September 18th – 20th, 2017

Nashville, TN

HOEGAN

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2017 ANNUAL FORUM

100+ healthcare executives driving health market innovation

40+ speakers and panelists who are pioneering the transformation of healthcare

3 keynote speakers offering exceptional insight

Sessions covering the latest topics of interest to healthcare executives

3 nighttime events for networking and unwinding in the Healthcare Capital of the United States

2.5 days

1 incredible opportunity to add some certainty to an

Welcome Letter from the Board of Directors

Welcome to the 2017 HCEG Annual Forum

On behalf of the Healthcare Executive Group (HCEG) and our Board of Directors, we are thrilled to welcome you to Nashville – the Healthcare Capital of the US – along with other executives who are pioneering the transformation of healthcare in the United States. Our goal for the 2017 HCEG Annual Forum is simple – to provide valuable information and key networking opportunities in a collaborative environment to guide you and your company through Innovation, Change and Growth – The overall theme of this year's Annual Forum.

Over the next two+ days, we hope you'll engage in robust dialogue, learn from each other about opportunities, challenges and issues we are all facing in the future of healthcare, and even more importantly, to forge new relationships with healthcare executives from across the industry – nationally and here in Tennessee. This 29th HCEG Annual Forum seeks to break down the silos that inhibit industry-changing innovation and provide you with actionable information, ideas and relationships to help you as you lead your organization through the remainder of 2017, into 2018, and beyond.

We look forward to having industry thought leaders and forum participants share openly – and to discussing how each of us, as industry leaders operating during this uncertain time of healthcare reform, can accelerate the convergence of innovation, change and growth within our industry. We hope you will take the ideas and unique experiences that you will certainly absorb during the Annual Forum back to your organizations to drive impactful changes that will make our collective healthcare transformation, in 2017 and forward, a reality.

We've brought together over a hundred leaders to engage in dialogue, to collaborate and partner, and to experience how innovative new models of care, reimbursement, technology and digital transformation are impacting all healthcare constituents today. We've also provided, through a unique association with the Nashville Healthcare Council, an intimate, small group setting and two exciting "after hours" networking receptions – unique opportunities for you to make new acquaintances, rekindle former relationships and strengthen existing connections while at the same time enjoying the best of Nashville entertainment.

Thank you and our sponsor partners for joining us at the 29th HCEG Annual Forum. We are thrilled that you share our excitement about the future of healthcare and we sincerely appreciate your participation.

Warm regards,

Ferris Taylor Conference Co-Chair COO Consultant - Arches Health Plan

Richard Lungen Program Committee Chair Managing Member – Leverage Health Alan Abramson Conference Co-Chair Sr Vice-President & CIO - HealthPartners

Bob Hoover Program Coordinator Vice-President - Change Healthcare

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Making the Most of the 29th Annual Forum of the Healthcare Executive Group

There are great opportunities to meet, experience and engage with fellow healthcare executives at HCEG's 2017 Annual Forum. To help you get the most out of the 29th Annual Forum in Nashville on September 18th through the 20th, read through this guide to ensure you're aware of what's to come.

You are among the health market's most influential leaders – connect with each other!

Schedule of Activities

The back of your name badge contains an abbreviated schedule. You can find a more detailed agenda here.

Networking Opportunities

Besides the ongoing opportunities for interaction with other participants during the sessions and events throughout the forum, the following networking opportunities are planned:

Sunday Night: 6:30-8:30 - Thompson Hotel Rooftop Reception Monday Night: 7:00-9:00 - Sponsor Networking Reception at ACME Feed & Seed Tuesday Night: 7:30-9:00 – Dinner Keynote "Reengaging in Trust" Tuesday Night: 9:00-11:30 - Nashville Late Night

Meet & Greet" at Sambuca Hosted (Sponsored by emids)

Social Media

During the forum, we'll be sharing some information and pictures via our @HCExecGroup Twitter account.

Feel free to follow the <u>@HCExecGroup</u> account.

Share your insights with those that could not attend. If you have a social media account, feel free to share your ideas and experiences with the #HCEGForum hashtag.

Continue to Engage After the Forum Ends

Once the forum is over, we'll be sharing information, content and pictures from the event in our newsletter, on our blog and via our social media channels.

The HCEG Newsletter

If you are not already a subscriber, join the mailing list for our newsletter. You can sign up <u>here</u>.

Blogging

Check out the <u>HCEG Blog here</u>. If you'd like to share your insight, ideas and/or opinion, we'd love to have you guest post on the HCEG blog. Send us an <u>email</u>.

Join Us on Twitter, Facebook & LinkedIn

Follow our LinkedIn account <u>here</u> and if you're on Facebook, you can find us at <u>here</u>.

Share Your Opinion About HCEG

We'd love to hear about what you thought of the 29th Annual Forum. What did you like? What didn't you like? What could we do to help you as a healthcare executive?

Send us your thoughts and idea here.

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Detailed Agenda

SUNDAY - 9/17		
6:30 pm	Meet & Greet Rooftop Bar at the Thompson Hotel	
MONDAY - 9/18		
7:00 am	Registration Opens	
7:30 am - 9:30 am	Special Pre-Forum Invitation-Only Executive Roundtable	
	Alan Abramson, Senior VP & CIO at HealthPartners and HCEG Office of the Chair, welcomes HCEG Board Members, special guests and Nashville Healthcare Council to a pre-forum breakfast and Q&A discussion on healthcare programs	
11:00 am	Welcome to Nashville & the 2017 HCEG Annual Forum	
	Welcome, Housekeeping and Recognition of HCEG's select group of Sponsor Partners – Platinum Sponsor CHC	
	Ferris Taylor, COO consultant for Arches Health Plan & Office of the Chair at HCEG opens HCEG Annual Forum and provides participants with a sampling of the value of the 29 th Annual Forum, housekeeping notes and the Forum Agenda	
11:20 am - 11:30 am	Welcome to Nashville – The Healthcare Capital of the United States	
	Hayley Hovious, President of Nashville Health Care Council, welcomes HCEG forum participants to Nashville and shares an overview of Nashville's healthcare participation and impact on a local and national basis	
11:30 am - 12:45 pm	Lunch, Opening Keynote & Q&A with Dr Karen DeSalvo	
	Dr. Karen DeSalvo, Former Assistant Secretary for Health & Human Services, will share a top-down overview of current and future healthcare topics – building upon HCEG & Nashville's context-setting environment and her vision of Health 3.0 following a plated lunch and will include an open Q&A with forum participants	
	SESSIONS – DAY ONE - MONDAY - 9/18	
1:00 pm - 2:00 pm	Value-Based Reimbursement/Relationships	
	Dr. David DiLoreto, Senior VP at GE Healthcare, Jim Smith, former president & COO at Excellus and John Poelman, Executive Director of the Accountable Care Learning Collaborative & Senior Director at Leavitt Partners share insights on the inevitable movement to value-based care and the importance of relationships between patients, providers and payers	
2:00 pm -3:15 pm	Precision Medicine/Behavioral Health Aspects of Substance Abuse/Opioids	
	Ian Gordon, Senior VP Health Insurance Operations at Regence (Cambia Health Solutions) engages panelists Anne Marie Aponte, Senior VP of Operations at NextHealth Technologies, Dr. Caroline Carney, Chief Medical Officer at Magellan Healthcare, Justin Lanning, CEO at 180 Health Partners and Jonathan G. Morphett, Managing Director, Investment Banking at Avondale Partners, LLC in an open discussion of the challenges of integrating behavioral health solutions into the healthcare challenges of escalating substance abuse, the opioid crisis and whole-person health	

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Detailed Agenda

MONDAY - 9/18 (continued)		
3:15 pm - 4:30 pm	Specialty Networks & Risk-Sharing at Scale	
	Dr. Richard Popiel, EVP & Chief Medical Officer at Cambia Health Solutions will be joined by panelists Brandon Cady, President of AIM Specialty Health and Dunston Almeida, EVP of Strategy & Business Development at Evicore Health in looking at the impact and implications of networks and risk sharing on the future of healthcare	
4:30 pm - 5:15 pm	2018 HCEG Top 10 Opening Discussion & Industry Pulse Survey Plans	
	Ferris Taylor, COO/Officer of the Chair at Arches Healthplan/HCEG and Chris Link, CHC Research & Consulting will facilitate a discussion of critical topics to be voted on in creating the 2018 HCEG Top 10 and complimenting the HCEG member view with the annual national Industry Pulse Survey facilitated by Platinum Sponsor Change Healthcare	
7:00 pm - 9:00 pm	Sponsor Networking Reception at ACME Feed & Seed	
	Charles Stellar, President & CEO at Workgroup for Electronic Data Interchange (WEDI) will host this private networking reception, accompanied by local Nashville entertainment, on behalf of HCEG's 10 select Sponsor Partners	
DAY TWO - TUESDAY 9/19		
8:00 am - 9:15 am	Motivational Keynote & Breakfast	
	Donato Tramuto – CEO of Tivity - shares his life experience professionally and personally in dealing with "Life's Bulldozer Moments"	
9:30 am - 10:45 am	Pharmacy Costs / PBM and Rx Transparency	
	William Resnick, Chairman & CEO at EmpiRx Health engages with panelists Jim Sheninger, Chief Pharmacy Officer at GoodRx, Blake Slansky, Divisional Vice President, Rx Commercial Market Development at Walgreens and Nichole (Nikki) White, VP Pharmacy Services at Medica on how health plans, health systems and health care providers must address rising prescription drug costs and industry pressures for more transparency	
10:45 am - 12:00 pm	"What was Missed in Two Decades of Population Health - Today's Opportunities for Disruptive Innovation"	
	Ben Leedle, Former CEO of Healthways, challenges a diverse panel of healthcare CEO's on how they have each addressed the gaps undressed by legacy or current health and wellness models. And how real value can be wrought 'this time around.'	
	Panelists include Darren Hodgdon, CEO at Beacon Specialized Services, Hugh Lytle, Founder & CEO at Equality	
	Health Rich Rakowski, Founder & CEO at Medically Home and Joe Jennings, CEO - BeHealth Solutions	
12:00 pm - 1:15 pm	Lunch What's Next for Healthcare?	
	Peter Wong, Author of "The Caregiver's Forecast" shares insight into his #1 Best Seller and implications for healthcare	
1:30 pm - 2:45 pm	"Healthcare & Consumers Going Digital - Is HIT a Disruption or Opportunity?"	
	Constance Sjoquist, Chief Content Officer at HLTH.co sets the context for a surely useful discussion about the implications and impact of healthcare consumerism and digital health.	
	Panelists include Torben Nielsen, VP of Innovation – Premera, David Vinson - CEO - Digital Health Group and Gary Word, VP, Consumer Payments at Change Healthcare	

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Detailed Agenda

DAY TWO - TUESDAY 9/19 (continued)		
2:45 pm - 4:00 pm	Payer Provider Operations - CMS Mandates & Provider Data Management Initiatives	
	Richard Lungen, Managing Member at Leverage Health, engages a panel representing health plan operations, provider credentialing and data exchange executives sharing insight of value-based relationships and PDM opportunities	
	Panelists include Ian Gordon, Senior VP Health Insurance Operations at Regence (Cambia Health Solutions), Russ Thomas, CEO at Availity, LLC, and Charlie Falcone, CEO at Aperture Credentialing, LLC	
4:15 pm - 5:15 pm	Technology Innovation and M&A Market Trends	
	Justin Roth, Managing Director at Triple Tree Investments leads a panel discussing current investment, legal and marketing opportunities in the healthcare technology, merger and acquisition space.	
	Paul Wallace, Managing Director at Heritage Group, LLC; Kris Kemp, Member - Member at Bass, Berry & Sims and Tom McEnery, EVP/Chief Marketing Officer at Change Healthcare join in the discussion	
5:15 pm - 5:30 pm	Wrap Up & Announcements	
	Ferris Taylor recaps Day Two and sets the tone for the closing dinner, keynote and late night emids party in Nashville	
5:30 pm - 7:30 pm	Break for Pre-Dinner & Late-Night Preparations	
	Forum participants enjoy a break from the fast-paced activities in advance of re-grouping for dinner and keynote address.	
7:30 pm - 9:00 pm	Dinner Keynote - "Reengaging in Trust"	
	Keynoter: Dr. Jan Berger, CEO at Health Intelligence Partners and Cambia Board Member shares her latest research and insights in preparation for her book on Reengaging in Trust – Thanks to Change Healthcare as Platinum Sponsor	
9:00 pm - 11:30	Nashville Late Night Meet & Greet" at Sambuca Hosted by emids	
	Special thanks to emids, another Nashville healthcare company	
WEDNESDAY 9/20		
8:00 am - 10:00 am	HCEG Sponsor & Member Forum Debrief with an Open Breakfast Buffet	



Speakers and Panelists

(Sorted alphabetically by last name)

Alan Abramson - Senior VP & CIO at HealthPartners

General management, technology operations and projects (\$100M-\$200M annual, 500-1,000 employees)

Leadership: government task forces and committees

Specialties: Strategic Planning & Business Development Public-Private partnerships Across industry collaboration

Strength Finders: Strategic, Individualization, Self-Assurance, Achiever, Activator

Dunston Almeida - EVP, Strategy & Business Development at Evicore Health

Dunston Almeida is a senior Fortune 25 executive with experience in technology and healthcare investing at leading organizations, including head of Emerging Markets strategy at Medco/Express Scripts, a \$100+ billion Pharmacy Benefits Manager.

He is currently Executive Vice President of Strategy and Business Development at eviCore Healthcare, the largest value-based care company covering 100 million members, and 100+ Health Plans and Health Systems across the US. He focuses on M&A, investments and partnerships working with the Board of Directors on eviCore's Strategy Council. Focus areas include advanced analytics, consumer engagement, cognitive computing and machine learning, post-acute care, payment integrity and precision oncology.

He has advised major corporations and private equity firms on issues of strategy, change and innovation around population health, value-based care and health care reform. Dunston also supports the formulation of eviCore's public policy strategies in Washington DC.

He has worked on deals across the healthcare spectrum, including HCIT, consumer-driven health, CROs, oncology, home infusion, specialty pharma, Medicare/Medicaid and has completed over \$30 billion of M&A transactions in North America, Europe, Latin America and Asia with extensive experience across the entire capital structure.

He graduated from Cornell University with a degree in Electrical Engineering at the age of 20.

Anne Marie Aponte - Senior VP Operations at NextHealth Technologies

Anne Marie Aponte is the Senior Vice President of Operations for NextHealth Technologies. In this role, Anne Marie has overall responsibility for the company's product and service delivery, including maximizing results for our clients, identifying and executing on mutually beneficial opportunities to expand partnership opportunities within our existing accounts, and ensuring seamless connectivity between our product roadmap and client needs.

Prior to NextHealth, Anne Marie led operations at Accolade, where she was similarly responsible for overall service delivery. During her six years with the company, she led a myriad of projects focused on refining the company's solution, driving growth within the existing customer base, and scaling operations via new technology and process. Prior to Accolade, Anne Marie worked for a large pharmaceutical manufacturer, spending time in human resources, sales, and marketing.

Biography:

Outside the office, Anne Marie enjoys competing in local CrossFit competitions and weightlifting meets, exploring the local food scene, and listening to live music.

Degree:

MBA in Health Care Management from the Wharton School at the University of Pennsylvania; BS in Industrial & Labor Relations from Cornell University.

Dr. Jan Berger - CEO at Health Intelligence Partners

I presently lead an International health care consulting company focused on healthcare strategy and business development. My clients vary from large multi-national corporations to small privately held startups. The company has a significant level of expertise in the area of consumer engagement and technology.

My past experience includes P & L responsibility, operational, corporate strategy/growth and M & A experience at CVS Caremark.

Brandon Cady - President & CEO at AIM Specialty Health

Brandon Cady is the President and Chief Executive Officer of AIM Specialty Health® (AIM). Brandon joined AIM in 2002 and executed top line growth initiatives that expanded the business into one of the largest and most successful specialty benefits management companies in the United States. Brandon has held a variety of leadership positions within hospital systems, health plans, and emerging technology companies. In 2000, he was a founding member of Planlinx, one of the first consumer-directed health care solutions in the United States. Prior to Planlinx, he spent several years with UnitedHealthcare working on business integration, network development strategies, and operational improvement initiatives. Brandon has also consulted with Blue Cross and Blue Shield plans on both new product development and medical cost reduction strategies.

Brandon earned his master's degree in Health Services Administration from the University of Michigan in Ann Arbor and a Bachelor of Business Management from the University of Iowa.

Dr. Caroline Carney - Chief Medical Officer at Magellan Healthcare

Dr. Caroline Carney joined Magellan Health in 2016, and serves as the senior vice president and national medical director. In this role, Carney is broadly responsible for supporting Magellan Healthcare in developing and supporting the clinical mission, vision, products and strategies – both behavioral and specialty – of the division.

Prior to her time at Magellan, Carney served as the chief medical officer of Tenet Health Plans, which served Medicare, Medicaid, commercial and exchange members in Arizona, Texas and Michigan. She also oversaw the daily medical operations of Phoenix Health Plans, Inc. serving Medicare, Medicaid and dual eligible members in Arizona in one of the state's largest integrated provider and hospital networks.

Previously, Carney served as the chief medical officer of MDWise, Inc., Indiana's largest notfor-profit HMO serving Medicaid and Exchange populations. She served as the medical director for the Indiana Office of Medicaid Policy and Planning, and helped launch the first Medicaid expansion products prior to the Affordable Care Act. She was an associate professor of internal medicine and psychiatry at Indiana University and the University of Iowa, where she specialized in providing integrated care for persons with active medical and behavioral conditions. Carney was a National Institutes of Health-funded researcher, and has won awards for teaching, research and clinical excellence.

Carney is a published author and co-author for over 100 peer and non-peer reviewed publications, including a wide array of topics from eating disorders, illness fears in the general population, receipt of clinical preventive medical services among psychiatric patients and post-traumatic stress disorder and physical health status among U.S. military personnel.

Carney earned her medical degree, as well as her master's degree in science, from the University of Iowa College of Medicine. She earned her bachelor's degree in general science from Loras College.

Dr. Karen DeSalvo - Former Assistant Secretary for Health & Human Services

Dr. Karen DeSalvo is a physician who has served as a leader through her 20-year career toward improving access to affordable, high quality care for all people with a focus on vulnerable populations through her direct care, medical education and administrative roles. Before coming to the Office of the National Coordinator for Health IT, she was the New Orleans Health Commissioner and New Orleans Mayor Mitchell Landrieu's Senior Health Policy Advisor. Before joining the Mayor's administration, Dr. DeSalvo was a professor of medicine and vice dean for community affairs and health policy at Tulane University School of Medicine. Following Hurricane Katrina, she created an innovative model of neighborhood-based primary care and mental health services for low-income, uninsured and other vulnerable individuals, and was the founder and president of 504HealthNet, a consortium of safety net providers in the New Orleans region.

Dr. DeSalvo served as president of the Louisiana Health Care Quality Forum and the National Association of Chiefs of General Internal Medicine. She has served on the boards of the National Association of County and City Health Officials and the Society of General Internal Medicine. Dr. DeSalvo was recognized as one of "Women of Excellence in Health Care" by the Louisiana Legislative Women's Caucus and named a "Children's Hero" by the Children's Bureau of New Orleans and Family Service of New Orleans named her as one of their Ten Outstanding Persons. In 2013, Governing Magazine named Dr. DeSalvo one of nine Public Officials of the Year. She earned her Medical Doctorate and Master's in Public Health from Tulane University, and Master's in Clinical Epidemiology from Harvard School of Public Health.

Dr. David Di Loreto, MD - Senior Vice President at GE Healthcare

Dr. DiLoreto, senior vice president at GE Healthcare Camden Group, is a physician-executive who is highly experienced in executive management, strategy and operations of healthcare delivery systems, and managed care companies. He has deep management expertise in community-based and academic health systems, large group medical practices, hospitals, and managed care organizations. His areas of specialty include clinical transformation, population health, business process improvement, leadership development, medical informatics, quality improvement and patient safety, and data management and analytics.

Prior to joining GE Healthcare Camden Group, Dr. DiLoreto was the chief clinical officer at a 12-hospital/100+ clinical location health system in the Midwest. He was accountable for key population health management strategies and the creation of accountable care organizations, clinically integrated networks, physician alignment strategies, and the integration of clinical services at all acute care facilities as well as post-acute care in 12 nursing homes, 4 assisted living centers, a long-term acute care facility, and a 4,000 provider clinically integrated network. He created the governance structure and operating model for the ACO/clinically integrated network and increased covered lives (risk-based and value-based contracts) from 50,000 to 250,000 during in a two-year period.

Dr. DiLoreto has also served as the founding executive of a 700-physician academic faculty practice, president of an IPA and oversaw medical management, medical affairs, hospitalist programs, employed physician practices, and health system quality and case management programs. Dr. DiLoreto most recently served as the chief executive officer of WellPledge, a health information technology company with a mobile platform that links health coaches, providers, and people with chronic diseases. Dr. DiLoreto is a board-certified ophthalmologist and a graduate of the University of Florida College of Medicine. He holds a master's degree in business administration Emory University, in Atlanta, Georgia. He earned his bachelor of science degree from Loyola University in New Orleans, Louisiana.

Charlie Falcone - CEO at Aperture Credentialing, LLC

Charlie is a senior healthcare executive with more than twenty years of experience in managed care, technology, healthcare delivery, pharmaceutical management, and medical device development and distribution. Charlie is CEO of Aperture Credentialing, LLC the largest and most reliable healthcare provider credentialing company in the nation.

Charlie is also a Managing Member of Leverage Health. In April, 2009 Charlie joined Leverage Health Solutions as a Partner. Leverage Health Solutions is a strategic and M&A advisory and business development firm that has clients across a broad range of sectors in the healthcare industry.

lan Gordon - Senior VP Health Insurance Operations at Regence (Cambia Health Solutions)

Ian is responsible for providing leadership and strategic direction for Regence Health Insurance Operations and Customer Experience, including efforts to improve service quality while achieving new levels of efficiency and effectiveness.

His areas of accountability include Claims, Member Services, Membership, Enrollment, Product Configuration, Digital Portals, Provider Operations, Cambia Project Management, Cambia Connect, Sales Operations and Operational Improvement and Quality functions.

lan came to Regence in 2014 from McKesson Health Solutions, where he served as senior vice president and general manager. Before that, he was CEO of Topaz Shared Services. He brings extensive experience to the leadership of operations, having served as chief operations officer at BlueCross and BlueShield of North Carolina, at Meritain Health where he was also president, and at Concentra.

Ian is active in the community, actively engaged with the Portland/Metro East chapter of Habitat for Humanity.

He has a bachelor's degree in accounting from Montclair State College, a Master of Business Administration from Rider University, and a master's degree in management information systems from the University of Virginia. He is also a certified public accountant.

Kariena Greiten - Chief Product Officer at Magellan Healthcare

In her role as senior vice president of product innovation for National Imaging Associates (NIA), Kariena Greiten has primary responsibility for assessing and designing new products, and leveraging the company's infrastructure to develop those products. Evidence of her innovative product leadership can be found in such outcome-oriented programs as CardiacConnectionsSM and OncologyConnectionsSM.

Kariena joined Magellan/NIA in 2004, as vice president of business planning and development. During her tenure, Kariena also has served in the corporate clinical area, where she has focused on clinical program management and evaluation.

Prior to joining Magellan/NIA, Kariena provided corporate oversight for various financial, strategic and operational aspects of CIGNA's specialty health care business. She also has served as chief financial officer of TYMetrix, an Internet-based processor of legal invoices, and as a corporate and investment banker with predecessors to Bank of America. In both of these companies she gained extensive experience assessing and responding to customer product needs.

Kariena earned a Master of Business Administration degree from the Wharton School of the University of Pennsylvania and a Bachelor of Arts degree from Colby College.

Hayley Hovious - President at Nashville Health Care Council

Hayley Hovious is the president of the Nashville Health Care Council. Prior to her appointment as president, Hovious served as the executive director of the Council Fellows, an initiative which seeks to engage, educate and inspire senior executives in health care.

Prior to joining the Council staff, Hovious served as trade director at the Tennessee Department of Economic and Community Development where she developed and managed the states export program.

She worked as a marketing manager for software startup Consensus Point, and before that as a brand manager at E.J. Gallo Winery in Modesto, Calif. A Nashville native, Hovious is a cum laude graduate of Smith College and has an M.B.A. from Vanderbilt University Owen Graduate School of Management.

She was appointed by the U.S. Secretary of Commerce to serve on the Tennessee District Export Council, is a member of the Downtown Nashville Rotary and is on the board of Sister Cities of Nashville.

Joseph Jennings - CEO at BeHealth Solutions, LLC

Joe has 29 years of executive experience in publishing and software. He was a founder, COO, and Director of ScholarOne, Inc., a leading provider of SaaS solutions for scholarly publishers, which was sold to Thomson Reuters (NYSE: TRI). He also founded Carden Jennings Publishing Co., Ltd. (CJP), where he has served as an executive and a member of its Board of Directors since its inception in 1985.

Keith Johnson - VP Corporate Provider Network Management at AmeriHealth Caritus

Managed Health Care professional with commercial and public-sector experience in both medical and behavioral health care. Experienced in operations, sales and development and network strategy and contracting.

Specialties: Network contracting, provider contract negotiation, government programs, relationship management, sales and development.

Kris Kemp - Member at Bass, Berry & Sims

Kris Kemp focuses on merger and acquisition transactions, securities offerings and representation of private equity and venture backed companies. In the last five years, Kris has been involved in more than \$3 billion worth of M&A transactions. His corporate practice also includes providing capital structure advice to emerging and growth companies.

Whether his clients are start-up endeavors or publicly traded companies, Kris helps each business find a unique and strategic path for growth and works to identify and resolve potential issues. His practice includes:

Mergers & Acquisitions – Advising both buyers and sellers of public and private companies on mergers, acquisitions and financings, including public and private debt and equity placements; representing executives in the negotiation of compensation arrangements related to strategic transactions.

Venture Capital – Representing investors and venture-backed companies in growth equity investments and other financing matters; counseling venture capital firms that invest in companies specializing in advanced manufacturing and materials, energy and environmentally clean technologies, and information and digital media technologies.

Prior to joining Bass, Berry & Sims, Kris was a shareholder and the head of the corporate practice group of Harwell Howard Hyne Gabbert & Manner, P.C.

Justin Lanning - CEO at 180 Health Partners

As President & CEO, of 180 Health Partners Justin is a social entrepreneur dedicated to making a meaningful impact on the national opioid crisis by building capacity in the market, increasing access to support services, improving outcomes and serving as an advocate to reduce the stigma associated with addiction and behavioral health.

180 Health Partners prevents babies from being born dependent on opioids, by helping moms achieve their substance-free goals. Providing personalized engagement and coordination of medical, addiction, behavioral, lifestyle and environmental resources, 180 Health Partners helps mothers build sustainable momentum in their lives. Named a 2017 Nashville Business Journal Most Promising Start-Up Health Care Hero, Justin is bringing private industry and community stakeholders together to collaboratively effect social change. 180 Health Partners is recognized by the Global Action Platform for bringing private capital to solve a complex epidemic.

Previously, Justin was Senior Vice President and Managing Director of the Xerox Services' (now Conduent) Healthcare Provider Analytics and Midas+ Solutions businesses where he applied his healthcare experience across the value chain. Justin also oversaw Xerox/Conduent's \$2.5 billion portfolio of healthcare quality and analytics businesses.

Justin joined Xerox/Conduent through the acquisition of Credence Health, where he was a co-founder, President and CEO. As a result of Justin's leadership Credence Health was one of the first companies in the nation focused on real-time predictive clinical analytics solutions and services. Before that, he was an executive for Healthways, a Nashville, Tennessee-based leader in the disease management and wellness industries for governments, health plans and employers.

Justin was also a Senior Consultant with Compuware. He began his career at SBC/AT&T.

Justin gained a B.S. in Engineering Physics from Missouri State University. He has received executive certifications from the Harvard University Public School of Health and from the Vanderbilt University Executive Development Institute.

He is a former board member of cardiac imagine analysis company Marrek in Salt Lake City, Utah. He is a past president of the Tennessee Health Information Management System Society (HIMSS).

Justin has served on multiple community boards and is an active member in several organizations, including: The Contributor, 180 Impact Fund, Alignment Nashville, Juvenile Diabetes Research Foundation (JDRF), Healthways Foundation, Leadership Health Care, The Phoenix Club of Nashville, 4Tucson and HIMSS.

Justin resides in Nashville, Tennessee with his wife of 15 years and two daughters.

Ben Leedle - President & CEO Blue Zones

Transformed Healthways from a small company focused on diabetes treatment to the number one independent population health management company in the world. Between 1995 and 2015, increased shareholder value by a multiple of 11, from \$1.67/share to \$20.62/share. Reinvented the company twice to meet new industry demands and create new markets. In each company reinvention, scaled massive growth by leveraging state-of-the-art technology infrastructure. Achieved these changes during a period that included the 2008 global recession and the 2010 introduction of the Affordable Care Act, a seriously disruptive force in the healthcare industry. Grew revenues ten-fold from \$75 million to about \$750 million between 2003 and 2015. Recognized for critical thinking, a strong work ethic and a high energy level. I am totally dedicated to the success of my organization, my customers and my colleagues. My focus is always on mission and building an organization for the long run.

Core Competencies:

- Unwavering Focus on Execution
- Incisive Vision
- Strong Business Acumen
- High Level Critical Thinking
- Creating Cultures of Purpose & Excellence
- Building Strong Customer & CEO Relationships
- Inspirational/Motivational Leadership
- Strategic Partnerships/Collaboration
- Attracting & Retaining Outstanding Executives
- Business Model Design & Transformation
- M&A & Post-M&A Integration
- Leveraging Technology for Growth

Christopher Link - Senior Consultant - Research at Change Healthcare

After graduating with my MBA in 2012 I have worked in both B2C and B2B market research. I believe that decision making requires a solid quantitative and qualitative foundation, and that without that foundation marketing strategies and tactics will lack the precision and effectiveness needed in today's marketplaces. I have also developed a deep interest and acumen for competitive intelligence. Currently I'm able to blend my work interests into a single focus through my strategy consulting work.

Beyond market research I have a background in human resources as well as psychology with a deep interest in cognitive color theory. In the marketing world, I've always had a passion for non-traditional, guerrilla and experiential marketing.

Henry Loubet - CEO at Bohemia Health

As CEO of Bohemia Health, Henry Loubet works with early-stage and established healthcare organizations including health plans, employee benefits consultants, health systems, physician groups, behavioral health/substance abuse organizations and private equity/venture capital firms to focus on overall strategy, innovation, business development, mergers & acquisitions and relationship building. Most recently, Henry served as Chief Executive Officer of Paladin Healthcare Alliance where he applied his national industry expertise to launch a comprehensive managed care platform, including a health insurance organization and affiliated physician alignment strategy.

Prior to his role at Paladin Healthcare Alliance, Henry was Chief Strategy Officer for the nation's top 20 Consultants, Brokers, and TPA. During his role at Keenan, he developed a PBM coalition with Express Scripts that now covers more than 400,000 members, led the Keenan TPA serving 75,000 members across multiple states, and established a direct-to-consumer based product in partnership with Covered California resulting in 11,000 individual and family members within the first year.

As former CEO of UnitedHealthcare's Western Region Henry was responsible for 1.6 million members across 10 western states. Prior, Henry was the Vice Chairman of Drug Emporium and DrugEmporium.com, a publicly traded pharmacy and Internet company, which was acquired by Rite Aid.

Henry holds a Bachelor of Science in Business Administration from Rider University, a Master of Science, Administration & Social Policy from University of Pittsburgh.

Richard Lungen - Managing Member at Leverage Health

Richard founded Leverage Health Solutions following 16 years of leadership experience within the managed care, life & health insurance and overall healthcare service industries, as a means to deliver best-practice solutions from leading service companies to healthcare payers. Since founding Leverage Health Solutions, the firm has experienced year after year growth in sales, referenceable clients and Portfolio Companies and has developed an expanded team of healthcare professionals.

Prior to founding Leverage Health Solutions in 2007, Richard was senior vice president of business development at HealthPlan Services, a leading business process outsourcing firm servicing health plans, associations and Taft Hartley plans, where he was responsible for record sales. Between 2001 and 2005, Richard held sales and business development leadership positions with MedAvant Healthcare Solutions (previously ProxyMed, PILL: NASDAQ). In this capacity, he was responsible for payer facing solutions related to preferred provider organization (PPO) access, PPO business process outsourcing (BPO), strategic relationships, and EDI clearinghouse services.

From 1998 to 2001, Richard was vice president of sales for PlanVista Solutions where he worked with the industry's premier payers and TPAs, and was responsible for top revenue production in each year. In 1993, Richard was an original employee at the launch of National Preferred Provider Network (NPPN), one of the nation's largest PPOs, and worked with them through 1998 when the company was sold to HealthPlan Services. At NPPN, Richard was responsible for virtually all original and subsequent large payer sales, strategies and many PPO relationships. Between 1992 and 1993, Richard was with Medical Administrators, a full-service insurance agency and TPA, which handled small group and individual insurance sales as well as Self-Insured employers.

Richard's tactical and leadership roles have allowed him to develop deep experience and tenured market knowledge related to healthcare payer sales and strategies, service vendors, PPOs, BPO and provider contracting. This knowledge and firsthand experience drives Leverage Health Solutions to provide healthcare payers with innovative solutions that optimize efficiencies and generate new revenue.

Hugh Lytle - Founder & CEO at Equality Health

Hugh Lytle is the Founder, Chairman, and Chief Executive Officer of Equality Health, LLC a population risk management company focused on improving care delivery for the underserved. Equality works with managed care plans, employers, and health systems to engage diverse members in a more meaningful and culturally significant way through customized, culturally-competent provider networks, mobile-based patient engagement platforms, and proprietary cultural care pathways, designed to improve chronic conditions that affect disparate populations.

A serial entrepreneur and self-described healthcare rebel, Mr. Lytle focuses on health service innovations that have a strong social mission and bring systemic change to the U.S. healthcare system.

Prior to founding Equality Health, Mr. Lytle co-founded Univita Health, a unique home-based care management business that improves the coordination and effectiveness of care delivered in home settings. For three and half years after founding Univita, Mr. Lytle led the company as President and Chief Executive Officer, building Univita into a national platform Independent Aging company serving over 6 Million commercially insured working-age, Medicare and Medicaid seniors and low-income beneficiaries.

Prior to creating Univita, Mr. Lytle was President and Co-Founder of Axia Health Management, LLC, the nation's leading population health management company whose pioneering efforts led to the development of the industry's first true single source provider of integrated preventive health and wellness benefits for Employers and Health Plans. Axia's flagship product, The Silver Sneakers Fitness Program is the nation's leading fitness program designed exclusively for active older adults, currently engaging more than 2 million seniors nationwide. Mr. Lytle brings more than 25 years of executive healthcare leadership experience to our nation's healthcare challenges. Prior to Axia/Healthways, Mr. Lytle held executive positions at CVS Health and Xerox Corporation.

Mr. Lytle earned an MBA from Butler University (1995) and a BA in Economics from the University of Indianapolis (1989). Mr. Lytle is a Principal with StarWest Ventures, a strategic healthcare advisory firm based in Scottsdale, Arizona. Mr. Lytle is a Guest-Lecturer at University of Arizona Eller School of Management. He is an Independent Board Director for Great Call, Inc. and sits on several healthcare Advisory Boards.

Tom McEnery - Executive VP & CMO at Change Healthcare

Mr. McEnery is EVP and Chief Marketing Officer of Change Healthcare after having initially joined the company in October 2014 with the same responsibilities. Formerly, Mr. McEnery was the Chief Marketing Officer of Optum (a part of UnitedHealth Group), the country's largest diversified health services business. Prior to joining UnitedHealth Group, Mr. McEnery was Managing Partner of Green Point Partners, and previously was Vice President, Global Marketing at Fair Isaac Corporation. Mr. McEnery also held a number of senior leadership positions at Fallon Worldwide and over the past 25 years has contributed to the success of businesses as diverse as Nikon, Fortune Brands, Weyerhaeuser, First Bank System (currently US Bank), General Mills, ConAgra, Ralston Purina, and Motorola.

A graduate of the University of Minnesota-Duluth, Mr. McEnery has also completed executive level coursework at Thunderbird, the Garvin School of International Management.

Jonathan Morphett - Managing Director at Avondale Partners

Jonathan serves as the Head of Investment Banking and has been a Managing Director with the group since 2004. Jonathan has over 25 years of investment banking experience, having completed over 100 M&A advisory, equity and debt transactions. Jonathan is a former Managing Director of Investment Banking at Morgan Stanley where he served in various positions for 14 years, primarily in New York and Sydney, Australia. Jonathan previously served as the Chief Financial Officer (CFO) of Austar United Communications Limited, Australia's second largest pay television provider. Jonathan is currently a Director for Centerstone Research Institute.

Jonathan received his MBA from the Tuck School of Business at Dartmouth and an LL.B. and BEc. from The University of Adelaide (Australia).

Torben Nielsen - VP of Innovation at Premera Blue Cross

Digital thought-leader with international expertise and diversified experience in high-tech, healthcare, and consumer goods industries. Worked for multi-national organizations Xerox

and LEGO, and co-founded and led start-up initiatives for second fastest-growing US digital health company in 2016, HealthSparq.

- Recognized as a visionary, results-oriented business executive with a proven trackrecord of increasing customer mindshare.
- Successfully defined and launched market-ready products and achieved triple-digit revenue growth through innovative and strategic business initiatives.
- Demonstrated a broad business background ranging from corporate and start-up environments to direct (B-C) and indirect consumer (B-B-C) channels.

John Poelman - Executive Director; Senior Director at Leavitt Partners

John Poelman is a senior director based in Salt Lake City. As a senior director, John informs clients on the shifting health care landscape with expertise in accountable care and in the implementation of the Affordable Care Act with the corresponding political dynamics.

John also serves as the executive director of the Accountable Care Learning Collaborative, an organization housed at Western Governors University with a mission to accelerate the accountable care movement and provide members with actionable intelligence on delivery system reform.

Previously to joining the firm, John served as a health policy analyst at the U.S. Department of Health and Human Services (HHS). John earned a master's degree in public health with an emphasis in health policy from George Washington University and a bachelor's degree from the University of Utah.

Dr. Richard Popiel - EVP & Corporate Chief Medical Officer at Cambia Health Solutions

Dr. Richard Popiel leads medical strategy for Cambia's regional health plans and provides executive leadership on care initiatives and cost management.

He came to Cambia Health Solutions from Horizon Healthcare Innovations, a Horizon Blue Cross Blue Shield of New Jersey company, where he was president and chief operating officer. Prior to that, he served as vice president/senior medical director for The Permanente Company.

Professional activities include chairing the National Council of Physician and Pharmacy Executives, a Blue Cross and Blue Shield Association council comprising chief medical and chief pharmacy officers, leading the Chief Medical Officer Leadership Group at America's Health Insurance Plans (AHIP) and serving on the AHIP board of directors.

His philanthropic activities include board membership for the George Washington University Alumni, where he has also been honored as an Outstanding Alumnus. Richard earned a B.S. in biology and his M.D. at The George Washington University in Washington, D.C. He also holds a Master of Business Administration from Northwestern University Kellogg School of Management. He is board-certified in internal medicine.

Rich Rakowski - Founder & CEO at Medically Home

Rich has relished the excitement, diversity and nourishment integrating learning secured from a 39-year career in engineering, strategy consulting and senior leadership roles in entrepreneurial start-ups, health care services companies, renewable energy, and resource recovery. His experience includes both public and private company leadership experience and he has been heavily-influenced by his personal family history. He is a frequent public speaker and a passionate advocate for the transformation of acute medical care into safer, more clinically-effective models.

Rich graduated from Lehman College in 1973 with a bachelor's degree in political science. It was at this time (in student government) that he discovered the power of advocacy as he successfully-led multiple positive social impact initiatives in the City of New York. After college, Rich served as a Rotary Foundation ambassador of good will in Germany, where he studied the Holocaust. That experience helped him better-understand the genesis of events from 1939-1945 and the implication of those times on how he wished to shape his life.

He began his formal career in Honeywell as a sales engineer, soon followed by operations consulting work with Fortune 100 clients in North America, South America, and Europe. In that role, he worked with over 150 manufacturing facilities in +40 industries, where he took-apart and redesigned large-scale production processes to improve quality, throughput, and costs. Learning from that experience became a platform for his later insights into healthcare delivery processes.

Rich founded and led New Paradigm Ventures (NPV), a business incubator in the health care and food industry market. A study conducted by his firm brought him to American Healthways and Blue Cross Blue shield of Minnesota as part of a merger between his firm and Healthways. During his tenure as President of Healthways, Healthways stock grew from \$18 to \$53 per share as the impact of his work began to shape the care support and population health sectors. His scaled experience with population health inspired him and passionately drew him into a focus on disruptive healthcare services models. Since Healthways, Rich and his partner Andy, founded Intersection Partners and in that role, launched a number of healthcare services businesses, including Clinically Home, the predecessor model of Medically Home.

Rich and his father were featured in the documentary film "Mr. Rakowski", which examines the effects of the Holocaust on his childhood and their relationship.

William Resnick - Chairman & CEO at EmpiRx Health

Bill Resnick is currently the Chairman and CEO of EmpiRx Health, a revolutionary Pharmacy Benefit Management company serving the pharmacy benefit needs of employers and Taft-Hartley funds throughout the United States. Prior to forming EmpiRx Health, Bill co-founded Solid Benefit Guidance in 2005. Solid Benefit Guidance is a national pharmacy and employee benefit consulting firm serving health plans, Fortune 500 clients and Taft-Hartley Funds. Bill sold Solid Benefit Guidance in June 2015 to Arthur J. Gallagher.

Prior to founding Solid Benefit Guidance, Bill held senior positions at several local and national health plans including General Manager for Medco Health Solutions, Vice President of National Account Sales and Account Management for Empire Blue Cross Blue Shield, and Senior Benefit Consultant for CODA/KVI.

Bill graduated from the State University of New York at Brockport in 1990 with a Bachelor of Science degree in business, with a concentration in marketing. He later went on to receive his MBA in HealthCare Administration in 1998 from Baruch/Mt. Sinai School of Medicine.

Julian Roberts – President & CEO at AAPPO, TPAAA, AAPAN and Executive Director at NASHO & NAVCP

Julian Roberts is the President and CEO of the American Association of Payers, Administrators and Networks (AAPAN), a national health industry association providing a unified, integrated voice for payers, TPAs, networks and care management in both commercial/government health and workers' compensation. Formed in 2012, AAPAN is the parent association for the American Association of Preferred Provider Organizations (AAPPO) and the Third-Party Administrators Association of America (TPAAA). In his role with AAPAN, he also serves as AAPPO's and TPAAA's President and CEO. Prior to stepping into these leadership roles, Roberts served for many years as Executive Vice President of Sales and Marketing for AAPAN and AAPPO.

Roberts also holds the position of Executive Director for both the National Association of Vision Care Plans and National Association of Specialty Health Organizations (NASHO). Roberts helped launch NASHO in January 2003 to advance and evolve specialty healthcare delivery in the United States. He is the only executive director the organization has ever had and successfully negotiated the merger of NAVCP with NASHO in 2011. NAVCP is a national vision care industry association that advocates for policies and legislation that increases consumer and employer access to affordable, quality eye care.

Justin Roth - Managing Director, Head of Investment Banking at Triple Tree

Justin Roth leads Investment Banking at TripleTree. Justin joined the firm as a Managing Director in 2012, serving clients across the healthcare services and technology markets and leading the firm's business development efforts. In addition to his M&A background, Justin

held a number of executive leadership positions in healthcare and brings strong industry and operating experience to his role at TripleTree.

Prior to joining TripleTree, Justin was Chief Financial Officer at Virtual Radiologic ("vRad"), a technology-enabled national radiology practice. Before vRad, Justin served as Chief Financial Officer and Chief Operating Officer for the Evercare business unit of UnitedHealth Group, where he was responsible for the strategic direction and financial and operational performance of this elder care and long-term care delivery business. In addition, he served as the Vice President of Finance for UnitedHealthcare's Medicare & Retirement (f.k.a. Ovations) business where he was responsible for financial planning and analysis as well as the company's merger and acquisition efforts. Justin arrived at UnitedHealth Group through its corporate development department, which is responsible for the Company's merger and acquisition activities. He began his career at Arthur Andersen.

Justin earned a Business Administration degree in Accounting from the University of Notre Dame.

Jim Sheninger - Chief Pharmacy Officer at GoodRx

Bio Not Available

Constance Sjoquist - Chief Content Officer at HLTH.co

Innovative, passionate, persistent executive, proven ability to visualize, strategize, execute, successful ideas, products, programs, services.

Track record of identifying, capitalizing, new market opportunities, drive strong contributions to revenues, bottom line profits, highly competitive environments.

Specialties: Health Care Private Exchanges, Cdh, Hsa, Wellness, Business Development, Sales, Marketing, Product Development, E-Commerce, B2b Solutions, Alliances, Partnering, Strategic Planning, Mergers, Acquisition

Blake Slansky - Divisional VP, Healthcare Segment Development & Integration at Walgreen Co.

Bio Not Available

James R Smith - Executive VP/Former President & COO at GE Healthcare Camden Group/Excellus

Mr. Smith is a seasoned consultant with over 25 years of experience as a health plan, hospital system, and large physician group executive. For the past 7 years He led the New York office of GEHC Camden Group and focused on strategic and implementation advisory services.

He has worked with world renown academic and research health care centers, large national and regional health systems, health plans, and self-funded payers to establish successful joint ventures and collaborations and advised on the development of strategies for provider responses as payers seek to implement new health plans and delivery networks for the public and private health exchanges.

He has extensive experience in managed care and provider network development and operations, health system and health plan strategic and business planning and development, medical group formation and operations, and direct contracting. He has assisted numerous organizations to design strategies, develop action plans, and implement efforts to move from volume-based to value-based care and implement new reimbursement methods and is a leading expert in developing CINs.

Prior to joining The Camden Group, Mr. Smith served as president of a large Blue Cross Blue Shield, leading this organization's growing membership to more than 700,000 commercial, Medicaid, and Medicare Advantage lives, with a \$2 billion annual healthcare budget. He also served as the founding president and chief executive officer at the Greater Rochester Independent Practice Association ("GRIPA"). In this position, he was responsible for the management of an operating structure to serve over 200,000 members and \$300 million in healthcare capitation and joint venture health plans premium and one of the first organizations recognized by the FTC as a clinically integrated network.

Specialties: Healthcare Consulting, Governance, Strategic Alliances, M&A, Network Development and Management,

Charles Stellar - President & CEO at Workgroup for Electronic Data Interchange

Charles Stellar boasts more than 35 years of accomplished expertise in health care, association management, and organizational leadership, with an in-depth focus on policy, communications, governance, advocacy, quality, compliance, and membership. He is expert at coordinating multi-faceted strategies that incorporate internal and external resources to ensure a successful positioning that achieves targeted goals and objectives.

Mr. Stellar recently joined WEDI, the Workgroup for Electronic Data Interchange, the leading authority on the use of Health IT to improve healthcare information exchange, as their interim President and CEO after his retirement as Executive Vice President of America's Health Insurance Plans (AHIP), the trade association representing the nation's health insurance industry, where he was the key liaison between AHIP's 350 plan and 400 affiliate members, ensuring consistency in messaging and shaping AHIP's brand and strategy.

At AHIP, Mr. Stellar's extensive portfolio included overseeing all aspects related to positioning the association and its diverse membership to a variety of national, state, and local audiences. He applied his in-depth knowledge of the health care industry and federal health programs to for-profit and not-for-profit health plans providing health insurance coverage, Medicare Advantage, Medicaid, and other products including Medigap, Dental, Long-Term Care, and Disability Insurance. Mr. Stellar earned bachelor degrees in health administration and business administration at the University of North Carolina.

Ferris Taylor - Consultant to Arches Healthplan & Office of the Chair at HCEG

Ferris W. Taylor, until recently was Chief Strategy and Chief Operating Officer at Arches Health Plan, a non-profit member-governed health insurance company providing health plan options to individuals and groups throughout Utah. Since the launch of the Affordable Care Act (ACA), Arches had welcomed over 80,000 Utahns as Members of its CO-OP and was committed to making health care better and more affordable. Unfortunately, Arches is one of the CO-OPs being shut down by the government. He is a consultant COO in wind down of the Arches operations.

Taylor also contributes time as the Office of the Chair of the Health Care Executive Group (HCEG), where he has been a board member for 14 years. HCEG is a national network of select healthcare executives and thought leaders, who navigate tactical and strategic healthcare issues and provide networking that promotes innovation and change via an open exchange of ideas, collaboration, and transformational dialogue.

Taylor brings more than 30 years of healthcare experience in technology and consulting services. His Arches' role included the vision of aligned members and providers around value through care delivery, payment reform, appropriate benefit design and fully-integrated state-of-the-art technology by transforming the nature of insurance payments and benefits to promote high quality, patient-centered and integrated care in an understandable, fair and affordable manner.

Prior Arches, Taylor founded and is now reengaged with Pragmatic Health Care Solutions, a health care strategy and market positioning firm. From 2003 to 2008, Taylor was VP of Strategic Marketing and Payer Market Strategy for Ingenix/Optum, the industry's largest health information technology company and part of UnitedHealth Group. Additionally, Taylor served 12 years as head of Marketing and Information Services for Harvard Community Health Plan, now HPHC, and 2 years as VP of Marketing and Planning for North Shore Medical Center, the six-community hospital part of Partners Healthcare that includes Mass General and Brigham and Women's Hospitals.

A graduate of Brigham Young University in Nuclear Physics with a minor in Spanish, Taylor holds an MBA with an emphasis in finance and quantitative economics. He is also a graduate of the GHAA/AHIP Executive Program in Managed Care from the University of Missouri.

Russ Thomas - CEO at Availity, LLC

Russ Thomas is the Chief Executive Officer of Availity. His vision helped to diversify Availity's solutions and grow its customer base, creating the foundation for the expansive Availity network that exists today.

Combined, the enterprise now delivers healthcare business solutions to a growing network that connects more than 1,000,000 physicians and allied care providers, 2,700 hospitals, and more than 600 technology partners with health plans nationwide. Under Thomas's leadership, Availity is leading the charge in provider engagement and empowering health care professionals to improve results.

Before joining Availity, Thomas was CEO of Gold Standard, a drug information database and clinical knowledge solution. Thomas grew the company from a small start-up to a multi-sector leader in the healthcare market before selling the business to Reed Elsevier in 2006. He remained with Reed Elsevier as a senior executive in their clinical information business until 2008. Thomas also serves on the Board of Directors of Connecture, Inc., (CNXR), a technology company that develops information systems to support purchasing insurance online.

Thomas is active in many industry and philanthropic organizations. He serves on the Board of Directors for eHealth Initiative, a Washington, D.C.-based non-profit organization that seeks to drive improvements in the quality, safety, and efficiency of healthcare through information technology. In 2015, he served as Chair of the United Way Northeast Florida Annual Campaign. Through the United Way, Availity developed a partnership with Ribault Middle School in the "Achievers for Life" dropout prevention program. He is a member of the Board of Trustees for Jacksonville University and was a founding board member and past chairman of Hillsborough Kids, Inc., which provides oversight and resources for more than 4,000 disadvantaged children in Hillsborough County, Florida. A licensed commercial pilot, Thomas was appointed to the Jacksonville Aviation Authority board of directors in 2015.

Thomas earned his Bachelor of Arts degree from Virginia Tech and his Juris Doctorate from the University of Virginia. He lives in Ponte Vedra, Florida with his wife Claudia and their two children. He is an avid cyclist.

Donato Tramuto - CEO at Tivity Health

As CEO of Tivity Health (formerly Healthways), Donato J. Tramuto brings more than 35 years of healthcare experience as a recognized innovator and industry leader, with a deep commitment to global healthcare access, a steadfast focus on patient outcomes and a keen understanding of digital engagement solutions.

Tramuto joined Healthways' board of directors in 2013 and became chairman in 2014. In 2008, he founded Physicians Interactive Holdings (now Aptus Health) a global provider of insight-driven digital engagement solutions for healthcare professionals and consumers, where he served as CEO and chairman.

In 2011, Tramuto founded Health eVillages, a non-profit organization which provides state-ofthe-art mobile health technology to medical professionals in the most challenging clinical environments. He is also the chairman and founder of the Tramuto Foundation, which helps individuals and organizations achieve their educational and healthcare goals.

Tramuto has been widely recognized for his professional achievements and his more than three-decade commitment to social change. In 2014, he was honored alongside Hillary Clinton, Robert DeNiro, and Tony Bennett, with the prestigious Robert F. Kennedy Ripple of Hope Award. In 2015, Tramuto was awarded an honorary doctorate of humane letters from the College of Fine Arts at the University of Massachusetts at Lowell.

Tramuto serves on several executive leadership boards, including the Boston University School of Public Health, the Livongo Health Foundation, the Brown University Healthcare Leadership Board, and the board of directors for Sharecare, Inc., and Safe Harbor Compliance and Clinical Development. In 2016, he was appointed to the board of Robert F. Kennedy Human Rights. He is chairman of the board of Robert F. Kennedy Center for Justice & Human Rights Europe.

Tramuto is the author of Life's Bulldozer Moments: How Adversity Leads to Success in Life and Business, a Hamilton Press publication.

David Vinson - CEO & Founding Director at DHX Group / Xcertia

David was an early pioneer in the digital health space, bringing together market innovators, curating apps and other digital assets, and driving adoption of transformative digital health strategies.

David is the Founder and Chairman of DHX Group, a nonprofit organization focused on the acceleration of digital health innovation. Most recently, DHX Group, along with the AMA, AHA, and HIMSS, launched Xcertia, a new multi-stakeholder collaboration dedicated to improving the quality, safety, and effectiveness of mobile health applications (apps).

David also currently serves as Founder and CEO of SocialWellth, a leading digital health curation services company that enables healthcare sponsors to prescribe curated digital health assets and deliver a human centered experience for consumers.

Prior to both DHX and SocialWellth, David held executive leadership positions including: Senior Vice President of the Payor Division at WebMD; Founder, President & CEO at Optate (acquired by WebMD); Co-Founder and Vice President at HealthMedia (acquired by Johnson & Johnson); Director at Blue Cross Blue Shield Michigan, and Senior Vice President at the University of Michigan Health System – MCARE. David has formed unique partnerships with key academic institutions that have dedicated considerable time and talent to the research, development, and testing of mHealth solutions. Through DHX and SocialWellth, David is helping to broaden the dialogue and research between market innovator beacons, centers of excellence and consumers, leading to an increase in effective development and adoption of next generation digital health strategies.

As a frequent speaker at industry forums and conferences for both healthcare and digital technologies, David is recognized as a well-respected transformational digital health strategist who provides passionate insights and a unique perspective on the convergence of mobile, social and micro insights to orchestrate consumer digital health experiences.

Paul Wallace - Managing Director at Heritage Group, LLC

Paul Wallace serves as Managing Director for Heritage Group. His prior experience includes more than 15 years in venture capital and private equity investing with firms such as GTCR, Lazard Asia, Gilbert Global, Petra Capital and SV Life Sciences.

He also spent 6 years leading corporate development for Healthways (NASDAQ: HWAY), during which time the company's revenue increased more than fivefold. He received his M.B.A. from Kellogg and his B.A. from the University of Richmond.

He is a native of Nashville, where he resides with his wife and three wild children.

Nichole (Nikki) White - VP Pharmacy Services at Medica (Ex-ExpressScripts)

Bio Not Available

Peter Wong - CEO at DNA & Associates

Bio Not Available

Gary Word - VP, Consumer Payments at Change Healthcare

Business product innovator building a US nationwide payment network of consumers, healthcare providers, health plan administrators and custodians of consumer funds. Specialties: business product innovator and market maker



Logistics

Location of the 2017 Annual Forum

The Thompson Hotel Nashville is located at 401 11th Avenue South, Nashville, TN 37203 615-262-6000

What Weather Should I Expect?

Nashville weather during the Annual Forum is predicted to be partly cloudy with highs in the upper 80's and nighttime lows in the mid 60's. And Nashville can get a bit sticky with high humidity so keep that in mind. Consider bringing a light jacket or sweater because we have two nighttime events planned.

What is the Suggested Attire for Each Event?

Sunday Night Rooftop Welcome Reception: Casual Monday-Tuesday Annual Forum Sessions: Business Monday Night ACME Meet & Greet Reception: Business Casual Tuesday Sponsor Dinner: Business Casual Tuesday Night at Sambuca: Casual

What Networking Opportunities Will There Be?

Besides the ongoing opportunities for interaction with other participants during the sessions and events throughout the forum, the following networking opportunities are planned:

Sunday Night: 6:30-8:30 - Thompson Hotel Rooftop Reception Monday Night: 7:00-9:00 - Sponsor Networking Reception at ACME Feed & Seed Tuesday Night: 7:30-9:00 – Dinner Keynote "Reengaging in Trust" Tuesday Night: 9:00-11:30 - Nashville Late Night Meet & Greet" at Sambuca Hosted (Sponsored by emids)

In addition, lunch will be served on Monday and Tuesday with breakfast served Tuesday and Wednesday

What Are My Transportation Options?

Ride-sharing (Uber, Lyft, etc.) pickup at the Nashville Airport is on level one, one floor below baggage claim. There are signs that will lead you to the pickup zone.

Once you arrive the Thompson Hotel most places are within walking distance. If you would like to travel outside of The Gulch area, there are plenty of Uber and taxi cab options available to you.

When Should I Plan to Arrive and Depart?

We hope your able to combine some pleasure with the business of transforming healthcare. Our Rooftop Welcome Reception takes place Sunday evening from 6:30 to 8:30. On Wednesday morning, a breakfast buffet will be served so be sure to stop by and take advantage of some last-minute networking.

What Kind of Sessions Can I Expect This Year?

We have some really great sessions planned. Speakers and panel participants have been working on these and we're excited about the information, ideas and opportunities that will be shared.

The final agenda and speaker roster is available here.

Who Will be Speaking?

You can learn more about the speakers and their backgrounds in the "Speaker and Panelist" section of this document.

Will There Be Wi-Fi?

Yes, complimentary Wi-Fi is provided in your rooms by the Thompson Hotel and our sponsor partner Softheon is providing Wi-Fi in our meeting space.

Who Can I Contact with Additional Questions?

Please contact Erin Branham, Manager of Conferences and Events, at <u>eb@hceg.org</u>



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TPRUM

More about the Healthcare Executive Group

The HealthCare Executive Group (HCEG) is a national network of executives representing the supply side of healthcare: health plans, health systems, provider organizations and other health industry participants coming together to continually learn, grow, share and reshape the industry. HCEG's members are executive leaders from some of the most dynamic health plans, health systems, and provider organizations in the United States.

The HealthCare Executive Group is supported by a select network of sponsor partners, industry advisers and alumni. A single membership fee covers all HCEG events and content including HCEG's Annual Forum, Executive Leadership Forums, a wide range of live and recorded education content and programming delivered via multiple channels, networking opportunities and other benefits of particular value to healthcare executives.

HCEG Member Value Built Upon Two Core Values

- 1. That healthcare executives trust their peers more than any other source when facing industry priorities, issues, and challenges; and
- 2. That, because those industry priorities, issues, and challenges evolve every year, our programs must allow our members to customize the dialogue as their operational and strategic priorities shift in response to market dynamics, new legislation and regulations.

How HCEG Provides Value to its Members?

- 1. Thought Leadership
 - HCEG Top 10 Priorities, Issues & Challenges
 - The Industry Pulse
- 2. Network Opportunities
 - Annual Forum
 - Executive Leadership Forum



- 3. Educational Content and Programming
 - Weekly Newsletters
 - Pre-recorded Webcasts and Podcasts
 - Virtual Panels and Tweetchats
 - Select Research Services
 - Blog Posts including LinkedIn and Facebook
 - Email Blasts and Micro-Blog Posts
 - Live Interactive Webinar

Why Join the Healthcare Executive Group?

 Discover exceptional education, exhibition and networking opportunities

Top 10 Healthcare Challenges

- Value-based Payments 1. Total Consumer Health Improving member's overall well-being – medical, social, financial, and environmental 2. Clinical and Data Analytics Leveraging big data with clinical evidence to segment populations, manage health and drive decisions 3. Cybersecurity Protecting the privacy and security of consumer information 4 5. Cost Transparency Growing legislation and consumer demand Harnessing Mobile Health Technology 6. Improving disease management, member engagement, and data collection/distribution Addressing Pharmacy Costs 7. Implementing strategies to address growth of pharma costs versus benefits to quality of care and total medical costs Care Redesign 8. Accessible Points of Care 9 ealth. retail clinics and micro-hospitals vs. large, integrated systems Next Generation ACOs 10 Additional programs in bundled payment, episodes of care-shared savings, and growing participant base
- 2. Get equipped with the resources and collaboration you need to address your priorities, issues and challenges
- 3. Be in the know about the hottest healthcare technologies and how you can use them
- 4. Learn what's working for others in the industry and how you can apply their solutions in your organization
- 5. Find creative answers to challenges including the latest technology innovations
- 6. Connect with and learn from colleagues, thought leaders and other industry experts
- 7. Develop life-long relationships that will serve you long into the future

Check out the 2017 Healthcare Executive Group Membership Overview <u>here.</u>