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Hospital  
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# \*FREE\* VIRTUAL EVENT **HEALTH CARE IN THE "NO NORMAL" ERA**

Thursday, Dec. 3  
2 - 3 p.m. ET

**Featuring Brandon Edwards  
Founder & CEO, ReviveHealth**



Questions?  
[Lgilbert@IHAconnect.org](mailto:Lgilbert@IHAconnect.org)

## **LEARNING OBJECTIVES**

- Discuss the latest negotiation and network strategies by the largest payors across the nation
- Identify data, research, and insights of the no normal concepts
- Outline strategies in health plans, retail health players, and emerging competitors

**INTENDED AUDIENCE** C-suite

*Since COVID-19 changed our lives, we've been wondering when things will go back to normal and what the new normal will look like. Neither answer is on the immediate horizon.*

Instead, we are in the "no normal," and we should expect to stay in this period for some time.

In the no normal:

- Hospitals scramble to fill their operating rooms while patients avoiding appointments and diagnostics will make those schedules even lighter.
- Hospitals struggle financially while payors reap the rewards of billions of dollars in deferred or avoided care.
- Once-thriving physician practices operate at reduced capacity and look for partners to stave off bankruptcy.

But, the no normal also means change. If we harness this change right, it could be for the better:

- Health care is no longer designed around physicians, refocusing wholly on patients and their protection.
- Telehealth is normalized, creating new access points and advancing consumer experience and digital sophistication.
- Most importantly, we talk openly about racial disparities in health care access and treatment approaches. We will no longer tolerate the inequities of the past.