Presents:

The Eighth Annual
HEALTHCARE UNBOUND
Conference & Exhibition

Networks, Platforms & Applications for Technology-Enabled Participatory Medicine

Special Focus on Remote Monitoring, Home Telehealth, mHealth, eHealth and Social Media for Promoting Wellness, Managing Diseases & Facilitating Accountable Care

July 11-12, 2011
Manchester Grand Hyatt San Diego
San Diego, CA

This event builds on the strength of our seven previous highly successful Healthcare Unbound conferences. The Conference has become a great networking and educational event, attracting hundreds of high-level executives and clinicians from the across the US and abroad.

The 2011 Healthcare Unbound Conference website is:

Last year's conference brochure may be downloaded at:

TARGET AUDIENCE

- Telehealth, IT, medical device, eHealth, mHealth and social media companies
- Healthcare providers, including: hospitals, integrated delivery networks, accountable care organizations, medical groups, home care agencies, hospices, disease management/population health management companies, call centers, public health/preventive medicine companies and weight management companies
- Assisted living facilities, retirement communities and nursing homes
- Consumer technology companies, including: consumer electronics, telecom, wireless and communication technology companies as well as their partners and suppliers
- Pharmaceutical, medical device and diagnostics companies as well as contract research organizations
- Health Plans and Employers
- Also of interest to: home builders, financiers, security analysts, consultants, government officials
We project 200-300 attendees at this year’s Healthcare Unbound Conference.

**CONFERENCE THEME**

Innovative technologies are driving opportunities to serve health consumers in new ways and in new settings. In 2002, Forrester Research coined the term “Healthcare Unbound” to encompass the trends toward self-care, mobile care, and home care. More specifically, Forrester describes Healthcare Unbound as “technology in, on and around the body that frees care from formal institutions.”

In addition to dramatically changing traditional health care delivery, Healthcare Unbound attracts a range of companies that previously have not been deeply involved in healthcare -- consumer electronics, telecom, gaming, fitness, and information technology companies to name a few.

**Examples of technologies driving Healthcare Unbound include:**

- **Consumer Technologies**
  - Smart houses
  - Personal communications devices -- PDAs, cell phones, etc.
  - Broadband -- cable, DSL, satellite
  - Digital cameras, video
  - Wireless
  - Social media
  - Wearable computing
  - Robotics

- **Healthcare Technologies**
  - Remote Monitoring
  - Personal Health Records/Electronic Health Records/Personal Health Information Records
  - ePrescribing
  - eDisease Management
  - eClinical Trials
  - Telehealth/telemedicine
  - Alerts & reminders
  - Traditional medical devices (becoming smaller, internet enabled, implantable)
  - Call Centers, customer relationship management technologies
  - Internet/web technologies -- interactive web sites, doctor/patient secure messaging, virtual physician visits, etc.

**Topics to be covered in this year’s agenda include:**

- Implications of healthcare reform, including accountable care organizations and meaningful use, for the Healthcare Unbound marketplace
- Reimbursement and regulatory developments
- Emerging business models
- Health consumer engagement and behavior change through the use of technology
- Technology-enabled participatory medicine
- Leveraging Healthcare Unbound technologies to promote wellness and manage diseases
- The use of entertainment and gaming in the promotion of fitness and wellness
- Health plan perspectives on Healthcare Unbound
- Employer perspectives on Healthcare Unbound
- Healthcare Unbound applications for Baby Boomers and seniors
- Technologies that facilitate the role of caregivers for the elderly
- The evolving role of Healthcare Unbound technologies in promoting personalized medicine
Emerging wireless applications and business models
The role of Healthcare Unbound technologies in the patient centered medical home
Using Healthcare Unbound technologies to prevent hospital readmissions
Innovative use of Healthcare Unbound technologies in home care
Personal health information records: emerging opportunities and implications
Opportunities and challenges in creating linkages between electronic health records and consumer-facing technologies such as remote monitoring and social media
Using principles of customer experience excellence to guide Healthcare Unbound product, service and program design
Behavioral economics and decision-making research: implications for Healthcare Unbound product, service and program design
Financier perspectives
Proving the ROI of Healthcare Unbound products and services
International perspectives on Healthcare Unbound

For information on speaking, sponsorship/exhibition opportunities and/or registration, please contact: Satish Kavirajan, Managing Director, TCBI:
Ph: 310-265-2570  Email: sk@tcbi.org

SUPPORTING ORGANIZATIONS
California Association for Health Services at Home (CAHSAH)
California Telemedicine and eHealth Center (CTEC)
Clinical Groupware Collaborative
Continua Health Alliance
LeadingAge (formerly AAHSA)
LeadingAge Center for Aging Services Technologies (CAST)
National Association for Home Care and Hospice (NAHC) / Home Care Technology Association of America (HCTAA)
San Diego Venture Group (SDVG)
Visiting Nurse Associations of America (VNAA)
Additional Supporting Organizations To Be Announced

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Federal Telemedicine News
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Please note: this is a preliminary agenda. The final brochure for the conference will be posted on our website within two weeks.

DAY ONE, MONDAY, JULY 11, 2011

7:00 REGISTRATION / SPONSOR / EXHIBITOR SHOWCASE & CONTINENTAL BREAKFAST SPONSORED BY: AT&T

8:00 CHAIRPERSONS’ OPENING REMARKS
Vince Kuraitis, JD, MBA, Principal, Better Health Technologies, LLC
Cindy Campbell, Associate Director Operational Consulting, Fazzi Associates, Inc.

8:30 KEYNOTE ADDRESS THE CONFLUENCE OF HEALTHCARE UNBOUND AND HEALTH IT: NURTURING A NEW BUSINESS ECOSYSTEM
Healthcare Unbound technologies and business models are changing profoundly:
From: Stand-alone, niche applications
To: Networked platforms and applications built on modular architectures

This presentation will discuss the changes occurring and the implications:

- “Closed” vs. “walled garden” vs. “open” – pros and cons
- Market evolution
- Is HITECH working?
- Healthcare Unbound technologies as applications on EHR technology platforms
- What will it take for HU technologies and business models to make markets “tip”?

Vince Kuraitis JD, MBA is Principal and founder of Better Health Technologies, LLC and author of the e-CareManagement blog (http://e-CareManagement.com). BHT consults to companies in developing strategy, partnerships and business models for chronic disease management and e-Health applications delivered in homes, workplaces, and communities; most recently, Vince has been assisting companies with strategies enabled by HITECH and health reform -- new business models built on networks, platforms & applications. BHT’s clients are both established organizations and early-stage companies, including: Intel Digital Health Group, Philips Electronics, Amedisys, Joslin Diabetes Center, Samsung Electronics, Siemens Medical Solutions, Medtronic, and many others. Vince brings 25 years of health care experience in multiple roles: President, VP Corporate Development, VP Operations, management consultant, and marketing executive. His consulting and work projects span 100+ different health care organizations, including hospitals, physician groups, medical devices, pharma, health plans, disease management, e-Health, IT, and others.

Vince Kuraitis, JD, MBA, Principal, Better Health Technologies, LLC

9:00 KEYNOTE ADDRESS: YOU’RE COSTING US! SHIFTING VIEWS ON DECISION-MAKING AND PERSONAL CHOICES, AND WHAT THEY MEAN FOR CONSUMER HEALTH TECHNOLOGY

Research on the twin topics of decision-making and self-control is popping up everywhere. Noodling about nudges, incentives, penalties and choice architectures has always featured subtle tensions – on the one side, individual freedom to choose and, on the other, governmental efforts to motivate the public and payer efforts to curb the “moral hazard” – the subsidizing of unhealthy behavior – implicit in all schemes of insurance.

Now things are getting serious. With the rising clamor for a clamp-down on the costs of Medicare, Medicaid, and other economic transfer programs, the politics -- and economics -- of personal choice are about to heat up. Wrapped around this highly-charged topic is a silver lining of sorts: Gadgets, gizmos, content and communities that help people stay healthy are going to be in demand. Critical Mass Consulting’s Mike Barrett, long-time IT analyst and former state senator from Cambridge, MA, offers a provocative analysis of the coming boom in Healthcare Unbound technology.

Mike is Managing Partner of Critical Mass Consulting, a healthcare and life sciences consultancy focused on information technology use by physicians, consumers, hospitals, health plans, and medical device and pharmaceutical firms. He’s a graduate of Harvard College magna cum laude and Northeastern University School of Law. An attorney, he served four elected terms in the Massachusetts State Senate from Cambridge, chairing the Committee on Health Care. Mike left office in 1995 to serve as CEO and General Counsel to the Visiting Nurse Association of New England, a group of Medicare-certified home health agencies organized to negotiate with health plans as a provider network. Three years later, he assumed the same positions for a group of eye and ear surgeons intent on forming an IPA. Mike departed both groups in 1999 to become the senior analyst on Forrester Research’s healthcare IT team. There he originated the company’s Healthcare Unbound reports, concerned with technologies that enable patients to manage their chronic conditions outside the bounds of formal institutions. In 2003 Mike established Critical Mass. He’s written extensively on public policy, having published articles in the Boston Globe, Newsday and the Atlantic Monthly.

Michael J. Barrett, Managing Partner, Critical Mass Consulting
KEYNOTE ADDRESS: THE EVOLUTION OF MHEALTH – WHAT IT TAKES TO TRANSITION FROM ‘PILOTS’ TO ‘IMPLEMENTATION’

What then does it take to evolve mHealth from the current “experimentation” phase into wide-spread adoption? Despite the significant investments in mHealth and the rise in application development, mHealth continues to hover at the edges of full-scale implementation and many enterprises never go beyond testing the waters with a series of “pilots.” We are now in the full hype cycle of mHealth. At last count, there are over 10,000 applications in medical, health and wellness across the various operating systems. And recent estimates of the size of the mHealth market suggest a steady-state industry that could top $4B to $7B in the US. Eleanor Chye, executive director of mHealth and Pharma at AT&T, shares her perspectives of the missing market elements (and no, it’s not just reimbursement reform), and draws specifically from AT&T experiences in scaling up mHealth solutions for large-scale enterprise commercial adoption.

Eleanor Chye leads AT&T’s product development team to conceptualize and bring to market our suite of enterprise offerings in the mobility healthcare and pharmaceutical space. Her mHealth and Pharma team are exploring ways in which to leverage cellular and wifi technologies with existing clinical and technological solutions to reduce the cost of care and improve healthcare outcomes. Key areas of focus will result in solutions targeted across all healthcare stakeholders, including patients, employers, federal and state agencies, physicians, hospitals, health insurance companies and government payors, pharmaceuticals, retail pharmacies. Prior to joining AT&T, Eleanor was Associate Principal at McKinsey, a leading strategic consulting company with global reach. During her nine years at McKinsey, Eleanor led the healthcare operations knowledge team, and has served a broad array of healthcare clients, including insurance payors, pharmaceuticals, healthcare technology vendors and others, in the areas of healthcare strategy, healthcare reform and policy, business development, operations and healthcare informatics (EMRs, HIEs, and the use of “real world data”).

Eleanor Chye, Executive Director, AT&T Mobility Product, mHealth and Pharma, AT&T

10:00 SPONSOR / EXHIBITOR SHOWCASE & REFRESHMENTS SPONSORED BY: AT&T

10:30 KEYNOTE ADDRESS: HEALTHCARE REFORM AS AN ACCELERATOR – EMERGING MODELS IN AGING SERVICES

Health care reform is rapidly accelerating changes in aging services that were already underway driven by consumer demands, capital and payment mechanisms, workforce, technology, quality, transparency and accountability. As non-profit providers look to the future they will face increased pressure to rapidly and dramatically adapt to changes in the marketplace.

These changes are driving innovation and the emergence of a number of new care/ business models. In his keynote address, Zachary Sikes will share data and examples to illustrate the emergence of these models. His presentation will highlight key obstacles, constraints and challenges these emerging models currently face, as well as enabling technologies that facilitate them. His keynote will describe CAST’s continuing work to document and accelerate the adoption of successful models by non-profit aging service providers.

Zachary Sikes most recently worked as a consultant to Pfizer, Inc., where he was responsible for the company's Medical Society eCooperative. He also managed many of Pfizer's external partner relations, including CAST. Prior to joining Pfizer, Zachary worked as a vice president for Partners Consulting Services and has experience with a number of consulting firms, including IBM, Arthur D. Little and The IT Group. He also served as captain in the United States Air Force. Zachary will be responsible for cultivating corporate America's interest in the mission of long-term care, which affects virtually all American families. He will identify, recommend and cultivate opportunities for AAHSA and its members to form partnerships within the corporate community and oversee this community's role in several
AAHSA’s programs, including group purchasing and shared services, sponsorships, fundraising and AAHSA’s Center for Aging Services Technologies (CAST). Sikes received a bachelor’s degree from the U.S. Military Academy and a master’s degree in national security studies with a focus on technology policy and competitive intelligence from Georgetown University.

Zachary Sikes, Senior Vice President, LeadingAge

11:00 KEYNOTE ADDRESS: THE UNDISCOVERED COUNTRY: DEFINING NEXT GEN WELLNESS

New technologies ranging from mHealth applications to social media tools are redefining the possibilities for healthcare decision making. However, there’s a tremendous gulf between potential benefit and actual outcomes. The health and wellness highway is littered with cutting edge technologies that ultimately failed to drive any meaningful improvement in consumer health behavior. Simply providing more information or repurposed content in a slicker technology package is unlikely to result in measurable change.

Integrating engaging technology with leading edge behavior change principles focused on how individuals actually make choices may enable better decision making and long-term improvements in diet and lifestyle. From behavioral economics to social networking to game theory a number of “best practices” are emerging driven by sometimes counter-intuitive but ultimately successful designs for helping changes in diet and lifestyle “stick”.

Bryce Williams, MS, recently joined Blue Shield of California as Director of Wellness responsible for thought leadership and strategic innovation focused on improving the health and wellbeing of Blue Shield’s roughly 5,000 employees and 3.5 million members. Prior to joining Blue Shield of California, Bryce led health and wellness initiatives for Blue Cross Blue Shield of Massachusetts during the state’s implementation of universal coverage and healthcare reform initiatives. Over the course of his career, Bryce has held a number of executive leadership positions at academic research, start-up and not-for-profit organizations. Bryce did his graduate work at the University of Wisconsin-La Crosse and received undergraduate degrees from Southern Methodist University.

Bryce Williams, Director, Wellvolution, Blue Shield of California

11:30 KEYNOTE ADDRESS: EMOTIONAL AUTOMATION

We’re at an historic moment in healthcare. Before our eyes, it is being remade. We’re unlearning things we thought we knew and gaining new knowledge and new insights. Are we wired to form emotional attachments and ascribe human qualities to things around us? As technology comes to healthcare, might this phenomenon provide the basis for new ways of achieving cost savings, increased quality and improved access to care? Are we witnessing the birth of a new discipline? Come join Partners HealthCare's Joe Ternullo for a closer examination of this topic. Learn who the pioneers are in the field. Explore what this phenomenon might mean for healthcare and for the economy. And, on the voyage ahead, consider what might this might mean for you.

Joseph Ternullo, JD, MPH, is Director of International Corporate Relations for Partners HealthCare and Associate Director of Partners’ Center for Connected Health, where he focuses on policy and enterprise-wide educational and advisory relationships. Joe is the originator of Partners' annual Connected Health Symposium and continues to supervise the event. He is a founder of the Continua Health Alliance and served as its initial vice president for over three years. He has served on the MGH and BWH Institutional Review Boards, the American Telemedicine Association's policy committee and the Chronic Care Workgroup of the American Health Information Community, the advisory body chartered to make recommendations to the U.S. Dept. of Health and Human Services on development and adoption of health information technology. Joe serves on the board of directors of Massachusetts Health Quality Partners and the executive committee of the Harvard Club of the North Shore. He teaches healthcare informatics law at Northeastern University and holds degrees from BC, BU and Harvard.
Joseph Ternullo, JD, MPH, Director, International Corporate Relations, Partners HealthCare & Associate Director, Center for Connected Health

12:00 SPONSOR / EXHIBITOR SHOWCASE & LUNCHEON

1:15 KEYNOTE ADDRESS: REMOTE MONITORING TO IMPROVE HOSPITAL READMISSION RATES
Imagine a "smart cane" that provides feedback to help senior citizens avoid falls. Or a nano-sized heart monitor that sends reports to the doctor via cell phone. These and other next-generation health care technologies are the work of UCLA Professor Majid Sarrafzadeh. As debate rages over the cost and effectiveness of America’s health care system, Professor Sarrafzadeh works with practicing physicians to develop easily understood remote monitoring solutions that save patients’ time, money and lives. Live demonstrations of health-improving remote monitoring solutions will be presented along with other applications.

Majid Sarrafzadeh received his PhD in 1987 from the University of Illinois at Urbana-Champaign in Electrical and Computer Engineering. He joined Northwestern University as an Assistant Professor in 1987. In 2000, he joined the Computer Science Department at University of California at Los Angeles (UCLA). He is currently a co-founder and co-director of the UCLA Wireless Health Institute (WHI). His recent research interests lie in the area of Embedded and Reconfigurable Computing with emphasis on healthcare. Dr. Sarrafzadeh is a Fellow of IEEE. He has served on the technical program committee of numerous conferences and been a general chair of many of them. Professor Sarrafzadeh has published approximately 370 papers, co-authored 5 books, and is a named inventor on 10 US patents. He recently co-founded Medisens and Bruin Biometrics, both in the area of Wireless Health.

Majid Sarrafzadeh, PhD, Professor, Computer Science, UCLA & Co-Director, UCLA Wireless Health Institute

1:45 KEYNOTE ADDRESS: WHAT HCPS NEED TO KNOW BEFORE CHOOSING PHONE-BASED MOBILE HEALTH SOLUTIONS FOR OUTPATIENT MANAGEMENT
Technology is great, but what if consumers don’t use it? David Inns, CEO of GreatCall, shares lessons learned about using the cell phone as a gateway for connecting with patients and delivering services to them as consumers. The cell phone is a great tool to connect people. When you add apps that engage the consumer, provide advice from a health care professional, or remind them to adhere to prescribed treatment schedule, there are factors in the design, delivery and support of the app that drive success. Learn from GreatCall’s experience.

David is currently President and CEO of GreatCall Inc., the creator of the Jitterbug cell phone and a leader in wireless services focused on helping customers stay connected, safe and healthy; David also sits on the Board of Directors. Working with founders Arlene Harris and Marty Cooper, David designed and launched the GreatCall service in November 2006—a service that has gone through extraordinary growth and has been recognized by a long list of awards for its innovations in mHealth and in serving Older Americans. David has 25 years of telecom management experience. Before joining GreatCall, David was Vice President, Consumer Markets for Bell Mobility in Canada where he ran the $1.6 billion consumer market P&L. He was also Vice President, Consumer Marketing for Bell Canada where he ran the $4 billion wireline P&L. David was a Partner at DiamondCluster International in the Chicago and San Francisco offices. David holds a B.Sc. in Electrical Engineering from the University of Western Ontario. He has an MBA from the J.L. Kellogg Graduate School of Management at Northwestern University and is also a licensed member of the Association of Professional Engineers.

David Inns, CEO, GreatCall, Inc. (Creator of Jitterbug)
2:15  **KEYNOTE ADDRESS: CARING FOR AGING POPULATIONS WITH CHRONIC CONDITIONS**
- The aging population and the impact of chronic conditions on that population:
- Drivers of change for this population
- New technology-enabled care models like telehealth and their implications
- A perspective on what care will look like in the future

Dr. Yan Chow is Director of the Kaiser Permanente Information Technology Innovation & Advanced Technology Group, which identifies, assesses and makes recommendations on new and emerging clinical information technologies that will impact health care in the next two to five years. Besides a successful clinical practice at Kaiser Permanente for over two decades, Dr. Chow has been involved in regional IT management for over 15 years where he oversaw a number of systems, including enterprise e-mail, reference databases and the primary operational system used by 58,000 providers in 60 dispersed sites to manage schedules, labs, radiology results, medications and immunizations. With a background in medicine, business, and technology, Dr. Chow has also founded and advised a number of startups in the Internet, health care technology, storage, and database spaces.

Yan Chow, MD, MBA, Director of Innovation and Advanced Technology, Kaiser Permanente

2:45  **KEYNOTE ADDRESS: CONTINUA HEALTH ALLIANCE: THE FUTURE OF PERSONAL CONNECTED HEALTH IS HERE!**
With skyrocketing healthcare costs in the United States coupled with an accelerating prevalence of chronic diseases and conditions, the management of wellness on a personal, business and health professional level has never been more important. Join Continua Board President and Chairman Clint McClellan for an exciting session on the telehealth industry’s leading trade organization.

Continua is an international not-for-profit industry alliance dedicated to establishing a system of interoperable personal connected health solutions that fosters independence and empowers people and organizations to better manage health and wellness. The Alliance is enabling a marketplace of interoperable devices that enable better care, empower consumers and connect healthcare providers to their patients.

But interop isn’t just for technical advantages. Continua technology allows successful products and services to help drive economies of scale, provide greater selection in a variety of patient and user settings, and helps utilize IHE health records to future-proof health systems.

Clint McClellan is currently the senior director of Business Development for QUALCOMM Incorporated. McClellan's current responsibilities include establishing opportunities in the Wireless Health market. McClellan joined QUALCOMM in December of 1997 as director of strategic marketing. McClellan brings a wealth of wireless industry analysis experience to QUALCOMM. Since joining QUALCOMM, McClellan has served in business development roles and established the Global Industry Analyst program and Global Market Intelligence program at QUALCOMM. Currently McClellan serves on the board of the Foundation for the Children of the Californias which supports Hospital Infantil, a pediatric Hospital, in Tijuana, Mexico and CommNexus. Prior to joining the Company, McClellan served as a senior analyst for Gartner Group/Dataquest's Telecommunications Group in its personal communications wireless program. McClellan holds a Bachelor's of Science degree in Economics from the University of California, Berkeley.

Clint McClellan, Senior Director, Business Development, QUALCOMM & President, Continua Health Alliance

3:15  **REFORMING RELATIONSHIPS: THE REAL VALUE OF PERSONAL HEALTH TECHNOLOGIES**
The world is all a-Twitter about mHealth, iHealth, eHealth and various technologies-of-the-moment that grab headlines and perhaps even share of wallet for a quarter or two. And there is no doubt that a wide range of personal health technologies in our lives will increasingly become a part of our care, from early detection to diagnosis to social support to coaching. But we can’t lose sight of the end goal of these technological innovations: to improve the quality of life of the people who use them. If health reform, in all its forms and flavors around the planet, is to be successful, then it must incorporate these technologies to help us form new and better *relationships* between patients, clinicians, caregivers, and community stakeholders. Eric Dishman will describe examples of how personal health technologies can begin to help us reimagine our relationships, responsibilities, and social covenant for healthcare.

*Eric Dishman is an Intel Fellow and director of Health Innovation in the Intel Architecture Group, responsible for driving Intel's cross-business strategy, research, and policy initiatives for healthcare information technologies. He founded Intel’s first Health Research & Innovation Lab in 1999 and was a founding member of Intel’s Digital Health Group in 2005, which recently formed a joint venture called “Care Innovations—An Intel GE Company” ([www.careinnovations.com](http://www.careinnovations.com)) where Eric is also the Director of Health Policy. Eric is widely recognized as a global leader in healthcare innovation with specific expertise in home and community-based technologies and services for chronic disease management and independent living. The Wall Street Journal named him one of "12 People Who Are Changing Your Retirement." He co-founded some of the world’s largest research and policy organizations devoted to advancing the cause of independent living, including the Technology Research for Independent Living (TRIL) Centre, the Center for Aging Services Technologies (CAST), the Everyday Technologies for Alzheimer’s Care (ETAC) program, and the Oregon Center for Aging & Technology (ORCATECH). Eric has received numerous awards for his work in helping to shape the future of health care.*

**Eric Dishman, Director of Health Policy, Intel-GE Care Innovations, Intel Fellow & Global Director of Health Innovation, Intel Corporation**

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**3:45 SPONSOR / EXHIBITOR SHOWCASE & REFRESHMENTS SPONSORED BY: AT&T**

*Choose From Track A, B or C*

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**TRACK A – Aging Services – Co-sponsored by LeadingAge & LeadingAge CAST**

**4:15A PANEL DISCUSSION: HEALTH REFORM AND THE ROLE OF LONG-TERM AND POST-ACUTE CARE (LTPAC) PROVIDERS AND TECHNOLOGY IN THE NEW CARE MODELS**

Health reform introduces new patient-centered, pay for performance and integrated care delivery models that aim to improve the quality of care and population health while lowering the cost of care. Under these models, LTPAC providers will key partners to acute care providers in post-operative rehabilitation, patients’ stabilization post-hospitalization, managing chronic conditions and holistic care coordination and support. Several technologies will be essential to the success of these partnerships. This session will highlight the efforts of pioneering long-term and post acute care providers in preparation for the implementation of health reform in the following areas:

- Managing chronic conditions, at risk patients and transitions of care through telehealth
- Care coordination through electronic health records and health information exchange, and portals
- Exploring new partnering opportunities in the new health care reform paradigm—hospitals are looking for partners to assist with re-hospitalization rates.

**Moderator:**
4:15B PANEL DISCUSSION: WHAT'S NEXT FOR WIRELESS HEALTH?
Wireless technology has a number of distinctive characteristics that make it an attractive platform for delivering healthcare anytime, anyplace. Wireless networks, ranging from body area to wide area networks, are increasingly ubiquitous. Devices with embedded wireless connectivity are increasingly being used to manage personal health and well-being, giving rise to applications like chronic care management, fitness tracking, medication compliance, and diagnostic monitoring. Though a number of real barriers remain to be overcome, perhaps no technology has a greater potential for encouraging healthy living and supporting good health practices. This panel will explore how people are benefiting from the new care practices and solutions enabled by wireless technology and device platforms. The panel will also discuss innovations in wireless health, emerging business models and trends as well as key considerations in implementing these technologies to improve health outcomes.

Moderator:
Rachel Maguire, Research Director, Health Horizons Program, Institute for the Future

Panelists:
Eleanor Chye, Executive Director, AT&T Mobility Product, mHealth and Pharma, AT&T
Mark Trigsted, Executive Vice President, Healthcare, Diversinet
David Inns, CEO, GreatCall, Inc. (Creator of Jitterbug)
Steve Wheeler, Director - Business Development, Ideal Life, Inc.
Brigitte Piniewski, MD, Chief Medical Officer, PeaceHealth Laboratories & Vice Chair, Market Adoption Working Group, Continua Health Alliance
Halle Tecco, Founder & Managing Director, Rock Health

6:00 DAY ONE CONCLUDES; SPONSOR/EXHIBITOR SHOWCASE & NETWORKING RECEPTION
According to a recent Towers Watson survey, fewer employees are “taking action to improve their health” in 2010 than in 2008 (59% compared to 65%) which is a surprise given the rise in chronic conditions. Further findings are that “27% would not participate in wellness efforts without incentives”.

What are employers and health plans doing to successfully motivate consumers to participate in their wellness initiatives?

During this panel you will learn:

- How virtual coaches are getting personal and gaining results
- Ways social graphs are being used to map and leverage influencers
- How reward strategies and behavioral economics are being utilized to produce behavior change

Moderator:
Sherri Dorfman, MBA, CEO & Consumer EHealth Specialist, Stepping Stone Partners
Blog: www.ConsumerEHealthEngagement.com

Panelists:
Lisa McGill, Vice President, Worldwide Human Resources, Brocade Communications Systems (Self Insured Employer)
Bryce Williams, Director, Wellvolution, Blue Shield of California
Eric Zimmerman, Chief Marketing Officer, RedBrick Health

5:15C SOCIAL MEDIA FOR MANAGING HEALTH
Social media technologies provide tremendous opportunities for individuals to take a more active role in their healthcare decisions and to facilitate self or family-care while at home or mobile. But, these technologies are also being applied by formal institutions to assist their patients with care transition processes -- to improve quality and the patient’s experience and reduce readmissions for those at high risk and cost. This session will provide an overview of social media in clinical and operational settings and explore some of the current applications. It will also include a discussion of possibilities for the future related to prevention, remote monitoring, communication, access and support.
Christina Beach Thielst, FACHE, Healthcare Administrator and Consultant
Author of Social Media in Healthcare: Connect, Communicate, Collaborate

6:00 DAY ONE CONCLUDES; SPONSOR/EXHIBITOR SHOWCASE & NETWORKING RECEPTION
8:15A PANEL DISCUSSION: MEDICATION ADHERENCE TECHNOLOGIES AND STRATEGIES FOR SENIORS
Medication non-adherence is prevalent particularly among seniors with multiple chronic conditions and complex medication regimens. New technologies are providing a broad range of functions aimed at improving medication non-adherence, from reminders to monitored medication dispensers are gaining grounds among seniors, care providers and family caregivers. The session presents examples of these technologies and how aging services providers are using these technologies in different care settings. In this session, attendees will:
- Learn about advanced medication management technologies that aim to improve medication adherence and patient outcomes
- Hear how new and evolving services models are facilitating the adoption of these technologies
- Hear the results of pilot evaluations of these technologies

Moderator:
Majd Alwan, PhD, Vice President, LeadingAge Center For Aging Services Technologies (CAST)
Panelists:
Madeline Pantalone, VP of Strategy and Business Development, GreatCall, Inc. (Creator of Jitterbug)
Mark Francis, Senior Business Development Manager, Intel New Business Initiative Group
Stephen Axelrod, Chairman and CEO, TabSafe Medical Services Inc.

10:00 SPONSOR / EXHIBITOR SHOWCASE & REFRESHMENTS

10:30A PANEL DISCUSSION: LONG-TERM AND POST-ACUTE CARE PROVIDERS AND PARTICIPATION IN HEALTH INFORMATION EXCHANGE
Interoperable Electronic Health Records (EHRs) that facilitate the exchanging of health information between acute and long-term and post-acute care providers (LTPAC) is key to improving quality of care, improving outcomes, eliminating unnecessary re-hospitalizations and reducing cost. This session will explore a few case studies from long-term and post-acute care providers who implemented EHRs and are exchanging health information with other providers.
- Learn about efforts of LTPAC providers in implementing EHRs
- Hear what LTPAC providers are doing to facilitate the electronic exchange of health information
- Learn about the benefits of health information exchange to providers and the patients they serve

Moderator:
Majd Alwan, PhD, Vice President, LeadingAge Center For Aging Services Technologies (CAST)
Panelists:
Peter Kress, CIO, ACTS Retirement Communities
Additional panelists to be announced

12:00A TECHNOLOGIES FOR PEOPLE WITH MULTIPLE CHRONIC CONDITIONS
Having multiple chronic conditions is increasingly common in the adult population, and is the norm amongst the elderly. Which technologies are purposefully designed to support the needs of people with multiple chronic conditions? What distinguishes these technologies from those focused on single-conditions? And how effective are they?
Rajiv Mehta, President, Bhageera Consulting & Co-Developer of Tonic, the self care assistant app

12:30A IT AIN'T DOG FOOD IF THE DOG DON'T EAT IT
There has been an explosion of new engagement technologies, approaches to personalization of communication, onsite interventions, and integration of financial structures that generate significant population behavior change. The goal is to build personalized segments of ONE, for effective intervention. A key element is to know the person; building psycho-demographic profiles layered over traditional health segmentation. This session explores the range of the newest tools, technologies, and multi-model communications strategies that can be applied to health engagement in clinical, consumer, or employer environments. Based on these tools, I provide scenarios of how they could be integrated into comprehensive solutions integrating face-to-face, print, telephonic, web, social media, and mobile technologies with incentive and tailoring capabilities.

Neal Sofian, Director Member Engagement, Premera Blue Cross

1:00 CONFERENCE CONCLUDES; Luncheon for Attendees of Optional Post-Conference Workshops

 TRACK B

8:15B PANEL DISCUSSION: GAMES TO PROMOTE HEALTH
While the traditional healthcare industry tackles the world of “sick care” there is a growing market for ways to be Thinking Differently About Healthcare® to encourage, educate, and expand the world of healthcare prevention, wellness, and healthy lifestyles. To make this new world of health care happen will require a melding of the worlds of consumer entertainment with the worlds of healthcare education. The perfect intersect of these two worlds is with online and gaming technologies. They combine “fun with healthcare education and consumer engagement” which is what is required to really ensure consumer empowerment and engagement with their healthcare.

This panel includes three leading experts in various aspects of the growing world of healthcare gaming technologies to encourage and promote health and fitness. This panel will present their latest learnings about how digital games are promoting better health education and healthier behaviors for both children and adults. Each panel member will present their respective expert experiences in the world of healthcare gaming technology and insights as to where the future is headed in this exiting world of healthcare gaming.

Moderator:
Teri Louden, CEO, The Louden Network
Panelists:
Douglas Goldstein, eFuturist & President, iConecto
Ernie Medina, Jr., DrPH, Preventive Care Specialist, Beaver Medical Group & CEO, MedPlay Technologies
Tim Jones, CEO, Health Nuts Media

9:15B PANEL DISCUSSION: FINANCIER PERSPECTIVES
Leading investors discuss the opportunities, challenges and critical success factors for startups and more established companies in the connected health space. Topics to be covered include investor perspectives on mHealth, eHealth, social media and remote monitoring.

Moderator:
Jay Srini, MS, MBA, FHIMSS, Chief Strategist, SCS Ventures
Panelists:
Tom Rodgers, Partner, Advanced Technology Ventures (ATV)
Bijan Salehizadeh, MD, General Partner, Highland Capital Partners
Marty Felsenthal, Partner, HLM Venture Partners

10:00 SPONSOR / EXHIBITOR SHOWCASE & REFRESHMENTS
10:30B UTILIZING REMOTE MONITORING PATIENT-DATA FOR ANALYTICS AND DECISION MAKING BY HEALTHCARE PROFESSIONALS

Economist Robert Litan estimates the use of home telehealth can bring about $197 billion net savings to the health care system over the next 25 years. Remote Patient Monitoring widens the availability of timely, actionable, individualized health data and assists healthcare professionals in their analysis and decision-making process. Information is communicated in real time or through a store and forward process providing results to healthcare professionals who can use the latest recorded information to assess each patient’s health status, modify the patient’s care plan accordingly and drive disease management activities. Both providers and payers are reporting significant cost savings within their telehealth programs as well as a positive impact on wellness. However the integration of patient data within existing Health IT infrastructures is proving to be a challenge. Data sets are large, often of low quality and current solutions are immature / not open. During this talk we will examine a number of success stories and also review the main challenges that are hampering the effective analysis of patient telehealth data. We will also share insight gained from our experience in the field on the key lessons learned on how to overcome existing gaps in capability.

Proteus Duxbury, PA Consulting Group

11:00B PANEL DISCUSSION: CURRENT REGULATORY ISSUES AND PREDICTIONS

As medical device technology for Healthcare Unbound has advanced, a number of market trends have highlighted areas in the FDA’s domain where industry needs are not well matched by regulatory processes. These processes are in difficult to map to the latest technology, in flux, or just plain not well understood. The recent FDA announcement of MDDS, a new class of medical device is just one such example. Specific gaps and issue areas for the FDA Regulation of consumer health, IT, EMRs, and mobile devices will presented, along with an overview of various initiatives underway intended to help mitigate this situation.

Moderator:
Michael Robkin, Principal, Anakena Solutions

Panelists:
Bradley M. Thompson, Esq., Member of the Firm, Epstein Becker & Green
Tim Gee, Principal, Medical Connectivity Consulting

12:00B THE CHALLENGE AND PROMISE OF THIRD PARTY REIMBURSEMENT FOR TECHNOLOGY-ENABLED PARTICIPATORY MEDICINE

Today’s and tomorrow’s technologies offer exciting opportunity for higher quality, more cost effective, patient care. In reaction to this promise, there is significant evidence-based research and demonstration work underway, much of it financed at the federal level. The Patient Protection and Affordable Care Act (Health Care Reform) created some new organizations and concepts (such as Accountable Care Organizations and the Medical Home) that are expected to add flexibility and coordination to the delivery of care. Additionally, many wish to shift patients out of nursing homes and to manage them in a high quality way, in their homes.

This promise and excitement has not yet led to widespread coverage of technology-enabled participatory medicine. Providers of technology-enabled participatory medicine face challenges to being covered and reimbursed by third party payers, such as Medicare, Medicaid, and private insurance. Two cornerstone payer structures that have posed particular difficulty are that coverage is founded on diagnosing and treating illness, and that coverage is expanded via an evidence-based process. Coverage of preventive services is by exception, typically after a particularly rigorous evidence-based process.

This session outlines key elements of the current mismatch between payer structures developed in the 1960s and the promise of technology-enabled participatory medicine. The session orients the healthcare unbound provider to the current language and policies of third
party payers, and to the need for an evidence-based approach to demonstrating better patient care. It is likely, in the intermediate term, that comparative cost effectiveness research that is currently underway will reshape how payers approach the integration of healthcare unbound technologies. The session will allot time for an exchange of ideas about how entrepreneurs can collaborate to speed this reshaping.

Barbara Santry, Senior Consultant, Quorum Consulting

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**TRACK C**

**8:15C** ACO and PCMH - TWO SIDES OF THE SAME COIN: CONNECTED HEALTHCARE TO SUPPORT ACCOUNTABILITY
The patient-centered medical home (PCMH) is an approach that evolved from the understanding that a well-organized, proactive clinical team working in a tandem with well-informed patients is better able to address their preventive and disease management needs in a guideline-concordant manner. The Accountable Care Organization is a broader system of care that is based on a strong revitalized and contemporary Primary Care base (PCMH), that works in tandem across the system to address the same goals as the individual PCMH practices, albeit on a larger and more complex scale.

These two approaches are in many ways two different representations of accountable care and represent a fundamental shift from episodic acute care models and are increasingly an integral part of health reform efforts supported on a federal level.

Foundational to the success of both models is their information infrastructure. The goal of this session is to elucidate (1) PCMH and ACO as Evolving Models of Healthcare Delivery; (2) Health Information Technology Applications to Support the PCMH; (3) Current Challenges in the HIT Landscape of PCMH and ACO and (4) Future HIT Landscape of PCMH.

David I. Nace MD, VP, Medical Director, McKesson Corporation & Board Member & Vice Chairman, Patient-Centered Primary Care Collaborative (PCPCC)

**9:00C** CASE STUDY: USING AN INNOVATIVE TELEHEALTH SYSTEM TO IMPROVE HEALTH OUTCOMES
Bosch Healthcare has partnered with early and successful adopters of the telehealth technology over a decade. Center for Medicare and Medicaid Services (CMS) is one of them. This case study, part of the CMS demonstration pilots, showcases how a well-designed telehealth program enabled by an innovative and clinically focused technology can produce great outcome for a large and geographically distributed patient population suffering from one or more chronic disease conditions.

Rajib Ghosh, MS, MBA, Senior Product Strategy Manager, Robert Bosch Healthcare
Lori Smet MN RN CCM, Case Manager Coordinator, Wenatchee Valley Medical Center

**9:30C** CASE STUDY: PROMOTING HEALTH & WELLNESS THROUGH THE USE OF A SECURE MOBILE PLATFORM
Diversinet is successfully linking patients, physicians and clinical workers using secure mobile technology powered by the Diversinet MobiSecure platform. Find out how key customers such as the US Army, Mihealth and others are gaining efficiencies and fostering personalized care while improving health and wellness.

MobiSecure is:
• Providing a secure, HIPAA compliant communication and messaging environment allowing Case Workers to effectively manage returning US Army Wounded Warriors suffering from mTBI (Mild Traumatic Brain Injuries)
• Improving patient health – a result of better compliance from better-informed patients taking medications as prescribed and following treatment plans
• Reducing physician and case worker workloads and decreasing unnecessary phone communications and missed appointments
• Enabling patients to enter, retrieve and update consolidated medical records for themselves and relatives conveniently, using their Web-connected computers and mobile devices.

Mark Trigsted, Executive Vice President, Healthcare, Diversinet

10:00 SPONSOR/EXHIBITOR SHOWCASE & REFRESHMENTS

10:30C CASE STUDY: SAN DIEGO BEACON COMMUNITY
The Department of Health and Human Services has awarded San Diego one of 17 Beacon grants to lead the nation in the use of health information technology (HIT) to improve health care across our region. The San Diego Beacon project is focusing on four clinical goals:

• Reducing 30-day inpatient readmissions across the community
• Reducing the time to intervention for heart attack patients from field to hospital
• Increasing childhood immunizations rates and reporting
• Reducing repeat radiology tests and radiation exposure within 60 days

The San Diego Beacon HIE will also harness the San Diego wireless community by allowing links into the HIE for new business opportunities in the community such as mHealth. Both care providers and patients will have greater empowerment of their healthcare.

James Killeen MD, Associate Clinical Professor of Medicine, UC San Diego Medical Center

11:00C PANEL DISCUSSION: HOME TELEHEALTH & ACCOUNTABLE CARE
The Affordable Care Act is creating an environment where hospitals and Accountable Care Organizations will have strong financial incentives to reduce avoidable readmissions. Effective clinical management of persons with chronic conditions, already an important role of post acute providers, is poised to become the differentiator that will define a home health provider’s value to an ACO. This panel of industry experts will discuss how post acute care providers have been successfully demonstrating the effectiveness of telehealth systems. Juxtaposing research studies with real-world experience, the panel will discuss the compelling reasons why integrating technology into clinical practice is key to competing on the basis of cost and outcomes for a limited number of seats at the ACO table.

Moderator:
Cindy Campbell, Associate Director Operational Consulting, Fazzi Associates, Inc.
Panelists:
Laurie Neander, Director, At Home Care Inc.
Tim Rowan, Editor, Home Care Technology Report
Rajib Ghosh, MS, MBA, Senior Product Strategy Manager, Robert Bosch Healthcare

12:00C PANEL DISCUSSION: CONNECTED HEALTH, ACCOUNTABLE CARE, MEANINGFUL USE & THE PATIENT CENTERED MEDICAL HOME - CURRENT STATE AND FUTURE DIRECTION
• What are some of the key provisions of Meaningful Use that relate to the use of connected health?
• What are some of the challenges (focus, technologies, reimbursement, etc.) and potential solutions for connected health technologies to achieve Meaningful Use?
How will accountable care organizations and patient centered medical homes change the marketplace for connected health products and services?

How do connected health strategies inter-relate and support efforts to establish successful Accountable Care Organizations?

How will technologies and relationships between key stakeholders in healthcare need to evolve over the next few years to enable optimal accountable care?

Moderator:
Christine Martin, MBA, PMP, Executive Director, California Telemedicine & eHealth Center (CTEC)

Panelists:
Gordon Norman, MD, MBA, EVP & Chief Innovation Officer, Alere
Christina Beach Thielst, FACHE, Healthcare Administrator and Consultant
Joseph Ternullo, JD, MPH, Director, International Corporate Relations, Partners
HealthCare & Associate Director, Center for Connected Health

1:00 CONFERENCE CONCLUDES; Luncheon for Attendees of Optional Post-Conference Workshops

OPTIONAL POST-CONFERENCE WORKSHOP ONE

CONSUMER ENGAGEMENT 3.0

Workshop Hours: 2:00 to 6:00 pm

“Believing the key to 21st century healthcare is thinking about our patients when they’re not in our presence and using technology to fulfill the requirements of excellent care.”
James L. Holly, MD, CEO, Southeast Texas Medical Associates

Engaging consumers through the mobile new media they use every day are key elements of success for Accountable Care Organizations and Meaningful Use. Now is the time to meet people where they are – in social networks, games, music, entertainment and life as they address their day to day needs. This can be done by applying the power of New Media connected to our care teams to positively impact our lives and communities. This workshop will explore Consumer Engagement 3.0 which is a high touch, high tech connection with people enable supported self care. Consumer Engagement 3.0 is the integration of……

• **Mobile**…*Everyone is connected* through Internet enabled *mobile devices.*
• **Social Media**…*Connected, real-time social* experiences from Facebook and Twitter to SharePoint, along with their *apps and compelling game experiences* (e.g. Farmville) deliver the place to hang out, play, or do collaborative work. *So let use the same tools for health!*  
• **Gamification**…*The process of turning work into play is Gamification.* Gamification takes what is considered a “have to” and turns it into a fun “get to” experience that builds healthier behaviors and skills in a more effective and engaging approach than other learning methods.
• **Analytics & Change Science** … Applying the latest data analytics along with insights and the research findings on the power of social media, coaching and gaming to stimulate and support healthy behaviors.

Now is the time to harness the power of these dynamic forces for lower costs, improve quality and enhanced health status.

Workshop Chairperson:
Douglas Goldstein, eFuturist & President, iConecto
As an eFuturist, Douglas Goldstein delivers the latest intelligence and insights on how emerging technology and entertainment can improve our lives. Douglas is a leading expert in improving health and performance through mobile, social media, gamification, analytics and behavioral change science. As a consultant and author, Douglas Goldstein guides organizations in dynamic change that improves productivity and performance. As a speaker, he catalyzes insights and motivates participants to use ‘i-Leadership’ and ‘Innovate Now’ to create a better future today. Douglas is the CEO of iConecto, Inc., which is a leader in Health® Everywhere solutions.

Workshop Instructors:
Ernie Medina, Jr., DrPH, Preventive Care Specialist, Beaver Medical Group; CEO, MedPlay Technologies
Brigitte Piniewski, MD, Chief Medical Officer, PeaceHealth Laboratories & Vice Chair, Market Adoption Working Group, Continua Health Alliance
Neal Sofian, Director Member Engagement, Premera Blue Cross

OPTIONAL POST-CONFERENCE WORKSHOP TWO

CREATING DISRUPTIVE TECHNOLOGIES FOR HEALTHCARE

Workshop Hours: 2:00 to 6:00 pm

The global healthcare market is experiencing a shift in which a new cost driven paradigm of "best value" challenges the incumbent "best possible" care model. Driven by concerns about healthcare's expense, legislation and reimbursement models will reward those technologies that give the same performance at a lower cost. So how do you harness the opportunities made available as this shift occurs? In this workshop, led by the design firm LUNAR, we will discuss how disruptive healthcare innovation can develop in line with the current changing business models of healthcare.

We will examine common patterns in successful medical disruptive technologies with an emphasis on the design process. Participants will learn key aspects of the Stanford University Biodesign process for Medtech, including how to identify the right clinical need, develop a sound business case, and have the wherewithal to create appropriate solutions. Taking it one step further, we will add a human focus to the Biodesign process, integrating current thinking on user-centered design, and develop a tool kit for understanding patients and providing effective motivations for compliance.

Tying it all together, we will lead a group innovation exercise to apply the above tools to create disruptive alternatives to existing costly, low-compliance solutions.

Headquartered in San Francisco, LUNAR is a 26 year old global creative agency that designs products that matter for the world’s leading brands. Our clients include Oral-B, HP, Apple, Siemens, SanDisk, Palm, Intel and dozens of Silicon Valley startups. LUNAR’s team of 50 designers and engineers come from a variety of backgrounds to form an interdisciplinary creative team that focuses on bringing beauty, ingenuity and charisma to products and customer experiences. The team applies this creative approach to client opportunities in lifestyle, consumer electronics and life science industries.

Differentiation in any category depends on creating a point of view. Too many products today copy the elements of other successful products. But disruptive innovations substantially breach an existing structure, based on norms that no longer hold true, and deliver same or equivalent value with lower cost. At LUNAR we have helped clients understand the market and define the opportunity space for such a product. LUNAR designed the PROVENT Sleep Apnea Treatment for Ventus Medical, which uses the body’s own breathing to create positive airway pressure, eliminating the need for often-ineffective surgery or the discomfort due to the cumbersome tubing, mask and machine of
CPAP (continuous positive airway pressure) therapy. For Intel Health, LUNAR designed the Intel Reader, a revolutionary portable device for people with reading-based learning disabilities or visual problems such as blindness or low vision. LUNAR created the Reader from scratch, combining a set of existing technologies (digital photography, OCR processing and text to speech devices) into a portable device, which is truly the first of its kind.

Workshop Instructors:
Rajiv Mehta, President, Bhageera Consulting
Krista Bangsund, Interaction Designer, LUNAR
Matt Durack, Engineering Program Manager, biotech emphasis, LUNAR
Robert Howard, VP Engineering, LUNAR
Laurie Vertelney, Director of User Experience, LUNAR

OPTIONAL POST-CONFERENCE WORKSHOP THREE

DEVELOPING A REGULATORY STRATEGY FOR YOUR HEALTHCARE UNBOUND PRODUCT

Workshop Hours: 2:00 to 6:00 pm

Regulatory uncertainty is a fact of life when developing Healthcare Unbound types of products. Regulatory uncertainty translates to business risk: risks in delays in time to market and development costs, and risks of incremental regulatory compliance costs and potentially even responding to enforcement actions. Whether you plan to be regulated or want to avoid regulation at all costs, a strategy is required to achieve your goals.

This workshop takes you through a process to manage regulatory risk in both the product development and go to market phases of business development. In this workshop you will learn the following:

- The legal definition of a medical device and what factors contribute to the potential classification of your product as a regulated medical device
- How being regulated as a medical device manufacturer can impact your business, and how to minimize that impact
- How to take advantage of the potential advantages of being regulated
- The impact regulatory considerations can have on current or anticipated marketing claims and intended use
- How to keep your product from being regulated as a medical device if you determine your best course is to remain unregulated

The workshop will be based case studies, and based on participation, using workshop participants’ products. The workshop may also use case studies from current events, such as AirStrip Technologies, Mobile MIM, Mobisante MobiUS, and others. The case studies will look at device classifications, business and market strategic impacts, competitive impact, product claims and intended use.

At the end of this workshop you will be able to create a regulatory strategy for your Healthcare Unbound product and company. You will understand exactly what makes your product a regulated medical device or not, and what is required to maintain that classification over time. The workshop will close with a description of how to create a high level plan to implement your regulatory strategy, including objectives and milestones.

Workshop Instructor:
Tim Gee, Principal, Medical Connectivity Consulting
Tim Gee is Principal and founder of Medical Connectivity Consulting, specializing in workflow automation through the integration of medical devices with information systems, and enabling technologies. Tim has 25 years of experience with expertise in wireless medical devices, converged medical device/enterprise networks, requirements elicitation, regulatory strategy, connectivity, interoperability, diagnostic and point of care workflows, and patient flow optimization. Tim has served providers and vendors, including: Abbott Point of Care, Ascom, Awarepoint, Baxter Healthcare, Biotronik, Capsule, Cardinal Health, Ekahau, Emergin, GE Healthcare, Hill-Rom, Intel Digital Health, Providence Health, Robert Wood Johnson University Hospital, Spectrum Health, Welch Allyn and others. He is currently an advisor to two startups. Tim speaks frequently at industry conferences and corporate events, national sales meetings and user group meetings. He is on the editorial advisory board of a number of magazines, and publishes the blog Medical Connectivity (www.medicalconnectivity.com), and also participates in industry initiatives.