2026 Spring Intensive: Regulatory Update

“Better Together: Strengthening Care Through Community Partnership”

May 7–8, 2026 | Sheraton Portland Airport Hotel | Portland, Oregon

Jointly hosted by the Oregon Hospice & Palliative Care Association (OHPCA) and the Washington State Hospice & Palliative Care Organization (WSHPCO)

DETAILED SCHEDULE – THURSDAY, MAY 7, 2026

<table>
<tr><td>*Breakfast, Registration/Sign In*</td><td>*7:45–8:30a*</td></tr>
<tr><td>Welcome, Housekeeping, Announcements</td><td>8:30–8:45a</td></tr>
<tr><td>**Keynote - A View from the Other Side: Caregiver Perspectives on Hospice**
Dr. Ashley Meagher, MD, MPH, FACS</td><td>8:45–9:45a</td></tr>
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Dr. Ashley Meagher was a board-certified general surgeon and surgical intensivist when she unexpectedly became the primary caregiver for her terminally ill husband. Dr. Meagher will share her insights regarding their shared hospice experience. She will discuss the lack of knowledge she and her physician colleagues had regarding what services hospice and palliative care programs provide. Dr. Meagher will also discuss the challenges of providing direct, hands-on caregiving in a home that was not designed for the use of “DME”. The experience of being a caregiver has provided Dr. Meagher with “lessons learned” that she hopes to share with hospice and palliative care providers for the rest of her career.
Session Learning Objectives:
• Identify opportunities for improvement in how referral sources explain what palliative care and hospice services include and do not include.
• Assess their program’s patient and family-facing educational materials for content and clarity.
• Identify how to assess a caregiver’s need for hands-on training in providing direct patient care.
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<tr><td>**Helping Care Go Well: A Caregiver’s Role in the Hospice Experience**
Meg McCauley, Director of Association Management and IT Manager, OHPCA & WSHPCO</td><td>9:45–10:15a</td></tr>
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This session offers a caregiver’s perspective on hospice care shaped by both lived experience and professional work in hospice and palliative care. Drawing from her experience caring for her husband while he was receiving hospice care, Meg McCauley reflects on what helped care go well during a difficult time. The presentation explores how preparation, communication, and collaboration with the hospice team supported care that felt aligned and responsive, and how hospice teams can invite and support caregiver engagement—creating space for questions caregivers may not yet know to ask. This session emphasizes partnership, highlighting ways hospice teams can better support the non-clinical realities families bring with them when hospice care begins.</td></tr>
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Learning Objectives:

- Identify factors that support how a non-clinician caregiver manages the care needs of their loved one.
- Recognize how hospice teams can invite caregiver engagement by creating space for questions caregivers may not yet know to ask.
- Reflect on how communication, teaching, and logistical support (e.g., symptom management and equipment use) influence caregiver confidence and the day-to-day hospice experience at home.

Meg McCauley is a hospice and palliative care professional with over 30 years of experience supporting nonprofit organizations in Oregon and Washington. Her work has focused on association management, program development, and coordinating education and outreach for hospice providers. In addition to her professional role, Meg brings personal experience as a caregiver, which has deepened her understanding of how hospice care is experienced by patients and families. She values a practical, collaborative approach to compassionate end-of-life care.

Break with Vendors	*10:15–10:45a*
FY 2027 Proposed Hospice Wage Index Rule AND a Chance to Create Comments in Response – Make a Difference Today! Judi Lund Person, MPH, CHC, Lund Person & Associates Hospice Consulting	10:45a–12p

The FY 2027 Hospice Wage Index proposed rule will publish in early April, 2026. In addition to an expected rate increase, we are expecting other regulatory changes and requests for information as well. We will explore the various components of the proposed rule and the proposed wage index values (by state/by county). It is likely that there will be some mention of proposals to curb fraud, waste and abuse in hospice. We will carefully consider the proposals and comment – yes. Do you have something to say? Do you want to comment on issues that make delivering hospice care more difficult, more costly, or more duplicative? We will discuss and create comments that can be submitted on behalf of Washington and Oregon providers. This is your chance to truly make a difference!

Learning Objectives:

- Describe the changes CMS has proposed in the FY2027 hospice wage index proposed rule.
- Discuss non-rate proposals impacting Medicare hospice regulations and formulate comments for submission.
- Discuss challenges hospice providers have in these times and create comments to share as a part of the proposed rule comment process.

Judi is the principal of the newly established Lund Person & Associates, LLC, hospice consulting. For 21 years, she served as the Vice President, Regulatory and Compliance at the National Hospice and Palliative Care Organization, where she served as a key contact with the Centers for Medicare and Medicaid Services, other federal agencies, helping to ensure that NHPCO's voice was heard with policymakers.

In 2024, Judi was selected for inclusion in the 2024 Edition of Who's Who in America and was also presented with the Albert Nelson Marquis Lifetime Achievement Award by Marquis Who's Who.

Over her two-decade tenure with NHPCO, Judi developed and updated countless tools and resources for hospice providers and has authored numerous articles on hospice care. She has also spoken at state and national hospice meetings throughout the country. She is known for turning regulations into "plain English" so that providers will understand how a change will impact their program.

Early in her career, Judi was a part of a small group of advocates that worked for the passage of the Medicare Hospice Benefit in Congress. That advocacy work resulted in the addition of hospice to Medicare in 1982, with the original Medicare Hospice Conditions of Participation published in 1983.

Lunch, Visit with Vendors	*12–1p*
Hospice Documentation Requirements (via Zoom) Kathy Mersh, Medicare Part A Provider Outreach & Education Consultant; NGS, an Elevance Health Company	1–2p

This session will provide a clear, practical overview of hospice documentation requirements, including key regulations, best practices, and effective strategies. Attendees will gain actionable guidance to help prevent and address common denial issues while supporting ongoing Medicare compliance.

Learning Objectives

- Support ongoing compliance with Medicare regulations
- Strengthen understanding of hospice documentation requirements
- Develop solutions to resolve documentation-related denials

Kathy Mersch brings over 20 years of experience with Wellpoint Federal and currently serves as a Provider Outreach and Education Consultant. In this role, she partners with Part A providers across the J6 and JK Medicare regions. Throughout her career, she has collaborated with the Centers for Medicare & Medicaid Services, legislative offices, the Office of Inspector General, Quality Improvement Organizations, and both beneficiaries and providers to help ensure patients receive the care and services they need.

Empowering Clients with Updated Funeral Resource Information Holly Pruett, MA, Funeral Celebrant & Death Doula, Oregon Funeral Resources & Education	2–3p

Did you know that in Oregon and Washington, no one is required to purchase the services of a funeral home? Family-driven after-deathcare can be an empowering part of the care continuum. Unfortunately, many first responders, hospice, and funeral industry pros don't know about the rights of families to care for their own dead. This session introduces non-commercial public information tools for hospice and palliative care staff and their clients—"a good resource for families," says Oregon Chief Medical Examiner Sean Hurst, MD. "Many people out there are just legitimately unaware of this option that families have."

Learning Objectives:

- By attending, participants will be able to identify and correct 3 common misconceptions about after-deathcare
- By attending, participants will understand how hospice organizations can empower their clients with non-commercial information on funeral rights and resources

- On completion of this session, participants will be able to find and share accurate information on funeral resources

An experienced and knowledgeable life passage guide, Holly J. Pruett helps individuals, families, and communities to prepare for, live with, and talk about death. Holly is professionally trained as a Life-Cycle Celebrant, Community Death Educator, Home Funeral Guide, and Death Doula, with two Proficiency Badges from the National End-of-Life Doula Alliance, and certification in Thanatology from the Association for Death Education & Counseling.

Break with Vendors	*3–3:15p*
Key Drivers of Hospice Access and Experience Marc Berg, Co-Owner & Sarah Cameron, Principal, Berg Data Solutions	3:15–4:15p

Using a comprehensive dataset that includes every Medicare provider in the country, this session explores key drivers of hospice access focused on the patient experience in Washington and Oregon. We evaluate the intersection of hospice admission criteria to clinical practice in the hospital to unpack barriers to hospice access and identify where hospice agencies can step up support that encourages appropriate patient care.

Learning Objectives:

- By engaging in this workshop, participants will understand the frequency with which residents of Washington and Oregon access hospice services.
- By engaging in this workshop, participants will understand how WA and OR compare to National and Case-Mix Adjusted benchmarks for key drivers of hospice access.
- By engaging in this workshop, participants will establish a foundation for concrete ways to improve access to hospice care.

Marc has over 40 years of experience in the healthcare industry. His experience spans founding and owning a home medical equipment (HME) company and home health agencies, starting a venture capital-financed sleep study equipment manufacturer/service provider, to holding several senior leadership positions with major healthcare organizations. His responsibilities with healthcare systems have spanned inpatient and post-acute services as well as operational and finance roles. In 2017 Marc co-founded Berg Data Solutions with his son Alex Berg to analyze provider data and provide insights to organizations based on his years of experience in healthcare. The opportunities identified in this work allow organizations to improve their financial performance, patient satisfaction scores, and clinical outcomes.

Sarah is a strategic healthcare leader with 20 years' experience and a passion for making healthcare simple, accessible, and community-based. While in her most recent role at Providence, she supported strategic planning, growth and transformation of a dynamic home-based portfolio, which included home health, hospice, palliative care, home infusion, PACE, DME, skilled nursing facilities, and other services across multiple states. She has deep experience in WA hospice and home health Certificate of Need, launching new PACE sites, and cultivating strong acute to post-acute partnerships. Sarah joined Berg Data Solutions in October 2025 and is thrilled to translate big data into actionable strategic projects that improve both business performance and the way people experience care in our communities.

Adjournment	4:15p

DETAILED SCHEDULE – FRIDAY, MAY 8, 2026

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<tr><td>Breakfast, Registration/Sign In</td><td>7:45–8:30a</td></tr>
<tr><td>Welcome, Housekeeping, Announcements</td><td>8:30–8:45a</td></tr>
<tr><td>Plenary - Better Together: Community as Intervention in End-of-life Care
Erin Collins, MN, RN, CHPN, Director of Programs, The Peaceful Presence Project</td><td>8:45–9:45a</td></tr>
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Illness, dying and grief are universal experiences. Palliative care and hospice provide integral, important medical care as we navigate these experiences. Yet research has shown that only 5% of a dying person's time is spent face to face with medical providers. Communities have a responsibility to provide support in the other 95% of the time. Partnering with non-medical community resources can be a key intervention to improve the quality of the dying and grief experience of your patients. This session will describe the Compassionate Community model of care and the Oregon Network for Community-based Serious Illness Support and how to access community partners.

Learning Objectives:

- After completing this session, participants will be able to identify three community-based roles that provide non-medical care
- After completing this session, participants will be able to describe the Compassionate Community Model of Care
- After completing this session, participants will understand how to access a statewide network of community-based providers

Erin is a Certified Hospice and Palliative Care Nurse with 18 years of nursing experience in hospice and adult and pediatric oncology. She received her master's degree in nursing education from OHSU in 2022 and is a graduate of the Being with Dying program at Upaya Zen Center. Erin is a 2022 Cambia Health Foundation Sojourns Scholar and a 2025 recipient of the Hastings Center for Bioethics Cuniff-Dixon Award for excellence in palliative care nursing. She is a board member for the Oregon Hospice and Palliative Care Association and the Oregon Health Authority Palliative Care Advisory Council.

She co-founded her non-profit, The Peaceful Presence Project, after seeing that many patients came to hospice afraid of death and largely unprepared for it. She is committed to educating the community at all levels, including individuals, families, students and clinicians in preparing for and talking about serious and terminal illness with compassion and tenderness. She empowers families to be present with their loved ones in the final stage of life, however long that may be, and believes that by talking about and planning for death with our loved ones, we can ease much of the suffering that arises at the end of life.

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<tr><td>Break with Vendors</td><td>9:50–10:15a</td></tr>
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Partners In Care Integrated Volunteer Doula Program 10:15–10:55a

Shannon Campbell, Volunteer Manager, Partners in Care and Lisa Hurley, Chief Operating Officer, Partners in Care

This session highlights how Partners In Care, a Central Oregon nonprofit hospice and palliative care provider, developed an integrated volunteer end-of-life doula program to enhance whole-person care across its 10,000-square-mile service region. Grounded in more than 45 years of service and consistent 5-star Medicare quality ratings, the program embeds trained volunteer doulas within the care continuum to provide emotional, spiritual, and practical support for patients and families. The presentation explores impacts on interdisciplinary collaboration, community engagement, and organizational identity, along with implementation considerations including role clarity, training standards, funding, evaluation metrics, and scalable strategies to support long-term sustainability.

Learning Objectives:

- Explain how integrating volunteer end-of-life doulas enhances whole-person care and continuity across hospice and palliative services
- Recognize essential considerations for implementing doula programs, including role clarity, training, funding, and evaluation
- Identify practical strategies for launching and sustaining a scalable, volunteer-based doula program within an established care organization

Shannon Campbell is the Volunteer Manager at Partners In Care, overseeing nearly 200 volunteers who support individuals and families at end of life. With over six years in hospice care and a background in education, she has led innovative volunteer training efforts and recently helped launch an end-of-life doula collaboration with The Peaceful Presence Project. Trained as an end-of-life doula herself, Shannon is deeply committed to holistic, person-centered care shaped by both professional experience and personal caregiving.

Lisa Hurley is the Chief Operations Officer at Partners In Care, bringing more than 18 years of leadership experience in hospice, home health, and community outreach. A dedicated advocate for access to care, she serves as President of the Central Oregon Parkinson's Council and as a board member of the Oregon Hospice and Palliative Care Association. Lisa is also the co-host of the Partners In Care Podcast and a producer of a short documentary highlighting the organization's mission and impact.

Clinical Excellence in Action: Surviving an OIG Audit 10:55-11:15a

Lisa Hurley, Chief Operating Officer and Kristi Williams, BSN, RN, Quality Manager, Partners in Care

OIG audits can be disruptive, resource-intensive, and challenging particularly for hospice organizations navigating complex regulatory expectations. This session will provide a candid, real-world overview of our organization's experience with an Office of Inspector General (OIG) audit, walking participants through the full audit timeline from initial notification to final resolution. This session is designed for hospice leaders, compliance professionals, and operational stakeholders seeking practical guidance grounded in lived experience rather than theories.

Learning Objectives:

Through practical insights, pearls, and hard-earned lessons learned, attendees will gain actionable strategies to strengthen audit readiness, improve internal coordination, and minimize operational and emotional strain during an audit process.

Lisa Hurley is the Chief Operations Officer at Partners In Care, bringing more than 18 years of leadership experience in hospice, home health, and community outreach. A dedicated advocate for access to care, she serves as President of the Central Oregon Parkinson’s Council and as a board member of the Oregon Hospice and Palliative Care Association. Lisa is also the co-host of the Partners In Care Podcast and a producer of a short documentary highlighting the organization’s mission and impact.

Kristi Williams, BSN, RN, has been with Partners In Care for 21 years, spending the past 16 years in Quality. During her career she has worked as a dialysis nurse, stayed home with her children, and then returned to healthcare. Kristi collaborated closely with the CEO and board to successfully merge two smaller organizations to form Partners In Care. Outside of work, Kristi’s greatest joy is her family—especially her two-year-old grandson and three-month-old twin granddaughters, who live nearby in Central Oregon.

Better QI Leads to Better Outcomes; One Agency's Journey Greg Pang, Principal, MHA, Greg Pang Healthcare Consulting	11:15a-12:15p

Our agency struggled for years to clearly describe the role of the QI department. The importance of QI has grown immensely as there were new requirements for QAPI plans and increasing focus on Compliance, Accreditation, Star Ratings, Value Based Purchasing, and Patient Satisfaction. I'll describe my agency's QI journey, and outline our "best practices" for participants in their journey to create their own!

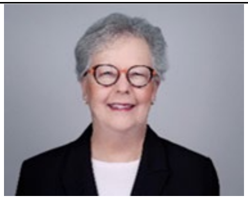
Learning Objectives:

- Understand the increasing prominence of QI in Hospice
- Gain ideas for further organizing and evolving QI functions
- Share your own "best practices" to increase quality at your agency

Greg is a native of Washington State, and has over 35 years’ experience including the most recent 17 years as CEO of an agency providing home health, in-home hospice, private duty home care, and operated 2 hospice care centers. The agency grew 10-fold in net assets over the course of his tenure. Greg is published in professional journals and has presented at national, state and local conferences. Greg served 2 terms on the Board of the National Homecare and Hospice Association, and 2 terms on the Board of the Home Care Association of Washington.

Greg’s specialty areas include startups, financial systems, operations management, performance indicators, compliance, marketing, information systems and also nonprofit management, accounting, and fundraising. Greg also has recent experience as an executive, professional, and teams coach. Greg is a skilled and dynamic presenter in a variety of settings, having a bachelor’s degree in Speech Communication in addition to a Master’s Degree in Health Administration.

Lunch, Exhibitor Bingo Drawing, Vendor Drawings	*12:15–1:15p*
Hard-Won Lessons in Hospice Care: The HOPE Tool and Responding to Emergencies Kathryn Bomkamp, Kaiser Hospice & Palliative Care; Casey Byman, RN, BSN, Hospice Quality Program Manager, EvergreenHealth; Zoe Diaz, MBA, CHC, COO, Tri-Cities Chaplaincy; Judi Lund Person, MPH, CHC, Lund Person & Associates Hospice Consulting, Christine Nidd, CPHQ, PMP, MSW, Manager of Quality & Compliance, Hospice of the Northwest	1:15-2:15p



During this panel presentation, panelists will share their experiences, expertise and understanding after the first six months of implementing the CMS HOPE tool. Two panelists will also share their lived experiences and learnings after having dealt with emergency situations which greatly impacted their ability to provide hospice care to their patients.

Learning Objectives:

- Identify how other hospice programs have managed challenges in meeting Regulatory Requirements: both related to the HOPE tool and Emergency Preparedness.
- Identify workflows and staff training strategies that have improved acclimatization to the HOPE tool in other hospice programs.
- Identify how the experience of a "real-life disaster" has improved the emergency preparedness in two hospice programs.

Kathryn Bomkamp, BSN, RN is the Hospice and Palliative Quality Manager for Kaiser Permanente Northwest (KPNW), serving the Portland Metro and Vancouver/Clark County areas. She brings more than 25 years of experience in healthcare, including 20 years dedicated to hospice and palliative care. Kathryn began her hospice career in 2006 at a Midwest hospice program, where she served as a Case Manager before advancing into the role of Clinical Educator, supporting staff development and clinical excellence. In 2017, she joined Kaiser Permanente Northwest Hospice/Palliative Care, initially serving as an RN Team Lead and Triage Nurse before transitioning into the Quality Department. She has served as the Hospice/Palliative Quality Manager since late 2021, focusing on quality improvement, regulatory compliance, and the delivery of high-quality, patient-centered end-of-life care.

Casey Byman, RN, BSN, CHPN graduated from Pacific Lutheran University with a Bachelors in Nursing and went on to start her career in Hospice care. She's worked for EvergreenHealth Hospice in Kirkland WA for over 10 years, starting with 7 years of direct patient care and 3+ now in Quality Compliance. Casey strives to help clinicians achieve their goal of excellent patient care while maintaining documentation compliance.

Zoe Diaz has over a decade of experience in health care administration, with the past several years dedicated to hospice and palliative care compliance and administration. Prior to these roles, she provided direct care to hospice patients while overseeing the administration and regulatory compliance of adult family homes in the Tri-Cities community. Her unique blend of hands-on caregiving and regulatory expertise offers a well-rounded perspective on hospice quality operations, patient advocacy, and organizational leadership. Zoe also serves on the WSHPCO Board of Directors.

Judi is the principal of Lund Person & Associates, LLC, a hospice consulting firm. She previously served for 21 years as Vice President of Regulatory and Compliance at the National Hospice and Palliative Care Organization, where she worked closely with federal agencies, including CMS, to represent hospice providers in policy discussions. Judi has developed numerous tools and resources, authored articles, and spoken nationally on hospice care, and is known for translating complex regulations into practical guidance. Early in her career, she contributed to advocacy efforts that helped establish the Medicare Hospice Benefit. She was recognized in *Who's Who in America* and received the Albert Nelson Marquis Lifetime Achievement Award.

Christine has over 12 years of hospice quality and regulatory experience at Hospice of the Northwest. She spent ten years on the NHPCO Quality and Standards Committee and three years as an Examiner for the Malcolm Baldrige National Quality Award. She holds an MSW and the CPHQ and PMP credentials, blending clinical insight with deep expertise in quality improvement and operational leadership. She focuses on strengthening quality systems, regulatory readiness, and organizational resilience to help hospice providers better prepare for and adapt to emerging challenges.

Break *2:15–2:30p*

Regulatory Deep Dive – Up to the Minute Hospice Regulatory Issues 2:30-3:30p

Judi Lund Person, MPH, CHC, Lund Person & Associates Hospice Consulting

What are the latest hospice regulatory issues and challenges? What new actions is CMS doing to curb fraud, waste and abuse in hospice. Can we describe the fraud with data? Hospice scrutiny is on the rise. What are the current topics? What topics are the various CMS contracted auditors looking at in hospice and what are they finding? What are policy makers considering for changes to the Medicare hospice benefit or to the payment structure? What regulatory changes have just been implemented for hospices this year? Closer to home, what do we know about hospice providers in Oregon? In Washington State? How can we track when a new provider is coming to town? Does the state licensing agency collect data and review before a license is granted? What do we know about the process prior to Medicare certification? What does the data tell us? So many thought-provoking questions for our discussion!

Learning Objectives:

- What recommendations is MedPAC considering for ESRD patients, or those needing palliative radiation, chemotherapy, or blood transfusions?
- What are the topics for CMS-contracted auditors? What do we know about their results?
- List the hospice data that should be gathered in your state to describe hospice services in your state in detail.

Adjournment 3:30p