

Global Speaker Catalog Form

Reference Resource Only - Submit Online | [Submit Online](#) | [Video Tutorial](#)

IMPORTANT - PLEASE READ ALL INSTRUCTIONS

This document is a tool for submitters. Final submissions must be entered online.

- HIMSS will not accept this document as a submission.
- The opportunities you select determine which fields are required, optional, or hidden. *This resource includes all fields.*
- **View which fields are included for the opportunities you select:**
 - 1. Start a submission
 - 2. Select your opportunities
 - 3. View the required and optional fields on the Submission Details Page.

We only accept Continuing Education Eligible Content through the GPSP.

Sales pitches burden our limited staff and our volunteer reviewers. Please refrain from submitting any sales pitches.

- The proposal must not promote an organization, product and/or service. Avoid endorsements: do not explicitly endorse any products, solutions, or services in your presentation. Your role as speaker is to inform, not to sell.
- It is recommended that proposals submitted by consultants or market suppliers include a provider/user participant as the primary speaker. For continuing education purposes, any form of commercialism or vendor bias in the proposal will not be accepted.

Provide detailed information and cite all your sources.

When submitting a proposal, please ensure you provide comprehensive details and substantiating evidence that support your content. Results, KPIs, and outcomes must be included in the proposal. Proposals that do not yet have this data will not be considered and should be submitted once complete data is available. This will not only strengthen your proposal but also facilitate the review scoring process. Detailed proposals with clear evidence enable reviewers to fully understand the scope, feasibility, and impact of your submission.

- Complete all components of the proposal. Do not enter NA/TBD/TBA.
- Be succinct in your text answers and avoid redundancy. Convey the critical points under each content section.
- Check for spelling and grammar errors.

- Include any URL links to charts/graphs/figures. Include references to existing works to build a case/rationale and discuss the broader generalizability of a case study. May also contain hyperlinks to open-source tools/websites.
- Identify and cite all sources and/or include all necessary acknowledgements.
- Obtain written permission from the copyright holder to reproduce/include previously published figures, tables, or text excerpts and acknowledge the original source in the figure caption or as a footnote.
- All necessary approvals/clearances must be obtained before submission.
- Proposal must not contain plagiarism, invasion of privacy, violation of proprietary rights or copyright, libelous or injurious matters.

Not meeting the above requirements may result in low review scores and/or ineligibility for some Call for Proposals/Speakers.

Defense Health Agency Proposal Submitters

Active-duty military personnel and civilians with the Defense Health Agency (DHA) should only submit proposal content to Kaitlin Prindle, kaitlin.s.prindle.ctr@health.mil, phone number 571-286-8143.

NEED HELP?

- For Technical Assistance to help you sign in email help@himss.org.
- For questions specific to an opportunity, email the point of contact listed on the [GPSP Homepage](#) or the Opportunities Page.
- Email general questions about the GPSP email gpsp@himss.org.

Submitter Information

If you are a submitter and a speaker, you must also enter your information under the speaker tab.

First Name *

Last Name *

Job Title/Role *

Company / Organization Name *

Worksite *

Select one option

- Healthcare Provider
- Others Allied to Healthcare

Healthcare Provider Sub-Category *

Select one option

- Academic Medical Center
- Ancillary Clinical Service Provider
- Behavioral Health
- Community Health Center Clinic
- Critical Access Hospital
- Enterprise Imaging
- Government Health Provider
- Home Healthcare Org
- Hospital, Multi-Hospital System, Integrated Delivery System
- Hospital-owned Ambulatory Clinic, IDS
- Independent Ambulatory Clinic
- Long Term and Post Acute Care Facility
- Payer, Health Plan
- Pharmacy
- Public Health

Others Allied to Healthcare Sub-Category *

Select one option

- Academic Education Institution
- Banks/Financial Services
- Entrepreneur, Startup, Disruptor
- Financial, Investment Firm
- Government
- Healthcare Consulting Firm
- HIE Organization
- Legal
- Market Supplier
- Pharma / Life Sciences
- Professional Assn/Society

Email Address *

Mobile Phone Number *

Are you a HIMSS member? *

Select one option

- Yes
- No

General Data Protection Regulation (GDPR) *

If consent below is not given and you do not agree to the policies, you will not be able to submit.

On behalf of myself and the speakers identified in this submission form, I give my consent to HIMSS to share my Personal Data and the speaker's Personal Data (for example name, title, organization, biographical information, and email address) with HIMSS event personnel and others, who may be external to HIMSS for the purpose of publicly promoting, organizing, and conducting this session at the HIMSS event(s) or program(s) for which this proposal was submitted. I understand I can opt out/revoke consent at any time by emailing gpssp@himss.org, and the abstracts I submitted will be removed.

Select one or more options

☐ Yes - I opt in (consent) to the use of Personal Data and information as described above.

GDPR Signature *

Please type your full name below to indicate your acknowledgement and acceptance of these terms and conditions:

Opportunities

To display more information about an opportunity, view the Opportunities Page online and select the checkbox next to the opportunity, or view the [homepage](#).

Opportunities *

Select one or more opportunities

- **Current Opportunities:** Visit the opportunities page or the homepage to see a list of current opportunities.
- **Global Catalog**
 - **Global Proposal Catalog | Share your idea(s).** HIMSS Global Proposal Catalog is the perfect place to share your ideas! Submissions are eligible for speaking engagements and content creation opportunities for one year from the date of your submission. Proposals are peer reviewed by the [Global Proposal Review Task Force](#) each month.
 - **Speaker Catalog | Submit a speaker profile.** Submit a Speaker Profile to HIMSS Global Speaker Catalog to be added to HIMSS Speakers Bureau. We'll send you quarterly reminders to review your speaker's profile and ensure it is up to date.

Submission Details

Speaker Profile Title

Type "[First Name] [Last Name] Speaker Profile".

Speaker(s) Information

Everyone listed as a speaker must agree to and acknowledge being included in the proposal. It is recommended that proposals submitted by consultants or market suppliers include a provider/user participant as the primary speaker. For continuing education purposes, any form of commercialism or vendor bias in the proposal will not be accepted.

Speaker Role:

- Facilitator
- Moderator
- Panelist
- Speaker

Speaker Email:

Speaker First Name:

Speaker Preferred Name:

Speaker Middle Initial:

Speaker Last Name:

Phonetic Spelling of Full Name:

Write your name as pronounced, not as it is spelled. Example: John Barowski = John Ba-ROFF-skee

Speaker Suffix:

Speaker Credentials:

Speaker Title:

Speaker Mobile Number:

Is the speaker a HIMSS member?

- ☐ Yes
- ☐ No

Speaker Address

Street:

City:

State:

Country:

Zip Code:

Social Media

LinkedIn:

X (Previously Twitter):

Bluesky:

Facebook:

YouTube:

Instagram:

WhatsApp:

Worksite *

Select one option

- Healthcare Provider
- Others Allied to Healthcare

Healthcare Provider Sub-Category *

Select one option

- Academic Medical Center
- Ancillary Clinical Service Provider
- Behavioral Health
- Community Health Center Clinic
- Critical Access Hospital
- Enterprise Imaging
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- Independent Ambulatory Clinic
- Long Term and Post Acute Care Facility
- Payer, Health Plan
- Pharmacy
- Public Health
-

Others Allied to Healthcare Sub-Category *

Select one option

-
- Academic Education Institution
- Banks/Financial Services
- Entrepreneur, Startup, Disruptor
- Financial, Investment Firm
- Government
- Healthcare Consulting Firm
- HIE Organization
- Legal
- Market Supplier
- Pharma / Life Sciences
- Professional Assn/Society

Speaker Organization:

Provide a brief description of the speaker(s) organization(s) including location, size, type of organization such as healthcare, hospital, consultant, government, market supplier, etc.

Biography

Please provide a brief description of the speaker's professional background. Do not post a resume/CV. If accepted, this bio may appear in marketing promos and/or be used to introduce the speaker.

Professional Speaking Experience

List up to three of the most recent presentations you have delivered. Please include organization, date, program, and title of your presentation.

HIMSS Speaking Experience

List up to three of the most recent presentations you have delivered for HIMSS. Please include organization, date, program and title of your presentation.

Speaker Specialties

Select the top three professional roles for which you prefer to target.

- Advocacy Groups Focused on Patient/Family Member/Caregiver
 - Allied Health Professional
 - CEO/COO
 - Chief Data Officer
 - Chief Digital Officer/Chief Digital Health Officer
 - Chief Quality Officer and Chief Clinical Transformation Officer
 - CIO/CTO/CTIO/Senior IT
 - CISO/CSO
 - Clinical Engineering Professional
 - Clinical Informaticist
 - CMIO/CMO
 - CNIO/CNO
 - Clinical Technologist
 - Consultant
 - CFO/VP Finance/Compliance Officer
 - Consumer Advocate Groups
 - Data Scientist
-

- Early Careerist
- First Time Attendee
- Government or Public Policy Professional
- Healthcare Financial/Administrative Professional
- Investor/Entrepreneur/Start Up Leader or Strategist
- IT Professional
- Information Management Professional
- Life Sciences Professional
- Management Engineering or Process Improvement Professional
- Military Health Professional
- Nurse
- Nurse Practitioner
- Payer
- Pharmacy Professional
- Physician or Physician's Assistant
- Population Health Management Professional
- Project Manager
- Programmers/Developers
- Professor/Academician
- Public Health Practitioner
- Quality Professional
- Research and Development Professional
- Student
- Supply Chain Management Professionals/Clinicians
- VP of other IT/IS Department

Areas of Expertise

Select all that apply. For a complete list of all topics, please visit the Topic Categories Page.

- **Artificial Intelligence in Healthcare:** *Exploring AI's transformative role across healthcare.*
 - AI Policy, Governance, and Ethics
 - AI Applications for Operational, Administrative, and Strategic Transformation
 - AI Implementation, Integration, and Scaling Efforts
 - Clinical AI Solutions for Care Delivery and Patient Outcomes
 - Data Infrastructure, Challenges, and Risks of AI
 - Future Trajectory of AI in Healthcare Innovation
- **Digital Health Transformation:** *Integrating technologies into care delivery to create a connected, patient-centered healthcare system that improves health outcomes, care delivery, and data-driven decision making.*
 - Alternative and Digitally-Enabled Care Delivery Models
 - Data-Driven Decision Making
 - Digital and Analytics Strategy, Transformation, and Technical Infrastructure
 - Emerging Health Technologies and Innovation

- Interoperability, Standards, and Health Information Exchange
- Patient-Centered Experience and Engagement
- Population Health and Public Health Intelligence
- Predictive Analytics
- User Experience, Usability, and User-Centered Design
- **Cybersecurity:** *Protecting electronic health information by ensuring confidentiality, integrity, and availability across healthcare systems.*
 - Alternative and Digitally-Enabled Care Delivery Models
 - Data-Driven Decision Making
 - Digital and Analytics Strategy, Transformation, and Technical Infrastructure
 - Emerging Health Technologies and Innovation
 - Interoperability, Standards, and Health Information Exchange
 - Patient-Centered Experience and Engagement
 - Population Health and Public Health Intelligence
 - Predictive Analytics
 - User Experience, Usability, and User-Centered Design
- **Business and Financial Management:** *Guiding health leaders toward financial sustainability and operational excellence.*
 - Change Management and Process Improvement
 - Clinically Integrated Supply Chain
 - Entrepreneurship and Start-ups for Innovation
 - Financial Optimization
 - Organizational Management
 - Project Management
 - Revenue Cycle Management
 - Value-Based and Outcomes-Driven Care Models
- **Health Equity:** *Ensuring everyone has a fair and equitable opportunity to attain their highest level of health through technology.*
 - Access and Barriers to Care
 - Digital Literacy
 - Health Disparities and Inequalities
 - Social Determinants of Health
- **Public Policy:** *Addressing the core issues of digital health with advocacy and public policy.*
 - Regional Public Policy (Americas, LATAM, APAC, EMEA)
 - State/Provincial-Level Public Policy and Legislation
 - Advocacy
 - Data Systems Modernization Public Policy
 - Private Sector vs Government Roles
- **Workforce:** *Preparing people and organizations to tackle what's next in health and wellness.*
 - Education and Preparing Workforce of the Future
 - Leadership
 - Professional Development
 - Recruitment, Retention, and Employee Wellness

Special Requests

Is there anything else you want us to know about yourself or your presentation style?

Professional Headshot

If accepted, Speaker photos will only be used for marketing materials, including the conference website. Photos are not used in the review process. Please refer to the below instructions and requirements.

Image requirements:

- Image should be a professional headshot photo; color is preferred but B&W is acceptable.
 - JPG, JPEG, PNG file formats are accepted.
 - Images should be square at least 1024px wide and 1024px tall (keep proportions of photo, no need to crop to this size).
 - Images should be proper ratio either 1:1 or 2:3; square
 - Maximum file size is 4MB.
 - File Name must be the speaker's Firstname_Lastname.xxx
-

Financial Relationship(s) Disclosure | Conflict of Interest (COI)

In support of improving patient care, HIMSS collaborates with the accrediting organization Partners for Advancing Clinical Education ("Partners"). Partners is jointly accredited by the Accreditation Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team. All prospective planners, faculty, and others who may control educational content in Partners jointly provided activities are expected to disclose all financial relationships they have had in the past 24 months with ineligible companies, prior to the beginning of the accredited CE activity. An ineligible company is any entity whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients (for specific examples of ineligible companies, visit [What is the ACCME's definition of an ineligible company?](#) | ACCME). There is no minimum financial threshold; Partners asks that you disclose all financial relationships, regardless of the amount with ineligible companies and regardless of the potential relevance of each relationship to the education. Partners must identify and mitigate any relevant financial relationships prior to activity development. In accordance with the ACCME, failure to provide disclosure information in a timely manner will result in your disqualification as a potential planner, faculty member, author, activity chair, or reviewer in this activity. Examples of Financial Relationships Owner (e.g., sole proprietor, stockholder in privately held company) Executive Role (e.g., Board of Directors, non-salaried role) Researcher (Research funding from ineligible companies should be disclosed by the principal or named investigator even if that individual's institution receives the research grant and manages the funds.) Consultant, Advisor, Speaker (e.g., advisory boards, speakers' bureaus); Independent Contractor (Including

contracted research) Royalties or Patent Beneficiary (Include product name along with Manufacturer/Company. Product information will be used only to identify degree of conflict and will NOT be disclosed to the learners.) Individual publicly traded stocks and stock options (diversified mutual funds do not need to be disclosed). For specific examples of ineligible companies, visit accme.org/standards

Have you had any financial relationship in any amount in the last 24 months with any ineligible company?

- Yes
- No

COI Agreement

Select both.

- I attest that clinical recommendations will be evidence-based and free of commercial bias (e.g., peer-reviewed literature, adhering to evidence-based practice guidelines).
- I agree to disclose any unlabeled/unapproved uses of drugs or products referenced in my presentation/materials.

COI Signature

Date:

HIMSS Publication and Recording Authorization (PRA)

I hereby grant to the Healthcare Information and Management Systems Society ("HIMSS") and its subsidiaries, affiliates, agents, representatives, licensees, distributees, and successors and assigns, an exclusive, perpetual, fully paid-up, royalty-free, worldwide license (with the right to sublicense) to do any and all of the following:

Record, reproduce, use, publicly perform, publicly display, distribute or sell in any medium and to prepare derivative works of my presentation and any accompanying presentation materials (e.g., slides, handouts, speech, etc.) (collectively, the "Presentation").

Use my name, likeness, photo, voice, appearance, biographical information, statements, and performance in association with the Presentation and take photographs, record, project, stream, and broadcast the foregoing for the roles (e.g., speaker, moderator, facilitator, etc.) that I participate in a HIMSS Event. If my presentation is selected for distribution during the HIMSS Event, I understand that I may be asked to pre-record my session approximately 2 to 3 months prior to the engagement. By checking this box, I agree to meet deadlines to produce and record my presentation in adherence to the timelines that will be established. This recording may be used in lieu of a live presentation, should a situation arise that requires this. However, under normal circumstances, it will not

otherwise be released for distribution and consumption until after live delivery at the event. In consideration of the foregoing, HIMSS agrees to acknowledge my contribution to the Presentation. HIMSS reserves all rights to determine if/when the Presentation will be presented and otherwise used.

Without limiting any of the foregoing, I acknowledge that such reproduction, use, public performance, public display, distribution, sale, and preparation of derivative works may include, but is not limited to, audiotapes, videotapes, web broadcasting, live simulcast, rebroadcasts, printed materials, and electronic/digital/computer media and other media. The Presentation may be edited as reasonably deemed necessary by HIMSS, and I forever waive any and all rights to royalties that may arise as a result of my participation.

I hereby agree that:

1. I will not present my HIMSS Event approved presentation for a period of three months prior to the date of the HIMSS Event.
2. I will not record (audio/video) and/or livestream my performance of the Presentation at the event. Should I desire to obtain a recording (audio or video) of my performance of the Presentation at the event, a request for such recording must be made in writing directly to HIMSS (HIMSSprofessionaldevelopment@himss.org) and shall be granted solely in HIMSS's discretion. Barring such written request and approval, I shall have no rights to make, display, re-purpose or otherwise use any recording of my performance of the Presentation at the event.
3. As a courtesy, I will notify my HIMSS liaison in writing should this presentation be presented again within three months post- HIMSS Event.

I represent, warrant, and covenant the following:

1. I hold all rights to this Presentation, unless I created the Presentation in my role as an employee of the Federal government or unless this is a work made for hire under applicable law. The Presentation is original and that I am the sole author or co-author and owner or co-owner of the Presentation and have full power to make this declaration; and no agreement to publish is now outstanding; that it contains no matter libelous or otherwise unlawful or which invades individual privacy or which infringes any proprietary right at common law or any statutory copyright.
2. I will indemnify, defend, and hold harmless HIMSS, its subsidiaries, affiliates, agents, representatives, licensees, distributees, and successors and assigns (each an "Indemnified Party" and collectively "Indemnified Parties"), and any and all Indemnified Parties, against any and all suits, claims, demands, or recoveries, including but not limited to damages, costs, expenses, and attorneys' fees, which may be made, taken, or incurred at any time by or against any and all Indemnified Parties, which, directly or indirectly, arise from or relate to the Presentation or the license granted hereunder.
3. On behalf of myself, my heirs, and my successors, and assigns, I hereby release any and all claims against the Indemnified Parties, which, directly or

indirectly, arise from or relate to the Presentation or the license granted hereunder.

4. If the Presentation contains a work made for hire under applicable law, I have the authority to bind my employer to this license granted hereunder. In this case, "I" is understood to include myself and my employer.
5. I have obtained all necessary clearances and licenses (including, but not limited to, any graphics, photographs, music, or sound that is or may be copyrighted by a third party), have cited all sources and /or included all necessary acknowledgements. Where I am using a previously published figure, table or text excerpt, I obtained written permission to reproduce it from the copyright holder, and I have acknowledged the original source in the caption for a figure or as a footnote to a table or text excerpt.
6. In the event that HIMSS shall commence any suit or action to interpret or enforce the agreements under this Authorization, I agree to reimburse HIMSS for its costs and expenses incurred in connection with such suit or action, including attorney fees and costs.

PRA Agreement

Select one.

- I permit HIMSS to record, publish or otherwise make my participation as session host and/or presentation available to the public or HIMSS members beyond the live presentation at the HIMSS Event.
- I do NOT permit HIMSS to record, publish or otherwise make my participation as session host and/or presentation available to the public or HIMSS members beyond the live presentation at the HIMSS Event.

Pre-Recording Agreement

If my presentation is selected for distribution during the HIMSS Event, I understand that I may be asked to pre-record my session approximately 2 to 3 months prior to the engagement. By checking this box, I agree to meet deadlines to produce and record my presentation in adherence to the timelines that will be established. This recording may be used in lieu of a live presentation, should a situation arise that requires this. However, under normal circumstances, it will not otherwise be released for distribution and consumption until after live delivery at the event. All rights, obligations, and promises made in this Agreement apply to pre-recorded presentation content in the same manner as live presentations.

Select one.

- Yes, I understand and agree to these terms.
- This is not applicable as I have not consented to the PRA Agreement.

PRA Signature

Type your name to constitute your signature.

Name of Employer

(if work made for hire).

Date:

Are you able and willing to participate in thought leadership that is sponsored?

- Yes
- No

If “Yes,” are you willing and able to participate in opportunities that are sponsored by a healthcare IT market supplier? You may be eligible to receive an honorarium for participating.

- Yes
- No

If “Yes,” are there any verticals of the industry you cannot speak on? If so, please describe the limitations.

Are there organizations or vendors you cannot or prefer not to work with?

*** If you have additional speakers, copy and paste the Speaker Information Fields. ***