEO, focuses on the fundamental design lessons learned from the pandemic and their applicability to leading organizations of resilient performance, adaptation, and vitality. Attendees will leave with provocative insights about how they can and must shape leadership capacity in their organizations to ensure success and stability.

### **Learning Objectives**

At the conclusion of this session, attendees will be able to:

- Identify the implications of the pandemic on current and future state of healthcare leadership and healthcare organizations
- Describe how epidemics reveal insights into leading in complex times
- Define key leadership insights for adapting positively to the challenge of the epidemic age

**12:00–1:00 PM**

## **Lunch Break**

For those who are virtual, this will be a one-hour break. Please return at 1:00 PM for the next session.

**1:00–1:45 PM**  
*General Session*

### **The Board Chair–CEO Partnership**

**Kimberly A. Russel, FACHE**

Chief Executive Officer

*Russel Advisors*

The relationship between the CEO and the board chair became even more significant with the challenges of the pandemic. This session will explore how the board chair–CEO relationship is changing as the pandemic moves to the endemic stage. Vital characteristics of effective board chair–CEO pairings will be analyzed. Board chair selection criteria and the pathway to success for new board chair–CEO relationships will be discussed. The session will conclude with observations, recommendations, and tips to maximize the effectiveness of this critical partnership.

#### **Learning Objectives**

At the conclusion of this session, attendees will be able to:

- Define the essential characteristics of highly effective and productive board chair–CEO partnerships
- Describe the impact on the board and the organization when the board chair and CEO are operating as partners
- Propose considerations and observations related to board chair selection
- Recommend actions to advance existing CEO–board chair relationships to the partnership level

## **Day 2 • Tuesday, February 15, 2022**

ALL SESSION TIMES ARE IN EASTERN TIME

**9:00–10:15 AM**  
*General Session*

### **Reclaiming Ambition: Creating the Post-Pandemic Healthcare System**

**Kenneth Kaufman**

Chair

*Kaufman, Hall & Associates, LLC*

As the number of COVID-19 cases and hospitalizations decline, hospitals continue to cope with the reverberations of the crisis, while at the same time facing a highly uncertain future for the U.S. healthcare system. A critical task for boards and executives is to attempt to understand the likely nature of how this changed the healthcare system, and the hospital's place in this system. This presentation will show how COVID-19 has accelerated a new basis for healthcare competition, and will review the strategic decisions that hospital boards and executives will need to make in order to remain vital forces in the new environment.

#### **Learning Objectives**

After this session, attendees will be able to do the following:

- Identify five effects of COVID-19 on healthcare organizations and emerging business models
- Describe the new basis of competition for hospitals and health systems
- Describe key strategic decisions related to digital capabilities and other aspects of the changing healthcare system

**10:15–10:30 AM**

**Break**

**10:30–11:15 AM**  
*General Session*

### **Scarce Healthcare: Analyzing the Eroding Advantages of Traditional Healthcare**

**Ryan Donohue**

Strategic Advisor

*NRC Health*

The spotlight on healthcare has been bright for years but COVID-19 turned it white hot. Unflattering media coverage, dissatisfied patients, and a painfully deep politicization of the industry. Despite myriad challenges, including an unprecedented and unceasing virus, healthcare retains many of its unique advantages: a scarce but sacred resource of unparalleled necessity and steadfast profitability.

ty. Will anything truly alter healthcare at its core?

The answer might already be yes. As traditional healthcare organizations attempt to catch their breath and retool for a post-pandemic environment, evidence suggest the industry has already been fundamentally altered. It appears healthcare may no longer fully enjoy its most powerful attribute: scarcity. Join as we examine the powerful forces pulling healthcare away from conventional settings and into every home and onto every screen in the community, and the implications for the traditional business model of healthcare delivery. Will more abundant healthcare benefit patients? Will invasive entrants finally succeed? What will happen to a healthcare workforce teetering on the brink? We will debate if traditional healthcare delivery returns to prominence or joins the dust heap of history. As we do, we'll attempt to carve out a future that benefits both those who provide care—and those who receive it.

### **Learning Objectives**

At the conclusion of this session, attendees will be able to:

- Describe the natural advantage of scarcity enjoyed by all traditional healthcare organizations
- Define what consumers want from abundant healthcare and what's already in motion
- Identify a framework to assess current organizational offerings and possible growth areas
- Discern the board's role in adopting a broader view of healthcare services and experiences

**11:15–11:30 AM**

## **Break**

**11:30 AM–12:15 PM**  
*General Session*

## **The Business of Disease, Illness, & Wellness**

**Brian J. Silverstein, M.D.**

Chief Population Health Officer

*Innovaccer*

Diseases move through a life cycle that includes illness and wellness. Our current system is based upon the treatment of illness rather than the promotion of wellness. In addition, the current stress of COVID-19 has also caused staffing challenges, volume swings, and stress on patient outcomes and health system finances. This pandemic has exposed the risks of our current business model and presents senior leadership and boards of healthcare organizations with an opportunity to reframe by allocating resources towards strategies that will result in improved clinical and financial performance.

The business models around wellness are dramatically different than the current illness-based models. This session will explore the specific local market factors that can impact strategy and lead to re-framing your own realistic market opportunity. We will also outline key operational elements of wellness-based models and how you can learn from them to improve clinical quality and financial performance. We will also explore the challenges for an illness-based healthcare system to adopt these practices and discuss a realistic path forward.

### **Learning Objectives**

At the conclusion of this session, attendees will be able to:

- Describe the clinical and business factors of disease and illness-based medicine
- Discuss wellness and describe the models to support this type of system
- Identify key operational factors that are important for each model to work
- Review factors to consider as you transition from illness to wellness

**12:15–1:00 PM**

## **Lunch Break**

For those who are virtual, this will be a 45-minute break. Please return at 1:00 PM for the next session.

**1:00–2:00 PM**  
*General Session*

## **What Boards Should Know About Healthcare's Emerging Security Risks**

**Cris V. Ewell, M.S., Ph.D.**

Chief Security & Privacy Officer

*NRC Health*

Healthcare is a frequent target from both internal and external threats. In addition, the health-

care industry frequently lags behind other sectors with the ability to understand the risks they are encountering. In fact, security controls have been a low priority for boards in the past. Only recently have boards started to change due to high-profile attacks on healthcare. Unfortunately, while there is interest from the directors, there often is limited knowledge about the functions and risks related to security and data protection.

This session will discuss the security issues, threats, and risks that impact healthcare entities. Participants will learn about the challenges the board and executives need to address and how to determine if you are prepared to adapt your security strategy to protect against emerging threats. You will leave the session with the tools and resources necessary to understand the risks and ensure your security program is resilient and able to adapt to changing environments.

***Learning Objectives***

At the conclusion of this session, attendees will be able to:

- Discuss the most common healthcare security threats
- Describe the current security challenges in the healthcare environment
- Assess your organization's security strategy and ability to prepare for the data threats and attacks
- Identify common healthcare security shortcomings and resource failures
- Define how to navigate this complex environment and create a plan that can adapt to the emerging threats

**2:00 PM**  
**Virtual Only**

**Adjourn**