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High-Performance Healthcare Technology
For Value-Based Care and Payment

Cedar Gate enables payers, providers, employers, and service administrators to excel at value-based care with a unified technology and services platform delivering analytics, population health, and payment technology on a single data management foundation. From primary care attribution, to bundled payments, to capitation, Cedar Gate is improving clinical, financial, and operational outcomes for every payment model in all lines of business.

Learn more at www.cedargate.com.
9:00–9:05 AM CT  
**Opening Comments from the Publisher**  
**SPEAKER**  
Fawn Lopez, Publisher, Modern Healthcare; Vice President, Crain Communications

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9:05–9:45 AM CT  
**Opening Keynote**  
Sanford Health’s Value-Based Care Journey: Challenges and Opportunities Serving Patients and Health Plan Members Across the Upper Rural Midwest  
Sanford Health, the largest rural health system in the United States, is dedicated to transforming the healthcare experience and providing access to world-class healthcare in America’s heartland. Headquartered in Sioux Falls, South Dakota, the organization serves more than one million patients and 220,000 health plan members across 250,000 square miles. Sanford Health recently announced a virtual care initiative to transform rural care delivery, improving access to affordable, high-quality healthcare for generations to come. Learn from Sanford Health leadership about how the health system is committed to removing barriers to access and addressing health disparities by extending care, coverage and services – ensuring that patients benefit from the right care, at the right time, in the right place, no matter where they live or the health challenges they face.  
**SPEAKERS**  
Matt Hocks, Vice President and Chief Operating Officer, Sanford Health  
Nathan Peterson, Executive Vice President and Chief Strategy and Development Officer, Sanford Health  
John Snyder, President, Sanford Health Plan

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9:45–10:45 AM CT  
Getting Healthcare Right:  
A Fireside Chat With TriHealth CEO, Mark Clement and Lumeris CEO, Mike Long  
What does it look like to disrupt the way care is delivered from the inside out? Learn how TriHealth has been able to drive value-based care in their market, improving the health status of their communities, working with payers to reimburse caregivers to keep people healthy and contracting directly with large companies to care for their employees. Find out how the TriHealth partnership with Lumeris is accelerating their journey to value, has changed the culture at TriHealth and is helping the system provide care in a manner that can reduce the stress on our caregivers.  
**SPEAKERS**  
Mark Clement, Chief Executive Officer, TriHealth  
Mike Long, Chief Executive Officer, Lumeris

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The Value-Based Care Journey: Examining Various Paths to Success

CMS tested 93 value-based payment and service delivery models, while the commercial sector led parallel initiatives to boost efficiency, quality and satisfaction. After years of experimentation, value-based care emerged as the best approach for yielding significant clinical coordination, quality and financial improvements. Consequently, legacy processes, organizational structures and technologies designed for fee-for-service are failing to enable value-based care.

In this session, we invite three market-leading healthcare organizations to share their journey in diverse value-based models. Join us for a candid discussion among peers and discover how each has forged their own path to success.

MODERATOR
David Morris, Executive Vice President and Chief Commercial Officer, Cedar Gate Technologies

PANELISTS
David Louder, MD, Executive Director, Medical University of South Carolina Health Alliance
Andrea Osborne, Senior Vice President, ACO Operations and Delegated Services, VillageMD
C.J. Stimson, MD, Assistant Professor of Urology, Vanderbilt University Medical Center; Chief Medical Officer, VUMC Employee Health Plan; Senior Vice President of Value Transformation, Office of Population Health

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flatiron.com/oncology/clinical-decision-support/
How to Make the Most of Data in Value-Based Care

The transition to value-based care relies heavily on clinical and administrative data. Not only do value-based payment programs hinge on accurately reporting data, but being able to easily access and analyze data from multiple sources is crucial to success in these programs. In this session, physician executives from Flatiron Health, Intelligent Medical Objects and Oracle share practical tools providers can leverage to make the most of their organization’s data. They’ll also touch on the role of leaders in this work and their thoughts on the future of value-based care.

MODERATOR
Maria Castellucci, Content Strategist, Modern Healthcare

PANELISTS
Amy Andersen, Industry Executive Director of Healthcare, Oracle
James Hamrick, MD, Vice President of Clinical Oncology, Flatiron Health
Steven Rube, MD, Chief Clinical Officer, Intelligent Medical Objects

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Grounded in data. Guided by insights.

Intelligent Medical Objects is the foundation and future of health IT. Our terminology and insights solutions ensure the integrity of patient data from the point of care to a range of uses across the healthcare ecosystem.

Learn more at imohealth.com.
12:45–1:15 PM CT  Better Hiring for Value-Based Care

Sourcing and nurturing healthcare candidates takes lots of time and recruiter skill—imagine automating tasks and freeing recruiters up to spend time with people. Paradox’s AI assistant Olivia is working with leading healthcare organizations to solve their biggest hiring challenges. Learn how Paradox is automating the recruiting process and shaping the future of value-based care with better hiring.

SPEAKER
Martine Schumacher, Healthcare Segment Vice President, Paradox

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1:15–1:20 PM CT  Closing Comments from the Publisher

SPEAKER
Fawn Lopez, Publisher, Modern Healthcare; Vice President, Crain Communications
Cedar Gate enables payers, providers, employers and service administrators to excel at value-based care. Our unified technology and services platform enhances and automates data management activities to deliver employer and provider analytics, care management and payment technology necessary to pursue every payment model and optimize performance in all lines of business. From primary care attribution, to bundled payments, to capitation, our platform is designed to improve clinical, financial and operational outcomes for all.

With Lumeris as a partner, health systems across the country are fulfilling the promise of value-based care. A joint-operating partner in both value and risk, Lumeris delivers market leading technology, insurance capabilities and on-the-ground expertise to more than one million patients and 7,000 physicians nationwide. Lumeris is proud to offer 5-star health plans that consistently deliver better clinical and financial outcomes for Medicare, Medicaid, Commercial and Individual populations. To learn more about Lumeris, please visit www.lumeris.com.

Paradox is building the world’s leading conversational recruiting software to drive automation with a human touch. Serving global clients with hiring needs across the healthcare industry, our conversational assistant Olivia does the work talent teams don’t have time for—streamlining tasks like screening, interview scheduling and more through fast, easy, mobile-first interactions. We support employers across the healthcare industry—including Pfizer, Aveanna, CVS Health, SSM Health, Houston Methodist and Essentia Health—and have been honored with numerous awards, including Human Resource Executive’s Best HR Product of 2019 and 2022.

Flatiron Health® is a world leader in transforming patients’ real-life experiences into knowledge to help accelerate improvements in cancer care and treatments. Our unparalleled network supports physicians and other healthcare professionals on the cancer frontlines, and can connect practices and patients directly to research that can help expand and improve cancer treatment and care options. We are recognized around the world for our important contributions to health systems, clinicians and, most importantly, to patients.

Intelligent Medical Objects is a healthcare data enablement company that ensures clinical data integrity and quality—making patient information fit-for-purpose across the healthcare ecosystem, from hospitals to health information exchanges to payers, and beyond. IMO’s vast footprint in EHRs powers our ability to capture and preserve clinical intent at the highest level of specificity. Our secure technology platform and products then help our clients to transform and extract the greatest value from their data. In short, IMO is the catalyst that enables accurate documentation, precise population cohorting, optimized reimbursements, robust analytics and better care decisions to optimize patient outcomes. Learn more at imohealth.com.

Oracle Health believes that reimagining the patient experience and improving outcomes through innovation is the key to healthcare transformation. Health systems’ ability to provide affordable, patient-centered care will drive better outcomes and long-term operational viability—and Oracle is here to make it possible with ERP, HCM and SCM cloud solutions. To learn more, visit oracle.com/healthcare.
Better Hiring for Value-Based Care.

Learn how Paradox is automating the recruiting process and shaping the future of value based care with better hiring.

“MultiCare

With Olivia, we were able to take a much more tailored approach to our hiring... cutting out unnecessary expenses and work.

Paradox is working with leading Healthcare organizations to solve their biggest hiring challenges.