Special Needs Plan Leadership Summit

Improving Outcomes for Hard-to-Reach and At-Risk Populations

June 25 - 27, 2019
Princeton Club, NYC
The 8th Annual Special Needs Plans Leadership Summit is the only non-association place for managers of special needs plans to gather, network and uncover insights and tactical strategies for expanding their DSNPs and ISNPS as well as for ones looking for insights into full integration.

With takeaways applicable to DSNP and ISNP plans newcomers and experienced executives alike, we invite you to return for the concrete action plans and closed-door conversations only available in this intimate event. New content this year covers auditing and achieving Model of Care requirements and CMS updates as well as new ones addressing specific challenges to full integration, behavioral integration, social determinants of health, and technology to streamline audits, Model of Care processes and enhanced supplemental benefit administration.

TOPICS AT A GLANCE

- Keynote: Examining the Challenges and Opportunities Facing SNP Plans
- The Future of D-SNPs and State Integration
- How ISNPs Fit in An Integrated World
- Leveraging Supplemental Benefit Authority to Address the Social Determinants of Health
- How to Prepare for a CMS Audit
- Effective Strategies for Integrating Behavioral Health
- PANEL: An Examination of Challenges for Moving towards Medicare-Medicaid Integration
- Communication Strategies for Membership Acquisition and Retainment
- Fireside Chat: Brainstorming on The Future of Social Issues in Healthcare - How Will We Build ROI?
- Moving to the Future Utilization of Technology: Evaluation, Implementation and Considerations
- How to Make the Most of Your HRA Strategies and Hard To Reach Populations
- So, You Got Your Audit Engagement Notice… What Happens Now?
- Operationalization of Systems for Smooth Audits
- Model of Care Narrative Designs for Audit Readiness
- Datamining strategies for Assessing Supplemental Benefits

Audience interaction and participation is encouraged now more than ever. If you’ve got questions, submit them early or have them ready onsite to ask our expert faculty of speakers!
WHO WILL ATTEND?

Plans who have or are thinking of implementing a DSNP, ISNP or CSNP. Titles include:

01 Long-Term Care
02 Dual Special Needs Programs
03 Community/Member Engagement
04 Integrated Services
05 Dual Eligibles Products
06 Integrated Special Needs Plans
07 Government Relations
08 Utilization & Case Management
09 Strategy and Operations
10 Integrated Care management
11 Director - SNP Program
12 Special Needs Plan (SNP) Sales
13 D-SNP Quality and Stars Incentive Program Managers
14 DSNP Managers

Consultants and technology providers are also encouraged to attend.

TOP REASONS TO ATTEND

This year we are bringing in ten new speakers for a new and fresh perspective and a content packed four-hour workshop for new SNP Plans and those wanting an information refresher.

01 Double the speakers from last year
02 Discuss with peers and hear from experts the implications of future integration policies and programs and how they affect your plans
03 Gain insights into the new opportunities for SNPs and implement them within your organization
04 Take back important lessons on integration, communication and audits that will enhance your operations at home
05 Join like-minded peers for networking and in-depth discussions about similar challenges for an unrivaled exchange of ideas
06 Obtain knowledge about technologies that can streamline operations, improve efficiency and help you identify effective strategies and needed interventions
07 Participate in the Three newly added sessions on CMS Audits that will better prepare your organization to demonstrate compliance
OUR RENOWNED SPEAKING FACULTY

Lauren Easton, Vice President of Innovation
COMMONWEALTH CARE ALLIANCE

Roseann DeGrazia, Vice President Regional Network
UPMC HEALTH PLAN

Caroline McDonald, Principal
PRIZM HEALTH ADVISORY, LLC

Yisel De Llano, Senior Director SNPs
FLORIDA BLUE

Cynthia Napier Rosenberg, M.D., Associate Vice President, Medical Services
UPMC HEALTH PLAN

Taib Dedic, Director, Product Development
CENTENE CORPORATION

James Milanowski, President, CEO
GENESEE HEALTH PLAN

Cheryl Phillips, M.D., President and CEO
SNP ALLIANCE, INC.

Gretchen Wagner, Director
HUMANA

Kim Chen, Director of Operations
HUMANA, INC.

Melodie Farmer, Quality Assurance Program Manager
CAREOREGON

Nancy Erickson, Director
BLUEPEAK ADVISORS

Hank Osowski, Managing Director
STRATEGIC HEALTH GROUP

Suzanne Gore, Principle
STATE HEALTH PARTNERS

CONFERENCE CHAIR

Kara Curtis, Program Manager, Special Needs Plans
BOSTON MEDICAL CENTER HEALTHNET PLAN
Nancy Archibald, Senior Program Officer
CENTER FOR HEALTH STRATEGIES (CHCS)

Fernando Arbelaez, Sr Dir, Research, Development and Analytics
GATEWAY HEALTH

Laura Cline, Director of Care Coordination
CANTEX CONTINUING CARE NETWORK

Yisel De Llano, Senior Director SNPs Plans
FLORIDA BLUE

Michelle Fogg, Manager Medicare Operational Compliance
HEALTH PARTNERS PLANS

Angela Lloyd, Dir. Medicare Audit & Corrective Action
HEALTH PARTNERS PLANS

Suzanne Gore, JD, MSW, Founder and CEO
STATE HEALTH PARTNERS

Patsy Tschudy, Director of Managed Care
CANTEX CONTINUING CARE NETWORK

Karissa Smith, LPC, CADC I, Senior Operations Manager
CAREOREGON

Toc Soneoulay-Gillespie, MSW, Social Services Manager, Population Health Partnerships
CAREOREGON

Garrison Rios, Executive Director of Cal MediConnect and Medicare Operations
L.A. CARE HEALTH PLAN

Karen Kimsey, Chief Deputy Director,
DEPARTMENT OF MEDICAL ASSISTANCE SERVICES
Pre-Conference Workshop: Tuesday, June 25

1:00 – 5:00  SNPs 101: Critical Factors from Concept to Launch

- Review applications do and don’ts
- Understand how to establish network adequacy
- Learn how to demonstrate financial alignment
- Hear about strategies for stratifying risk
- Gain what you need to know to master ICT’s (interdisciplinary care team) and ICP’s (interdisciplinary care plan)
- Examine examples of value-based initiatives and how you can implement them
- Review strategies on how to effectively negotiate and manage MIPPA agreements

Hank Osowski, Managing Director
STRATEGIC HEALTH GROUP

Patsy Tschudy, RN, CCM, Director of Managed Care
CANTEX CONTINUING CARE NETWORK

Lara Cline MSN, FNP-BC, C-NE, RAC-CT, Director of Care Coordination
CANTEX CONTINUING CARE NETWORK

5:00 – 6:00  Networking Cocktail Reception

Wednesday, June 26

7:30 - 8:20  Registration and Networking Breakfast

8:20 - 8:30  Chairperson’s Opening Remarks

Kara Curtis, Program Manager, Dual Eligible Special Needs Plans
BOSTON MEDICAL CENTER HEALTHNET PLAN

8:30 - 9:10  Keynote: Examining the Challenges and Opportunities Facing SNP Plans

- Understand new policies effecting implementation and growth of SNP’s
- Review dynamics that are getting in the way of advancing integration
- Examine what is getting in the way of growing special needs plans
- Look into the future for opportunities we have yet to explore

Cheryl Philips, President and CEO
SNPS ALLIANCE
**9:10 - 9:50 The Future of D-SNPs and State Integration**

- Understand key differences between D-SNP, FIDE SNP and Medicare-Medicaid Plan (MMP) plan types
- Examine trends in state SNP and MMP markets
- Review of new integration and integration sharing standards for plans
- Understand states’ perspective with maximizing the opportunities and managing the challenges of FIDE SNP transition
- Learn about opportunities for working well with State Medicaid Agencies on integrated D-SNP programs

Nancy Archibald, Senior Program Officer
CENTER FOR HEALTH CARE STRATEGIES (INVITED)

**10:00 - 10:30 Networking Break**

**10:20 - 11:00 How ISNPs Fit in An Integrated World**

- Examine Medicaid efforts to increase the use of home and community-based services and understand how this impacts states’ views of I-SNPs.
- Learn how to help states see the value of I-SNPs.
- Discuss potential strategies that I-SNPs can use to partner with states to promote person-centered, integrated care.

Suzanne Gore, Principal
STATE HEALTH PARTNERS
Karen Kimsey, Chief Deputy Director
DEPARTMENT OF MEDICAL ASSISTANCE SERVICES

**11:00 - 11:40 Leveraging Supplemental Benefit Authority to Address the Social Determinants of Health**

- Examine SNP goals to address Social Determinants of Health with strategic alignment to the model of care
- Review challenges and barriers to address SDOH in SNP population and learn how to address these challenges
- Learn how to inform financial risk through data analysis and evaluation of each specific supplemental benefit identified to address social determinant of health in the SNP population
- Consider supplemental benefit impact to HEDIS and CMS Stars measure performance
- Operationalize business activities to enhance member access of supplemental benefits to meet SDOH needs through communication, risk identification and trigger events

Roseann DeGrazia, Vice President Regional Network
UPMC HEALTH PLAN
11:40 – 12:20  Meaningful Language Access Workshop

- Recognize the unique and essential role of an interpreter, service provider, and how together, they honor the voices that are often unheard;
- Explore how effective interpretation impacts the power, privilege and access to communication and information;
- Share and exchange interpreting tools and techniques to reduce interpreter error and improve access.

Toc Soneoulay-Gillespie, MSW, Social Service Manager
CAREOREGON

12:20 - 1:20  Networking Luncheon

1:20 - 2:00  Effective Strategies for Integrating Behavioral Health

- Learn how to engage primary care providers in identifying and coordinating behavioral health services
- Review ways to deliver primary care services where the member is, not where you want them to be
- Understand how to tap into community behavioral health resources to supplement a member’s personal care plan

Lauren Easton, Vice President of Innovation
COMMONWEALTH CARE ALLIANCE

2:00 - 2:40  Care Management Strategies (HRA’s, Transitions, and Individualized Care Plans):

- Learn about CareOregon’s Regional Care Team Model
- Learn how to improve HRA completion rates
- Triaging the work
- Transitions of Care
- Strategically utilize telephonic, community-based, and embedded staff
- Understand how to best utilize technology
- Understand how individualized care plans are built from assessments within our care management platform, GSI Health Coordinator
- Population Segmentation; Proactively identify populations to target
- Evaluate of Technology solutions

Karissa Smith, LPC, CADC I, Senior Operations Manager
CAREOREGON

Melodie Farmer, Quality Assurance Program Manager
CAREOREGON
2:40 – 3:20  An Examination of Challenges for Moving towards Medicare-Medicaid Integration

Moderator:
Kara Curtis, Program Manager, Dual Eligible Special Needs Plans
BOSTON MEDICAL CENTER HEALTHNET PLAN

Panelist:
Taib Dedic, Director, Product Development
CENTENE CORPORATION
Lauren Easton, Vice President of Innovation
COMMONWEALTH CARE ALLIANCE
Garrison Rios, Executive Director of Cal MediConnect and Medicare Operations
L.A. HEALTH CARE PLAN

3:20 – 3:50  Networking Break

3:50 - 4:30  CAMPFIRE DISCUSSION: Moving to the Future Utilization of Technology: Evaluation, Implementation and Considerations

- Examine the rapid convergence of technology, networking and care
  - Telehealth
  - Robotics
  - AI and Machine Learning
- Understand goals for technology
  - Increase understanding and usage of data exchange
  - Means to better utilize human resources
  - Provide previously unattainable conclusions and predictions
- Hear about the regulatory and technical challenges of care management and remote patient monitoring
- How to evaluate and implement technology
  - Ie: what team members do you involve

Kara Curtis, Program Manager, Dual Eligible Special Needs Plans
BOSTON MEDICAL CENTER HEALTHNET PLAN

4:30 - 5:15  Fireside Chat: Brainstorming on The Future of Social Issues in Healthcare – How Will We Build ROI?

- Understand how investing in social programs like housing, food and transportation reduces healthcare costs
- Examine analytics needed to demonstrate use of programs - ‘closing the loop’
- Definition of what ROI will look like in this future

Cynthia Napier Rosenberg, M.D., Associate Vice President, Medical Services,
UPMC HEALTH PLAN
James D Milanowski, President & CEO
GENESEE HEALTH PLAN
5:15 - 5:30  Chairperson’s Closing Remarks  
Kara Curtis, Program Manager, Dual Eligible Special Needs Plans  
BOSTON MEDICAL CENTER HEALTHNET PLAN

5:30 – 6:30  Networking Cocktail Reception

Thursday, June 27

8:00 - 8:55  Networking Breakfast

8:55 - 9:00  Chairperson’s Opening Remarks  
Kara Curtis, Program Manager, Dual Eligible Special Needs Plans  
BOSTON MEDICAL CENTER HEALTHNET PLAN

9:00 - 9:45  Communication Strategies for Membership Acquisition and Retainment  
- Review of systems for meetings and training  
- Understand effective strategies prior to enrollment  
- Grass roots marketing  
- Examine verification systems throughout the sales process:  
  • Verification of Key Providers  
  • Verification of Meds to ensure there are no changes in copays  
  • Verification of pending processes to ensure continuity of care  
  • Learn how to implement a sales checklist  
  • Ensure the completed checklist is handed off to the Clinical team  
  • Conduct Welcome Calls  
Yisel De Llano, Senior Director SNPs Plans  
FLORIDA BLUE

9:45 - 10:30  So, You Got Your Audit Engagement Notice…. What Happens Now?  
- Understand what you are going to go through during a program audit  
- Review the CMS Audit Protocols and recent CMS Changes  
- Understand the areas that plans are regularly failing and how to ensure you don’t  
Nancy E. Erickson, BSN, MHA, Director  
BLUEPEAK ADVISORS

10:30 – 11:00  Networking Break
11:00 - 11:45 Operationalization of Systems for Smooth Audits

- Understand how Human operationalized audit preparedness
- Learn how compliance and quality work together
- Hear about Humana’s audit methodology and tools
- Discuss ongoing monitoring and reporting
- Hear about new technologies that help Humana streamline audit preparedness

Gretchen Wagner, Home Compliance & Risk Management, Healthcare Services
HUMANA
Kim Chen - Director of Operations
HUMANA

11:45 - 12:30 CASE STUDY: Maximizing Audit Preparedness: Effectively Preparing for the Unique Challenges of SNP

- Adopt best practices to prepare for and prevent common mistakes in a CMS Audit
- Prepare a Corrective Action Plan to meet audit requirements
- Understand the Validation Audit process
- Overcome common compliance issues specific to SNPs

Angela Lloyd, Director Medicare Audit & Corrective Action
HEALTH PARTNERS PLANS
Michelle Fogg, Manager Medicare Operational Compliance,
HEALTH PARTNERS PLANS

12:30 – 1:30 Networking Lunch

1:30 - 2:15 Case Study: Datamining Approach to Assessing Supplemental Benefits

- Learn how Gateway Health has designed a comprehensive data integration effort aimed to formulate evidence-based strategies that enhance member satisfaction, improve cost control, and optimize quality scores.
- Review categories of data integration needed for a thorough analysis
  - Administrative Data
  - Clinical Data
  - External Data
- Examine methodology and reasoning on population segmentation
- Review how Gateway formulated its strategy based on data
- Analyze Gateway’s design and evaluation of interventions

Fernando Arbelaez, Senior Director, Research, Development and Analytics
GATEWAY HEALTH
2:15 - 3:00  Model of Care Narrative Designs for Audit Readiness

- Examine ways to balance MOC commitments and flexibility
- Understand how to analyze your MOC to identify risk areas
- Review considerations for risk stratification
- Learn how to leverage the off-cycle/’redlined’ MOC submission

Caroline Wilson McDonald, Principal
PRIZM HEALTH ADVISORY, LLC

3:00  Chairperson’s Closing Remarks

Kara Curtis, Program Manager, Dual Eligible Special Needs Plans
BOSTON MEDICAL CENTER HEALTHNET PLAN
VENUE DETAILS

THE PRINCETON CLUB OF NEW YORK
15 WEST 43RD STREET
NEW YORK NY 10036
212.596.1200
info@princetonclub.com

PRINCETON CLUB OVERFLOW ROOM BLOCK DETAILS

Conveniently located less than 0.5 miles from the Princeton Club of New York, the Millennium Broadway New York Times Square room block is now open. Please call or use the link below to reserve your room today. The room block rate at this hotel is $289/night.

To reserve by phone: Call 1-800-622-5569. Ask to make a reservation in the “Special Needs Plan Leadership Summit” Block to receive the negotiated rate.

To reserve online: Click the following link, WFRA 19 Princeton Club Overflow, enter your arrival/departure dates and choose the best room type available for your stay.

Last day to book: 6/5/19
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4 HOUR WORKSHOP ADD ON: $300

GROUP DISCOUNTS ARE AVAILABLE

Please contact Whitney Hall at 704.341.2443 or whall@risehealth.org

In order to secure a group discount, all delegates must place their registrations at the same time. Group discounts cannot be issued retroactively.

REFUNDS AND CANCELLATIONS: For regarding refund, complaint and/or program cancellation policies, please visit our website: risehealth.org/the-fine-print/

HOW TO REGISTER

CALL
704.341.2443

REGISTER ONLINE
risehealth.org/SNPsummit
(Click to Register Online)

MAIL
Wilmington FRA
3420 Toringdon Way,
Suite 240
Charlotte, NC 28277

Please write H581 on your check.
RISE is the premier community for health care professionals who aspire to meet the extraordinary challenges posed by the emerging landscape of accountable care and government health care reform.

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BluePeak Advisors was established in 2010 by a group of government healthcare professionals dedicated to solving the Medicare Part C and D Programs’ unique regulatory and operational challenges. Led by Principals Babette S. Edgar and Sherry Pound, our team of consultants consists of senior level managed care professionals, experienced clinicians and former Centers for Medicare and Medicaid (CMS) regulators who have worked at health plans, pharmacy benefit managers (PBMs), and CMS. The team consists of career government healthcare professionals with the experience and expertise to service our clients across the country. BluePeak’s focus lies in PBM and health plan operations, Medicare compliance consulting, STAR rating improvements, CMS advocacy and support, pharmaceutical manufacturer marketing and payer strategies for reimbursement, clinical programs strategies and integration and data analytics.

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