



Healthcare Education Associates presents

Get Post-Enrollment
Operations Right for
2015

Post-Enrollment Operations on the Health Insurance Exchanges

Streamlining the Post-Enrollment Process

August 25-26, 2014 | Sheraton Nashville Downtown

Enrollment Reconciliation Plan Management
Payments, Claims & Billing
Data Transmissions Workarounds Data Integration
Enrollment & Disenrollment Back-end Functionality
Post-enrollment Operations SERFF 834s

Summit Highlights Include How to:

- Improve Your Enrollment & Disenrollment Procedures
- Get the Kinks Out of Transmitting 834s and All Back-end Functions
- Establish a Sound Enrollment Reconciliation Process
- Streamline Internal & External Workflow
- Organize Interdepartmental Communications
- Effectively Manage the Claims, Payment & Billing Process
- Align Data Transmission & Connectivity

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TO REGISTER: CALL 866-676-7689 OR VISIT US AT WWW.HEALTHCARE-CONFERENCES.COM



Double check that your insurance exchange operations are top-notch and prepare NOW for 2015!

- Register today for the ONLY insurance exchange conference that focuses exclusively on operational best practices, the **Post-Enrollment Operations on the Health Insurance Exchanges** conference, slated for August 25-26 in Nashville. Technical glitches were an unfortunate fact of life in the roll out of the exchanges; don't let operational snafus hurt your enrollment again!

We're keying in on topics not covered in any other conference:

- A comprehensive look at the challenges and issues in plan management and SERFF
- Specific ways to improve your enrollment and disenrollment procedures
- Best practices in improving data transmission between the health plan and exchange
- Effectively electronically transmitting 834s

- Building a process and standards for enrollment reconciliation
- Moving the enrollment "workaround" file to an automated, long-term solution
- Creating a proper workflow scenario from A to Z
- Managing the claims, payment and billing processes
- All the facts about tax credits, penalties and extensions
- Building the proper infrastructure for member life changes post enrollment

There's simply too much at stake to let operational issues get in the way of your success on the insurance exchanges!

Register today! Call 866-676-7689 or online at www.healthcare-conferences.com.

Sincerely,

Laura Garza

LAURA GARZA, Senior Vice President
HEALTHCARE EDUCATION ASSOCIATES

Kevin Mowll

KEVIN MOWLL, Executive Director
RESOURCE INITIATIVE & SOCIETY FOR EDUCATION

- P.S. This is a unique networking opportunity for executives involved in exchanges operations—don't miss it!

Who Should Attend?

Medicare, Medicaid, Commercial Plans, & States
(all plans on the Exchanges):

- COOs
- Senior Operational Executives
- Heads of Enrollment & Eligibility
- Heads of Data Management
- Heads of Technology
- Heads of Payments, Claims, Billing
- Heads of Plan Management

- Underwriting Officers
- Heads of the Exchanges
- Heads of Government Relations

Plus:

- Consultants
- Actuaries
- Software & technology providers
- Private Exchanges
- Brokers & Agents
- Law firms

Top Reasons to Attend

- Take a retrospective look at the challenges of plan management & SERFF
- Get lessons learned from others who've revamped their enrollment and disenrollment procedures
- Improve data exchange between the exchange enrollment system and the health plan
- Ensure data accuracy and expediency
- Get the kinks out of electronically transmitting 834s
- Close the loop in enrollment reconciliation
- Effectively move the enrollment "workarounds" file to an automated long-term solution
- Tackle business workflow and streamline interdepartmental communications and procedures
- Ensure your billing system is up to date and compliant
- Successfully manage tax credits, penalties & exceptions
- Build the proper infrastructure for member life changes post-enrollment
- Effectively manage CMS and IRS reports

CPE Credits



Healthcare Education Associates is registered with the National Association of State Boards of Accountancy (NASBA) as a sponsor of continuing professional education on the National Registry of CPE Sponsors. State boards of accountancy have final authority on the acceptance of individual courses for CPE credit. Complaints regarding registered sponsors may be submitted to the National Registry of CPE Sponsors through its website: www.learningmarket.org.

Sponsored learning activities are measured by program length, with one 50-minute period equal to one CPE credit. One-half CPE credit increments (equal to 25 minutes) are permitted after the first credit has been earned in a given learning activity. Please note that not all state boards adopted this rule. Some participants may not be able to use one-half credit increments. This course is offered as a group-live course and does not require prerequisites or advance preparation. We offer advanced level courses. Although no prerequisite courses, experience, or advance preparation is required to participate in this program, working knowledge of Healthcare is required, as well as, prior knowledge of the program topic.

For specific learning objectives and program description, please refer to the individual conference sessions topics in the conference brochure located on our website: www.healthcare-conferences.com/thefingerprint

The recommended CPE credit for this course is 13 credits in the following field(s) of study: Specialized Knowledge and Application

DAY ONE: Monday, August 25, 2014

- 8:00 – 8:45 Exhibits Set-Up, Registration, & Continental Breakfast
- 8:45 – 9:00 Co-Chairs' Opening Remarks:
Eugene Sayan, CEO & Founder
Softtheon
- Additional Chair TBA

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9:00 –
10:00

Plan Management & SERFF: A Retrospective Look at the Challenges of Plan Management & SERFF

► Opening Panel

- What is needed for health plan contracting?
- How do you select and regulate the plans that are coming on to your shelf?
- How does batch processing work?
- What are the business rules?
- Ensuring system sustainability
- Is SERFF really viable? Where are we now?
- How will carriers get their plans on the website?
- How do exchanges certify plans?
- How does billing get done?

Peter B. Nichol, *Assoc. Director of IT Systems and Operations*
Access Health CT

Zane A. Chrisman, *Plan Management and Attorney Specialist*
Arkansas Insurance Department

Rachel Dolan MPP, *Policy Specialist*
National Academy for State Health Policy (NASHP)

10:00 –
11:00

Revamping Your Enrollment & Disenrollment Procedures: Lessons Learned

► Case Study

- How can you improve your enrollment & disenrollment process?
- Understanding how enrollment is activated - - closing the loop
- Policy around passive disenrollment
- What worked and how will you overhaul the process?
- Technology standards and protocols to facilitate electronic enrollment
- Managing variances within enrollment numbers
- What are the metrics for managing carriers?

Debra Hammer, *Chief Communications Officer*
New Mexico Health Insurance Exchange

Michael Dineen, *Director, Service and Support*

New Mexico Health Insurance Exchange

Zane A. Chrisman, *Plan Management and Attorney Specialist*
Arkansas Insurance Department

11:00 – 11:15 Morning Break sponsored by  EngagePoint™

11:15 –
12:00

Data Transmission: Improving Interaction Between the Exchange Enrollment Data System and the Health Plan

► Internal & External Data Integration

- How is the enrollment information centralized by the exchange and how does it interact with data systems for enrollment & operations?
Connectivity with:
 - multi-carrier
 - single-carrier
 - third party with robust functionality
 - third party with minimal functionality
 - interface with public exchange on public & SHOP side
 - service centers
 - welfare department/Medicaid
- Notification to members and other business processes
- The latest in CMS requirements for reporting- 1095
- Identifying discrepancies in data
- Data access: How do you share information and still protect privacy and security?

Speaker TBA

12:00 – 1:15 Networking Luncheon

1:15 –
2:15

Ensuring Data Accuracy & Expediency: Taking Every Precaution to Get it Right

- Garbage in, garbage out
- Ensuring the people manipulating data have a real appreciation for what it is
- What do you need and how can you ensure it is valid?

Moderator:

Regina Shapiro, *Director of Business Development*
DataWing Software

Panelists:

Patricia MacTaggart, *Lead Research Scientist/Lecturer*
George Washington University Health Policy Department

Scott Devonshire, *Chief Information Officer*
Massachusetts Health Connector

Bethany Frey, *Senior Communications Specialist*
Washington Health Benefit Exchange

2:15 –
3:15

Effectively Transmitting 834s: Getting the Kinks Out for 2015

► Back-end Functionality

- What are the operational controls you have in place for transmitting 834s?
- How many members do you have?
- Common file formats: How to use them and how to integrate them
- What are the carrier 834 daily/monthly needs?
- What are CMS 834 daily/monthly requirements?
- Working with EDI standard
- Taking a close look at ASC X12N implementation guidelines

Kevin Hause, *COO*
Hawaii Health Connector

James Foster, *Office of National Health Reform*
Blue Cross Blue Shield of Michigan

3:15 – 3:30

Afternoon Break sponsored by 

3:30 –
4:30

Building a Process & Standards for Enrollment Reconciliation: Critical Issues for Closing the Enrollment Loop

► Fixing the Reconciliation Debacle:

- How do you manage the reconciliation process?
- Are you tracking the number of cancelled members or members who changed products?
- Managing the relationships of the members who think they are covered
- Ensuring your members are actually enrolled in their plan
- Ensuring payer payer knowledge of EDI processes
- Analyzing the actual cost of reconciling discrepancies – resources, money, time
- Systems integration: being able to automate the process to reconcile fully
- Remediation – picking up the stuff you let slide

Moderator:

Todd Schrubbs, *Vice President, Business Development*
EngagePoint

Panelists:

Joanna Donbeck, *Operations Program Manager*
Washington Health Benefit Exchange

Michelle Storz, *Senior Manager, Individual Markets, Operations*
Priority Health

James Foster, *Office of National Health Reform*
Blue Cross Blue Shield of Michigan



4:30 –
5:00

Softheon Topic TBA

Eugene Sayan, *CEO & Founder*
Softheon

5:00



Cocktail Reception Immediately

Contact Jennifer Clemence for more information on our sponsorship opportunities at jclemence@healthcare-conferences.com or 704-341-2438

DAY TWO: Tuesday, August 26, 2014

8:00-8:45 Continental Breakfast
8:45 – 9:00 Recap of Day One

9:00 –
10:00

Effectively Moving the Enrollment “Workarounds” File to an Automated Long-Term Solution

- When does a workaround become a best practice or the norm?
- How to develop a workaround into a more permanent procedure?
- What have you learned?
- What is the impact on the exchange, health plan, and providers?
- Creating a thorough testing environment for the workaround

Moderator:

Todd Schrub, *Vice President, Business Development*
EngagePoint

Panelists:

Patricia MacTaggart, *Lead Research Scientist/Lecturer*
George Washington University Health Policy Department

Kevin Hause, *COO*
Hawaii Health Connector

Scott Devonshire, *Chief Information Officer*
Massachusetts Health Connector

10:00 –
10:45

How to Tackle Business Workflow & Streamline Interdepartmental Communications & Procedures

- Creating the proper workflow scenario: From A to Z
- Capability concerns
- How is the data passed from department to department?
- Interdepartmental communication risks
- What are you doing to avoid compromising data and workflow kinks?
- Aligning procedures and improving communication

Rose Hughes, *Chief Operations Officer*
The Wahiawa Center for Community Health

Jason Leung, *Consultant to Director Operations (Washington Health Benefit Exchange)*
Washington Health Benefit Exchange

10:45 – 11:00 Morning Break

11:00 –
12:00

Managing the Claims, Payment, & Billing Process: Ensuring Your Internal Billing System is Up to Date & Compliant with All the New Rules

- Where is the money flowing to and can you actually confirm it has gotten to where it is supposed to go?
- Is your billing system up to speed?
- Staying compliant with the new rules: when does the grace period expire?
- How are you actually receiving the money? Avoiding confusion when multiple payments are made from multiple sources
- Cost-sharing reductions
- What are the implications for providers?
- 820 payment implementation guide and transmission specifications
- Ensuring accuracy
- Are your members paying directly or through the feds?
- Communicating payment to the end-user
- How are the “underbanked” affecting the process?

Moderator:

TBA

Panelists:

Juan M. Montanez, *Principal*
Health Management Associates

Michelle Storz, *Senior Manager, Individual Markets, Operations*
Priority Health

12:00 – 1:15

Luncheon sponsored by **Softheon**
work with innovators

1:15 –
2:00

Tax Credits, Penalties, & Exceptions: Facts You NEED to Know & Procedures to Implement

- How will the penalties be administered for anyone who didn't enroll?
- Will they be pro-rated?
- How are people handling special events like marriage, divorce, having babies, etc?
- What are the tax credit exceptions?
- How will the notification take place for post March 31 enrollment?
- What are the tax credits and advanced premium tax credits?
- What does the APTC look like at the end of the year with someone who makes more money or less?

Barbara Markham Smith, *JD, Principal*
Health Management Associates

CJ Bawden, *Communications Officer*
Silver State Health Insurance Exchange

2:00 –
2:45

Building the Proper Infrastructure for Member/ Life-Changes Post Enrollment

- How are health plans making changes for member/life-changes?
- How's the federal government making member/life-changes?
- What type of protocol do you have in place to deal with the modifications?

CJ Bawden, *Communications Officer*
Silver State Health Insurance Exchange

Additional Speaker TBA

2:45 –
3:30

Topic TBA

3:30 End of Summit



IMPORTANT INFORMATION

To Register:

Fax: 704-341-2641

Mail: Healthcare Education

Associates

18705 NE Cedar Drive
Battle Ground, WA
98604

Phone: 866-676-7689

Online: www.healthcare-conferences.com

Post-Enrollment Operations on the Health Insurance Exchanges

August 25-26, 2014
Sheraton Nashville
623 Union Street
Nashville, TN 37219
p: 615-259-2000
f: 615-742-6057

We have a limited number of hotel rooms reserved for the conference. The negotiated room rate of \$179 per night will expire on 8/3/2014, although we expect the block to sell out prior to this date. To ensure you receive a room at the negotiated rate, book well before the expiration date. Upon sell out of the block room rate, availability will be at the hotel's discretion. Mention the "Health Exchange Operations" conference when booking your room to receive the negotiated rate.

FEES AND PAYMENTS

The fee for attendance at Post-Enrollment Operations on the Health Insurance Exchanges is: \$1895

Special rate for state and federal exchange executives: \$895
Please make checks payable to Healthcare Education Associates, and

write code H227 on your check. You may also pay by Visa, MasterCard, Discover, or American Express. Purchase orders are also accepted. Payments must be received no later than August 18, 2014.

Team Discounts:

- **Three people will receive 10% off**
- **Four people will receive 15% off**
- **Five people or more will receive 20% off**

In order to secure a group discount, all delegates must place their registrations at the same time. Group discounts cannot be issued retroactively. For more information, please contact Mark Williams at mwilliams@healthcare-conferences.com or 704-341-2441

CANCELLATIONS: If we receive your request to cancel 30 days or more prior to the conference start date, your registration fee will be refunded minus a \$250.00 administrative fee. Cancellations occurring between 29 days and the first day of the conference receive either a 1) \$200 refund; or 2) a credit voucher for the amount of the original registration fee, less a \$250.00 administrative fee. No refunds or credits will be granted for cancellations received after a conference begins or for no-shows. Credit vouchers are valid for 12 months from the date of issue and can be used by either the person named on the voucher or a colleague from the same company. **Please Note:** For reasons beyond our control it is occasionally necessary to alter the content and timing of the program or to substitute speakers. Thus, the speakers and agenda are subject to change without notice. In the event of a speaker cancellation, every effort to find a replacement speaker will be made.



The Conference Organizers

Healthcare Education Associates is a division of Financial Research Associates, LLC. HEA is a resource for the healthcare and pharmaceutical communities to improve their businesses by providing access to timely and focused business information and networking opportunities in topical areas. Offering highly targeted conferences, Healthcare Education Associates positions itself as a preferred resource for executives and managers seeking cutting-edge information on the next wave of business opportunities. Backed with over 26 years of combined conference industry experience,

the producers of HEA conferences assist healthcare professionals, actuaries, attorneys, consultants, researchers and government representatives in their professional endeavors. For more information on upcoming events, visit us online: www.healthcare-conferences.com

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RISE (Resource Initiative & Society for Education) Vision:



To build a community and an educational system that promotes successful careers for professionals who aim to advance the quality, cost and availability of health care.

RISE provides:

- A forum to build professional identity and a network of colleagues
- A platform to capture and share knowledge and insights
- A venue to develop and share benchmarks and document best practices
- Career track development support
- A channel for building alliances, partnerships and affiliations that fulfill the vision

RISE (Resource Initiative & Society for Education) Mission:

RISE is the first national association totally dedicated to enabling healthcare professionals working in organizations and aspiring to meet the challenges of the emerging landscape of accountable care and health care reform. We strive to serve our members on four fronts: Education, Industry Intelligence, Networking and Career Development. To learn more about RISE and to join, visit us online: www.rasociety.org

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Empowering the nation's first state health benefit exchange since 2008, Softheon's vision and strategic direction address healthcare payer, provider, and government agencies' goal of meeting Affordable Care Act (ACA) milestones. Softheon provides solutions for interacting with Federal and State Health Insurance Exchange (HIX) Marketplaces, while measurably reducing administrative costs, improving member and provider satisfaction, as well as addressing regulatory compliance challenges in all managed care administrative processes.

Softheon's Marketplace Connector Cloud (MC2) has been trusted by over 35 health plans as an accelerated federal, state, and private exchange integration platform. Softheon MC2 is a Software-as-a-Service (SaaS) solution where insurers pay a one-time activation and ongoing PMPM fees for exchange members only, while eliminating most, if not all, risks associated with ACA compliance of 2014 enrollment and other mandates.

To find out more about the Softheon, visit www.softheon.com

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EngagePoint accelerates governments' transition to a modern, integrated, sustainable enterprise by delivering software and services for program modernization, program administration, and program integrity. We follow a principled and proven approach to create innovative solutions that our clients can own and evolve long after our work is done. By rethinking common business needs with unbridled thought-leadership, EngagePoint creates software products targeted at realizing efficiencies while simultaneously providing a dramatically enhanced user experience.

DataWing Software® offers accurate, reliable, easy-to-use data management solutions for healthcare eligibility and capitation reconciliation. Since 1996 we have provided our clients with ROI based on process efficiencies, data accuracy, cost containment and recovery of revenue.



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Sponsorship and Exhibit Opportunities

Enhance your marketing efforts through sponsoring a special event or exhibiting your product at this event. We can design custom sponsorship packages tailored to your marketing needs, such as a cocktail reception or a custom-designed networking event.

To learn more about sponsorship opportunities, please contact Jennifer Clemence at 704-341-2438 or email jclemence@healthcare-conferences.com

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Post-Enrollment Operations on the Health Insurance Exchanges

Streamlining the Post-Enrollment Process - Getting it Right for 2015

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Fax: (704) 341-2640
Call: (866) 676-2641
Online: www.healthcare-conferences.com
Mail: Healthcare Education Associates
18705 NE Cedar Drive
Battle Ground, WA 98604



Healthcare Education Associates

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☐ Yes! Register me for the conference: \$895* (government rate)
(*Subject to HEA approval)
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Please mention your priority code when registering:



Conference Code: H227



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Streamlining the Post-Enrollment Process

August 25-26, 2014 | Sheraton Nashville Downtown

834s Post-enrollment Operations Data Transmissions
Data Integration Payments, Claims & Billing Plan Management
Enrollment & Disenrollment Workarounds SERFF Enrollment Reconciliation
Back-end Functionality

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