





# PULMONARY HORIZONS 2<sup>ND</sup> ANNUAL COPD CONFERENCE Miami Hilton Downtown 1601 Biscayne Blvd, Miami, FL 33132 July 17-19, 2015

# **CONFERENCE AGENDA**

# **Pulmonary Horizons 2nd Annual COPD Conference Agenda and Instructions**

Dear Conference Attendees, Exhibitors and Speakers, and Volunteers, on behalf of the Conference Program Committee, we would like to thank you for your participation and look forward to an engaging and invigorating conference at the Pulmonary Horizons 2nd Annual COPD Conference - Miami Hilton Downtown - July 17-19, 2015.

# **Learning Objectives**

Participants will identify methods and processes to enhance the diagnosis, treatment and management of patients with COPD. Participants will describe programs that align all stakeholders and resources throughout the care continuum that improve both health and financial outcomes. Participants will identify novel strategies that leverage technology, devices and/or drugs to enhance patient care.

# **Target Audience**

The target audience includes every health care worker, including RTs, Nurses, Case Managers, Nurse Practitioners, Physicians, Pharmacists, Physician Assistants, Medical Assistants, and health care administrators including, CEO, CNOs, CFOs, leaders of ACOs, PCMHs, MCOs and Integrated Healthcare Delivery Systems; Payers and Health Plan Administrators, Government and Third Party Payers; PBMs, Medical Device manufacturers, Pharmaceutical Companies' representatives.

# Pulmonary Horizons 2<sup>nd</sup> Annual COPD Conference – Program Committee

Justin Callahan Brian W. Carlin, MD Robert McCoy, RRT Henry McMillan Jim Nelson Mary Nelson Karen Deitemeyer Isabel Pereira, MD Vernon R. Pertelle, RRT Jean Rommes, Ph.D. Brian Tiep, MD













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# Name, Address, and Other Information

The information you provided during your registration will be used for your badge(s). Your badge(s) will be printed from this information. Degree information will be taken from information we have obtained or that you provided during registration for the conference.

### NAME BADGES ARE REQUIRED TO ATTEND ALL CONFERENCE SESSIONS AND EVENTS.

Indicate if you wish your email address be withheld from exhibitors in response to this email.

# **Pre-Conference Questionnaire**

You will be receiving a separate email with a two (2) question; questionnaire on what you would like to gain from the conference. Please complete the questionnaire and return it as soon as possible.

# **Agenda and Schedule of Events**

The agenda and schedule of events is attached as a pdf document to this email. It can also be accessed on the homepage of the website (<u>pulmonaryhorizons.org</u>) to download and print. Print using the two sided option is recommended.

# **Special Services**

### **Americans with Disabilities Act**

If you have special needs under the Americans with Disabilities Act, please let us know or contact the hotel property directly at (305) 374-0000 and be sure to let them know that you are attending the Pulmonary Horizons 2nd Annual COPD Conference and inform them of your particular needs.













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# **Physician Payments Sunshine Act**

Section 6002 of the Affordable Care Act requires the establishment of a transparency program, now known as Open Payments, to increase public awareness of financial relationships between drug and device manufacturers and certain health care providers. In order to facilitate compliance for applicable organizations participating in the Conference with this law, the Pulmonary Horizons Program Committee needs to collect additional information from physicians attending the conference. Physicians who are licensed to practice in the U.S. may be asked to provide further information.

# **Registrant Profile**

The profile of meeting participants include patients, physicians, nurses, nurse practitioners, physician assistants, respiratory therapists, pharmacists, administrators; all from various parts of the continuum of care.

# **Dress Code and Laptops**

The dress code for both days is business casual for speakers, exhibitors and conference staff; for attendees casual dress is acceptable. Be sure to dress in anticipation of the 'pleasant Miami humidity'.

Be sure to bring your laptop to utilize the flash drives that will be provided to review conference information by some participating exhibitors.

# **General Registration Fee**

Registration fees cover your participation at the conference along with continental breakfast and lunch on Saturday and Sunday. There will be an evening reception with cocktails hosted at the Hard Rock Cafe, Bayside, which is one (1) mile from the Hotel. The address is as follows:

Bayside Marketplace, 401 Biscayne Blvd, R200, Miami, FL 33132 - (305) 377-3110

You will be provided drink tickets for use at the Hard Rock Cafe and must have your name badge in order to participate. Please inform us immediately if you have special dietary requirements.













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# **Speakers and VIP Dinner**

There will be a Speakers and Corporate Partners & Platinum Sponsors only dinner at the Knife Argentinian Steakhouse, which is one (1) mile from the Hotel. The address is as follows:

Bayside Marketplace, 401 Biscayne Blvd, R106, Miami, FL 33132 - (786) 866-3999

Participants will be identified with ribbons on their name badges; and must bring them in order to participate. A backup names list will be available to check your name should you not have your name badge.

# **Complimentary Attendees**

The general registration fee, allows you to attend the conference events and the Exhibit Hall without additional fees or tickets. Students from any discipline, patients and complimentary invitees from the local area are invited to attend the full conference, however must ensure they are registered prior to participation in pre-conference workshops and full conference. The preconference workshops are for healthcare professionals only (students and patients are not permitted to attend).

# **Research Administrators/Association Executives**

This category is provided for (1) those individuals who attend for reasons other than obtaining professional accreditation hours, (2) who are not health care professionals working clinically in pulmonary, critical care or sleep medicine, or (3) who are not actively engaged in the conduct of basic, translational or clinical research. For instance, research administrators (non-scientists or clinicians,) research coordinators, executive staff of related professional organizations, or other individuals with an organization but not a clinical or scientific interest in the Conference. Registrants in this category may attend sessions, exhibits and workshops. Registrants in this category are not eligible to receive CME, Nursing Contact Hours, or Continuing Education Units.

# **Spouses/Partners/Guests**

Registrants in this category must accompany a Full Conference registrant (whether regular, student, patient) and may attend all events however you must notify us in advance by email of the attendee. Those in this category are not eligible to receive CME, Nursing Contact Hours, or Continuing Education Units. Children and Pets are not permitted.













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### **Members of the Press**

The Pulmonary Horizons 2nd Annual COPD Conference will be covered by the press. If you do not wish to be videoed or photographed be sure to inform them in advance.

Videography and Photography by Attendees of the Conference and Pre-Conference Workshops is Strictly Prohibited.

# **Mobile Telephones**

Please be sure to silence or turn off your mobile phone during all sessions.

### **Hotel Reservation**

You must register in order to receive hotel accommodations. Hilton Miami Downtown at: (305) 374-0000

There are local area hotels located nearby as alternatives should the hotel become full.

Individual hotel cancellation policies will apply per hotel requirements. Many hotels allow cancellations up to 72 hours prior to your arrival date, but check the hotel's policy.

# **Name Badges and Materials**

Pick up your registration materials and name badge(s) at the Symphony Ballroom Foyer during these times:

Friday July 17, 2015 - 7:00 a.m. to 7:45 a.m. - AND - 12:00 p.m. to 12:45 p.m. (Spirometry and COPD Coordinator Workshop Attendees and Full Conference Attendees)

Saturday July 18, 2015 - 7:00 a.m. to 8:00 a.m.

Sunday July 19, 2015 - 7:00 a.m. to 8:00 a.m.

Attendees that arrive after the above hours will find their name badge(s) and registration materials in the Symphony Ballroom Foyer.













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# **Badges**

Badges will not be mailed prior to the Conference. Registrants will pick up badges and event materials at the Symphony Ballroom Foyer. See above for Registration Desk hours.

# **Conference Format**

With the exception of the Keynote and Special Presentations, the format for all sessions will be Panel Presentations facilitated by a Moderator. Attendees are strongly encouraged to engage in the discussion during the panels.

# **QUESTIONS?**

# Attendee and Speaker Information, Exhibit Program

Andrea Brooks Andrea Brooks

# **Photography**

Nichol Del Rosso Nichol Del Rosso

# Videography

James Peterson, Ph.D., FACSM James Peterson, Ph.D., FACSM

# **Conference Program**

Andrea Brooks
Andrea Brooks













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**Workshop Sessions** 

Andrea Brooks
Andrea Brooks

**Support Opportunities/Advertising** 

Andrea Brooks Andrea Brooks

Follow us during the conference on Twitter, Instagram and Facebook:

Twitter: https://twitter.com/PulmonaryH #pulmonaryH @pulmonaryH

Instagram: http://instagram.com/pulmonaryhorizons/#pulmonaryH

Facebook: https://www.facebook.com/pulmonaryhorizons #COPD@pulmonarH













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# Friday July 17, 2015

### Spirometry Workshop 8:00 A.M. ~ 12:00 P.M. (Picasso)

The Spirometry Workshop is introduced to give a recognized national qualification for those practitioners who regularly perform spirometry and interpret the results; and introduce and certify those who are new to spirometry. This is a practical competence certificate. Supported by an unrestricted educational grant from the National Lung Health Education Program (NLHEP) and New Diagnostic Designs (NDD). (Eligible for AMA PRA Category 2 CME; 4 CEUs, BRN, RCP)





### The target attendees include:

- Nurses (MD practice-based, respiratory nurse specialists)
- Physiotherapists (especially respiratory specialists pulmonary function technologists)
- Doctors (general practitioners)
- Nurse Practitioners
- Physician Assistants
- Pharmacists
- Respiratory Therapists













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COPD Coordinator Workshop 1:00 P.M. ~ 5:00 P.M. (Picasso)

The COPD Coordinator Workshop is introduced to give practical competence on management and treatment in 'primary care' to address patterns for chronic obstructive pulmonary disease (COPD) with a focus on preventing reactive care for acute exacerbations, in exchange for proactive diagnosis and ongoing multifactorial COPD management, comprising smoking cessation, influenza and pneumonia vaccinations, pulmonary rehabilitation, and symptomatic and maintenance pharmacotherapy according to severity, and patient engagement, education and empowerment, payer and coverage determinations and hands on oxygen delivery system education; to improve a patient's health-related quality of life, reduce exacerbations, and alleviate the functional, utilization, and financial burden of COPD. Supported by an unrestricted educational grant from Nonin Medical. (Eligible for AMA PRA Category2 CME; 4 CEUs, BRN, RCP)

The target attendees include:



- Nurses (MD practice-based, respiratory nurse specialists)
- Physiotherapists (especially respiratory specialists pulmonary function technologists)
- RN Case Managers (medical group based)
- Nurse Practitioners
- Physician Assistants
- Pharmacists
- Respiratory Therapists













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# 7:00 A.M. ~ 7:45 A.M. Registration/Continental Breakfast (Foyer - Symphony Ballroom)

Registration and post-panel assessments Powered by Turning Technologies - Sponsored by Corporate Partner Sunovion Pharmaceuticals, Inc. Speakers ask questions and receive real-time feedback with handheld clickers or mobile devices. Results instantly display on screen and collect in detailed reports to ensure all participants are counted. No need for paper forms as the technology tracks participants for individual knowledge for pre and post-tests and captures interactive response real-time to catalogue solutions, designed for unique insights to provide data-driven summaries.

### 7:45 A.M. ~ 8:00 A.M. Welcome/Overview of Day & Summary of 1st Annual Conference (Symphony Ballroom I)



Brian W. Carlin, MD, FCCP, FAARC
Pulmonologist, President and Medical Director
Sleep Medicine and Lung Health Consultants, LLC
Vice President, National Board for Respiratory Care (NBRC)
Chairman, National Lung Health Education Program (NLHEP)
Ingomar. PA



Vernon R. Pertelle, MBA, RRT President and CEO StratiHealth, Inc. Executive Director Pulmonary Horizons, Inc. San Diego, CA

### 8:00 A.M. ~ 8:45 A.M. Keynote Presentation (Symphony Ballroom I)



### Nicholas "Dr. Nick" Yphantides, MD, MPH, Chief Medical Officer, Health & Human Services, San Diego, CA

Dr. Nick Yphantides currently serves as the Chief Medical Officer for San Diego County. He was the Chief Medical Officer (CMO) of one the largest network of Community Clinics in San Diego County, the Council of Community Clinics and was the publicly elected Chairman of the Board of Directors for Palomar Health, the largest Public Hospital District in California. As a result of his personal health transformation he now advocates for population and regional health transformation and is passionate about putting the health back into healthcare and keeping the patient at the center of their care.

8:45 A.M. ~ 8:55 A.M. Break (Symphony Ballroom II)













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### 8:55 A.M. ~ 9:40 A.M. Panel: Patient Perspectives of Care - (Symphony Ballroom I)

Panelist will provide an overview of perspectives from patients, caregivers, advocates and discuss their views on interventions they believe will improve the diagnosis, treatment and management of patients based on their professional as well as personal experiences with the healthcare system. Survey results from patients who are diagnosed with COPD will be reviewed and discussed. Presentations on the COPD Foundation's Patient Powered Research Network (PPRN) - pcornet, COPD360Social and Praxis Programs; as well as results from Patient Perspectives of Care Scores from CMS' Hospital Compare will be reviewed and discussed.



Moderator

### Brian W. Carlin, MD, FCCP, FAARC

Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP) Ingomar, PA

### **Panelists**



John Walsh
President and
Co-Founder
COPD Foundation
President and CEO
Alpha-1 Foundation
Miami, FL



Jean Rommes, PhD
Executive Board,
EFFORTS
Advocate,
COPD Foundation
Patient Representative
Patient-Centered
Outcomes Research
Institute (PCORI)
Des Moines, IA



A Nicole Allen, MHSA Manager Voice of the Customer Sutter Healthcare Sacramento, CA



Jim and Mary Nelson Patient and Caregiver EFFORTS; Advocate COPD Foundation American Lung Association Tucson, AZ



Karen Deitemeyer
Patient, EFFORTS
Advocate, COPD
Foundation
American Lung
Association
Melbourne, FL



Joan Franklin
Senior Contracts
Manager
Southern CA
Permanente Medical
Group
Kaiser Permanente
Pasadena, CA

9:40 A.M. ~ 9:50 A.M. Break - (Symphony Ballroom II)













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# 9:50 A.M. ~ 10:50 A.M. Panel: Accountable Care Organizations (ACOs); Program Development & Implementation - (Symphony Ballroom I)

Physicians, Administrators and Clinical Leaders review and discuss their experience with new care delivery models and transitional care programs, which have been in place over the past year. It will highlight successful practices, health and financial outcomes and provide recommendations for others to develop similar models. Innovative approaches that link the patient across the continuum of care, which include home medical equipment (HME) providers will be covered in detail to support increased knowledge to develop or enhance programs that improve the treatment and management of patients. A special presentation on the Centers for Medicare & Medicaid Services (CMS), Center for Medicare and Medicaid Innovation (CCMI) Grant; results from the Pittsburgh Regional Health Initiative, will be reviewed and discussed to highlight population-based healthcare.



Moderator

# Ni Cheng Liang, MD Assistant Clinical Professor Medical Director, Pulmonary Services Center for Pulmonary and Sleep Medicine University of California, San Diego San Diego, CA



Special Presentation

# Brian W. Carlin, MD, FCCP, FAARC Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP)





Suellyn Ellerbe, RN, MN, NEA-BC
President & CEO
Suellyn Ellerbe & Associates
American Organization of Nurse
Executives
Randolph, NJ



James Dom Dera, MD
Family Physician, NCQA
Patient Centered Medical
Home (PCMH), Certified
Content Expert (CCE),
ACO Medical Director
PCMH Lead Physician
Summa Health System
Akron, OH



**Tim Buckley, MS, RRT, FAARC**System Director
ACO, Respiratory
Summa Health System
Akron, OH



Ingomar, PA

Marvin C. Weiss, MD, PhD
Pulmonologist
Southern California
Permanente
Medical Group
Kaiser Permanente
San Diego, CA



Christine Cunningham, BS, RRT
Clinical Director
CHI Health at Home
Catholic Health Initiatives (CHI)
Columbus, OH

10:50 A.M. ~ 11:00 A.M. Break - (Symphony Ballroom II)













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# 11:00 A.M. ~ 11:45 A.M. Panel: Patient Centered Medical Home (PCMH); Primary Care across the Continuum -(Symphony Ballroom I)

The primary care medical home or patient centered medical home (PCMH) is accountable for meeting the majority of each patient's physical and mental health care needs, including prevention & wellness, acute care, post-acute care, home health, chronic care and when appropriate palliative care and hospice. Comprehensive care requires a team of providers; which include physicians, advanced practice nurses, physician assistants, nurses, pharmacists, dieticians, social workers, educators, and care coordinators, case managers, durable medical equipment (DME) companies, respiratory therapists and telehealth. PCMHs include a large and diverse team to meet the needs of patients; others, including smaller practices, build virtual teams linking themselves and their patients to providers and services in their communities.



Moderator

Isabel Pereira, MD Geriatrician, Internal Medicine Medical Director Home Health and Hospice Hyperbaric Medicine Carlsbad, CA



Moderator

Brian W. Carlin, MD, FCCP, FAARC Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP)

Ingomar, PA

### **Panelists**



Matt Mesnik. MD **Chief Medical Officer** QuickCheck eHealth Express Healthcare Board Member, eVeritas Founding Partner eLTOT (Long-Term Oxygen Therapy) Minneapolis, MN



James Dom Dera, MD Family Physician, NCQA **Patient Centered Medical** Home (PCMH), Certified Content Expert (CCE), **ACO** Medical Director **PCMH Lead Physician** Summa Health System Akron, OH

Kevin Hodgdon, RRT, CPFT Clinical Sales Specialist ndd Medical Technologies Boston, MA



Trina Limberg, BS, RRT Director Preventive Pulmonary and Rehabilitation Services University of California San Diego Health System San Diego, CA



Nicholas Yphantides, MD, MPH **Chief Medical Officer** Health and Human Services San Diego County National Director Health & Wellness Axene Health Partners, LLC San Diego, CA



Deb McGowan, RN, BSN, ACM Senior Director Health Outcomes **COPD Foundation** 

Washington, DC















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### 11:45 A.M. ~ 12:30 P.M. Panel: Retail Health Clinics Role in Primary Care - (Symphony Ballroom I)

Retail clinics offer convenient, low-cost basic primary care treatment, screening and diagnostic services in a variety of settings. Increasingly, these clinics are an integral part of a U.S. health care system in the throes of massive change as payers and providers migrate toward Triple Aim goals of (1) improved patient care, (2) population health and (3) reduced cost. Many retail clinics are adapting to provide basic chronic care management services and forming partnerships with area health systems in efforts to become better integrated with other community providers. As the role of retail clinics evolve they face a series of challenges and opportunities to integrate this business model into a health care system reconfiguring to advance Triple Aim goals and to contribute to a Culture of Health.



Moderator

Vernon R. Pertelle, MBA, RRT President and CEO StratiHealth, Inc. Executive Director Pulmonary Horizons, Inc. San Diego, CA

# Panelists



Jennifer Hart, RN, MSN, FNP-BC Clinic Practice Manager Minute Clinic CVS Health New York, NY



Brenda Salas, RN, MSN, FNP-BC Family Nurse Practitioner Minute Clinic CVS Health Ledgewood, NJ



Matt Mesnik, MD
Chief Medical Officer
QuickCheck eHealth,
Express Healthcare
Board Member,
eVeritas, Founding
Partner eLTOT
Minneapolis, MN



Kevin Hodgdon, RRT, CPFT Clinical Sales Specialist ndd Medical Technologies Boston, MA



Brian W. Carlin, MD, FCCP, FAARC
Pulmonologist, President and Medical
Director
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Consultants, LLC
Vice President,
National Board for Respiratory Care
(NBRC)
Chairman,
National Lung Health Education
Program (NLHEP)
Ingomar, PA

12:30 P.M. ~ 1:15 P.M. Lunch - (Symphony Ballroom II)













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### 1:15 P.M. ~ 2:00 P.M. Nina Radcliff, MD - Special Presentation on E-Cigarettes - (Symphony Ballroom I)

With an outstanding reputation as a medical physician and dedicated communicator to her patients as well as audiences nationwide, Dr. Nina Radcliff is devoted to helping people live healthier lives and gain wise understandings about health and wellness concerns facing our nation, today. She is becoming one of America's leading doctor-reporters contributing to weekly columns and broadcast segments – committed to providing clear, concise and insightful understandings on breaking medical news; developments in medicine; personal health and wellness; as well as the healthcare industry, at large. Her driving passion has always been to touch lives and make a difference through medical practice and wise communications with a balanced framework of understanding in Ethics and Morals; she was greatly influenced at a very young age by her mother – an excellent communicator, dedicated people person and practicing physician.



Special Presentation

Nina Radcliff, MD

Anesthesiologist

Atlanticare Regional Medical Center

Media Medical Health Contributor

Young Physicians & Communications, Committee Member

New Jersey State Senate Health Committee

Physician Legislator Ambassador

Pomona, NJ

"E-cigarettes are safer than cigarettes, their makers say or imply. But until e-cigarettes are proven safe, the FDA is refusing to let them into the country and may soon ban their sale, as major U.S. medical associations have asked.

"We have an open investigation into this issue," FDA spokeswoman Rita Chappelle tells WebMD. "What is happening right now is FDA has reviewed several e-cigarettes, e-cigars, and e-pipes, and have refused entry of these products into the country. We acted because these products appear to require FDA approval for marketing, and have not been reviewed by the agency."

An informal FDA review of some of these products "indicated that these products are not currently approved," Chappelle says.

If the FDA bans e-cigarettes, an action many observers believe imminent, it won't be the first North American agency to do so. Last month, Canada's health agency banned the importation or sale of e-cigarette products.

What's all the fuss about? At the heart of the issue is a debate over what the e-cigarette really is."

Source: WebMD - http://www.webmd.com/smoking-cessation/features/ecigarettes-under-fire













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### 2:00 P.M. ~ 2:45 P.M. Panel: Financial Considerations, Challenges and Opportunities - (Symphony Ballroom I)

The clinical and economic burden of chronic obstructive pulmonary disease (COPD) is significant and is increasing. COPD is the third leading cause of death in the United States, after heart disease and cancer. COPD is prevalent in Medicare and Medicare Advantage populations -- In its 2012 version, the Centers for Medicare and Medicaid Services (CMS)' Chronic Conditions Among Medicare Beneficiaries Chart book reported that 12 percent of Medicare beneficiaries have COPD, and a Pharmacoeconomic and Outcomes Research paper found that in the Medicare Advantage population, respiratory-related costs accounted for 22 percent of total all-cause health care costs for members with COPD. Members access the system at a higher and more frequent rate, whereas 20 percent of patients hospitalized with COPD exacerbations are readmitted within 30 days. These exacerbation costs account for nearly 70 percent of the estimated \$50 billion in annual COPD expenditures, with readmission-related expenses ranking third highest among Medicare beneficiaries. Hospital and post-acute care leaders discuss the challenges and opportunities with managing patients and highlight successful practices.



Moderator

George N. Miller, Jr., MHSA
Chief Executive Officer
CommUnity Health Center
Professor, Central Michigan University
Past Commissioner, Medicare Payment Advisory Commission (MedPAC)

### **Panelists**



Andre Boyd, FACHE
Senior Vice President
Chief Executive Officer
Jackson North Medical Center
Jackson Health System
Miami, FL



Nicholas Yphantides, MD, MPH
Chief Medical Officer
Health and Human Services
San Diego County
National Director Health & Wellness
Axene Health Partners, LLC
San Diego, CA



Suellyn Ellerbe, RN, MN, NEA-BC
President & CEO
Suellyn Ellerbe & Associates
American Organization of Nurse
Executives
Randolph, NJ



Win Vaughan, MBA
President
Catholic Health Initiatives
Virtual Health Services
Englewood, CO

2:45 P.M. ~ 2:55 P.M. Break - (Symphony Ballroom II)













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### 2:55 P.M. ~ 3:40 P.M. Panel: Community-Based Pulmonary Rehabilitation Opportunities - (Symphony Ballroom I)

The opportunity for partnership between Outpatient Pulmonary Rehabilitation Clinics and local fitness centers such as the YMCA, LA Fitness, etc., provides patients a continuum of care following the successful completion of their Pulmonary Rehabilitation Program; with access to state of art exercise equipment and in many cases handicapped accessible warm water therapy pools. In addition, fitness centers have a significant opportunity for wellness and integration within ACOs through comprehensive programs based in the community to enhance patient activity while being monitored by specially trained and licensed fitness instructors who can provide assessments, guidance, constant encouragement and support. An important yet unmet need that can help prevent the typical patient plateau and subsequent decline following the completion of a comprehensive pulmonary rehabilitation program.



Brian Tiep, MD, FCCP, FAACVPR
Medical Director
Pulmonary Rehabilitation
City of Hope
Medical Director, Respiratory Disease Management Institute
Duarte, CA

### Panelists



Keith Robinson, MD, MS, FCCP
Pulmonary Physicians of South Florida
Medical Director
Fusion Health
Pulmonary Rehabilitation
Oakland Park, FL



Chris Garvey, FNP, MSN, MPA, FAACVPR
Manager, Seton Medical Center
Pulmonary & Cardiac Rehabilitation
Nurse Practitioner
University of California San Francisco
Sleep Disorders Center
California Thoracic Society, Secretary
San Francisco, CA



Trina Limberg, BS, RRT, FAARC, MFAACVPR
Director
Preventive Pulmonary and Rehabilitation
Services
University of California
San Diego Health System
San Diego, CA



Karen Deitemeyer
Patient, Advocate
EFFORTS
COPD Foundation
American Lung Association
Melbourne, FL



Nina Radcliff, MD

Anesthesiologist

Atlanticare Regional Medical Center, Media Medical Health Contributor

Young Physicians & Communications, Committee Member

New Jersey State Senate Health Committee, Physician Legislator Ambassador

Pomona, NJ

3:40 P.M. ~ 3:50 P.M. Break - (Symphony Ballroom II)













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### 3:50 P.M. ~ 4:35 P.M. Panel: Medical Device Management and Compliance - (Symphony Ballroom I)

Medical devices prescribed to treat patients with COPD include continuous positive airway pressure (CPAP), non-invasive ventilation, humidification with integrated flow generator and Long-term oxygen therapy (LTOT). Adherence to treatment in patients with severe chronic obstructive pulmonary disease (COPD) can be the difference between maintaining a chronic stable condition or frequent exacerbations. However, when appropriately prescribed and correctly used, medical devices and in particular LTOT has clearly been shown to improve survival in hypoxemic COPD patients. Although adherence to LTOT varies widely from 45% to 70% and with other devices used simultaneously [such as CPAP] can negatively impact compliance with treatment if the devices are not adequate for the patient to feel better. Few studies have suggested or evaluated interventions that conduce to compliance enhancement. The lack of sufficient data regarding COPD patients following prescription of medical devices is an enormous void that must be duly confronted to augment clinical effectiveness and cost containment for the long term use. This panel will review and discuss devices that can lead to improved health outcomes while reducing overall cost; and will include representatives from medical device manufacturers.



Moderator

# Robert McCoy, BS, RRT, FAARC Managing Director Valley Inspired Products Principal, ValleyAire Respiratory Services Associate Executive Director, Pulmonary Horizons Apple Valley, MN

### **Panelists**



Justin Callahan
President
Fisher & Paykel
Healthcare
Irvine, CA



Mark Goldberg, MBA
Product Marketing
Manager
Nonin Medical, Inc.
Minneapolis, MN



Patrick Gorman, BS, RRT Regional Sales Manager Chart Industries, Inc. Biomedical Division Garfield Heights, OH



David Pugh Regional Vice President Drive Medical Tucson, AZ



Jean Rommes, PhD
Executive Board, EFFORTS
Advocate,
COPD Foundation
Patient Representative
Patient-Centered Outcomes
Research Institute (PCORI)
Des Moines, IA



Brian Tiep, MD, FCCP, FAACVPR
Medical Director
Pulmonary Rehabilitation
City of Hope
Medical Director, Respiratory
Disease Management Institute
Duarte, CA

4:35 P.M. ~ 4:45 P.M. Break - (Symphony Ballroom II)













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# CONFERENCE AGENDA

# Saturday July 18, 2015

### 4:45 P.M. ~ 5:30 P.M. Panel: Pharmaceutical Management and Compliance - (Symphony Ballroom I)

Poor adherence to prescribed drugs leads to a high rate of exacerbation and poor health-related quality of life in patients with chronic obstructive pulmonary disease (COPD). However, few strategies are acceptable and effective in improving medication adherence. There are many barriers to medication adherence for patients with COPD. Typical reasons cited by patients for not taking their drugs included high costs for drugs and their feeling "it does not do any good". This intentional non-adherence is often due to the patient's misunderstanding the clinician's instructions. Although proper education ensure the patient is fully informed about the important aspects of their treatment regimen, generally educational interventions, do not consistently improve medication adherence. Besides the patients' understanding, their motivation and expectation about the success likelihood of medical intervention are critical factors to medications adherence. Panelists will discuss, optimal drug delivery and tactics to monitor and improve adherence to pharmaceuticals to improve health outcomes and reduce costs. This panel will include representatives from pharmaceutical companies, pharmacy benefit management companies and drug management organizations.



Moderator

# Brian W. Carlin, MD, FCCP, FAARC Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Passiratory Cal

Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP) Ingomar, PA

### **Panelists**



Joe Lewarski, BS, RRT, FAARC Executive Vice President ExactCare Pharmacy, Inc. Cleveland, OH



Win Vaughan, MBA
President
Catholic Health Initiatives
Virtual Health Services
Englewood, CO



Jennifer Hart, RN, MSN, FNP-BC Clinic Practice Manager Minute Clinic CVS Health New York, NY



Ni Cheng Liang, MD

Assistant Clinical Professor
Medical Director, Pulmonary
Services Center for Pulmonary
and Sleep Medicine
University of California, San Diego
San Diego, CA













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# **CONFERENCE AGENDA**

# Saturday July 18, 2015

5:30 P.M. ~ 5:35 P.M. Wrap-Up - (Day 1)



Moderator

Brian W. Carlin, MD, FCCP, FAARC Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP) Ingomar, PA

6:00 P.M. ~ 8:00 P.M. Evening Reception & Cocktails (Dress Casual)

Hard Rock Cafe - Miami

Bayside Marketplace 401 Biscayne Blvd Miami, FL 33132

Phone: (305) 377-3110

1 mile from Hilton Miami Downtown

6:30 P.M. ~ 8:30 P.M. Speakers & VIP Dinner (Dress Casual)

Knife Argentinian Steakhouse - Miami

Bayside Marketplace 401 Biscayne Blvd Miami, FL 33132

Phone: (305) 377-3110

1 mile from Hilton Miami Downtown













# PULMONARY HORIZONS 2<sup>ND</sup> ANNUAL COPD CONFERENCE Miami Hilton Downtown 1601 Biscayne Blvd, Miami, FL 33132 July 17-19, 2015

# **CONFERENCE AGENDA**

# **Sunday July 19, 2015**

# 7:00 A.M. ~ 7:45 A.M. Registration/Continental Breakfast (Foyer - Symphony Ballroom)

Registration and post-panel assessments Powered by Turning Technologies - Sponsored by Corporate Partner Sunovion Pharmaceuticals, Inc. Speakers ask questions and receive real-time feedback with handheld clickers or mobile devices. Results instantly display on screen and collect in detailed reports to ensure all participants are counted. No need for paper forms as the technology tracks participants for individual knowledge for pre and post-tests and captures interactive response real-time to catalogue solutions, designed for unique insights to provide data-driven summaries.

### 7:45 A.M. ~ 8:00 A.M. Welcome/Overview of the Day & Summary of Day 1 (Symphony Ballroom I)



Brian W. Carlin, MD, FCCP, FAARC
Pulmonologist, President and Medical Director
Sleep Medicine and Lung Health Consultants, LLC
Vice President, National Board for Respiratory Care (NBRC)
Chairman, National Lung Health Education Program (NLHEP)
Ingomar, PA



Robert McCoy, BS, RRT, FAARC
Managing Director
Valley Inspired Products
Principal, ValleyAire Respiratory Services
Associate Executive Director, Pulmonary Horizons
Apple Valley, MN

### 8:00 A.M. ~ 8:45 A.M. Keynote Presentation (Symphony Ballroom I)



Amritha Kidiyoor, PhD, Researcher, Wake Forest Baptist Medical Center, Institute for Regenerative Medicine, Winston Salem, NC Dr. Kidiyoor currently serves as a researcher under Anthony Atala, MD, Director at the Wake Forest Baptist Medical Center's Institute for Regenerative Medicine. Her specific interests are associated with reprogramming fibrotic lung tissue to functional epithelial lung tissue. She works with more than 300 scientists in the fields of biomedical and chemical engineering, cell and molecular biology, biochemistry, pharmacology, physiology, materials science, nanotechnology, genomics, proteomics, surgery and medicine to translate the science of regenerative medicine into clinical therapies, that will benefit patients with chronic lung disease.

8:45 A.M. ~ 8:55 A.M. Break (Symphony Ballroom II)













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# CONFERENCE AGENDA

# **Sunday July 19, 2015**

8:55 A.M. ~ 10:05 A.M. Panel: Innovation, Emerging and Remote Technology - (Symphony Ballroom I)

Panelist will provide an overview of perspectives and experience with innovation in healthcare from a policy perspective, technology, process and development for innovation and the infrastructure, which is supportive of innovation. Innovation in healthcare continues to be a driving force in the quest to balance cost containment and health care quality; while improving outcomes.

Timely transfer of clinical data will alert monitoring staff that patients with COPD are starting to deteriorate. Symptoms worsen for 3-5 days before an exacerbation needs treatment so this window of opportunity can lead to earlier interventions by health teams (Seemungal et al, 2000). The aim is to improve symptoms, avoiding hospital admissions or reducing length of stay. Telemonitoring may lessen the need for home visits, allowing better use of limited staff time and resources without compromising care. It can also be used to improve patients' knowledge and motivate them to change behaviors that will help them manage their illness. The Centers for Medicare & Medicaid Services (CMS), views Telemedicine as a cost-effective alternative to the more traditional face-to-face way of providing medical care (e.g., face-to-face consultations or examinations between provider and patient) that states can choose to cover under Medicaid. This definition is modeled on Medicare's definition of telehealth services (42 CFR 410.78).



Moderator

# Brian W. Carlin, MD, FCCP, FAARC Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP) Ingomar, PA



Win Vaughan, MBA
President
Catholic Health
Initiatives
Virtual Health Services
Englewood, CO



Matt Mesnik, MD
Chief Medical Officer
QuickCheck eHealth
Express Healthcare
Board Member,
eVeritas
Founding Partner
eLTOT (Long-Term
Oxygen Therapy)
Minneapolis, MN



Amritha Kidiyoor, PhD
Doctoral Researcher
Wake Forest University
Baptist Medical Center
Institute for
Regenerative Medicine
Winston Salem, NC



**Panelists** 

Mike Hess, RCP. RRT
Veterans
Administration
Medical Center
U.S. Department of
Veterans Affairs
Kalamazoo, MI



Sandra G. Adams, MD, MS
Web-based Interactive
Professional Education
Medical Director
Professor of Medicine
Division of Pulmonary
Diseases & Critical Care
University of Texas
Health Science Center
San Antonio, TX



Vernon R. Pertelle, MBA, RRT
President and CEO
StratiHealth, Inc.
Executive Director
Pulmonary Horizons, Inc.
San Diego, CA

10:05 A.M. ~ 10:15 A.M. Break - (Symphony Ballroom II)













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# CONFERENCE AGENDA

# **Sunday July 19, 2015**

### 10:15 A.M. ~ 11:00 A.M. Panel: New Technology vs. New Products - (Symphony Ballroom I)

New technology is one of the primary drivers for increased healthcare costs in the United States. Both physician and industry play important roles in the development, adoption, utilization and choice of new technologies and new products. The Federal Drug Administration regulates new drugs and new medical devices, but healthcare technology assessment (HTA) remains limited. HTA today it is decentralized with increasing private sector efforts. Innovation is left to free market forces, including direct to consumer marketing and consumer choice. But to be fair to the consumer, we must highlight the risks and benefits of a new technology or new products in order for health professional and consumers to make an informed choice. Physicians, institutions and industry need to work together by providing proven, safe, clinically effective and cost effective new technologies, which require valid pre-market clinical trials and post-market continued surveillance with national and international registries allowing full transparency of new products to the consumer—the patient.

**Panelists** 



Moderator

Robert McCoy, BS, RRT, FAARC
Managing Director
Valley Inspired Products
Principal, ValleyAire Respiratory Services
Associate Executive Director, Pulmonary Horizons
Apple Valley, MN



Marvin C. Weiss, MD
Pulmonologist
Southern California
Permanente
Medical Group
Kaiser Permanente
San Diego, CA



Matt Mesnik, MD
Chief Medical Officer
QuickCheck eHealth
Express Healthcare
Board Member,
eVeritas
Founding Partner
eLTOT (Long-Term
Oxygen Therapy)
Minneapolis, MN



Marlene Davis
Clinical Technology
Senior Clinical Systems
Engineer
National Facilities
Services
Kaiser Foundation Health
Plan Kaiser Permanente
Pasadena, CA



Brian Tiep, MD, FCCP, FAACVPR

Medical Director

Pulmonary Rehabilitation

City of Hope

Medical Director, Respiratory

Disease Management Institute

Duarte, CA



Vernon R. Pertelle, MBA, RRT
President and CEO
StratiHealth, Inc.
Executive Director
Pulmonary Horizons, Inc.
San Diego, CA

11:00 A.M. ~ 11:10 A.M. Break - (Symphony Ballroom II)













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# **Sunday July 19, 2015**

### 11:10 A.M. ~ 12:20 P.M. **Roundtable Discussion: Clinical Research in Non-Traditional Settings** (Symphony Ballroom I)

Traditional randomized, controlled trials (RCTs) are considered the "gold standard" of study designs because they provide the highest certainty that impacts can be attributed to the intervention itself, rather than to external factors. Randomization helps ensure that the treatment and control groups are similar to each other before they receive the intervention; tight control of the setting and delivery of the intervention help ensure that other external factors do not contribute to observed differences in outcomes. As a result, traditional RCTs minimize bias by isolating the effect of an intervention from other potential causes. In other words, traditional RCTs provide internally valid estimates of program effects (that is, they are accurate for the given setting and the patients with whom they are tested). However, traditional RCTs may provide information that is of limited usefulness to clinicians, payers, and other decision makers about the effectiveness of Patient Centered Medical Home (PCMH) models and other health care interventions that occur in real-world; such as home medical equipment, home health that occur outside of the institutional setting.



Facilitator/Scribe

Vernon R. Pertelle, MBA, RRT President and CEO StratiHealth, Inc. **Executive Director** Pulmonary Horizons, Inc. San Diego, CA



Moderato

### Brian W. Carlin, MD, FCCP, FAARC

Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP) Ingomar, PA





Julian Husbands, MD Vice President Home Healthcare Services Apria Healthcare Lake Forest, CA



Nicholas Yphantides, MD, MPH Chief Medical Officer Health and Human Services San Diego County National Director Health & Wellness Axene Health Partners, LLC San Diego, CA



Amritha Kidiyoor, PhD **Doctoral Researcher** Wake Forest University **Baptist Medical Center** Institute for Regenerative Medicine Winston Salem, NC



Brian Tiep, MD, FCCP, FAACVPR Medical Director Pulmonary Rehabilitation City of Hope Medical Director, Respiratory Disease Management Institute Duarte, CA



Robert McCoy, BS, RRT, FAARC **Managing Director** Valley Inspired Products Principal ValleyAire Respiratory Services Associate Executive Director **Pulmonary Horizons** Apple Valley, MN



Brian K. Walsh, PhD, MBA, RRT-NPS, ACCS, AE-C, FAARC Associate Anaesthesia Harvard Medical School Clinical Research Coordinator Boston Children's Hospital Boston, MA













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# **Sunday July 19, 2015**

12:20 P.M. ~ 12:50 P.M. Working Box Lunch - Roundtable Discussion: Clinical Research in Non-Traditional Settings - (Symphony Ballroom I)

12:50 P.M. ~ 1:35 P.M. Panel: Integrating Home Medical Equipment (HME) Providers in the Continuum of Care - (Symphony Ballroom I)

The clinical and economic burden of chronic obstructive pulmonary disease (COPD) is significant and is increasing. Today's healthcare system perpetuates a view of DME (durable medical equipment) providers as deliverers of equipment, not providers of care. But Respiratory Therapists, who work for HME providers, can ensure that the right oxygen equipment is matched to a patient. Most importantly they serve as allied health experts that can truly bridge the gap between the patient and their physician to identify issues that could lead to a rapid decline in their condition. The value-based rationale for partnering and including HME providers in the continuum of care is not clearly defined; although represents a significant opportunity to improve outcomes while reducing costs, thus must be explored further to ensure all resources are used effectively.



Moderator

George N. Miller, Jr., MHSA
Chief Executive Officer
CommUnity Health Center
Professor, Central Michigan University
Past Commissioner, Medicare Payment Advisory Commission (MedPAC)



Kelly Garber, RRT Senior Director National Clinical Services Apria Healthcare Lake Forest, CA



Andre Boyd, FACHE
Senior Vice President
Chief Executive Officer
Jackson North Medical
Center
Jackson Health System
Miami, FL



Isabel Pereira, MD
Geriatrician
Internal Medicine
Medical Director
Home Health and
Hospice
Hyperbaric Medicine
Carlsbad, CA



**Panelists** 

Tim Buckley, MS, RRT System Director ACO, Respiratory Summa Health System Akron, OH



Christine Cunningham, BS, RRT
Clinical Director
CHI Health at Home
Catholic Health Initiatives (CHI)
Columbus, OH



Jim and Mary Nelson
Patient and Caregiver
EFFORTS; Advocate
COPD Foundation
American Lung Association
Tucson, AZ













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# **Sunday July 19, 2015**

### 1:35 P.M. ~ 2:00 P.M. Wrap-Up and Next Steps/Opportunities - (Symphony Ballroom I)

The opportunity to enhance patient diagnosis, treatment and management through innovative and collaborative clinical management of COPD can eliminate the complex nature associated with patients diagnosed with COPD and lead to better health outcomes while reducing the cost burden of caring for patients. Patients with COPD require lifelong monitoring and responsive disease management as the disease progresses. The summary of the panels will be discussed based on data and information captured by the Turning Technologies software to identify successful practices and actionable next steps by meeting participants; summarized in a document for attendees to take home with them.



Brian W. Carlin, MD, FCCP, FAARC Pulmonologist, President and Medical Director Sleep Medicine and Lung Health Consultants, LLC Vice President, National Board for Respiratory Care (NBRC) Chairman, National Lung Health Education Program (NLHEP) Ingomar, PA

### 2:00 P.M. ~ 3:00 P.M. Networking and Refreshments - (Symphony Ballroom II)

The opportunity to network and collaborate with one another following the conference to continue the discussion and support the exchange of ideas and information for next steps. Complimentary water, coffee and tea and a two (2) drink minimum ticket provided for alcoholic beverages. A cash bar will be available for additional drinks.













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The Program Committee and Staff of Pulmonary Horizons and National Lung Health Education Program (NLHEP), would like to Thank Our Corporate Partners and Platinum Sponsors for their Generous Support and Time















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# **About Pulmonary Horizons**

### **Mission**

The mission of Pulmonary Horizons (PH) is to provide the highest quality, balanced, *patient centered cross-continuum education*™ in a learning environment that fosters critical thinking, encourages participation by all stakeholders, and instill a strong appreciation of practical knowledge and applied evidence-based programs in the treatment and management of patients diagnosed with COPD. Pulmonary Horizons is a nonprofit, tax-exempt IRS Section 501 (c) (3) organization; in partnership with the National Lung Health Education Program (NLHEP).

# **Purpose**

The purpose of Pulmonary Horizons COPD Education is to enhance the dialogue, knowledge and eliminate barriers between all stakeholders as participants to contribute to the most comprehensive and efficient learning, and collaboration to improve the overall care of patients with COPD. Speakers, participants and patients are responsible to engage in effective dialogue to uncover new knowledge to support lifelong learning – based on practical patient centered recommendations.

### **Board of Directors**

Brian W. Carlin, MD
Isabel Pereira, MD
Robert McCoy, RRT
Vernon R. Pertelle, RRT
Brian Tiep, MD





