



GET READY FOR

**Denver!**  
**JULY 20-22, 2026**



**HEALTHTRUST**  
 UNIVERSITY CONFERENCE

**12 Breakout Sessions for Education & Professional Development**  
**OPEN TO SUPPLIERS**

Note: Information is up to date as of **April 21**. Presenters and information subject to change.

**New for 2026: Suppliers are eligible to apply for CE credits for 8** of the 12 sessions open to them this year. Four of the 12 sessions do not offer CE credits. (Credit and/or a certificate of participation is available in the disciplines of Healthcare Executives, Nursing, Pharmacy and/or Supply Chain as noted below.) Contact [education@htu.healthtrustpg.com](mailto:education@htu.healthtrustpg.com) with questions.

**BREAKOUT SESSIONS AT-A-GLANCE**

**MONDAY**

**MON. July 20 | 1 – 2PM Category: Sustainability—CE**  
**Connecting the Dots: Creating Cohesion in Healthcare Sustainability**  
 CE Credit proposed: Healthcare Executive, Nursing, Pharmacy, Supply Chain  
 Other Target Audiences (no CE): ASC, Physicians

**MON. July 20 | 1 – 2PM Category: Rx Operations—CE**  
**Make the Rocky Mountains of Pharmacy Staffing Less Rocky With Remote Clinical Pharmacist Services**  
 CE Credit proposed: Pharmacy, Healthcare Executive

**MON. July 20 | 2:15 – 3:15PM Professional Development**  
**Momentum: The Energy to Keep Going**  
 (featuring Suneel Gupta) – No CE

**MON. July 20 | 2:15 – 3:15PM Category: Rx Clinical—CE**  
**Less is more? A Debate on Current ID Practices**  
 CE Credit proposed: Pharmacy  
 Certificate of participation: Allied Health  
 Other Target Audiences who may be interested (no CE): ASC, Physicians

**MON. July 20 | 3:30 – 4:30PM Category: Rx—No CE**  
**Pharmacy Benefit Landscape: What Health Systems Need to Know Now**  
 Who will benefit from this session: C-suite, Pharmacy Leadership, Supply Chain

**MON. July 20 | 3:30 – 4:30PM Category: Rx Leadership—CE**  
**New Hospital, New eHR...New Health System!**  
 CE Credit proposed: Pharmacy, Nursing, Supply Chain  
 Certificate of Participation: Allied Health  
 Other Target Audiences (no CE): Physicians

**TUESDAY**

**TUES. July 21 | 9:45 – 10:15AM MICRO ED No CE**  
**Aligning Contract Labor to Demand: All the Cost Savings, None of the Disruption**  
 Who will benefit from this session: C-suite, Supply Chain, Nursing Leaders

**TUES. July 21 | 2:30 – 3:30PM Professional Development**  
**Fear Less, Do More** (featuring Michelle Poler) – No CE

**TUES. July 21 | 2:30 – 3:30 PM Category: Rx Leadership—CE**  
**Creating a Leadership Launchpad: Fueling the Next Generation**  
 CE Credit proposed: Pharmacy, Nursing, Supply Chain, Healthcare Executive  
 Certificate of Participation: Allied Health

**TUES. July 21 | 2:30 – 3:30 PM Category: Rx Clinical—CE**  
**Multidisciplinary Process for the Review of Existing & Emerging Biosimilars**  
 CE Credit proposed: Pharmacy

**WEDNESDAY**

**WED. July 22 | 7 – 8AM Category: Rx Operations—CE**  
**Medical Group Practices—What are they using & where are they getting it?**  
 CE Credit proposed: Rx, Supply Chain, Healthcare Executive  
 Certificate of Participation: Allied Health  
 Other Target Audiences who may be interested (no CE): ASC

**WED. July 22 | 7 – 8AM Category: Rx Operations—CE**  
**A Mile High View of Pharmacy Performance: Developing a System-level Director of Pharmacy Dashboard**  
 CE Credit proposed: Pharmacy, Healthcare Executive



## Breakout Sessions in Detail

Note: Information is up to date as of **April 21**. Presenters and information subject to change.

MONDAY, July 20, 2026

1 – 2PM Time Block

MONDAY, July 20 | 1 – 2PM

### Connecting the Dots: Creating Cohesion in Healthcare Sustainability

CE Credit proposed: Healthcare Executive, Nursing, Pharmacy, Supply Chain

Other Target Audiences who may be interested (no CE): Ambulatory Surgery Center, Physicians

Course level: Basic

Category: Sustainability—CE

#### Presentation Summary

In the United States, healthcare contributes to 8.5% of total carbon emissions which stems from Scope 1, Scope 2 and Scope 3 emissions. A focus on environmental sustainability enables a healthcare system to minimize its footprint by reducing waste, improving energy efficiency and reducing greenhouse gas emissions while serving as community role models. To be effective at addressing the many facets of sustainability, organizations need structure. Learn how sustainability and risk assessment can work together to help organizations understand how to be proactive to reduce risk. Join this session and hear from subject matter experts who will share insights on current legislation, areas of opportunity and available resources.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Identify opportunities to incorporate sustainability into your organization.
2. Recall various global sustainability legislative and regulatory actions that impact healthcare.
3. Recognize evidence-based resources and recommended practices available to healthcare members including those that are specific to HealthTrust to support sustainability integration efforts.

#### Biographies

**Zoë Beck**, MBA, Master of Environmental Management, is the AVP of Sustainability at HCA Healthcare where she leads the company's efforts in sustainability and environmental, social and governance (ESG)

issues. Previously, Beck led the sustainability and ESG efforts for HealthTrust and Premier, working with industry suppliers, member health systems and other stakeholders to advance efforts in environmentally preferred purchasing and supplier transparency to assist health systems in achieving their related goals. She earned an MBA and Master of Environmental Management from Duke University and a B.S. in Business Administration from the University of Notre Dame.

**Stephanie Ward**, RN, BSN, is a Senior Manager on HealthTrust’s Clinical Operations team with more than 27 years of nursing experience. Working alongside the GPO Strategic Sourcing team, she supports enterprise surgical services and environmental performance initiatives, contributing to product evaluation processes, strategy development and cross-functional coordination with advisory boards and specialty committees. Ward earned a Bachelor of Science in Nursing from the University of New Mexico.

**Jennifer Westendorf**, DNP, RN, CNOR, is the Assistant Vice President of Environmental Performance and Surgical Services, Clinical Operations at HealthTrust. In her role she manages the Surgical Advisory Board, Cardiovascular Operating Room Specialty Committee and the Environmental Sustainability Council. Westendorf works alongside the GPO Strategic Sourcing team to integrate the clinical voice of HealthTrust’s members into the sourcing process and leads the organization’s environmental sustainability program. She earned a bachelor’s degree from Western Michigan University, a master’s degree from the University of Detroit Mercy, and a Doctorate of Nursing Practice from the University of Minnesota.

#### **List of Evidence-based References and/or Industry Resources Consulted**

- Mehra, R. & Sharma, M.K. (2021). Measures of sustainability in healthcare. Sustainability Analytics and Modeling 1. <https://doi.org/10.1016/j.samod.2021.100001>
- Molero, A., Calabro, M., Vignes, M., Gouget, B., & Gruson, D. (2021). Sustainability in Healthcare: Perspectives and Reflections Regarding Laboratory Medicine. *Annals of Laboratory Medicine*, 2021 (41), 139-144 <https://doi.org/10.3343/alm.2021.41.2.139>.
- National Academy of Medicine. (n.d.). Why decarbonizing matters for the U.S. health sector. <https://nam.edu/product/why-decarbonizing-matters-for-the-u-s-health-sector/>



MONDAY, July 20 | 1 – 2PM

## Make the Rocky Mountains of Pharmacy Staffing Less Rocky With Remote Clinical Pharmacist Services

CE Credit proposed: Pharmacy, Healthcare Executive

Course level: Intermediate

Category: Pharmacy Operations—CE

### Presentation Summary

Maintaining adequate pharmacist staffing is an ongoing challenge for pharmacy leadership. The expanding need for pharmacists at the bedside can further impact site ability to provide oversight for EMR medication order review and clinical interventions. Learn how Scripps Health launched a remote clinical pharmacy service (TeleRx) to support its five hospital campuses and five oncology infusion centers. Join presenters for this session that will cover the evolution and expansion of the remote clinical pharmacy service and as well as a roadmap that can be followed by other healthcare organizations looking to explore a similar initiative.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Identify the basic requirements to establish and maintain a remote clinical pharmacy service and department for a small healthcare system.
2. Recall the process for development and the scope of services offered by one provider with five hospital campuses and five oncology infusion centers.
3. Recognize the key performance indicators used to measure the success of a remote clinical pharmacy service.

### Biographies

**Aaron Ginsberg**, PharmD, is the Director of Centralized Pharmacy Services for Scripps Health in San Diego, California. Over the last 23 years, his roles at Scripps have included Clinical Pharmacist at La Jolla Hospital; Medication Safety Officer for Mercy Chula Vista Hospital; Manager of Pharmacy Operations at Green Hospital; and Manager of Central Prior Authorization for Scripps Medical Foundation—all of which elevated his passion for healthcare. Ginsberg completed a doctoral degree at the University of Southern California and a Bachelor of Science degree in Biology at the University of California, San Diego.

**Yuliya Novak**, PharmD, is the Manager of Telepharmacy and the Centralized Pharmacy Float Pool for Scripps Health in San Diego, California. She has been with Scripps for 15 years and was instrumental in the launch and expansion of the systemwide remote clinical pharmacist service. Novak completed a Doctor of Pharmacy degree at Creighton University School of Pharmacy and Health Professions.

### List of Evidence-based References and/or Industry Resources Consulted:

- Chong RLK, Chan ASE, Chua CMS, Lai YF. Telehealth Interventions in Pharmacy Practice: Systematic Review of Reviews and Recommendations, *J Med Internet Res* 2025;27:e57129, doi: 10.2196/57129 PMID: 40334268 PMID: 12096025.

- Finkelstein RJ, Parker CP, Levy BT, Carter BL, Kennelty K. Development of a centralized, remote clinical pharmacy service to enhance primary care. Pharm Pract (Granada). 2021 Jan-Mar;19(1):2348. doi: 10.18549/PharmPract.2021.1.2348. Epub 2021 Mar 10. PMID: 33777264; PMCID: PMC7979315.
- Alexis Hyman, PharmD, MBA, MS, Engie Attia, PharmD, BCPS, David Putney, PharmD, MPH, Laura M Blackburn, PharmD, BCPS, BCCCP, FCCM. Evaluation of a Hybrid Remote Clinical Pharmacy Services Model, American Journal of Health-System Pharmacy 2025: zxaf229, <https://doi.org/10.1093/ajhp/zxaf229>.
- Kenneth A Kester, Karen M Finck, Praveen Reehal, Dorraine Reynolds, Telepharmacy services in acute care: Diverse needs within a large health system, American Journal of Health-System Pharmacy, Volume 79, Issue 11, 1 June 2022, Pages 881–887, <https://doi.org/10.1093/ajhp/zxac026>



## 2:15 – 3:15PM Time Block

**MONDAY, July 20 | 2:15 – 3:15PM**

### **Momentum: The Energy to Keep Going**

**Category: Professional Development—No CE**

**Biography Suneel Gupta** is a bestselling author, Harvard Medical School visiting scholar, and the founding CEO of RISE, a pioneering wellness company acquired by One Medical (now part of Amazon). Through his books, research and leadership work, he helps individuals and organizations build emotional resilience, prevent burnout and align purpose with performance. Drawing from his journey as an entrepreneur and investor in companies like Airbnb and Impossible Foods, Suneel equips teams with science-backed tools to sustain energy, sharpen focus and thrive at work and in life.



**MONDAY, July 20 | 2:15 – 3:15PM**

### **Less is more? A Debate on Current ID Practices**

CE Credit proposed: Pharmacy

Certificate of participation: Allied Health

Other Target Audiences who may be interested (no CE): Ambulatory Surgery Center, Physicians

Course level: Intermediate

**Category: Pharmacy Clinical—CE**

## Presentation Summary

The intersection of infectious diseases and antimicrobial stewardship can be a controversial space. This is especially true with use of combination therapies. Four areas of current debate include rifampin combination therapy, inhaled antibiotics for pneumonia, combination therapy for resistant infections, and adjunct aminoglycosides for endocarditis.

While there are several practices within infectious diseases that have become established standards of care, they are based on weak or limited evidence. Some of these practices result in more antibiotic use and toxicity. In a time of increasing healthcare costs and worsening antibiotic resistance rates, it is paramount to re-evaluate these practices and reduce unnecessary exposure to antibiotics as well as decrease spend. Presenters will share and synthesize some of the evidence that has led to select controversial practices, as understanding is the gateway to minimizing unnecessary use.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Recall evidence-based literature that supports and refutes the use of inhaled antibiotics for the treatment of pneumonia.
2. Identify in vitro and clinical data evaluating the need to use adjunct gentamicin for prosthetic valve Staphylococcus aureus (SA) endocarditis.
3. Recognize guideline recommendations and patient-centered clinical scenarios for combination therapy regimens that have been suggested for the management of resistant infections.

## Biographies

**Jill Cowper**, PharmD, BCIDP, is a Division Infectious Diseases (ID) Pharmacist for Healthtrust Supply Chain where she supports HCA Healthcare antimicrobial stewardship programs and formulary operations for the enterprise. Cowper completed a PGY-1 pharmacy practice residency, PGY-2 residency in critical care and ID, and a fellowship in ID. She has 15 years of antimicrobial stewardship experience, is Board Certified in ID, and has co-authored 18 peer-reviewed articles, a book chapter and six published abstracts.

**Laura Cwengros**, PharmD, BCIDP, is a Clinical Infectious Diseases (ID) Manager/Pharmacist for HCA Healthcare, supporting Chippenham and Johnston-Willis Hospitals in Richmond, Virginia, where she assists the ID team with complex patients and educates staff at both hospitals on standards of care related to infectious diseases. Cwengros obtained a Doctor in Pharmacy degree from the University of Michigan and completed PGY-1 and PGY-2 ID residencies at Detroit Medical Center. She is also Board Certified in Infectious Diseases.

## List of Evidence-based References and/or Industry Resources Consulted

- Tamma PD, Heil EL, Justo JA, Mathers AJ, Satlin MJ, Bonomo RA. Infectious Diseases Society of America 2024 guidance on the treatment of antimicrobial-resistant gram-negative infections. Clin Infect Dis 2024. Available at: <https://www.idsociety.org/practice-guideline/amr-guidance/>. Accessed April 2025.
- Kalil AC, Metersky ML, Klompas M, et al. Management of adults with hospital-acquired and ventilator-associated pneumonia: 2016 clinical practice guidelines by the Infectious Diseases Society of America and the American Thoracic Society. Clin Infect Dis 2016; 63(5): e61-111.
- Baddour LM, Wilson WR, Bayer AS, et al; American Heart Association Committee on Rheumatic Fever, Endocarditis, and Kawasaki Disease of the Council on Cardiovascular Disease in the Young, Council on Clinical Cardiology, Council on Cardiovascular Surgery and Anesthesia, and Stroke Council. Infective Endocarditis in Adults: Diagnosis, Antimicrobial Therapy, and Management of Complications: A Scientific Statement for

Healthcare Professionals From the American Heart Association. *Circulation* 2015; 132(15): 1435-86. Erratum in: *Circulation* 2015; 132(17):e215. Erratum in: *Circulation* 2018; 138(5): e78-79.

- McDonald EG, Aggrey G, Tarik Aslan A, et al. Guidelines for diagnosis and management of infective endocarditis in adults: a WikiGuidelines group consensus statement. *JAMA Netw Open* 2023; 6(7): e2326366. Erratum in: *JAMA Netw Open* 2023; 6(8): e2332858.
- Osmon DR, Berbari EF, Berendt AR, et al. Diagnosis and management of prosthetic joint infection: clinical practice guidelines by the Infectious Diseases Society of America. *Clin Infect Dis* 2013; 56(1): e1-25.
- Caniff KE, Kunz Coyne AJ, Rybak MJ. 1033. Unexpected Allies: Vancomycin and Cefazolin Combination Therapy in Methicillin-Resistant *Staphylococcus aureus* Bacteremia. *Open Forum Infectious Diseases* 2023; 10(Suppl 2): ofad500.064.
- Kale-Pradhan PB, Giuliano C, Jongekrijg A, Rybak MJ. Combination of vancomycin or daptomycin and beta-lactam antibiotics: a meta-analysis. *Pharmacotherapy* 2020; 40(7): 648-58.
- Holland TL, Bayer AS, Fowler VG Jr. Persistent methicillin-resistant *Staphylococcus aureus* bacteremia: resetting the clock for optimal management. *Clin Infect Dis* 2022; 75(9): 1668-74.
- Minter DJ, Appa A, Chambers HF, Doernberg SB. Contemporary management of *Staphylococcus aureus* bacteremia-controversies in clinical practice. *Clin Infect Dis* 2023; 77(11): e57-68.



## 3:30 – 4:30PM Time Block

**MONDAY, July 20 | 3:30 – 4:30PM**

### **Pharmacy Benefit Landscape: What Health Systems Need to Know Now**

Who will benefit from this session: C-Suite, Pharmacy Leadership, Supply Chain

**Category: Fundamentals in Practice, Pharmacy—No CE**

#### **Presentation Summary**

This educational session explores the rapid changes shaping the pharmacy benefit landscape and what this means for health systems, from both employee benefit and pharmacy business planning perspectives. Key considerations related to impact of evolving federal and state policy; revenue model challenges; entry of alternative PBM; biosimilar & GLP trends; and market demand for better pharmacy benefit experience. Participants will gain insights from an expert panel and explore what these changes and challenges are and applicable financial impact for consideration.

The session will also examine how a more connected approach across pharmacy, HR, and supply chain can reduce friction and unlock greater value. Designed for pharmacy leaders, supply chain professionals, and finance executives, this discussion provides practical perspectives on strengthening oversight, improving the member experience, and aligning stakeholders around one of the organization's most significant areas of spend.

*Moderator:*

**Young Fried**, PharmD, is the Senior Vice President, Business Development & Pharmacy Services at HealthTrust. With more than 25 years of experience across a variety of healthcare settings, she leads

HealthTrust's Pharmacy GPO, Pharmacy Benefits Program Coalition and Sales. Prior to joining HealthTrust, Fried held VP/Chief Pharmacy Officer positions at Wellmark BCBS, Cigna, HealthPartners, an IDN in the Midwest and United Here Health, a national Taft Hartley Fund. Other leadership positions were at Advocate Health Care, a regional health system in the Midwest, and HCSC (BCBSIL and BCBSTX). Fried earned a Doctor of Pharmacy degree from the University of Illinois in Chicago and an MS degree in Applied Pharmacoeconomics from the University of Florida.

*Panelists:*

**Nancy Price** is the Vice President of HR Strategic Sourcing at HealthTrust, where she oversees a Pharmacy Benefits Program with \$7.2 billion in annual spend, 3.2 million plan participants and 391 clients. With more than 25 years of experience in employer-sponsored health plans, strategic sourcing and large-scale benefits contracting, Price has held senior leadership roles overseeing compensation and benefits strategy for large national organizations, including responsibility for health and welfare plans, benefit plan assets, compliance, analytics and vendor negotiations. She obtained a BS degree in Public Administration from The University of Texas.

**Kevin Carter** is the Assistant Vice President for Pharmacy Benefit Strategy at HealthTrust, where he leads clinical strategy and champions a "clinical first" philosophy. With more than 30 years of industry experience, including 25 years at CVS Health, Carter specializes in sustainable pharmacy benefit design, formulary development and data-driven cost containment. He obtained a Bachelor of Science degree in Pharmacy from The University of North Carolina at Chapel Hill.



**MONDAY, July 20 | 3:30 – 4:30PM**

## **New Hospital, New eHR...New Health System!**

CE Credit proposed: Pharmacy, Nursing, Supply Chain

Certificate of Participation: Allied Health

Other Target Audiences who may be interested (no CE): Physicians

Course level: Basic

**Category: Pharmacy Leadership—CE**

### **Presentation Summary**

Health systems may increase the number of acute care centers either by new construction or acquisition. Significant planning is required just for the opening and integration of the new locations. Opening a new hospital and transitioning to a new electronic health record are significant projects that, even when taken separately, require substantial organization and coordination across a health system's many departments. But what happens if you complete both within five days of each other? This presentation will share the planning beforehand, and the subsequent lessons learned following a successful new hospital opening and eHR implementation, transforming a single academic health center

into a system of six hospitals. Strategies for instituting systemwide policies and establishing a single medication formulary will be shared, as well as plans for ongoing clinical governance.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Recall steps required to ensure operational readiness and regulatory compliance of a newly opened acute care hospital.
2. Recognize various approaches and strategies for standardization of policies and processes across previously existing and independently operating acute care hospitals, including formulary standardization.
3. Identify key aspects of a governance structure for implementing new ideas and optimizing existing build of a newly launched electronic health record.

### **Biography**

**Robert Eastin**, PharmD, is the Executive Director of Pharmacy Services at UCI Health, overseeing the shared pharmacy services across the six-hospital health system, including the clinical pharmacy, medication safety, education, procurement, informatics and investigational drug service programs. He is the co-chair of the Inpatient Pharmacy Governance Subcommittee, coordinating oversight of UCI Health's Epic system implementation and ongoing optimization. Previously, Eastin was the inpatient pharmacy director of UCI Health Orange and oversaw pharmacy operations for the infusion center pharmacies. He earned a Doctor of Pharmacy Degree from the University of the Pacific and completed his PGY-1 Pharmacy Practice Residency at Scripps Mercy Hospital.

### **List of Evidence-based References and/or Industry Resources Consulted:**

- Christopher Urbanski, Ryan Cello, Brian Luby, Karl Gumpfer, Doina Dumitru, Formulary management guiding principles for automated systems, *American Journal of Health-System Pharmacy*, Volume 79, Issue 18, 15 September 2022, Pages 1599–1606, <https://doi.org/10.1093/ajhp/zxac123>
- UCI Health- Irvine Opens Its Doors. 10 December 2025. <https://www.ucihealth.org/about-us/news/2025/12/uci-health-irvine-now-open>
- Christy Ciccarello, Molly Billstein Leber, Mandy C Leonard, Todd Nesbit, Mary G Petrovskis, Emily Pherson, Heidi A Pillen, Celia Proctor, Jennifer Reddan, ASHP Guidelines on the Pharmacy and Therapeutics Committee and the Formulary System, *American Journal of Health-System Pharmacy*, Volume 78, Issue 10, 15 May 2021, Pages 907–918, <https://doi.org/10.1093/ajhp/zxab080>
- Michael Stepanovic, Cassandra L Bright, Uyen N Doan, Sooyeon Kim, Amanda Kirolos, Talia Raman, Stephen F Eckel, Kathryn A Morbitzer, Developing core concepts in pharmacy administration and leadership training, *American Journal of Health-System Pharmacy*, 2026;, zxag107, <https://doi.org/10.1093/ajhp/zxag107>



TUESDAY, July 21, 2026

30-Minute Micro Education Session  
9:45 – 10:15AM Time Block

**MICRO EDUCATION | Workforce Solutions | No CE**  
**Aligning Contract Labor to Demand: All the Cost Savings, None of the Disruption**

Who will benefit from this session: C-suite, Supply Chain, Nursing Leaders

Workforce strategy requires more than addressing immediate staffing gaps. This session focuses on how health systems can take a more structured approach to managing contract labor through a managed service provider (MSP) model. Through a member-led discussion, participants will examine how standardizing vendor management and pricing can create greater consistency, transparency, and cost savings without requiring changes to existing staffing partners.

The conversation will highlight practical considerations for implementing an MSP approach, including how to maintain access to preferred agencies while improving rate competitiveness and contract oversight. Attendees will also explore how baseline analytics can support better visibility into labor utilization and cost savings, enabling more informed decisions while preserving workforce continuity.

**Presenters:**

**Sara Bailey**, VP Account Management, HealthTrust Performance Group  
**Jeff Greenlund**, VP Strategic Accounts, HealthTrust Workforce Solutions



2:30 – 3:30PM Time Block

TUESDAY, July 21 | 2:30 – 3:30PM

**Fear Less, Do More**

Category: Professional Development—No CE

**Biography:** **Michelle Poler** is a social entrepreneur, keynote speaker and author of *Hello, Fears: Crush Your Comfort Zone* and *Become Who You're Meant to Be*. As the founder of the global movement **Hello Fears**, she inspires millions to step outside their comfort zones and unlock their full potential through courage and action. A creator of the viral project **100 Days Without Fear**, Michelle has shared her message on stages like TEDx and at companies including Google, Facebook, Netflix and Microsoft.



TUESDAY, July 21 | 2:30 – 3:30 PM

## Creating a Leadership Launchpad: Fueling the Next Generation

CE Credit proposed: Pharmacy, Nursing, Supply Chain, Healthcare Executive  
Certificate of Participation: Allied Health

Course level: Intermediate

Category: Pharmacy Leadership—CE

### Presentation Summary

Sharply lower pharmacy school enrollment has contributed to a challenging pharmacist recruitment environment. At the same time, health system medication management has grown increasingly complicated, requiring sophisticated business skills to steward finances and keep patients safe. The U.S. is also facing a severe, long-term nursing shortage, with projections indicating a deficiency of over 78,000 full-time Registered Nurses (RNs) in 2025 and over 63,000 by 2030. In this session, discover how HealthTrust/HCA launched the Pharmacy Leadership Development Program to secure the future of its pharmacy leadership through a 10-month strategic initiative which transforms high-potential managers into directors by equipping them with sophisticated business and clinical acumen. Presenters will share how this program can be appropriately scaled to provide many healthcare candidates with training to master both the practical tools and the leadership mindset required to successfully step into director roles.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Recall the key components of an effective administrative structure for maintaining a sustainable leadership training program.
2. Recognize key learning objectives that are needed for a successful leadership training program.
3. Identify the key role of homework assignments and mentoring relationships that support a leadership training program.

### Biographies

**Jenny Burnette**, PharmD, MBA, BCPS, serves as Vice President of Pharmacy for HCA Healthcare's Central & West Texas Division, where she supports a team of 10 leaders and 300 pharmacy team members. In addition to exceeding clinical, financial and operational goals, Burnette is proud of formalizing growth opportunities through the StaRx program and CWT Pharmacy Leadership program. Prior to this role, she served in various pharmacy leadership roles at academic medical centers. Burnette's strength in building partnerships with leaders has led to consistent positive results for health systems. She earned a Doctor of Pharmacy degree at the University of Florida and completed a pharmacy administration residency.

**Nathan Hanson**, PharmD, MS, BCPS, FASHP, is the Vice President of Pharmacy for the HealthTrust/HCA Healthcare MidAmerica Division, encompassing seven hospitals in Kansas and Missouri. In this role, he supports the Directors of Pharmacy in all areas of oversight. He is the founder and RPD for a PGY-2 Health System Pharmacy Administration and Leadership residency, and is involved with the local college of pharmacy. Hanson enjoys leadership development and activities where rules and data intersect with

people and processes, and is passionate about serving leaders to reach their full potential. He earned a Doctor of Pharmacy degree from Drake University and an MS degree in Pharmacy Administration from The University of Kansas.

**Sarah Hardt**, PharmD, is the Division Director of Pharmacy Operations for the HealthTrust HCA Healthcare Central & West Texas Division. In her role, she supports nine hospitals with regulatory compliance, medication distribution, diversion prevention and inventory management. Pharmacy leader and student development are passion projects for Hardt. She earned a Doctor of Pharmacy degree from The University of Texas at Austin College of Pharmacy, where she now serves as adjunct faculty and holds the role of Regional Director for Experiential Education.

**Katie Sherman** is a Senior Project Manager supporting the HealthTrust Supply Chain corporate team in the Pharmacy, Procure to Pay and Expanse efforts. Throughout her career, Sherman has managed numerous projects of various scale and complexity within the healthcare space. She enjoys utilizing her organizational and collaborative skills to assist in initiatives that strengthen the strategic efforts of business owners and peers. Previously, Sherman worked as a coordinator on the Human Resources team and within the Clinical Services Group at HCA Healthcare before transitioning into project management. Sherman earned her degree at the University of Findlay and is currently working toward her Project Management Professional certification.

#### **List of Evidence-based References and/or Industry Resources Consulted:**

- Chen D, Amerine LA, Kernan W. Pharmacy executive and mid-level manager perceptions of leadership in contemporary health-system pharmacy. *Am J Health-Syst Pharm.* 2025;00:1-24
- Edward G. Nold, William T. Sander, Role of the director of pharmacy: The first six months, *American Journal of Health-System Pharmacy*, Volume 61, Issue 21, 1 November 2004, Pages 2297–2310,
- White SJ, Tryon JE. How to find and succeed as a mentor. *Am J Health-Syst Pharm.* 2007;64:1258-1259.
- Amerine LB, Granko RP, Brummond PW, et al. ASHP statement on the roles and responsibilities of the pharmacy executive. *Am J Health-Syst Pharm.* 2022;79(6):497-499.
- Ellinger LK, Trapskin P, Black R, Kotis D, Alexander E. Leadership and effective succession planning in health-system pharmacy departments. *Hosp Pharm.* 2014;49(4):369-375.
- Sara J. White, Jennifer E. Tryon, How to find and succeed as a mentor, *American Journal of Health-System Pharmacy*, Volume 64, Issue 12, 15 June 2007, Pages 1258–1259. <https://www.southuniversity.edu/news-and-blogs/2025/12/pharmacy-student-shortage> <https://www.bls.gov/ooh/healthcare/pharmacists.htm#tab-6> <https://www.ksmu.org/news/2024-09-16/pharmacy-school-enrollment-in-the-u-s-is-dangerously-low-especially-in-missouri>
- <https://pr.mo.gov/boards/pharmacy/PerfectStormv5.pdf> <https://www.ashp.org/Professional-Development/ASHP-Podcasts/Practice-Journeys/Developing-Emerging-Leaders-Leveraging-ASHP-Resources>



TUESDAY, July 21 | 2:30 – 3:30 PM

## Multidisciplinary Process for the Review of Existing & Emerging Biosimilars

CE Credit proposed: Pharmacy

Course level: Basic

Category: Pharmacy Clinical—CE

### Presentation Summary

Everyday healthcare providers are bombarded with emails and calls about new biosimilars entering the market. Choosing the best workhorse biosimilar requires a systemic, multidisciplinary approach. Learn how Scripps Health opted for a scheduled rotating review of four to five biosimilar compounds per quarter, along with a complete review of each compound annually and semi-annually for financial consideration. Reaching the goal required the health system to establish a working group, consisting of clinical pharmacists from both the inpatient and outpatient sites of care, experts from the prior authorization department, retail pharmacy, information technology and pharmacy administration. Presenters will share how they utilized available tools from their wholesaler, the GPO and commercial health plans to select workhorse and backup biosimilar compounds.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Identify work group team members critical for a successful multidisciplinary biosimilar review process.
2. Recognize required task delegation to team members, based upon their expertise.
3. Recall some of the tools available from the Group Purchasing Organization (GPO), wholesalers and/or commercial health plans for biosimilar clinical and financial review.

### Biographies

**Angela Rosenblatt**, M.S., PharmD, BCPS, APh, CPEL, is Corporate Director of Pharmacy, Ambulatory Services at Scripps Health. Board certified in pharmacotherapy and advanced practice licensed, Rosenblatt has a background in critical care and emergency medicine and extensive experience advancing inpatient and ambulatory pharmacy practices. She previously led pharmacy operations for five oncology infusion centers, improving workflows, outcomes and patient care, and served as Clinical Manager and Pharmacy Director at Scripps Green Hospital. Rosenblatt completed a residency at the University of Southern California and is a Certified Pharmacy Executive Leader (CPEL). She has expanded ambulatory pharmacy services, integrating Advanced Practice Pharmacists into specialties such as geriatrics, cardiology and neurology.

**Sherrie Todd**, RPh, is the Director of Pharmacy Purchasing and 340B for Scripps Health. With more than 20 years of experience, Todd has worked within pharmacy purchasing/contracting and 340B as well as spending more than 10 years as Director of Purchasing for a \$350 million annual spend organization. Todd obtained a Doctor of Pharmacy degree from Oregon State University and a BA in Chemistry from the University of Oregon.

## List of Evidence-based References and/or Industry Resources Consulted:

- De-identified and modified tools available through the wholesaler and GPO to compare contracts, reimbursement and ROI
- SharePoint planner for scheduling reviews and assigning tasks will be part of the live presentation



WEDNESDAY, July 22, 2026

7 – 8AM Time Block

WEDNESDAY, July 22 | 7:00 – 8:00 AM

### Medical Group Practices—What are they using & where are they getting it?

CE Credit proposed: Pharmacy, Supply Chain, Healthcare Executive

Certificate of Participation: Allied Health

Other Target Audiences who may be interested (no CE): Ambulatory Surgery Center

Course level: Intermediate

Category: Pharmacy Operations—CE

#### Presentation Summary

Have you ever wondered what the medical group providers are using in their outpatient clinics? Do you know where they are getting their drugs? If your answer is “I have no idea,” then how do you know if the medical group practices are compliant with your policies and contracts? In this session, you will learn how to gain visibility into medical group practices and assist them in optimizing their drug procurement as well as discover the importance of standardization in decision-making.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Recognize evidence-based strategies to gain visibility into medical group drug procurement practices and vaccine strategies.
2. Recall steps to register medical group practices with your Group Purchasing Organization (GPO) and create purchasing accounts with your wholesaler.
3. Identify how to optimize purchasing within medical group practices to maximize savings.

## Biographies

**Brad Cook**, PharmD, MBA, BCPS, is the Group Pharmacy Director for Prime Healthcare in Kansas and Missouri, where he leads four inpatient pharmacies and one retail pharmacy. Cook graduated from the UMKC School of Pharmacy and received an MBA from West Texas A&M. He completed a pharmacy residency at Barnes Jewish Hospital and is board certified in pharmacotherapy. He has worked in leadership roles in both clinical and administrative settings. Cook is involved with the American Society of Health-System Pharmacists as well as the local and state affiliates in Kansas and Missouri, where he has held leadership roles.

**Duc Mai**, PharmD, APH, is a Director of Pharmacy for Prime Healthcare where he is responsible for supporting systemwide operations and leading key strategic initiatives. For the past five years, he has overseen enterprise vaccine initiatives, focusing on brand standardization, cost optimization and program compliance. Mai earned a Doctor of Pharmacy degree from Roseman University.

**Quyêt Tran**, RPh, MBA, FACHE, is a Regional Director of Pharmacy for Prime Healthcare, where he led the wholesaler conversion project for 100+ outpatient clinics and ambulatory surgery centers. Tran has corporate oversight for the hospitals within his region. Prior to Prime Healthcare, he held leadership positions within Cardinal Health and several hospital systems in various areas, including operations, sales and business development. Tran earned a BS in Pharmacy from the University of Louisiana, Monroe, and an MBA from Purdue University. He is also a fellow of the American College of Healthcare Executives.

### List of Evidence-based References and/or Industry Resources Consulted:

- American Society of Health-System Pharmacists. ASHP guidelines on medication cost management strategies for hospitals and health systems. *Am J Health-Syst Pharm.* 2008; 65:1368-84.
- Maki, W. (2019). Medication Management in the Clinic Setting. *Pharmacy Purchasing and Product*, Sept, pp. 10-19.
- Koray Parmaksiz, Elizabeth Pisani, Roland Bal, Maarten Olivier Kok. A systematic review of pooled procurement of medicines and vaccines: identifying elements of success. *Globalization and Health.* 2022;18(1):1-17. doi:10.1186/s12992-022-00847-z
- Parmaksiz K, Bal R, van de Bovenkamp H, Kok MO. From promise to practice: a guide to developing pooled procurement mechanisms for medicines and vaccines. *Journal of Pharmaceutical Policy & Practice.* 2023;16(1):1-15. doi:10.1186/s40545-023-00574-9
- Tichy, E. M., Rim, M. H., Cuellar, S., Tadrous, M., Schumock, G. T., Johnson, T. J., Newell, M. K., & Hoffman, J. M. (2025). National trends in prescription drug expenditures and projections for 2025. *American Journal of Health-System Pharmacy*, 82(14), 806–821. <https://doi.org/10.1093/ajhp/zxaf092>



WEDNESDAY, July 22 | 7:00 – 8:00 AM

## A Mile High View of Pharmacy Performance: Developing a System-level Director of Pharmacy Dashboard

CE Credit proposed: Pharmacy, Healthcare Executive

Course level: Intermediate

Category: Pharmacy Operations—CE

### Presentation Summary

Due to the challenging task of objectively assessing a Directors of Pharmacy's (DOPs) performance across multiple hospitals, leaders at one IDN developed a centralized dashboard with well-defined measures of performance and a scoring rubric. Join us to discover how the DOP Dashboard is used to assess the regulatory, operational, accreditation, financial and clinical performance of each DOP on a semiannual basis. Presenters will share how outcomes can be trended and shared with each hospital's leadership team in support of opportunities for developing similar dashboards for leadership improvement and accolades for achievement across an enterprise.

**Learning Objectives** | *At the end of this session, participants should be able to:*

1. Identify measurable performance indicators that can be used to assess a Director of Pharmacy's (DOPs) performance.
2. Recall an example of a scoring rubric for each DOP measure of performance.
3. Recognize comparable measures to be reported to senior leadership in evaluating DOP performance.

### Biographies

**Bryan Jones**, DPh, MS Pharm Admin, is the Assistant Vice President, Acute Pharmacy Operations for Lifepoint Health. There, he provides operational oversight for 29 acute care hospitals, supervision of 30 remote order entry pharmacists and management of strategic relationships with outsourced remote order entry vendors. While completing an ASHP-accredited residency in Pharmacy Administration, Jones earned a Doctor of Pharmacy degree from the University of Tennessee Health Science Center in Memphis and a Master of Science in Pharmacy Administration from the University of Tennessee.

**Grant Sivley**, PharmD, BCPS, serves as Director of Pharmacy Data Analytics at Lifepoint Health, where he leads enterprisewide pharmacy analytics across more than 60 acute care hospitals and a broad network of rehabilitation and behavioral health facilities. His work focuses on formulary compliance, financial stewardship, purchasing optimization and cost-savings initiatives. Sivley earned a PharmD at the University of Arizona College of Pharmacy and completed PGY-1 and PGY-2 residencies in Pharmacy Informatics through Lifepoint Health, in partnership with Lipscomb University, and is a Board-Certified Pharmacotherapy Specialist.

**Todd White**, RPh-KY, PharmD, MBA-HM, BCSCP, is the Assistant Vice President, Acute Pharmacy Operations for Lifepoint Health, providing operational oversight for 31 acute care hospitals and serving as the subject matter expert for pharmacy automation, sterile/non-sterile compounding, accreditation, regulation, and pharmaceutical waste management. White earned a Doctor of Pharmacy degree from

Creighton University and a Master of Business Administration in Healthcare Management from Western Governors University. He is a Board Certified Sterile Compounding Pharmacist.

### List of Evidence-based References and/or Industry Resources Consulted:

- Minimum-standard-pharmacies-hospitals.pdf
  - ASHP minimum standards for hospital pharmacy services.
- <https://www.google.com/url?sa=t&rct=j&q=&esrc=s&source=web&cd=&ved=2ahUKEwj197TrivQAxV9MdAFHcbhAIEQFnoECDUQAQ&url=https%3A%2F%2Fpublications.ashp.org%2Fpreviewpdf%2Fbook%2F9781585284030%2Fch004.xml%3FpdfJsInlineViewToken%3D904866345%26inlineView%3Dtrue&usg=AOvVaw3BMKHJGw2CVxmdonFKx4St&opi=89978449>
  - Director of Pharmacy Competency as published by ASHP PDF
- Health System (Director)
  - APA Career Pathways – Roles and Responsibilities of a DOP
- Lindsey B Amerine, Robert P Granko, Philip W Brummond, Samuel V Calabrese, Kristine K Gullickson, Lindsey R Kelley, Jeffrey D Little, Mark Sullivan, ASHP Statement on the Roles and Responsibilities of the Pharmacy Executive, American Journal of Health-System Pharmacy, Volume 79, Issue 6, 15 March 2022, Pages 497–499, <https://doi.org/10.1093/ajhp/zxab340>
  - ASHP published article on the key roles of a pharmacy executive. A little above the scope of a DOP, but does contain some citable traits that could be included.
- Key performance indicators for pharmaceutical services: A systematic review - ScienceDirect
- Systematic review of KPIs for pharmaceutical services. This study brings together several studies that may be beneficial in supporting the presentation. This is more of a clinical performance resource vs an operational performance review. This is our best source and has multiple studies that may be able to support this presentation. medication-cost-management-strategies-hospitals-health-systems.pdf
  - ASHP description of guidelines to manage drug costs in a hospital – Covers any potential citations for budget management. Would also cover things such as contract purchasing compliance and invoice management. Inventory turns recruitment-selection-retention-pharmacy-personnel.pdf
  - ASHP coverage of recruitment and retention.
- 8.4\_Preparing\_for\_a\_DEA\_Inspection.pdf (SECURED)
- pharm2511\_accp-therapintchg.pdf
- a. ACCP coverage of Therapeutic interchange and the requirement for P&T involvement
- Pharmaceutical Waste - ASHP
- a. ASHP about pharmaceutical waste
- 2025 Hospital Survey Scoring Algorithm\_20250401\_v10.0.pdf
- <https://www.usp.org/compounding/general-chapter-797>
- a.USP 797 inclusion as part of our measures.
- hospital-core-elements-H.pdf
- a. Antimicrobial stewardship measure. CDC
- MCM16-285 Antibiotic Stewardship in Community Hospital.pdf (SECURED)
- a. ASHP presentation at midyear. Talks about days of therapy.
- Standards | Joint Commission
- Joint Commission MM standards for accreditation

