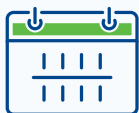


33RD ANNUAL **AHA RURAL**  
**HEALTH CARE**  
**LEADERSHIP**  
**CONFERENCE**



**FEBRUARY 2–5, 2020**  
ARIZONA GRAND RESORT & SPA  
PHOENIX, AZ



RESERVE YOUR SPOT  
BY **DECEMBER 13** FOR  
THE GREATEST SAVINGS  
WITH **EARLY BIRD**  
**TUITION PRICING!**



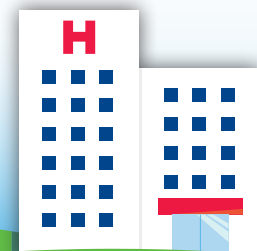
REGISTER THREE  
AND THE **FOURTH**  
**ATTENDS FOR FREE!**

**RURAL HEALTH CARE LEADERS WILL:**

- Gain practical tools for achieving peak operational and clinical performance, while improving value and affordability.
- Understand what the latest developments in Washington in an election year mean for rural hospitals and their communities.
- Revitalize leadership, boost governance expertise, and create a renewed culture.
- Strengthen the hospital's capacity to deliver value-based care through strategic partnerships and collaborations.
- Engage clinical talent and enhance care delivery through innovative workforce solutions.
- Explore how virtual health technologies are improving access to care.

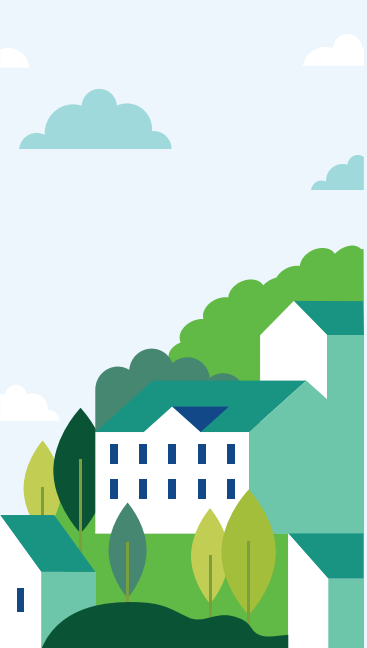
**WHO SHOULD ATTEND:**

- Rural Hospital CEOs, Administrators, Senior Executives and System Leaders
- Governing Board Members
- Nursing and Physician Executives
- Public Health and Community Leaders and Researchers
- Executives of Rural Health Care and Hospital Associations, Networks and Clinics



[www.aha.org/rural-conference](http://www.aha.org/rural-conference)





**RURAL HEALTH CARE LEADERS ARE ACTIVELY TRANSFORMING THEIR ORGANIZATIONS THROUGH A FOCUS ON AFFORDABILITY AND VALUE WITH INNOVATIVE RESPONSES TO EMERGING OPPORTUNITIES.** Strategic partnerships that cut across the care continuum, evolving payment models, unique workforce approaches, effective leveraging of digital technologies, attention to the social determinants of health, and new care models are enabling rural providers to improve the health of their communities. Success is being driven by inspired leadership, forward-thinking governance, and resilient clinicians.

The American Hospital Association’s 2020 Rural Health Care Leadership Conference brings together top practitioners and thinkers to share strategies and resources for accelerating the shift to a more integrated and sustainable rural health system. We’ll examine the most significant operational, financial and environmental challenges and present innovative approaches that will enable you to transform your organization’s care delivery model and business practices.

Plan to arrive early to enjoy Phoenix and join us on Sunday afternoon to dive deeper into individual and organizational performance improvement topics through two pre-conference workshops. These workshops provide opportunities for additional interaction between participants and faculty, adding value to your conference experience.

The AHA’s Rural Health Care Leadership Conference offers a powerful focus on innovative ideas, thoughtful insights, and tested strategies for responding to an ever-changing world. We hope you’ll join us in Phoenix.

## SCHEDULE

SUNDAY, FEBRUARY 2	
12:00 – 5:00 pm	Registration
2:00 – 3:30 pm	Workshops
MONDAY, FEBRUARY 3	
7:00 – 8:00 am	Registration and Continental Breakfast
8:00 – 9:30 am	Welcome and Opening Keynote
9:45 – 11:00 am	Affordability and Value Slam
11:15 am – 12:30 pm	Strategy Sessions
	Governance Track
12:30 – 2:00 pm	Lunch with Roundtable Discussions
2:00 – 3:15 pm	Keynote
3:30 – 4:45 pm	Strategy Sessions
	Governance Track
5:30 – 7:00 pm	Networking Reception

TUESDAY, FEBRUARY 4	
7:00 – 7:50 am	Registration and Continental Breakfast
7:00 – 7:50 am	Sunrise Sessions
8:00 – 9:30 am	Keynote
9:45 – 11:00 am	Strategy Sessions
	Governance Track
11:15 am – 12:30 pm	Strategy Sessions
	Governance Track
12:30 – 1:30 pm	Lunch with Topical Networking Tables
1:30 – 2:45 pm	Keynote
3:00 – 4:00 pm	Business Briefing
3:30 – 7:00 pm	Optional Recreational Activities: Desert Hike or Shopping

WEDNESDAY, FEBRUARY 5	
7:00 – 8:45 am	Continental Breakfast
7:30 – 8:45 am	Strategy Sessions
	Governance Track
9:00 – 10:15 am	Strategy Sessions
	Governance Track
10:30 – 11:30 am	Closing Keynote

## SPECIAL FEATURES



### Enhanced Governance Programming

Sessions for trustees focus on the information and skills that will help move a rural hospital board from good governance to great governance, including:

- The impact of emerging trends on the structure and work of governing boards
- Best practices for elevating board decision-making
- Metrics and expectations for holding leadership accountable for results
- Governance and innovation in driving organizational change
- The role of the board in the community benefit arena
- Tools to standardize and improve board member recruitment, on-boarding, and orientation
- Strategic questions boards should be asking about IT



Sessions marked with  are part of the Governance Track.



### Hot Topic Roundtable Discussions

Grab lunch and join a roundtable discussion group for facilitated conversation on thorny issues and current topics in rural health care. Share what's working well in your organization and gain others' advice on your challenges. We'll address a variety of topics including health disparities in rural women, attracting and retaining great employees, innovative models to engage communities, and creating expert teams.

### Recreation and Rejuvenation: Tuesday, February 4

#### • Desert Nature Hike, 3:30 – 6:00 pm

Nature lovers and exercise enthusiasts of all levels will enjoy this scenic hike through the South Mountain Preserve. Knowledgeable guides will direct hikers and provide commentary on plant and animal life as well as the history of the area.

#### • Shopping Excursion, 3:30 – 7:00 pm

Enjoy access to two of Arizona's premier shopping destinations. Fashion Square is Scottsdale's largest mall, offering the very best in every category. Old Town Scottsdale is a Wild West-themed enclave filled with period buildings, covered sidewalks and shops showcasing Native American jewelry and Western art and clothing. Bus transportation is included in the \$10 fee.



### Plan a Retreat for Your Leadership Team or Governing Board

The Conference offers an excellent opportunity for your team or governing board to meet in a retreat setting with select conference faculty or other facilitators. Contact Laura Woodburn at [lwoodburn@aha.org](mailto:lwoodburn@aha.org) for more information.

### Pre-Conference Opportunity to Inform and Improve Rural Health Research: Sunday, February 2

Join the Collaborative for Rural Primary care Research, Education, and Practice (Rural PREP) team in a **Design and Dissemination Studio** on Sunday, February 2nd from 12:30 – 3:30 pm. This opportunity aims to make research more community-centered and culturally-relevant with a focus on rural hospital-relevant research topics. Travel allowances provided. Separate registration through Rural PREP is required to participate. Contact [rprep@uw.edu](mailto:rprep@uw.edu) for more information and to learn how to participate.



# KEYNOTE SESSIONS



## MONDAY, FEBRUARY 3

### The Rabbit Effect: Live Longer, Happier, and Healthier with the Groundbreaking Science of Kindness

**Kelli Harding, MD**, Assistant Clinical Professor of Psychiatry, Columbia University and author

What are we missing when it comes to our wellbeing? What would truly help us to thrive? Dr. Kelli Harding explores groundbreaking scientific evidence to reveal how surprising hidden factors, such as kindness, love, friendship, environment, community and connection in our day-to-day lives, can have a far greater impact on our overall health than anything that happens in the doctor's office. For instance, chronic loneliness can be as unhealthy as smoking a pack of cigarettes a day; napping regularly can decrease one's risk of heart disease; and people with purpose are less likely to get sick. At once transformative and inspiring, Dr. Harding shares a radical new evidence-based way to think about the determinants of health, wellness, community, and how we live.

### Addressing Disruption through Innovation and Value in Rural Communities

Moderated by AHA Board Member **Peter Wright**, president of Bridgton and Rumford Hospitals, this fast-paced session will explore today's key disruptors within the health care field, such as emergent technologies, regulatory pressures and consumerism. Six rural hospital and health system leaders will share, in seven minutes or less, how their organizations are redesigning care delivery, introducing new products and services, or otherwise transforming to meet today's key disruptors, challenges and opportunities.

### Charting the Course: Launching Patient-Centric Health Care

**John Nance**, ABC News Aviation Analyst and Patient Safety Advocate

In many respects American health care has resembled a disparate fleet stuck in port during a series of mega-storms. Now, however, the waiting game is over as the seismic movement from a fee-for-service world to one in which measurements and reimbursements—and survival—are based on the quality and effectiveness of outcomes is frankly unstoppable. But without a carefully acquired understanding of how to change, and a clear articulation by leaders on where we are heading, organizations will fail despite the best of intentions. John Nance explores how the health care system that succeeds will be one that understands how to empower, motivate, and inspire the people who are the organization, as well as deal positively with the inevitability of human and systemic mistakes.

## TUESDAY, FEBRUARY 4

### Washington Update

**Nancy-Ann DeParle**, Partner & Co-Founder, Consonance Capital Partners; former Assistant to the President & Deputy Chief of Staff for Policy to President Barack Obama; **Lanhee Chen, PhD**, Research Fellow at the Hoover Institution and former Policy Director for the Romney-Ryan Presidential Campaign; **Rick Pollack**, President and CEO, American Hospital Association; **Erika Rogan, PhD**, Senior Associate Director, Policy, American Hospital Association; and **Travis Robey**, Senior Associate Director, Federal Relations, American Hospital Association

Join American Hospital Association leaders and special guests for a discussion on the latest from Capitol Hill, the upcoming elections and what it all means for hospitals and health systems. This session will provide a federal regulatory update on recent regulations impacting Critical Access Hospitals and rural PPS hospitals.

### Rhetoric, Reality, and Responsibility: The Rural Governance Challenge

**James E. Orlikoff**, President, Orlikoff & Associates, Inc.

Hospitals will disappear! Volume-based payment is just around the corner! Tech companies will disrupt and then own all of health care! These are but a few of the rhetorical truisms bandied about today. But what is the reality and what is the truth? And, how can rural health care boards tell the difference and make decisions to help their hospitals and systems survive in a post-disruption world? This presentation will outline the tensions between the health care rhetoric and reality and provide governance techniques to help boards tell the difference.

## WEDNESDAY, FEBRUARY 5

### Disrupting for Good: Using Passion and Persistence to Create Lasting Change

**Chris Field**, CEO, Mercy Project and author

From running for mayor as a teenager to breaking multiple Guinness World Records to helping save over a hundred children from slavery, Chris Fields has been disrupting most of his life. Seamlessly weaving his own story with those of other ordinary people who became extraordinary disruptors, Chris offers a clear call to action: anybody, anywhere, can choose to disrupt for good. But it doesn't stop there. Chris will end by walking you through his personal Disruption MAP so that you leave both prepared and inspired to disrupt for good in your own job, non-profit, school, neighborhood, and family.

# STRATEGY SESSIONS

## MONDAY, FEBRUARY 3

### Two Tales of Preserving Rural Access

**Ken Beutke**, President, OSF HealthCare Saint Elizabeth Medical Center; **Don Damron**, Vice President of Ambulatory Services, OSF HealthCare Saint Elizabeth Medical Center; **Nathan Miller**, Executive Director, FQHC, Maury Regional Medical Center; and **Kenny Boyd**, Chief Operating Officer, Maury Regional Health, Maury Regional Medical Center

Access to sustainable rural health care is increasingly threatened with many communities experiencing vulnerability to hospital closures. And yet, a bold “all in” commitment for rural America has produced alternative frameworks for health care sustainability that feature innovative care delivery models, patient and provider enabling technology solutions, network development, facility redesign, and community engagement and empowering partnerships. In this session we’ll explore how two organizations have successfully responded to the loss of their health care services to offer better support to their rural populations. You also learn how to educate the community that an alternative model may be the most viable long term solution to meet community needs.

### Powered by Our People: Physician Partnership and Recruitment

**Jennifer Wharton**, Chief Ambulatory and Medical Group Officer, Jefferson Healthcare and **Steve Butterfield, MD**, Chief Medical Officer, Medical Group, Jefferson Healthcare

Armed with the realization that the easiest provider to recruit is the one that does not leave, Jefferson Healthcare has outlined a strategy for creating a great place for great providers to practice medicine. After two years of a dedicated focus on provider engagement, Jefferson Healthcare has recruited 20 providers and has developed a multi-specialty Medical Group dedicated to working together to deliver high quality, safe, value care to patients and the community. Learn strategies to instill provider engagement and improve recruitment by cultivating transparency, partnership, and a shared sense of purpose; leverage the power of a dyad structure and provider leadership development; create a structure that fosters collaboration; and work together to deliver high-quality care for patients and improve the quality of life for providers.

### Creating Alignment for Success in Transitions of Care

**Jason Cohen, MD**, Chief Medical Officer, North Valley Hospital and **Nancy Hendrickson**, Director, Care Continuum, North Valley Hospital

This session provides insights into maximizing limited resources to achieve improved outcomes at transitions of care. North Valley Hospital took a multidisciplinary approach to improve care transitions, including: redesign of the medical staff committee structure, implementation of individualized care plans, a nursing-focused rapid improvement event on the discharge process, care coordinator identification of care partners, an admission medication reconciliation improvement project, creation of a care continuum director, use of HIPAA-compliant messaging to primary care providers, and Hospitalist-led redesign of discharge instructions. Learn how the cumulative impact of these interventions lifted the hospital to 5-star achievement in the care transitions measure, and improved communication across the continuum of care.

### Changing the Payment Paradigm—The Pennsylvania Rural Health Model

**Janice Walters**, Chief Operating Officer Consultant, Office of Rural Health Redesign - Pennsylvania Department of Health; **Brendan Harrison**, Vice President of Government Programs, CE/NE PA, UPMC Health Plan; **David Hoff**, Chief Executive Officer, Wayne Memorial Hospital; **Tammy Anderer, MSN, CRNP, PhD**, Chief Administrative Officer Geisinger Health System, North Central Region/Geisinger Jersey Shore Hospital; and **Kate Slatt**, Senior Director, Innovative Payment and Care Delivery, The Hospital and Healthsystem Association of Pennsylvania

In partnership with the Center for Medicare & Medicaid Innovation, the Pennsylvania Department of Health’s new Rural Health Model flips the script on hospital care. By changing how hospitals are paid, the new model aims to reward hospitals for keeping patients healthy and out of the hospital altogether, replacing hospitals’ traditional model—treating patients when they are sick or injured. This new payment approach not only provides a critical measure of stability for hospitals and patients, but also for rural communities and jobs. Since starting work on this model several years ago, we’ve heard from over a dozen states, all asking: “Is it working?” This panel convenes stakeholders to share the Pennsylvania experience.



### Community Benefit: What Boards and Executives Should Know

**Julie Trocchio**, Sr. Director, Community Benefit & Continuing Care, The Catholic Health Association of the United States and **Trina Hackensmith**, Vice President, Lyon Software

Board members and executive leaders are responsible for ensuring that their organizations are faithful to their mission and fulfill their charitable tax-exempt purpose. Not-for-profit hospitals continue their mission of service by responding to community health needs and meet the IRS community benefit standard. This session will examine federal requirements governing hospital tax-exemption, including working with community partners to conduct community health needs assessment and plans to improve community health. It will cover the definition of community benefit and the rationale for what can and cannot be reported to the IRS as community benefit. You’ll gain a greater understanding of the role of the board and executive leadership in the community benefit arena.

### Engaging Local Leaders to Drive Policy Changes and Care Delivery Innovations in Rural Communities

**Sabra Rosener**, Vice President, Government & External Affairs, UnityPoint Health

This session explores how policymakers, health systems and community leaders can work together to advance innovative care models and prepare for the future of the rural economy. You’ll gain an understanding of key policy changes needed to sustain health care in rural communities, such as establishing a rural emergency center designation, strengthening infrastructure and reimbursement for telemedicine services, expanding services provided by rural health clinics, and addressing barriers to workforce recruitment and retention. Learn how one rural health system successfully launched its own grassroots effort to engage rural communities and expand adoption of telemedicine and new care settings outside the walls of the traditional hospital, taking advantage of opportunities for public/private partnerships and rural/urban collaboration.



### Making Your Board a Model of Governance Excellence

**Lyn Jenks**, Governance Consultant, Munson Healthcare

Hospitals and health systems have made efficient operations, high quality and standardization of internal processes major elements of success—but what most of us have neglected to do is spend adequate time fully integrating these initiatives at the very top the organizations with our boards. Munson Healthcare studied what makes boards great, implementing an assertive program to build a benchmark model for system and local hospital governance. Learn how to boost board engagement in high-level decision making, improve overall satisfaction of board members, standardize and improve board recruitment, on-boarding, orientation and education, and more!

## TUESDAY, FEBRUARY 4

### Rural Hospitals Can Use ACOs to Create a Statewide Clinically Integrated Network and Adopt Population Health Strategies

**Paul Gardner**, VP, Rural Health/ACO, Mississippi Hospital Association; **Lynn Barr**, CEO, Caravan Health; and **Tim Thomas**, ACO Champion/Finance Specialist, Neshoba County General Hospital

Succeeding in a risk-bearing ACO is possible regardless of a hospital's size, whether leaders believe it can further reduce their Medicare spending, or if the organization is made up of affiliated (not employed) providers. This session will debunk the ACO myths and share a state association and a hospital's experience in forming and participating in a statewide clinically integrated network. Learn how hospitals are joining forces in non-traditional ways to pool lives to negate the effects of variation in savings, achieve sustainable income, mitigate their risk, and provide better-coordinated care to patients. You'll gain strategies for succeeding in value-based payment models and practical tips on program participation opportunities, applications, requirements, and timelines.

### Strategies for Addressing the Challenges Faced by Rural Hospitals in Accessing and Integrating Behavioral Health Services

**Nancy-Ann DeParle**, Partner & Co-Founder, Consonance Capital Partners; former Assistant to the President & Deputy Chief of Staff for Policy to President Barack Obama and rural hospital leaders

This panel will provide an overview of the different behavioral health models of care available to any rural hospital, specifically walking through key learnings of mental health support that do not require a federal or state grant to implement. You'll hear directly from critical access hospital CEOs on how they were able to successfully overcome the unique challenges faced by rural hospitals in accessing and integrating mental health services in their community.

### Rural Hospital Obstetric Care: What Do We Know, What Works and What Can Be Done

**Tom Morris**, Associate Administrator, Federal Office of Rural Health Policy, HRSA; **Katy Backes Kozhimannil, PhD, MPA**, Director, University of Minnesota Rural Health Research; and **John Cullen, MD**, Providence Valdez Medical Center and President, American Academy of Family Physicians

Rural areas have seen a significant loss of hospital-based obstetric services in recent years, stressing rural hospital boards that face difficult decisions in deciding whether they can sustain OB services. This session will examine the scope of this challenge and the key factors that affect the ability to offer and maintain OB access. Learn how one CAH has been able to maintain its OB services and how the community sees it as an essential services. We'll also feature a new awardee from the HRSA Rural Maternity Obstetrics Management and Strategies Pilot Program sharing how they will use the grant funding to develop a networked approach to ensuring access to rural OB and maternity services.

### Telehealth: Identifying Solutions for Rural Communities to Address Provider Access and Patient Outmigration

**Brian Bossard, MD**, President and Chief Executive Officer, Bryan Telemedicine and **Rebekah Mussman**, President and Chief Executive Officer, Crete Area Medical Center

Health care in rural communities is at a tipping point, with many critical access hospitals struggling to respond to provider shortages and declining patient volumes. Bryan Telemedicine has adapted theoretical applications into real world practice, expanding far beyond simple video interactions between providers and patients. Hear this incredible journey of collaboration, call to action, overcoming obstacles, and the creation of best practice virtual care solutions that offer innovative and cost-effective solutions for patient care and positively impact the work life balance of rural providers.



### Accelerated Strategic Planning for Rural and Critical Access Hospitals: Finding Solutions to Today's Toughest Challenges

**Dennis Burke, MSHA**, President and CEO, Good Shepherd Health Care System and **Guy Masters, MPA**, Principal, Strategic Advisory, Premier Healthcare Solutions, Inc.

Is your current strategic plan an effective, confidence-inspiring roadmap for your hospital, offering clear direction with focused priorities to guide decisions by the board and senior leadership? Unfortunately many strategic plans could more accurately be described as operations improvement/resource allocation plans. This session will provide a customizable process and tools to enable boards and leadership to achieve a balance between governance and management and short- and long-term scenarios, resulting in a strategic planning framework that addresses top concerns and implications for patient services, financial performance, workforce stabilization, technology, expanded access, and changing demographics. Board members will learn how to hold management accountable for results based on clearly defined metrics and expectations, and in a consistent and timely fashion throughout implementation.



### Transforming Care through Age-Friendly Health Systems

The nation's population over age 65 is projected to reach 83.7 million or 39% by the year 2050, an increase from 21% of the population in 2012. Age-Friendly Health Systems is an initiative of The John A. Hartford Foundation and the Institute for Healthcare Improvement in partnership with the AHA and the Catholic Health Association of the United States. The initiative is designed to meet the needs of older adults, looking beyond acute events, engaging the whole community, and achieving better health for older adults. By focusing on four key areas—what matters, medications, mobility and mentation—we aim to improve patient care, safety and outcomes; improve patient and family engagement in care; and reduce length of stay and readmissions. This session will highlight the experiences of a rural hospital on the journey to achieve Age-Friendly status.

### Managing Cybersecurity Risk in Health Care: The Leader's Role

**John Riggi**, Sr. Advisor for Cybersecurity and Risk, Risk Advisory Services, American Hospital Association

Protecting health care organizations from cyberattack is a growing challenge. Health care data is highly attractive, the tactics used by potential hackers are constantly evolving, and significant information sharing within our environments places you uniquely at risk. And yet protecting your organization's data extends beyond technical systems and processes; leadership from the top of the organization is critical to establish a culture of cybersecurity. Join us to explore best-practice leadership behaviors to reduce the likelihood and impact of a cyber event.



### Is Being a District Hospital the Right Governance Model for Your Organization?

**Doug Faus**, Chief Executive Officer, Ivins Memorial Hospital; **Lindsley Withey**, Director, Strategic Advisory, Navigant; and **Kaitlyn Moore**, Managing Consultant, Navigant

Government ownership of hospitals has a time and a place, but often rural hospitals find that they have outgrown the need for government support. Many hospitals have found that changing from a district hospital to a 501(c)3 non-profit hospital has given them the latitude to better meet the needs of their patients and their community. The process, however, is complicated. This session will help rural hospitals to evaluate what is needed to consider such a transition, the pros and cons of each model, and how best to implement the change should you choose this path. You'll learn how to determine which model is right for your patients, your organization, your community, and your workforce.



## WEDNESDAY, FEBRUARY 5

### Improving Patient Safety by Building a Just Culture

**Nick Marsico**, VP, Ancillary Services/COO, Magruder Hospital and **Linda Oman**, Director, Risk Management & Compliance, Magruder Hospital

After its results on the AHRQ Survey on Patient Safety Culture declined, the leaders of Magruder Hospital undertook the necessary actions to transform its culture. This session will share what Magruder has learned about the importance of changing organizational culture to improve patient safety and drive fear out of the organization—resulting in improvement in every dimension (and on every question) on the 2018 survey between 9% and 41%. You'll learn to recognize the differences between a just organization and one that is not, identify steps to drive fear from the organization, and understand how to utilize AHRQ survey results to identify and measure areas to improve.

### Transforming Care to Drive Consumerism

**Josh Martin**, CEO, Summit Pacific Medical Center and **Brian Haapala**, Senior Vice President, Dougherty Mortgage

Working with its board, Summit Pacific Medical Center has established a positive vision for care transformation for the organization and community. The presenters will explore the myriad performance domains that must be successfully implemented to execute on this vision including the recruitment of providers supporting the care transformation vision, clinical workflow, and the design of facilities to support transformation. Because care transformation often requires a capital commitment, the session also will explore how to identify and match the sources of care transformation funding with what is available in the marketplace and how to secure a funding commitment early in the process to ensure transformation strategies are supported.



### New Approaches to Effective Board Decision Making

**James E. Orlikoff**, President, Orlikoff & Associates, Inc.

The first thing any effective board or leadership group does is decide how it will make decisions. Further, effective boards develop different, clearly defined processes to make decisions of different magnitudes. Yet, many boards have never had an explicit conversation about or developed multiple approaches to this most critical of governance functions—their decision making. This session will outline several different, practical and effective decision making techniques to expand your board's tool kit of processes and techniques for making effective decisions.

Exploring New Frontiers: Evolving Alignment Options between Health Systems and Rural Hospitals

**Justin Chamblee**, Senior Vice President, Coker Group

Numerous forces are driving rural hospitals to consider innovative affiliations with larger health systems, including rising IT and supply costs, limited provider/specialist access, commitment to rural markets/population in primary/secondary service areas, and management expertise. At the same time, historical affiliation models may still be appropriate in certain circumstances, including full acquisition, management, lease and joint operating arrangements. Evolving and less formal models as well may accommodate rural identity and independence, including preferred services arrangements, EPIC hosting, visiting specialists and other need-specific arrangements. This session will explore the myriad of options available to rural hospitals and communities, detailing best practices and potential pitfalls to consider with any affiliation strategy.

The Safe Passage Initiative: Police Giving Hope to Addicts through the Tools for Recovery

**David Schreiner**, President/CEO, Katherine Shaw Bethea (KSB) Hospital and **Danny Langloss, Jr.**, Dixon, Illinois Police Chief

*Safe Passage* is an addiction recovery initiative that allows those seeking treatment to contact police without fear of arrest, as long as they don't have any outstanding warrants. People can also turn over drugs and paraphernalia without being charged. Learn how KSB Hospital and the Dixon Police Department partner with treatment centers in and outside of Illinois to coordinate care and treatment for participants. You'll hear how they've successfully placed needy individuals into treatment and have been able to secure a treatment bed for a participant within two hours.



Interactive Governance Clinic

**James E. Orlikoff**, President, Orlikoff & Associates, Inc.

Bring your thorniest governance issues to one of the nation's preeminent health care governance experts. You'll gain practical solutions and proactive ideas for improving governance performance. This session will be very interactive and no issue is off the table, so come prepared to talk, to question and be challenged!

WORKSHOPS *Pre-registration is required and is available via online registration.*

SUNDAY, FEBRUARY 2



Governance and Innovation: Driving Major Organizational Change

**Cathy Eddy**, Founder, Retired President, Health Plan Alliance

Innovative approaches are key to meeting the governance challenges facing rural hospitals and health systems now and in the future. This workshop will explore ways for board members to examine their roles in oversight, insight and foresight, and explore new opportunities to collaborate and improve the health of their communities.

Practical Tactics to Engineer Culture Change

**Rusty Holman, MD**, Chief Medical Officer, LifePoint Health; **Jim Edmondson**, Chief Executive Officer, Southern Tennessee Regional Health System – Pulaski; and **Mike Herman**, Chief Executive Officer, Riverview Regional Medical Center

Culture is one of the underlying fundamentals of achieving sustainable quality improvements in hospitals. It is vital that personnel in all departments—from environmental services and dietary staff to clinical staff and executive leadership—build a culture of collaboration and teamwork to constantly drive improvement in quality care and patient safety. This workshops examines strategies to rally teams around quality and safety goals, improve communication, and engineer cultural change that have led to significant results including a more than 60% decrease in aggregate hospital-acquired patient harms. You'll learn from fellow rural health care leaders how to implement key tactics to enhance teamwork and drive significant and sustainable results in quality, patient safety, and experience. Finally we'll explore approaches for overcoming common barriers, as well as methods for effectively tracking and measuring culture at all levels of the organization.



# SUNRISE SESSIONS

## TUESDAY, FEBRUARY 4

### Tap into Innovative Strategies to Drive Performance Improvement

**Kirk Soileau**, CEO, Natchitoches Regional Medical Center; **Matt Walker, PharmD**, CEO, William Bee Ririe Hospital; and **Kristi Martinsen**, Hospital State Division Director, Federal Office of Rural Health Policy, HRSA

Rural hospitals across America are taking bold steps within their communities and in partnership with their leadership peers to improve performance. Join this conversation to gain actionable ideas for boosting quality and addressing readmissions and learn how one hospital has used a multi-pronged technical assistance approach through the development of partnerships, care coordination, and hiring an ER navigator, to become one of the nation's TOP 100 SafeCare Hospitals. And then discover how a rural hospital CEO uses innovative strategies to leverage a network of other hospital CEOs on performance improvement initiatives and community engagement. Examples of excellence and innovation are in the field—this session will inspire you to launch your own transformation initiatives.

### Emotional Intelligence: One of the Highest Indicators of Success in the Workplace

**Laurie Cure, PhD**, President/CEO, Innovative Connections and **Marilyn Schock**, CEO, UC Health North

Research says that leaders fail for a variety of familiar reasons. But what accounts for leadership success? What we know is that emotional intelligence (EI) is the #1 predictor of professional and personal excellence with 90% of top performers in organizations having higher levels of EI. Integration of this critical competency is quickly becoming a requirement as a briskly changing environment necessitates skills in self-awareness, trust building, conflict management, listening and empathy. This session will provide attendees with strategies to build EI skills in themselves and their teams and review the example of one rural hospital in which physicians in critical care specialties showed statistically significant improvement in EI at the conclusion of the program.

# BUSINESS BRIEFING

## TUESDAY, FEBRUARY 4

### Understanding and Successfully Navigating the USDA Community Facilities Loan Program

**Ralph Castillo**, Chief Executive Officer, Morgan Medical Center; **Alan Richman**, President and CEO, InnoVative Capital LLC; and **Anita Lopez**, Asset Risk Coordinator, Rural Development, USDA

Learn how a critical access hospital successfully reengineered itself and procured a 2.375%, fully-funded \$35 million USDA Direct Loan. Learn directly from USDA about new developments in the Community Facilities RD Program that may impact hospital decision making when considering a capital project. This session will examine how MMC procured various types of external credit support to enhance its loan underwriting, while working through all aspects of the national, state and local-based USDA loan process. Topics to be covered will include the development and financing process, the construction and permanent loan, as well as new developments at USDA.



# 33RD ANNUAL AHA RURAL HEALTH CARE LEADERSHIP CONFERENCE

**FEBRUARY 2–5, 2020**

ARIZONA GRAND RESORT & SPA  
PHOENIX, AZ



## REGISTER ONLINE

Visit [www.aha.org/rural-conference](http://www.aha.org/rural-conference) for easy, online registration.

## REGISTRATION QUESTIONS

**PHONE:** (312) 893-6897

**EMAIL:** [ruralregistration@aha.org](mailto:ruralregistration@aha.org)

## GENERAL QUESTIONS

**EMAIL:** [lwoodburn@aha.org](mailto:lwoodburn@aha.org)

### REGISTRATION RATES

#### EARLY BIRD

By December 13

#### REGULAR RATE

After December 13

### Health Care Provider Organizations, Academic Institutions, Government Entities, Nonprofit Associations and Organizations

AHA Organizational Member	\$645	\$695
Non-Member	\$775	\$825
AHA RPB, Governing Council and Committee Members	\$600	\$650

### Business Representatives

Attendance at the AHA Rural Health Care Leadership Conference by business representatives is limited to AHA Associates and conference sponsors. If you would like to attend the conference as a member of the business community, we encourage you to become an AHA Associate or sponsor. Contact Carl Aiello at [caiello@aha.org](mailto:caiello@aha.org) for more information on these opportunities.

AHA Associate	\$745	\$795
---------------	-------	-------

Contact Kayla Heyward at [kheyward@aha.org](mailto:kheyward@aha.org) if you are unsure of your membership status or need the AHA Associate registration code.

### Fourth Team Member — FREE

Send three people from your organization and the fourth attends for free. All registrations must be submitted at the same time.

### Workshops, Sunday, February 2, 2:00 – 3:30 pm

You will have the option to select one of two complimentary workshops during online registration:

**WORKSHOP #1:** Governance and Innovation: Driving Major Organizational Change

**WORKSHOP #2:** Practical Tactics to Engineer Culture Change

### Recreational Activities, Tuesday, February 4

Desert Nature Hike, 3:30 – 6:00 pm	Complimentary
Scottsdale Shopping Excursion, 3:30 – 7:00 pm	\$10

## SCHOLARSHIPS

A limited number of partial tuition scholarships is available. Contact Laura Woodburn at [lwoodburn@aha.org](mailto:lwoodburn@aha.org) for information on how to apply.

## HOTEL ACCOMMODATIONS

The Arizona Grand Resort & Spa is an AAA Four Diamond all-suite resort ideally situated on the doorstep of 17,000 acres of South Mountain Preserve, featuring a challenging 18-hole golf course, expansive athletic club, luxury spa and salon, and unique dining venues, creating the complete resort experience.

Arizona Grand Resort & Spa  
8000 S. Arizona Grand Parkway | Phoenix, AZ 85044 | [www.arizonagrandresort.com](http://www.arizonagrandresort.com)

The special conference attendee rate is \$239 for a single/double and includes complimentary daily in-room internet.

## TO MAKE A RESERVATION

**Online:** Visit [www.aha.org/rural-conference](http://www.aha.org/rural-conference) for a link to online reservations at the conference rate.

**By phone:** Call (877) 800-4888 and let them know that you are attending the AHA Rural Health Care Leadership Conference to receive the discounted rate.

The cut-off date to receive this rate is **January 3, 2020**. We strongly recommend reserving your room as soon as possible as rooms could sell out before cut-off date.

## TRANSPORTATION

The Arizona Grand Resort & Spa is located six miles from the Phoenix Sky Harbor International Airport. For information on airline and rental car discounts, and other ground transportation options, visit [www.aha.org/rural-conference](http://www.aha.org/rural-conference).

## SUBSTITUTIONS/CANCELLATIONS

If you cannot attend the conference you can send a substitute, even at the last minute. If you must cancel entirely, your request for a refund – minus a \$250 processing fee – must be made in writing to [ruralregistration@aha.org](mailto:ruralregistration@aha.org) no later than January 10, 2020. Cancellations made after January 10th are not eligible for a refund. In the unlikely event of a cancellation of the program, AHA is not responsible for non-refundable items.

## SPECIAL ACCOMMODATIONS

In you need any of the auxiliary aids and services identified in the Americans with Disabilities Act, contact Connie Lang at [clang@aha.org](mailto:clang@aha.org) with a written description of your needs.

## CONTINUING EDUCATION CREDIT

**American College of Healthcare Executives (ACHE):** By attending the Rural Health Care Leadership Conference offered by the AHA participants may earn up to 18 ACHE Qualified Education Hours toward initial certification or recertification of the Fellow of the American College of Healthcare Executives (FACHE) designation.

**AMA PRA Category 1 Credit(s)™:** In support of improving patient care, the Duke University Health System Department of Clinical Education and Professional Development is accredited by the American Nurses Credentialing Center (ANCC), the Accreditation Council for Pharmacy Education (ACPE), and the Accreditation Council for Continuing Medical Education (ACCME), to provide continuing education for the health care team.

Category 1: Duke University Health System Department of Clinical Education and Professional Development designates this activity for a maximum of 18 *AMA PRA Category 1 Credit(s)™*. Physicians should claim only credit commensurate with the extent of their participation in the activity.

**California Board of Registered Nursing:** AHA Health Forum is provider approved by the California Board of Registered Nursing, Provider Number 12650 for 18 contact hours. Check with your state provider for reciprocity.

**College of Healthcare Information Management Executives (CHIME):** The 2020 Rural Health Care Leadership Conference has been approved by the College of Healthcare Information Management Executives (CHIME) to award a total of 19 continuing education units (CEUs) toward the CHIME Healthcare CIO (CHCIO) Program. CHIME members may claim their CEUs for this program by entering them on the CHIME website at <https://chimecentral.org/education/non-chime-continuing-education-units/>.

**AHA Certification Center:** The Rural Health Care Leadership Conference qualifies for 18 AHA Certification Center continuing education credits (CECs) toward CHC, CHFM, CHESP, CHHR, CMRP, and CPHRM recertification.

**Nursing Home Administrators:** This conference may satisfy continuing education requirements for nursing home administrators, which vary from state to state. Check with your state agency to determine eligibility.

## SPONSORS (As of September 25, 2019)



33RD  
ANNUAL **AHA RURAL**  
**HEALTH CARE**  
LEADERSHIP CONFERENCE

**FEBRUARY 2–5, 2020**

ARIZONA GRAND RESORT & SPA  
PHOENIX, AZ



RESERVE YOUR SPOT  
BY **DECEMBER 13** FOR  
THE GREATEST SAVINGS  
WITH **EARLY BIRD**  
**TUITION PRICING!**



REGISTER THREE  
AND THE **FOURTH**  
**ATTENDS FOR FREE!**

