

# HEALTH POLICY AUDIOCONFERENCE

## Evaluation Form for Continuing Education Credit

This form must be completed in order to receive continuing education credit.

### RESPONDING TO THE CHALLENGE OF RISING HEALTH CARE COSTS July 30, 2002, Audioconference

This evaluation must be completed and faxed to the HIPAA Summit Office at 760-771-3183 in order to receive CE credit.

Name \_\_\_\_\_

License State \_\_\_\_\_ License/Bar Number (Nurses and Attorneys) \_\_\_\_\_

Company Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (     ) \_\_\_\_\_ Fax (     ) \_\_\_\_\_ E-mail \_\_\_\_\_

#### 1: PLEASE RATE THE OVERALL QUALITY OF THIS PROGRAM

	Excellent	Very Good	Fair	Poor
1. The presentations were:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. The illustrative materials were:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The audio quality was:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The registration process was:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

#### 2: HOW WELL WAS EACH COURSE OBJECTIVE MET?

	Excellent	Very Good	Fair	Poor
5. To Project and Analyze Health Care Cost and Premium Change in the United States :	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. To Outline the Role of Health Care Business Groups and Coalitions In Responding to Health Care Costs Growth:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. To Suggest Strategies Employed by Employers and Health Plans in Response to Health Care Cost Growth:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. To Present Case Studies of Employer and Health Plan Strategic Responses to Health Care Cost Growth.:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9. Based on the information presented in the colloquium, will you make any changes to your practice?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
If so, what changes? _____				
9. Did you feel that this presentation was free of bias?	<input type="checkbox"/> Yes	<input type="checkbox"/> No		
10. Comments and/or Suggestions for future topics: _____				

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Name \_\_\_\_\_

### 3: PLEASE RATE EACH SPEAKER

<b>Robert S. Galvin, MD, MBA</b>	Excellent	Very Good	Fair	Poor
Overall Session Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content Usefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ideas/Information Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conference Materials Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Dana McNurtry</b>	Excellent	Very Good	Fair	Poor
Overall Session Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content Usefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ideas/Information Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conference Materials Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Arnold Milstein, MD, MPH</b>	Excellent	Very Good	Fair	Poor
Overall Session Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content Usefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ideas/Information Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conference Materials Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>Jamie Robinson, Ph.D.</b>	Excellent	Very Good	Fair	Poor
Overall Session Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content Usefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ideas/Information Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conference Materials Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

<b>John Iglehart</b>	Excellent	Very Good	Fair	Poor
Overall Session Value	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Content Usefulness	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ideas/Information Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Conference Materials Presented	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: \_\_\_\_\_

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