

Electronic Healthcare Delivery: The Future is Near

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Presentation Goals

- Discuss the effects of major federal legislation on evolving issues related to the healthcare system and healthcare providers
- Understand the escalating use and role of social media in the healthcare industry
- Develop strategies to minimize potential medical litigation and compliance risks when using social media in the healthcare arena
- Understand the current status and risks of Telemedicine and emerging healthcare technologies
- Understand the future and implications of healthcare delivery in the electronic and internet ages

Overview

- Background ➔ Driving Change
- Social Media
- Telemedicine
- The Convergence
- Summary & Conclusions



4

BACKGROUND

5

Health Care Reform

- Health Care Reform Goals
 - Improve Access
 - Universal Coverage
 - Increase quality reporting to include outcomes
 - Increase integration of care through partnerships of physician networks and hospitals
 - Cost control and cost reduction



Former President Obama Signs PPACA March 23, 2010

www.hhs.gov/ohrt/officeofhealthcarereform.pdf

6

From Fee-Based to Quality-Based

- **Fee-for-service** → **Value-based/Quality-based reimbursement system**
 - Reward doctors and hospitals for improving quality of care
 - Lower demand for inpatient hospital services, greater demand for outpatient services
 - Increased number of insured patients
 - Improving patient experience key to preserving reimbursement
 - Public outcomes reports = hospital competition on outcomes and total value
 - Clinically **Integrated Networks and Population Health** Initiatives

Health Affairs October 11, 2012

7

Health Care Reform II



Former President Obama Signs MACRA
April 16, 2015

8

Quality Payment Program (QPP)

- Rulemaking enacted by CMS under MACRA
- MACRA repealed the Sustainable Growth Rate (SGR) formula
- Streamlines multiple quality reporting programs into the new
 - Physician Quality Reporting Program (PQRS)
 - Value Based Modifier (VBM)
 - Medicare Electronic Health Records (EHR) Incentive Program
- Provides **incentive payments** for participation in Alternative Payment Models (**APMs**)

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APM/Quality-Payment-Program-MACRA-NPM-060815.pdf>

9

MACRA

Pub.L. No. 114-10

- Medicare Access and CHIP Reauthorization Act of 2015 (MACRA)
- Bipartisan support → signed into law April 16, 2015
- Encourages adoption of Alternative Payment Models (APMs)
 - Retains Fee-for-Service Model participation
- Telehealth: Section 106(c)
 - Requires General Accounting Office (GAO) to draft 2 reports & submit to Congress within 2 years of MACRA's enactment

<https://www.congress.gov/114th-congress/house-08/2015>

10

Health Care Reform



???

11

SOCIAL MEDIA

12

Background

- Social Media
 - Market & brand services, manage public relations, communicate during public health crisis
- “E-patients”
 - Patients who use the Internet as a health resource to learn about their own diseases, seek out treatment centers, and provide other patients with medical assistance and support
 - 42% have used social media to access consumer reviews on health topics
 - 25% have posted their views of healthcare experience
 - 20% have joined on-line healthcare “communities”

www.med.umich.edu/jrnc/curriculum/overhead/MHA_Webinar_Slides_-_Social_Media_and_Health_Care.pdf
 http://peh.health.umich.edu/healthcare/2012/07/18/health-care-social-media-report.pdf
 Merchant RM, et al. N Engl J Med 2011;365:289-293

13

Background

- 3,351 out of 3,371 (99.4%) of U.S. hospitals identified use of some variety of social media
- On-line communities
 - Medically-oriented site allowing patients to share stories and seek emotional support and clinical knowledge
- On-line educational sites
- Doctor-to-doctor networks
- Many others...

Mosk H, et al. Am J Gastroenterol 2014;109:1128-1132
 www.healthcarebusiness.com/blog/hospital-marketing/hospital-use-social-media-new.html

14

Background

- Sites frequently used by medical professionals
 - LinkedIn
 - Facebook
 - Twitter
 - Yelp
 - YouTube
 - MySpace
 - Flickr
 - Google Plus
 - Vimeo
 - Instagram
- Thousands of social media websites exist



www.med.umich.edu/jrnc/curriculum/overhead/MHA_Webinar_Slides_-_Social_Media_and_Health_Care.pdf

15

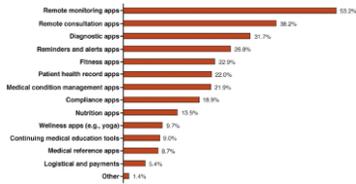
Background

- **Digital Health Movement**
 - mHealth → Mobile Health
 - Electronic health record (EHR) portals
 - Social media
 - Smartphone applications
 - Wearable biosensors
- **Goals:**
 - Monitor patients remotely
 - Improve face-to-face care
 - Drive clinical decisions
 - Offer value to health-care organizations, their patients, & their staff

Singel B. Am J Gastroenterol 2016;111:624-630.

16

Telehealth Remote Patient Monitoring 5 Year mHealth App Growth Potential



Rao MS, Atreja A. Clin Gastroenterol Hepatol 2016;14:1697-1705.

17

LAWS, REGULATIONS, & RISKS

18

Laws & Regulations

- Federal legislation
- Medical malpractice
- Professional ethics
- Employment issues



19

Laws & Regulations

- **Federal Legislation**
 - Health Insurance Portability & Accountability Act (HIPAA)
 - Most apparent issue regarding social media in health care
 - Protects information healthcare providers put into patient's medical records
 - Protects conversations about patient care and treatment
 - Standardized electronic processing of PHI
 - Privacy Rule
 - Security Rule
 - DHHS Office of Civil Rights enforces compliance with both rules

www.hhs.gov

20

Laws & Regulations

- **Federal Legislation**
 - HIPAA violations via social media
 - **Do not disclose:**
 - Names, geographic subdivisions smaller than a state, date of birth, date of death, social security numbers, telephone numbers, e-mail addresses
 - Health Information Technology for Economic & Clinical Health Act (HITECH)
 - Created uniform standards for electronic transmission of clinical data
 - Imposes rigid violation & reporting requirements for HIPAA breaches/violations

www.hhs.gov/office/primary/health-administration-and-enforcement/office/health-enforcement.html

21

Laws & Regulations

HIPAA

- **Violations via social media → varied & rampant**
 - University Medical Center case
 - Governor Barbour of Mississippi tweets about Legislature recognizing fiscal situation
 - Employee Carter tweets Governor should schedule his routine appointments during the week when UMC is open instead of paying overtime to 15-20 staff on a weekend
 - **ISSUE:** PHI breach v. exercise of right to free speech
 - **OUTCOME:** Employee Carter resigns
 - Innovis Health case (Fargo, SD)
 - Nurses post shift change updates to co-workers on personal Facebook pages
 - Patient names not posted but enough patient specifics identifies patients
 - PHI breach

www.morenews.com/news/11713800/vernon-said-if-a-phd-after-reading-tweet-to-governor-barbour
http://journal.ajronline.org/2010/01/05/social-media-phd.html

22

Laws & Regulations

Medical Malpractice

- **Use of social media by health care professionals affects course of litigation**
- **Federal Rules of Evidence 401 & 402**
 - Deal with Admissibility of Evidence → includes social media
 - Must be “relevant” & “authenticated”
- **State governments have specific evidentiary rules**
- **Generally, relevant social media communications & other electronic stored data must be produced**

www.americanbar.org/publications/litigation_journal/2012_13/winter/the_admissibility_social_media_evidence.html

23

Laws & Regulations

Medical Malpractice

- **Hearsay**
 - Out-of-court statement → excluded from evidence
- **Surgeon uses social media (Twitter) for patient education updates**
 - Plaintiff uses Tweets as “statement against interest” → hearsay comes in as evidence
 - Educational video used as evidence that surgeon did not meet the standard of care

24

Laws & Regulations

Professional Ethics

- **AMA & AOA Codes of Ethics**
 - Physician must place patient welfare above self interest
 - Physician should not “friend” patients & should “pause before posting”
 - Tweets, posts, & other forms of communication can veer into forbidden territory
- **On-line colleague relationships**
 - **Hypo:** physician learns from Facebook post that colleague on-call was inebriated while performing an endoscopy
 - Obligation to report impaired, incompetent, and/or unethical behavior

Farmer J, et al. Ann Intern Med 2013;258:620-627
www.ama-assn.org/speicalty/physician-resources/medical-ethics/code-medical-ethics/updates9033

Laws & Regulations

Professional Ethics

- **Employed physicians of health care organizations**
 - Need to comply with laws and ethics rules of those organizations
 - Subject to additional levels of discipline internally
- **Most state Medical Boards have found violations of on-line professionalism**
 - Inappropriate contact with patients
 - Inappropriate prescribing
 - Misrepresentation of credentials
 - Misrepresentation of clinical outcomes

Bottles K, Kim J. Physician Exec 2013;33:94-96.

Laws & Regulations

The Housestaff

- **Medical student & young physician perspective on social media**
 - Medical students are heavier users of social media than older physicians
 - Way of life
 - Employed by health system/teaching institution → internal rules & risks
- **Challenge: Requisite level of professionalism v. constitutional rights**
 - 2013: Temple University med students openly posted Twitter Vine videos (6 seconds or less) from match day sharing tears & frustrations
 - 2009: 60% U.S. medical schools reported medical students posting inappropriate unprofessional content on-line

www.ama-assn.org/speicalty/physician-resources/medical-ethics/code-medical-ethics/updates2015_page
 Bottles K, Kim J. PEJ 2013;September-October: 95-98.

Laws & Regulations The Housestaff

- **Survey of 78 Medical Program Directors**
 - 60% reported unprofessional social media posts by trainees
 - 43% related to confidentiality
- **University of Florida cross-sectional study of medical student & resident Facebook pages**
 - 12 instances of potential breaches of privacy
 - NB: All occurred during medical missions

Chavira IC, et al. JAMA. 2009;301:1309-1315.
Thompson JA, et al. J Med Internet Res 2011;13:e44

Laws & Regulations The Housestaff

- **Issues:**
 - What is appropriate Internet search re: patient/case?
 - What if an "unprofessional" picture or comment posted by a friend without the student's permission is later discovered by the Dean of Students?
 - What is an appropriate blog and in what venue?
 - What is an appropriate statement or topic?
 - What is an appropriate online venue and what are the boundaries?

www.ama-assn.org/ama/pub/physician-resources/medical-ethics/code-medical-ethics/option10011.page

Laws & Regulations Attending Physicians: The Real Deal

- **SEXTING during surgery**
- Arthur Zilberstein, MD
 - Swedish Medical Center (Seattle, WA)
- **Allegations:**
 - During surgeries 📱 sent explicit "selfies," texted sexual messages, arranged meetings on hospital property during work hours for sex, ...
 - C-sections, pediatric appendectomies, epidurals, cardiac procedures, tubal ligations
 - License suspended indefinitely (March 2015)

www.doh.wa.gov/News/Article.aspx?articleid=2977723&newsheadline=license-suspended-indefinitely-sent-explicit-selfies-work-in-responsibly-gross-but-acceptable.html

Social Media Behavior/Misbehavior Explanations

- **Ignorance:** might not realize that off-duty behavior on a social-networking site may raise questions from public about unprofessional behavior
- **On-line Disinhibition Effect**
 - Dissociative anonymity → You do not know me
 - Invisibility → You cannot see me
 - Asynchrony → See you later
 - Solipsistic introjection → It is all in my head
 - Dissociative imagination → It is just a game
 - Minimizing authority → We are all equals
 - Altering self boundary

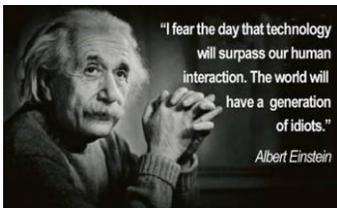
Greenberg S, et al. J Gen Intern Med 2010;25:1227-1229.
Lieber J. Cyberpsychol Behav 2004;7:521-526.

Social Media Behavior/Misbehavior Unrealized Risk Areas: Volunteering

- Medical Missions ☛ Doctors without Borders & others
- Philanthropic Volunteering ☛ National & international catastrophes
- Risky postings → photos & comments involving:
 - Identification of individuals being treated
 - Identification of same individuals in social situations
 - Alcohol with/without intoxication
 - Laughing, grinning, partying, nudity
 - Guns
 - Political statements
 - Recall 2010 Haiti earthquake
 - Et cetera

Greenberg S, et al. J Gen Intern Med 2010;25:1227-1229.

Albert Einstein on Technology



Unsubstantiated

RISK PREVENTION STRATEGIES

34

Risk Prevention Strategies

- Social media risk prevention strategies in health care
- 5 key position policy statements developed re: online medical professionalism
 - Collaborative effort:
 - ACP Council of Associates
 - ACP Ethics, Professionalism, & Human Rights Committee
 - Federation of State Medical Boards Special Committee on Ethics & Professionalism
- Published 2013

Farmer J, Sulmasy L, et al. Ann Intern Med 2013;158:600-7. 35

Risk Prevention Strategies

- Social Media Policy Statements
 1. Use of on-line media can bring significant educational benefits to patients and physicians, but may also pose ethical challenges. Maintaining trust in the profession and in patient-physician relationships requires that physicians **consistently apply ethical principles** for preserving the relationship, confidentiality, privacy, and respect for persons to online settings and communications.
 2. The boundaries between **professional and social spheres** can blur online. Physicians should keep the 2 spheres separate and comport themselves professionally in both.

Farmer J, Sulmasy L, et al. Ann Intern Med 2013;158:620-7. 36

Risk Prevention Strategies

- **Social Media Policy Statements**
- 3. E-mail or other electronic **communications** should only be used by physicians in an **established patient-physician relationship** and with patient consent. **Documentation** about patient care communications should be included in the patient's medical record.
- 4. Physicians should consider periodically "**self-auditing**" to assess the accuracy of information available about themselves on physician-ranking websites and other sources online.
- 5. The reach of the Internet and online communications is far and often permanent. Physicians, trainees, and medical students should **be aware** that **online postings** may have **future implications** for their professional lives.

Farran J, Salmay L, et al. Ann Intern Med 2013;158:620-7.

37

Risk Prevention Strategies

- **Actively monitor your own & your practice/staff reputation on-line**
- **Reputation Management: When a negative comment is posted**
 - Never respond online
 - Attempt to identify the patient and discuss with staff if allegations have any merit
 - Contact a health law attorney before reaching out to patient
 - Consider meeting with patient and demonstrate respect for patient's opinion
 - Investigate if negative comments could be removed depending on the source → may need professional input

Belle JM et al. Clin J Gastroenterol 2013;11:882-886.

38

Risk Prevention Strategies

- Social media communications (SMC) should never disclose PHI
- SMC should never be confrontational
- SMC should be only professional with past or current patients
- SMC between trainee-faculty relationships should follow traditional boundaries

Mason RC, et al. Am J Gastroenterol 2014;109:1328-1332.

39

Risk Prevention Strategies

- On-line advice should be avoided unless coupled with a patient visit
- Texting & non-Web based communications frequently do not provide adequate security → avoid these
- Self-audit and correct inaccurate online information
- Be careful when posting → institutions use social media to screen potential faculty and trainees

Mason RE, et al. Am J Gastroenterol 2014;109:1128-1132.

40

Risk Prevention Strategies

- Establish written HIPAA compliant social media policy employment statement → implement it & track it
- Avoid texting and e-mailing PHI without appropriate safeguards
- Verify telephone numbers & e-mail addresses for accuracy before communicating with a patient
- Use appropriate encryption software
- Send the encryption password to recipient separately
- Understand your privacy settings

Mason RE, et al. Am J Gastroenterol 2014;109:1128-1132.

41

TELEHEALTH TELEMEDICINE

42

Tales from the Crypt

- **March 1998:** FDA approves Viagra® to treat erectile dysfunction
- Requirement for prescription + physician evaluation
- Need Internet prescription from "licensed" physician
- **July 26, 2007:** Pennsylvania Internist "agreed to the permanent, voluntary surrender of his license because he failed to carry out the minimal standards for prescribing...which included a physical examination of the patient."



www.dhs.pa.gov/ProfessionalLicensing/VerifyProfessionalDisciplinaryAction/Documents/2007-07-07_health_licensing_boards.pdf

43

Telehealth: Evolution

- Teleradiology
- TeleICU
- Teledermatology
- Telepathology
- Telemental Health
- "TeleFUTURE"



www.americanmedical.org/resources/telemedicine-practice-guidelines/telemedicine-practice-guidelines#WBSDaPFFU

44

Telehealth v. Telemedicine

- **Telehealth** → overall access to health information rather than provision of direct patient care
- **Telemedicine** → subset within Telehealth attributed specifically to patient care
- Definitions vary by state & organization

F10J M3, ed. Telemedicine: A Guide to Assessing Telecommunications in Health Care. Washington, DC: National Academies Press; 1996.

45

Telehealth Sites

- **Distant site** → site(s) at which physician or other licensed practitioner delivering service is located
- **Originating site** → location of patient at time service is being furnished occurs via telecommunications system
- **Originating sites authorized by law:**
 - Physician offices, critical access hospitals, rural health clinics, federally qualified health centers, hospital-based renal dialysis centers, skilled nursing facilities, community health centers

46

Telehealth

- **a/k/a: Telemonitoring**
- **Centers for Medicare & Medicaid Services (CMS)**
 - Use of telecommunications and information to provide access to health assessment, diagnosis, intervention, consultation, supervision, and information across distance
- **Applications:**
 - Telephones, Fax machines, E-mail systems, Remote patient monitoring devices that collect & transmit data

<http://www.cms.gov/Outreach-and-Education/Medicare-Learning-Network-MAN/NMNPProducts/downloads/telehealthc10181.pdf>

47

Telemedicine

- **American Telemedicine Association**
- **"Use of medical information from one site to another via electronic communications to improve a patient's clinical health status"**
- **Telemedicine applications are increasing:**
 - Two-way video
 - E-mail
 - Smart phones
 - Wireless tools
 - Other forms of telecommunication technology



www.americantelemed.org/about-telemedicine/what-is-telemedicine#:~:text=VEDMTRFPO

48

REGULATION

49

MACRA



Former President Obama Signs
MACRA
April 16, 2015

50

Federation of State Medical Boards

- **Model Policy for the Appropriate Use of Telemedicine Technologies in the Practice of Medicine**
 - Adopted April 2014
 - Guidance for State Medical Boards to create laws governing provision of care via Telemedicine



www.fsmb.org

51

Interstate Licensure Compact

- Passed April 2017
- Agreement between 18 participating states & their MD/DO licensing boards
 - Compact legislation subsequently introduced in additional states
- Easier for physicians to obtain medical license in multiple states
- Interstate Medical Licensure Commission → accepts applications

www.medicape.com/newsarticle/279424_print

52

Interstate Licensure Compact

- Eligible physicians expected to benefit
 - Practicing in rural areas
 - Practicing in underserved communities
 - Locum tenens
 - Metropolitan areas that include more than one state
 - Providing Telemedicine services to patients in other states

www.medicape.com/newsarticle/279424_print

53

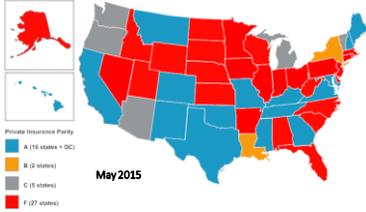
Telehealth & Government

- PPACA & MACRA → support Telehealth
- CMS
 - Established list of reimbursable services → expanding
 - Currently limits originating site locations → expanding
- Populations currently under study for Telehealth expansion
 - Medicaid population
 - Rural America & isolated communities
- State Telemedicine Parity Laws
 - Require private insurers to cover Telemedicine services
 - Laws have doubled over past 5 years

www.ahg.gov/telehealth/pdf/16forpubliccomment.pdf
 http://www.cms.gov/Outreach-and-Education/Medical-Device-Advertising-Network/MDS/MS/Products/downloads/telehealthofstate.pdf
 www.americanmedical.org/files/2014/03/state-telemedicine-gap-analysis-physician-practice-standards-to-improve.pdf?force=14

54

Parity Laws: Private Insurance Telemedicine Coverage



55

RISKS

56

Telemedicine Potential Risks

- Informed consent
- Documentation
- Credentialing & privileging
- Standards of care
- Continuity of care
- Medication prescribing

57

Telemedicine Potential Risks

- Fraud & abuse
- Reimbursement
- Privacy
- Medical license jurisdiction
- Laws vary among states → State Medical Boards determine privileges and parameters

58

Telemedicine Potential Risks

- **Mobile Medical Apps (MMAs)**
 - Potentially create more than product liability issues
 - Increasingly used by patients & providers
 - Examples:
 - Monitoring & controlling → insulin pump delivery
 - Stethoscope function
 - Patient analysis → radiation dose, BMI, vital signs
 - Reference apps → drug interaction, drug allergy
 - Communication → access health records & other data
- **Wearable Biosensors**
- **Smartphone applications**

Evolving areas:
Personal Health
Technology

Springer B. Ann J Gastroenterol 2016;111:824-830

59

Telemedicine Potential Risks Personal Health Technology

- **Fitbit users unknowingly published physical & sexual activities online & searchable via standard search engines**
- **Open Effect Report**
 - Canadian not-for-profit applied research organization focusing on digital privacy and security
 - 7 of 8 tracking devices failed to maintain security of user's information
 - Apple Watch was only device that did not fail
 - Same devices shared user's location with commercial Bluetooth "beacons" in the proximity

www.forbes.com/sites/kashmiri/2015/10/05/fitbit-moves-quietly-after-users-sexual-activity-exposed/#1405488879c7
https://openeffect.ca/reports/fitness_tracker.pdf

60

Telemedicine Potential Risks

Other Potential Risks

- **Technology quality**
 - Interference with accuracy of diagnosis
 - Interference with accuracy of treatment
- **Guidelines in Telehealth**
 - Already exist → more currently under development
 - NB: Standard of care issue
- **Quality measurement?**
- **Certification requirements?**
- **Training requirements?**

61

Risk Prevention Concerns



- See me
- Feel me
- Touch me

© JEFFREY HARRIS (2005)

62

RISK PREVENTION STRATEGIES

63

Risk Prevention Strategies

- Know the State Licensing Board rules and licensing requirements for Telemedicine
- Do not practice Telemedicine across state lines
- Stay abreast of developing Federal laws regarding Telemedicine
- Document Telecommunication patient interactions in the chart

64

Risk Prevention Strategies

- Standardize patient encounters → guidelines?
- Establish a disclaimer explaining the limitations → use it with all Telemedicine encounters
- Involve a physician &/or Healthcare attorney versed in Telemedicine
- Telemedicine and technology in health care delivery is rapidly evolving 📡 stay tuned...

65

THE CONVERGENCE

66

Telehealth & Future Evolution

- **Telehealth → Digital Health**
- **Digital Health**
 - Integrating digital technologies into a harmonized health delivery model to improve process and outcomes of health care
- **Digitalist**
 - Does not yet exist ☹️ is this the new Hospitalist?
 - Remotely track data from biosensors, apps, portals, and social media & then combine the data with clinical parameters and knowledge about patient's medical history

Telehealth → Digital Health The Convergence

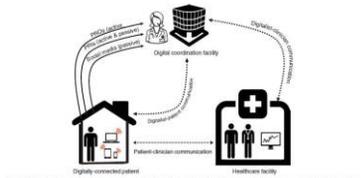


Figure 5. Model of digital-enhanced health-care delivery. In addition to traditional patient-clinician communication and coordination, digital health offers new opportunities for remote monitoring of data, including patient-reported outcomes (PROs) actively tracked through apps and portals, patient-reported symptoms (PRS) actively and passively collected by wearable sensors and transmitted as wireless signals, and passive monitoring of social media data. The "digital" routing to a convergence facility, unites the data streams and thereby communicates with patients via portals, telephone, or videoconferencing, and their coordination directly with clinicians as needed to manage patients.

Digital Health Programs

- University of Pittsburgh Medical Center
- University of Maryland, Baltimore
- UCLA Medical Center
- Mt. Sinai, New York
- University of New Mexico
- Mayo Clinic
 - Plans to provide healthcare input to 200 million patients worldwide by 2020????
- Others...

SUMMARY & CONCLUSIONS



70

NO GOOD DEED GOES UNPUNISHED!!!



71

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- Practicing Gastroenterologist for over 30 years
- Board Certified:
 - Gastroenterology
 - Internal Medicine
 - Forensic Medicine
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- www.medlawcompliance.com



72



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73
