

Medicaid Managed Care Congress

May 21-23, 2018

Hyatt Regency Baltimore Inner Harbor
Baltimore, MD

**DRIVE INNOVATION WHILE NAVIGATING
POLITICAL AND REGULATORY UNCERTAINTY,
VALUE-BASED CARE TRANSITIONS AND
FINANCIAL RESOURCING SHORTAGES**

Social Determinants of Health | Alternative Payment Models |
Strategic Partnerships for Care Coordination | And More

Book by March 16 and Save \$200 off standard rates.

www.MMCCongress.com

@Healthcarebiz
#MMCC2018

NOW IN ITS 26TH YEAR, MMCC TAKES YOU FROM IDEATION TO IMPLEMENTATION

MMCC 2018 addresses the most pressing issues facing state Medicaid officials, managed care organizations, and healthcare providers. Better understand policy and drive next generation Medicaid Managed Care through case study insights, candid peer dialogue, and intimate networking.

The Medicaid Managed Care Congress convenes more than 300 CMS, State Medicaid Directors, and managed care organizations to examine current federal and state policies and understand their impact on the managed care industry, as well as share strategies to improve quality, manage cost, and drive Medicaid innovation.



G. Lawrence Atkins

Executive Director

MLTSS Association



Margaret Murray

CEO

**Association for Community
Affiliated Plans (ACAP)**



Jeff Myers

President and CEO

**Medicaid Health Plans
of America (MHPA)**



Louis Saccoccio

CEO

**National Health Care Anti-Fraud
Association (NHCAA)**

MEET WITH REPRESENTATIVES FROM THESE STATES:

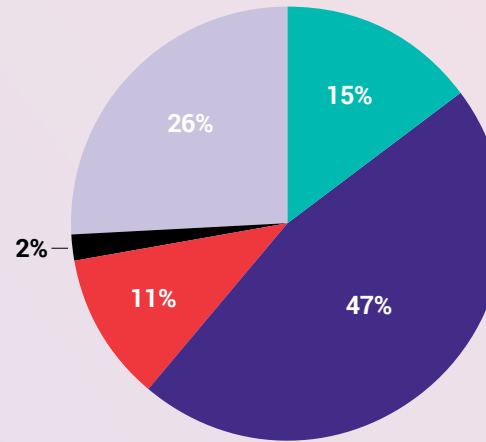


A SAMPLE OF WHO YOU'LL MEET

2017 MMCC ATTENDEES INCLUDED:

Accretive Health | Acelity Inc | Aetna | Aetna Better Health | Aetna Medicaid | Affinity Health Plan | Agile Health Inc | AHCA | Alkermes | American Specialty Health | AmeriHealth Caritas | Anthem/Amerigroup | arroHealth | Association for Community Affiliated Plans | Avesis Inc | Behavioral Healthcare Inc | Blue Cross Blue Shield of Michigan | Blue Cross Blue Shield of Tennessee | Blue Cross Complete of Michigan | BlueCross BlueShield of South Carolina | Calvert Street Capital Partners | Cambridge Health Alliance (CHA) | CaptureRx | CareCall Inc | CareFamily LLC | CareOregon | CareSource Inc | CareTrust REIT | Centene Corporation | Centers for Medicare & Medicaid Services | Central FL Behavioral Health Network | Children's Hospital and Health System | Cigna HealthSpring | Clinical Support Services Inc | Cognosante | Colorado Behavioral Healthcare Council | Colorado Department of Health Care Policy & Financing | Consumer Direct Care Network | Coordinated Transportation Solution | Crystal Run Health Plans | CVS MinuteClinic | Delaware Medicaid & Medical Assistance | Department of Health and Human Services | Department of Public Works | Office Of Medical Assist Pr | Diatherix | EK Health Services Inc | EnvisionRx | Envolve Benefit Options | Express Scripts | Family Health Network | Ferring Pharmaceuticals Inc | Fisher & Paykel Healthcare | FL Blue Effective | FOCoS Innovations | Foothills Behavioral Health Partner | Gateway Health Plan | Geisinger Health Plan | Genoa | George Mason University | Georgetown University Center for Child & Human Development | Gold Coast Health Plan | HCA | Health Fidelity | Health Management Associates | Health New England | Health Plan of San Mateo | HealthAtlas | HealthCrowd | HealthSpring | HHA eXchange | **and more!**

WHO ATTENDS MMCC?



Health Plans	47%
Solution Providers	26%
Government Employees	15%
Non-Profit	11%
Other	2%

MAIN CONFERENCE DAY ONE • MONDAY, MAY 21, 2018

8:00 am	Registration	
	Birds Eye View: A Macro Look at Federal & State Developments in Medicaid, Managed Care, Clinical and Operational Trends and Policy Implementation	
9:00 am	The Current Managed Care Landscape Nationwide Alexander Shekhdar, Vice President, Policy, Medicaid Health Plans of America (MHPA)	
9:45 am	Update on Regulatory Developments and Government Initiatives on the Hill Impacting Managed Cares TBD	
10:30 am	Networking Refreshment Break	
11:15 am	The Impact of Patient Reported Outcomes on Regulators and Payers Christine McSherry, Co-Founder, Jett Foundation	
12:00 pm	MLTSS Integration, State-wide Update	
12:45 pm	Fraud, Waste & Abuse in Medicaid Managed Care The National Health Care Anti-Fraud Association (NHCAA) will host this panel discussion on the topic of health care fraud, waste and abuse, specifically regarding Medicaid managed care. Join the NHCAA's CEO and three key NHCAA member representatives and seasoned anti-fraud professionals who work for insurers that hold Medicaid managed care contracts as they address the leading issues and trends in the FWA space as it pertains to MC. <i>Moderator:</i> Louis Saccoccio, CEO, National Health Care Anti-Fraud Association <i>Panelists:</i> Richard Munson, Vice President, Investigations, UnitedHealthcare Nicholas Messuri, Vice President, Fraud Prevention & Recovery, DentaQuest Katherine Leff, Director, Special Investigations Unit, CareSource	
1:30 pm	Networking Luncheon	
	Specialty Populations and Programs	Addressing the Opioid Epidemic
2:30 pm	Monitoring EPSDT and Data Sharing with MCOs Colleen Sonosky, JD, Associate Director, Division of Children's Health Services Health Care Delivery Management Administration, DC Department of Health Care Finance Serina Kavanaugh, DC Department of Health Care Finance	Strategies to Manage the Opioid Crisis John Lovelace, President of UPMC for You & Government Programs and Individual Advantage Products, University of Pittsburgh Medical Center Health Plan, Pennsylvania
3:15 pm	Achieving Meaningful Improvements and Value for Beneficiaries Through D-SNP Programs	Effective Strategies for Engaging & Retaining People with an Opioid Use Disorder in Treatment David Loveland, Community Care Behavioral Health Managed Care Organization (CCBH)
4:00 pm	MLTSS for the Intellectual and Developmental (IDD) Population	Treating Complex Populations within Opioid Addiction

MAIN CONFERENCE DAY TWO • TUESDAY, MAY 22, 2018

7:30 am	<i>Registration</i>
8:30 am	Chairman's Opening Remarks: John G. Lovelace, President, UPMC for You
8:45 am	Opening Keynote
9:15 am KEYNOTE PANEL	The Future of Medicaid and Medicaid Expansion <i>Moderator:</i> Clay Farris, Mostly Medicaid <i>Panelists:</i> Jeff Myers, President & CEO, MHPA Margaret A. Murray, Chief Executive Officer ACAP <i>Other panelists to be added</i>
10:00 am	<i>Morning Networking Break</i>
10:30 am	Utilizing Waiver Programs to Treat Complex Populations for Better Outcomes Stephanie Muth, Deputy Medicaid Director, Texas Department of Health & Human Services
11:00 am	Digital Communications - Healthcrowd
11:30 am PANEL	Medicaid Director Panel Discussion <i>Moderator:</i> Vernon K. Smith, Ph.D., Senior Advisor, Health Management Associates <i>Panelists:</i> Jon Hamdorf, Interim Medicaid Director, Kansas Department of Health & Environment Dennis R. Schrader, Medicaid Director, Maryland Department of Health Claudia Schlosberg, Medicaid Director, District of Columbia Department of Health Care Finance Stephanie Muth, Deputy Medicaid Director, Texas Department of Health & Human Services Dave Richard, Deputy Secretary for Medical Assistance, Division of Medical Assistance, North Carolina Department of Health and Human Services
12:15 pm	<i>Luncheon Break -State Medicaid Roundtable Luncheons</i>

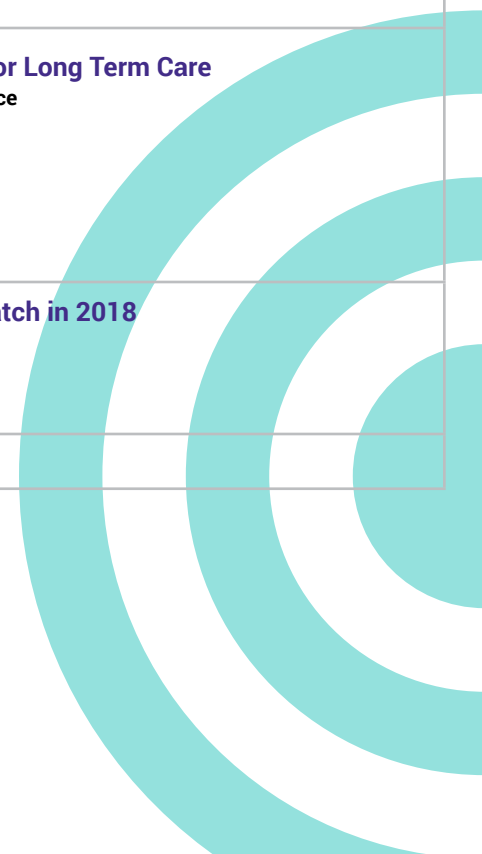
MAIN CONFERENCE DAY TWO • TUESDAY, MAY 22, 2018

BREAKOUT TRACKS

	A MLTSS	B Behavioral Health Integration	C Social Determinants of Health	D Member & Patient Engagement Clay Farris, Mostly Medicaid
1:15 pm	Chairperson's Remarks	Chairperson's Remarks Dan Lavallee, Director, Government and Business Relations, Government Programs, UPMC Health Plan	Chairperson's Remarks Jennifer Babcock, Vice President, ACAP Christine (Tina) Nye, Senior Fellow, NORC	Chairperson's Remarks Clay Farris, Mostly Medicaid
1:30 pm	Automating LTSS Financial Eligibility to Reduce Fraud Barbara Selter, Vice President, Health Services, MAXIMUS Nancy Shanley, Vice President of Consulting and Policy Analysis, Health Services, MAXIMUS	Treating Substance Use Disorder in BEH Populations Steve Benjamin Senior Vice President, Quality, Training and Legislative Affairs, Harbor Behavioral Health Stephanie Calmes, Clinical Director, Harbor Behavioral Health	Applying SDOH to Triple Aim Frances Martini, BSN, MBA, VP Population Health, BlueCare Tennessee	The Role of the Case Manager to Improve Member Engagement with Their Health Merrill Friedman, Sr. Director Disability Policy Engagement, Federal Affairs, Anthem, Inc.
2:15 pm	The Evolution of Long Term Care Integration: Then and Now Kelli Emans, Managed Care Policy/ Home & Community Services Division, Aging & Long Term Support Administration, Washington State Department of Aging and Health Services	SMI Services: Housing Case Study for BEH SMI Populations <i>Moderator:</i> Mollie Hertel, Senior Research Scientist, Health Care, NORC at the University of Chicago Blythe Fitzharris, Ph.D., LCSW, Chief Clinical Officer, Mercy Maricopa Integrated Care	Innovations in Addressing the Special Health Care Needs of Children to Improve Outcomes, Access to Health Care Services, and Other Needed Supports <i>Moderator:</i> Cheryl Austein Casnoff, Senior Fellow, NORC at the University of Chicago Mary Dale Peterson, President & CEO, Driscoll Health Plan, Texas Mark Rakowski, Vice President, Children's Community Health Plan, Wisconsin	Member Engagement Strategy Session
3:00 pm	Networking Refreshment Break			
3:30 pm	MLTSS Payment Systems & the Complaints/Appeals Process Carolyn Yocom, Director, Health Care, U.S. Government Accountability Office	PCORI Granted Behavioral Health Home Case Study Patricia Schake, MSW, LSW, Senior Director Program Innovation, Community Care Behavioral Health Managed Care Organization (CCBH)	Addressing Social Determinants of Health for the Justice-Involved Populations <i>Moderator:</i> Lois Simon, Principal Research Scientist -- NORC at the University of Chicago <i>Panelists:</i> Brianna Ensslin, Director of Public Policy, Molina Healthcare of New Mexico Sarah Spiekermeier, MBA/HCA, CPM Implementation Medicaid Administrative Director, Banner University Health Plan	Member Engagement Strategies and Best Practices for Clinical Outcomes Kavita R. Singh Evans, Pharm.D, Clinical Specialist, Pharmacy Transition of Care, Memorial Hospital Miramar (tentative) Fabio Vogel, Pharm.D., BCPS, Clinical Coordinator, Pharmacy, Memorial Hospital Miramar (tentative)
4:15 pm	MLTSS for the Intellectual and Developmental (IDD) Population	Behavioral Health Integration discussion brought to you by Genoa Health	Housing Case Study Care Oregon Eric Hunter, President & CEO, CareOregon Rebecca Ramsay, Executive Director, CareOregon	Reaching Complex Populations for Improved Outcomes and Population Health Adelline Ntatin, MPH, MBIM, MA, Director, Cultural & Healthcare Equity, Aetna Better Health of Maryland
5:00 pm	Cocktail Reception			

MAIN CONFERENCE DAY THREE • WEDNESDAY, MAY 23, 2018

8:00 am	Registration
8:55 am	Chairman's Opening Remarks: John G. Lovelace, President, UPMC for You
9:00 am	Optimizing State Quality Rating Systems for Medicaid Managed Care Pursuant to the requirements of the May 2016 Managed Care Final Rule (CMS-2390-F), the first significant regulatory update for managed care in over a decade, in this session CMS will be offering opportunity for comment from states and other stakeholders to identify performance measures and a methodology for a Medicaid (and CHIP) managed care quality rating system that is built around transparency; alignment of systems of care; and consumer and stakeholder engagement. This session will operate as an interactive listening session by CMS, to better understand state, health plan, and beneficiary needs to maximize functionality, meaningfulness, and user value from state-based managed care quality rating systems. Participants will be asked to share ideas and suggestions for CMS to consider in developing a framework that serves as a foundation for states to consider in implementing a state-run quality rating system. States with existing or developing quality rating systems are welcome to share their successes and challenges experienced to-date. Karen Matsuoka, Chief Quality Officer & Director, Division of Quality and Health Outcomes at Centers for Medicare & Medicaid Services (CMS)
10:30 am	Morning Networking Break
11:00 am KEYNOTE PANEL	Medicaid Long Term Services and Supports, Creating Quality Measures and an Integrated Model for Long Term Care <i>Moderator:</i> Claudia Schlosberg, Medicaid Director, District of Columbia Department of Health Care Finance <i>Panelists:</i> G. Lawrence Atkins, Executive Director, Long Term Quality Alliance & MLTSS Association Sarah Triano, Centene Laura Hopkins, Anthem <i>Panelists to be Added</i>
12:00 pm PANEL	Managed Care Mergers, Acquisitions & Partnerships: Trends, Developments and What to Watch in 2018 <i>Moderator:</i> Vernon K. Smith, Ph.D., Senior Advisor, Health Management Associates <i>Panelists to be Added</i>
1:00 pm	Conference Concludes





Book Your Hotel

Hyatt Regency Baltimore Inner Harbor

300 Light Street

Baltimore, MD, 21202

SPONSORS AND EXHIBITORS

Engage Influential Health Plan Executives and Key Players in the Healthcare Ecosystem

Sponsor the event to shake hands with government officials, health plan executives, industry leaders, and other key players in the healthcare ecosystem. For sponsorship and exhibition opportunities, contact:

Michael Moriarty
Michael.Moriarty@knect365.com
+1 (646) 895-7412

LEAD-GENERATION. Shake hands with qualified decision makers in need of your products and services.

MESSAGING. Engage delegates before, during, or after the event through a wide range of digital and onsite messaging opportunities.

THOUGHT LEADERSHIP. Demonstrate your expertise through case study presentations, breakout sessions, panel discussions, and themed solution briefs.

CUSTOM OPPORTUNITIES. Select a sponsorship/exhibition package or work with us to develop a custom package aligned to your individual marketing objectives

BRAND AWARENESS. Ensure that your event presence and brand make a lasting impression on clients, prospects, and partners.

2018 Gold Sponsors



2018 Session Sponsors



Exhibitors *(as of January 31, 2018)*



THREE WAYS TO REGISTER

 **EASIEST:**
www.MMCCongress.com



CALL
888-670-8200 or
+1.941.554.3500



EMAIL
register@KNect365.com

Health Plan Rates	Register by March 16, 2018	Register by April 20, 2018	Standard Rate After April 20, 2018
Platinum 3-Day Pass	\$2,095	\$2,195	\$2,295
Gold 2-Day Pass	\$1,595	\$1,695	\$1,795
Non-Profit/Hospital/Community Health Center	Register by March 16, 2018	Register by April 20, 2018	Standard Rate After April 20, 2018
Platinum 3-Day Pass	\$1,695	\$1,795	\$1,895
Gold 2-Day Pass	\$1,195	\$1,295	\$1,395
CMS/Federal Government/State Medicaid Director	Register by March 16, 2018	Register by April 20, 2018	Standard Rate After April 20, 2018
Platinum 3-Day Pass	\$795	\$795	\$995
Gold 2-Day Pass	\$495	\$495	\$695
Solution Providers	Register by March 16, 2018	Register by April 20, 2018	\$695
Platinum 3-Day Pass	\$2,895	\$2,995	\$3,095
Gold 2-Day Pass	\$2,395	\$2,495	\$2,595

GROUP DISCOUNTS

Group discounts are available for groups of three or more. Book your group today by contacting Leslie Wu at LWu@knect365.com or 646-895-7434.

All registrations are subject to review by KNect365. KNect365 Customer Service will contact you if the delegate type is incorrect on your registration to adjust accordingly.

The nonprofit rate is reserved for 501(c)(3) organizations and similar entities that serve the community. All health plans, regardless if they are for-profit or nonprofit, are considered under the health plan umbrella for registrations.