



Healthcare Education Associates and RISE (The Risk Adjustment Initiative and Society for Education) Proudly Present Two Leading-Edge Events!



Conference
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Two essential conferences
focused on the dual eligibles
population! Get the all-access
pass and attend any session!

The 3rd Annual Dual Eligibles Best Practices Summit

Innovations in Medicare/Medicaid Eligible (MME) Care and Plan Execution

Topics at a Glance

- National Update on Coordination between CMS, States, and Health Plans
- Comparing Other Platforms for Integrated Care Delivery: PACE, ACO, and Evercare
- The Challenges Revealed through Operationalizing Care Integration
- Understanding Cultural Competency and Persons Living with Disability
- The Architects of Success: Staffing, Advisory Groups, and Training
- Addressing the Key Limiting Factors of Substance Abuse and Behavioral Health
- Long-Term Care: Integrating Primary Care and HCBS
- Risk and the Capitation Rate
- Ensuring Quality of Care: The Metrics and the Meaning
- The Provider Perspective: Strategies for Effective Primary Care for Duals

September 16-17, 2013

The Buena Vista Palace Hotel and Spa, Lake Buena Vista, Florida
Two Co-Located Events – Get the All-Access Pass for Both!

Practical Take-aways
on Serving the Duals
Market!

Reaching, Retaining & Serving Dual Eligible Beneficiaries

Effective Strategies to Boost Outreach to This Challenging Market

Topics at a Glance

- Demystifying Duals: Discover Why Traditional Marketing Approaches Fail—and Explore Alternatives That Work
- Straight From the Source: What Do Duals Want From Their Care?
- Grassroots Outreach and Other Marketing Channels That Reach Duals
- Adios or Ciao? Culture and Language Can Be Powerful Additions to Your Communications and Marketing Toolkit
- Focusing Your Outreach on Duals With Distinct Needs
- Regulatory and Compliance Changes Affecting Your Marketing Strategies
- Emerging Opportunities in the Dual Eligibles Market
- Building Effective Marketing and Outreach: Experiences from the First States Launching Demonstration Projects
- Focusing Your Outreach on Duals with Distinct Needs
- Retention-Boosting Strategies That Will Work for Your Plan



**To Register: Call 866-676-7689
or visit us at
www.healthcare-conferences.com**



The Conference Sponsors

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. See www.healthcare-conferences.com for more information on upcoming events.



RISE began as the first national association totally dedicated to enabling healthcare professionals to meet the challenges of risk adjustment. Now, RISE has expanded its focus in recognition of the fact that risk adjustment, quality, revenue management and Star ratings are inexorably linked and that education in each of these areas is essential for plan and provider success. We strive to serve our members on three fronts: networking, education and industry intelligence. Through meaningful networking opportunities, roundtables, cutting-edge conferences and webcast presentations, RISE brings together multiple perspectives and facilitates highly interactive discussion between professionals and provides our members with the crucial information they need to stay ahead of the curve. To learn more about RISE, or to join, visit us online: www.rasociety.org

Healthcare Education Associates and RISE will bring you to the leading edge of dual eligibles education with two concurrent events:

The 3rd Annual Dual Eligibles Best Practices Summit -and- Reaching, Retaining & Serving Dual Eligible Beneficiaries

These cutting-edge events will be held concurrently, September 16-17, 2013 at the Buena Vista Palace Hotel and Spa in Lake Buena Vista, Florida. Opt to attend either event, or get the all-access pass to both!

Conference Highlights for the **Dual Eligibles Best Practices Summit** include:

- An update on benchmarks and metrics for the duals population
 - Insight into the rate setting process for duals
 - Developing an effective cultural competency plan
 - Understanding and meeting the needs of persons living with disabilities
 - Comparing platforms for integrated delivery: PACE, ACOs and Evercare
 - A look at the real-life challenges of operationalizing care integration
- ...and so much more!

Featured Sessions at the **Reaching, Retaining & Serving Dual Eligible Beneficiaries** event include:

- Actionable alternative approaches to reaching duals
 - Experiences from the first states launching demonstration projects
 - How to ace the marketing and enrollment process
 - Recent findings from focus groups with duals
 - Tapping into the duals market through community outreach
 - Retention strategies that really work
- ...and much more!

This is the most comprehensive duals event you'll find! Leverage the experience and expertise of our seasoned faculty to ride to the leading edge of this momentous opportunity in the health care industry. These conferences are designed to go beyond simply presenting information; they'll be catalysts for new thinking and lead to the forging of new partnerships!

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

Sincerely,

Michele Chandler

Michele Chandler, Conference Director
HEALTHCARE EDUCATION ASSOCIATES

Nancy Park

Nancy Park, Conference Director
HEALTHCARE EDUCATION ASSOCIATES

P.S. Customize your attendance and maximize your time with the All-Access Pass! Bounce back and forth between all sessions being offered and receive conference documentation from BOTH events!

Rave Reviews from Past Healthcare Education Associates' Conferences:

"The topics are very helpful with the current challenges and the speakers were all very informative." Antonette Buenavides, **LA CARE HEALTH PLAN**

"It provided me the opportunity to meet many experts in the industry and to learn what other plans are doing, how they deal with challenges, and their best practices." Lisa Zhou, **KAISER PERMANENTE**

"Good, practical information." David Henley, **PASSPORT HEALTH PLAN**

"Many great points for communicating with providers and member outreach tips." Melinda Jennings, **COVENTRY HEALTH PLANS**

"Good mix of payers, providers, vendors." Hewitt Moten, **AFFINITY HEALTH SYSTEMS**

Who Should Attend?

This conference is designed for **Medicare & Medicaid Plans, C-Suite, and Senior Executives** from the following areas:

- Dual Eligibles
- Care and Case Management
- Long-Term Care
- Product Development
- Patient Engagement
- Provider Relations
- State and Government Programs
- Government Affairs/Relations
- State Plan Administrators
- Operations
- D-SNPs and other Special Programs
- Quality Management
- Complex Care/Case Management
- Strategy, Strategic Planning
- Risk Management
- Quality Assurance
- Community and Non-Profit Organizations

Top Reasons to Attend

The 3rd Annual Dual Eligibles Best Practices Summit:

- Learn the latest on the **state of the nation** as it relates to duals care integration
- Discover how to implement the idea of **person-centered care** as it relates to duals
- Understand **quality** and applying metrics to the concept
- Get an inside look on the process of **setting capitation rates** and learn what you can do to prepare in advance of the announcement
- Examine what parts of the existing **models** can be used to craft the new models for serving duals
- Gain insights into how this large-scale effort can preserve and employ the knowledge of **local** institutions
- Speak the **language** of duals living with disabilities, high utilizing duals, duals in treatment, and duals of diverse cultures
- Uncover the **root causes** of poor health among duals: addiction and mental illness, poverty and lack of education, and hear about proven methods to address them
- Explore ways to **innovate** and move forward in the face of entrenchment
- Hone your **workforce** effectively and efficiently to navigate the constantly changing landscape

Reaching, Retaining & Serving Dual Eligible Beneficiaries:

- Discover what types of health plans duals are embracing—and why
- Walk away with **outreach strategies** that build member loyalty
- Generate new insights about the **essential role of culture** and language in your duals marketing program
- Uncover strategies to position your plan to assist seniors transitioning back into the community from hospitals and other institutions
- Learn why duals' health needs are so complex—and about **new strategies to reduce costs** by precisely aligning their care
- Hear from plans **successfully retaining and expanding their duals client base**, despite fierce industry competition
- Gain understanding about important consumer protections in the first duals demonstration projects
- Discuss **grassroots approaches to reaching dual members**
- Zero in on how collaborations with community & social groups are key to making & keeping strong connections with duals
- Leave this event **prepared to position your organization for success in the changing duals landscape**

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 Kevin Weigel at 704-341-2448 or email kweigel@healthcare-conferences.com**

To Register: Call 866-676-7689 or visit us at www.healthcare-conferences.com

The 3rd Annual Dual Eligibles Best Practices Summit

DAY ONE: Monday, September 16, 2013

7:45 - 8:30 Registration & Exhibit Set-Up

7:45 - 8:30 Breakfast Sponsored by



8:30 - 8:45

Chair's Welcome

8:45 - 9:30 The Three-Legged Race:

Coordination between CMS, the Local Governments, and Health Plans

- Update on the state of the nation with respect to integrating care for dual eligibles
- How the movements in individual states have affected the nationwide effort
- For the states with signed MOUs, how have CMS, local governments, and health plans worked together? What are the lessons learned? What has the process been with respect to managing time and deadlines? How have key operational hurdles been addressed with respect to reporting, privacy, and cost sharing?
- For the states who have withdrawn proposals, what are the reasons and way forward outside of the demonstration process? What impact have their withdrawals had on states in the process of or preparing for demonstration?
- How have seeming impasses between risk adjustment and consumer freedoms been addressed?
- How has the balance been struck between continuity of care and system overhaul?
- Navigation between the call to innovate and relying on existing systems: identifying the tried and true methods that deserve a place in the new models and the gaps where creativity is required

Nathan Goldstein, Chief Strategy Officer, **CENSEO HEALTH**

9:30 - 10:15 Ensuring Quality of Care:

The Metrics and the Meaning

The volume and variety of medical data and the absence of a national taxonomy for long-term services and supports renders it particularly challenging to find meaning with respect to quality of care.

- The existing metrics that quantify quality and how they must be adapted to provide meaningful information on duals care
- New and emerging metrics developed specifically for this population
- What are the benchmarks that can be used for this diverse population?
- What level of performance can be expected in the near term?
- How can we know if quality problems are related to program design or transitional issues?

Lisa Shugarman, Ph.D. Director of Policy, **THE SCAN FOUNDATION**

Jessica Briefer French, Senior Consultant in Research, **NCQA**

10:15 - 10:30 Morning Break Sponsored by



10:30 - 11:15 Local/National Partnership:

The Nursing Home without Walls Model of Care

- Why is partnership a robust model for care coordination for duals?
- What kinds of partnership are appropriate? Who are the important counterparties?
- What are the essential pieces of the local health care presence that need to be preserved for duals and why?
- How unrealized value in nursing homes in rural areas can be unlocked
- Marrying corporate funding capabilities with local care execution
- Innovations in financing the upfront costs of care coordination

Stephen Wood, Senior Vice President of Development, **UNITED AMERICAN**

11:15 - 12:00 The Cornerstone of Risk:

Rate Setting for Dual Eligibles Plans

- Insight into CMS's process of rate setting
- Special considerations for addressing risk across different sub-populations
- How plans can prepare operationally ahead of complete rate information
- Possibilities in risk sharing

Maria Dominiak, FSA MAAA, Managing Partner, **AIRAM ACTUARIAL CONSULTING, LLC**

12:00 - 1:00 Networking Luncheon Sponsored by



1:00 - 2:00

Caring for the High Needs/High Cost/High Touch Population

- Methodologies for identifying the high utilizing members of a health plan
- Replicable, hands on and quantifiable approaches to reduce medical cost and increase the quality of care

- Understanding the regulatory concerns in working with this population
- Avoiding hospitalization and reducing readmissions

Pamela Coleman, Vice President State Integrated Solutions, **OPTUM GOVERNMENT SOLUTIONS**

Christopher Duff, Executive Director, **DISABILITY PRACTICE INSTITUTE**

Anthony Evans, Vice President of Integrated Health, **CARESOURCE**

2:00 - 2:45

The Value of Cultural Competency

- What are the missed opportunities in serving the 36% of duals that represent racial and ethnic minority groups with respect to delivering quality care, illness prevention, and compliance with treatment?
- Is this just compliance or is it a market opportunity? What is the cost/benefit analysis? How can plans grow their market share?
- What is the process of developing cultural competency? What knowledge has been gained in the experience of implementing health equity?
- How to meet CMS's two requirements for the demonstrations related to cultural competency: diversity in language and provider network
- What other relevant legislation, such as the Older Americans Act of 1965, calls for emphasis on services to at-risk minority populations? What special provisions are there regarding services and supports to Native Americans?
- Other measures to effectively engage duals of diverse cultures by using readily-available local resources
- What are the pitfalls that can be avoided in implementing an ineffective cultural competency plan?

Dennis Edmonds, President and Chief Executive Officer, **TEXAS ASSOCIATION OF COMMUNITY BASED HEALTH PLANS**

Sharon Williams, Chief Operating Officer, **DETROIT AREA AGENCY ON AGING**

2:45 - 3:00

Afternoon Break Sponsored by



3:00 - 4:00

Understanding and Meeting the Needs of Persons Living with Disabilities

- How are the needs of the 38% of duals living with disabilities needs different from those of seniors in this population? What types of services do they use?
- What have been the consequences and lost opportunities of undifferentiated treatment to this population? How can these losses be recaptured?
- How can plans reach and engage this community?
- How does the reality of a long-term relationship impact a plan's investment in its relationship with its disabled beneficiaries?
- A look at the independent living model and the traditional medical model
- The primacy of self-determination and direction

Lamerial Daniels, Director of Special Programs, **MOLINA HEALTHCARE OF OHIO, INC**

Christopher Duff, Executive Director, **DISABILITY PRACTICE INSTITUTE**

Dennis Heaphy, Co-Chair, **DISABILITY ADVOCATES ADVANCING OUR HEALTHCARE RIGHTS**

4:00 - 5:00

Addressing the Key Limiting Factors of Substance Abuse and Behavioral Health

- What have been the challenges and successes of Didi Hirsch Mental Health Services' collaborative effort to address service integration in meeting the unique needs of individuals with co-occurring disorders?
- How have the needs of substance abuse and behavioral health care been met in an ever changing health care environment?
- Why are substance abuse and behavioral health considered separate issues?
- What are the proven, optimal ways to coordinate substance abuse treatment and behavioral health care with the medical piece?
- What impact does successful treatment of substance abuse have on cost containment and quality of care? What does it take to achieve success?
- What are the proven strategies to address behavioral health concerns within the duals population?

RuthAnn Markusen, M.S., RAS, CADC-II, ICADC, Director, Substance Abuse Programs, **DIDI HIRSCH MENTAL HEALTH SERVICES**

Stephen Fine, M.A., LMFT, Program Director, Crisis Residential Programs, **DIDI HIRSCH MENTAL HEALTH SERVICES**

5:00

End of Day One

5:00-6:00

Cocktail Reception Immediately Following

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The 3rd Annual Dual Eligibles Best Practices Summit

DAY TWO: Tuesday, September 17, 2013

7:45 - 8:30 Continental Breakfast

8:45 – 9:00

Chairperson's Recap of Day One

8:45 – 9:45

Comparing Other Platforms for Integrated Care Delivery: PACE, ACO and Evercare

- How are these models relevant to serving the dual eligible population? What is their success in achieving person-centered care?
- What are their strengths? What are their leading edges, their uncharted territories, of development?
- What are the challenges that limit their applicability to duals integration?
- What about the details? What are their current or potential capabilities in partnering with HCBS? Contracting with service providers? Manage revenue streams and coordination of payments between Medicaid and Medicare? How do these models engage family and care givers?

Moderator:

Pamela Parker, Manager, Special Needs Purchasing, **MINNESOTA DEPARTMENT OF HUMAN SERVICES**

Panelists:

Peter Fitzgerald, Executive Vice President of Policy and Strategy, **NATIONAL PACE**
Diane Bednar Flynn, East Regional President of Complex Population Management, Care Delivery and Management (Evercare and Inspiris), **OPTUM**
Speaker TBA, **ACO**

9:45 – 10:30

Where Do We Go From Here: New Opportunities and Approaches to Long-Term Care for Dual Eligibles

Part 1: Solutions and Considerations in Primary Care

- Why home-based care can be the best-long term care: benefits in patient autonomy and cost containment
- Interdisciplinary team: NP/PA, RN, LPN, SW, CC; what role do these team members play in the transition back to home?
- Impactable Care Management "Pillars": Medication reconciliation and adherence, fall risk, caregiver issues, hospice and end of life preparation, PCP compliance
- The importance of the "three way call" with PCP/PCP office, ICM team member, and member/caregiver
- Follow up: when to call and when to visit face to face
- The importance of clinical decision support for standard care planning and follow up

Terry Carr, Vice President of Clinical Operations and Systems Development, **COMPLEX CARE SOLUTIONS**

Part 2: Home and Community Resources that Maximize Success

- What are the emerging best models of integrating primary care and home and community based services? Which home and community based services have the most leverage to impact health quality?
- What role organizations like the AAAs can play in successful long-term care
- Building efficient networks that minimize redundancies
- What areas remain that are essential for building waivers?
- Community resources for transitioning duals back from long-term care facilities

Sharon Williams, COO, **DETROIT AREA AGENCY ON AGING**

10:30 – 10:45 Morning Break

10:45 – 12:00

Opening Pandora's Box: The Challenges Revealed through Operationalizing Care Integration

- An exploration of the key challenges in bringing the theories of duals care coordination into manifestation
- How developments in the demo process have impacted health plans
- How health plans have been able to move forward in the face of limited information
- How health plans can coordinate efforts to ensure the operational perspective is a key component of decision making in the demo process
- Balancing operational demands with consumer rights considerations

Moderator:

Kristy Strain, Corporate Executive Director of Complex Care, **CENTENE CORPORATION**

Panelists:

Audrey Shelto, CEO, **BLUE CARE PARTNERSHIP**
Pamela Tropiano, RN, CCM, BSN, MPA, Senior Vice President, Health Services **CARESOURCE**
Rohit Gupta, Director of Medicare, **INLAND EMPIRE HEALTH PLAN**
Julie Faulhaber, Senior Director, State Public Programs, **MEDICA**

12:00 - 1:00 Networking Luncheon

1:00 - 1:45 Case Study:

The Productive Working Relationship in Minnesota

- Minnesota's unique history as it relates to duals care coordination, the catalysts for change, and the progress so far
- How the state and health plans are mutually supportive in care innovation
- A specific look into the nuances of an effective relationship between state and plan professionals, and how collaboration has fostered creativity
- Minnesota's plans for the future

Pam Parker, Manager, Special Needs Purchasing, **MINNESOTA DEPARTMENT OF HUMAN SERVICES**

Julie Faulhaber, Senior Director, State Public Programs, **MEDICA**

1:45 - 2:30 The Architects of Success:

The People Behind the People

- Developing the appropriate staff to manage integration tailored to duals
- Recruiting members for boards, steering committees and other advisory groups
- Changing staffing needs during different stages of the process
- Educational/training needs: CMSA, sensitivity, and skills such as recognizing changing conditions and looking for opportunities to catch developing health problems before they deteriorate

Pamela Tropiano, RN, CCM, BSN, MPA, Senior Vice President, Health Services **CARESOURCE**

2:30 - 2:45 Afternoon Break

2:45 - 3:30 Case Study:

Health Plan/County Collaboration in California

- A detailed look at Inland Empire's process of participation and cooperation with Riverside County in the demonstration process
- How have strong historic institutional relationships impacted the day-to-day rapport between the organizations? What have been the simple efforts in developing good will and understanding that have strengthened the rapport? What has been the policy-making and operational impact of this accumulated good will?
- The expectations adjustments as theory is put into practice and proven strategies for building in flexibility in the face of limited information
- The blow-by-blow account of IEHP and Riverside County's IHSS collaborative efforts around the complex key operational challenges of data sharing, billing, and care coordination

Rohit Gupta, Director of Medicare, **INLAND EMPIRE HEALTH PLAN**

Jewel Lee, Regional Manager for Administrative Services, **RIVERSIDE COUNTY DEPARTMENT OF SOCIAL SERVICES, ADULT SERVICES**

3:30 - 4:15

The Provider Perspective: Strategies for Effective Primary Care for Duals

- What are the realities of caring for duals from a primary care perspective?
- What are the challenges providers face in duals care integration? Why are provider networks difficult to create? What are the solutions?
- What systems and support do they need in place in order to best coordinate care?
- The best practices in organizing provider teams

Dr. Nayana Vyas, Founder and President of Clinical Affairs, **FAMILY PHYSICIANS GROUP**

Dr. Eric Haas, Vice President of Clinical Affairs, **FAMILY PHYSICIANS GROUP**

Nicole Miller, LCSW Case Manager, **FAMILY PHYSICIANS GROUP**

Dr. Luis Allen, Medical Director, **CENTER FOR BEHAVIORAL HEALTH AT FLORIDA HOSPITAL**

4:15 End of Summit

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DAY ONE: Monday, September 16, 2013

7:45 - 8:30 Registration & Exhibit Set-Up

7:45 - 8:30 Breakfast Sponsored by



8:30-8:45

Chair's Opening Remarks

Leonard Kirschner, *Member*

ARIZONA STATE MEDICAID ADVISORY COMMITTEE

8:45-9:30 Demystifying Duals:

Discover Why Traditional Marketing Approaches Fail – and Explore Alternatives That Work

- Making first contact—what are the roadblocks to reaching duals?
- Obstacles to retaining duals
 - Why do patients and their families resist change?
 - Fallout from poor benefits coordination between Medicare-Medicaid
- What alternative approaches can encourage duals to join your plan?
 - Value-added benefits
 - Robust focus on care management
- Ways health education can strengthen retention

Beverly M. Weber, RN, LNC, *Vice President, Medical Management and Appeals & Grievances*, **HEALTHFIRST**

9:30-10:15

Regulatory and Compliance Changes Affecting Your Marketing Strategies and Tactics

- When state and federal rules regarding marketing to duals conflict, which takes precedence?
- Understand new recommendations from the U.S. Department of Health and Human Services for plans revamping their marketing materials for duals
 - How should you handle grey areas?
 - What are the consequences for missing the mark?
- Under the demos, how must marketing materials change?

Jason Silva, *Senior Compliance Analyst, Medicare-Medicaid Compliance, Dual Eligible Demonstration*, **HEALTH NET**

10:15 –10:30 Morning Break Sponsored by



10:30-11:15

Potentially Dual Eligible MA Members – Where Are They? What are the Tried-and-True Approaches to Finding Them?

- What are the geographic characteristics of duals?
- How do they compare to each other – and to your Medicare-only members?
- Can predictive modeling help focus your outreach?
- How does enhanced outreach facilitate additional enrollments?

James Dalen, *Chief Health Economist*, **ALTEGRA HEALTH**

11:15-12:00 Build Your Image:

How Stronger Brand Recognition Translates to Increased Member Loyalty

- Ways your brand image can reassure duals that you understand them and their needs—and that you deliver
- Consider how advocates can help get the word out
- How to communicate your brand message to duals without bombarding them
- Double duty—methods to make your brand image and messages speak distinctly to duals while also being easily recognized by the general public

Julie Burns, *Senior Director of Consumer & Community Relations*, **BLUE CARE PARTNERSHIP**

12:00-1:00 Networking Luncheon Sponsored by



1:00 – 2:00

Emerging Opportunities in the Dual Eligibles Market

- Part 1: What the Affordable Care Act Rollout Means to Your Plan
 - How will the demos affect sales and marketing to duals?
 - Are the Health Care Exchanges a viable distribution channel?
 - Can duals “shop” their care from the exchanges?
- Are we structurally prepared to handle Medicaid expansion?
 - Cost increases to the states
 - Health plans’ ability to absorb all the expected new members
- Part 2: Better Care for Duals & Savings for Taxpayers—Putting the Demos in Context
 - Federal expectations of Medicare-Medicaid demo plans
 - What are the commonalities and differences in the demos?
 - How is marketing a driver of success?
 - What are the goals of Medicare-Medicaid integration?
 - Importance of stakeholder engagement

Joe Moser, *Interim Executive Director*, **MEDICAID HEALTH PLANS OF AMERICA**
Leonard Kirschner, *Member*, **ARIZONA STATE MEDICAID ADVISORY COMMITTEE**

2:00-2:45 Strategy Spotlight:

Thinking Outside the Demos

- How has Minnesota tackled its unique challenges to reaching duals?
- Oklahoma’s distinctive approach to marketing to duals—challenges and opportunities
- Ways Pennsylvania is reaching institutionalized duals with essential services

Moderator TBD

Sue Kvendru, *Minnesota Senior Health Options Project Coordinator*, **MINNESOTA DEPARTMENT OF HUMAN SERVICES**

Dana Northrup, *Senior Project Manager*, **OKLAHOMA HEALTH CARE AUTHORITY**

Ray Prushnok, *Senior Director, Medicare Special Needs Plans*, **UPMC HEALTH PLAN**

2:45- 3:00

Afternoon Break Sponsored by



3:00 – 4:00 Building Effective Marketing and Outreach:

Experiences from the First States Launching Demonstration Projects

- California: Discover how the largest demo will market its plans
- Massachusetts: Examine the strategies they developed to attract duals
- Ohio: Learn how they’ve structured outreach

Moderator TBD

Jason Silva, *Senior Compliance Analyst, Medicare-Medicaid Compliance, Dual Eligible Demonstration*, **HEALTH NET**

Julie Burns, *Senior Director of Consumer & Community Relations*, **BLUE CARE PARTNERSHIP**

Pamela Tropiano, RN, CCM, BSN, MPA, *Senior Vice President, Health Services*, **CARESOURCE**

4:00-5:00

How to Ace the Marketing and Enrollment Process

- Consider your materials and strategic timing of dissemination
- Working within the community
- Reaching out to passive enrollees—step-by-step
- Achieve indirect marketing through educational materials
- How to strengthen retention with prompt post-enrollment follow-up

Britt Travis, *Assistant Vice President, Medicare Sales*, **MOLINA HEALTHCARE**

5:00-6:00

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8:30-8:45

Chair's Recap of Day One

Leonard Kirschner, Member, ARIZONA STATE MEDICAID ADVISORY COMMITTEE

8:45- 9:45 Straight from the Source:

What Do Duals Want From Their Care?

- Recent findings from focus groups with duals
 - What types of plans result in highest satisfaction from members and why?
 - How do duals first learn about the health plans they join?
 - What are their biggest problems accessing medical services?
- What consumer protections are built into the first duals demonstration projects?

Lynda Flowers, Senior Strategic Policy Advisor, AARP

9:45 –10:30

Grassroots Outreach and Other Marketing Channels That Reach Duals

- What are the advantages of community-based outreach over traditional marketing methods?
 - Engaging duals through non-profits, churches and other stakeholder groups
 - Why family members, caregivers and other influencers can be a health plan's strongest allies
 - The benefit of emphasizing self-advocacy and health education

Merrill Friedman, Vice President, Advocacy, AMERIGROUP

10:30 – 10:45 Morning Break

10:45-12:00 Adios or Ciao?

Why Culture and Language Are Powerful Additions to Your Communication and Marketing Toolkit

- How can bilingual communications underscore your plan's message to duals?
 - What are ways to develop mobile and digital outreach that are culturally-relevant and on-target linguistically?
- What role does a dual's connection to family, community and faith impact their perception of health?
- Seniors and people with disabilities: what are the most effective approaches to communicating with those individuals?
- Take on the power of appropriate language to reach your demographic
 - Should I use Cuban slang in my Spanish materials in Miami?

Jaime G. González, DrPH, MSSW, MSHA, National Director of Business Development, Latino Health Solutions, UNITEDHEALTHCARE

Merrill Friedman, Vice President, Advocacy, AMERIGROUP

12:00 – 1:00 Networking Luncheon

1:00 – 1:45

Retention-Boosting Strategies That Will Work for Your Plan

- Ways health education can strengthen retention
- How can you capitalize on year-round enrollment for duals?
- What are the benefits of a robust care management program?
- Identify strategies to handle operational challenges that impede retention of duals
 - Case managers—can they help duals avoid gaps in care?
 - Developing channels to serve the needs of full duals vs. partial duals
 - How to effectively monitor duals' eligibility status and help them re-certify
- Are there solutions to the behavioral health issues that can hinder retention?

Beverly M. Weber, RN, LNC, Vice President, Medical Management and Appeals & Grievances, HEALTHFIRST

1:45 – 2:30

Session Title: TBD

Speaker TBD

Interested in sponsoring this session? Please contact Kevin Weigel at kweigel@healthcare-conferences.com or 704-341-2448

2:30-2:45 Afternoon Break

2:45-3:30

Ways Non-Medical Marketing Methods Can Boost Enrollment and Lift Health Outcomes

- Adopt a holistic strategy by treating a dual's life outside of their medical needs
- Should you provide solutions that help members cover utilities, transportation and other basics?

Pamme Taylor, Vice President, Advocacy and Community Based Programs, WELLCARE HEALTH PLANS

3:30-4:15

Focusing Your Outreach on Duals with Distinct Needs

- Connecting with shut-ins and the chronically ill; here's how to target this hard to reach population—and those who care for them
 - What's the importance of creating partnerships with community organizations to spread your message?
 - Innovative ways that offering enhanced benefits can lead you to duals
- Dual veterans: what's the appropriate outreach for this diverse population?
 - What grassroots approaches work?
 - Identifying appropriate traditional advertising methods
- Solving the unique challenges of outreach to institutionalized duals
 - How can you find duals residing in senior housing? In assisted living facilities?
 - Positioning your plan to assist seniors transitioning back into the community from hospitals, skilled nursing facilities and other institutions
 - Uncover the strategic benefits of aligning with social workers and discharge planners

Gina Graciano, Director of Business Development, PACE CONSULTING SOLUTIONS

4:15

End of Summit

Another Dual Eligibles Upcoming Event Long-Term Care Management for Dual Eligibles

Working Together to Optimize Integration and Improve Care
August 1-2, 2013 * The NEW Tropicana, Las Vegas



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 Kevin Weigel at 704-341-2448 or email kweigel@healthcare-conferences.com

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Gold



ComplexCare Solutions (CCS). Optimizing the Power of Face-to-Face Prospective Health Assessments to enhance revenue, close star gaps and decrease hospitalizations. CCS delivers top-tier suspect identification, prospective assessments and care management services in all 50 states and Puerto Rico. Importantly, CCS leverages the value of its face-to-face assessments to support your members and your business goals—like the production of Impactable Care Plans and the closure of targeted Star Measure gaps. Impactable Care Plans with evidence based interventions resolve issues like medication reconciliation, medication adherence, provider follow-up appointments, and social network needs—that contribute most to avoidable hospital admissions and readmissions. Our people and technology provide the experience and information your business needs to meet your revenue management goals, increase member satisfaction and help expense management



CenseoHealth's mission is to facilitate meaningful connections between health plans and their members by providing tailored solutions resulting in high-quality, cost-effective health care at a historically underutilized site of care—the home. The Company's suite of services is anchored by CareConsult™, an in-home health consultation conducted by one of the Company's 10,000 licensed physicians that results in improved member engagement, more accurate diagnoses, and more informed primary care providers. CareConnect™ and CareCurrent™ expand CenseoHealth's breadth of support and subsequently assist health plans in their effort to close gaps in care and mitigate audit risk. For more information please visit www.censeohealth.com

Silver



Optum is a health services company with more than 35,000 people dedicated to making the health system work better for everyone. Our solutions and services are used at nearly every point in the health care system, from provider selection to diagnosis and treatment, and from network management, administration and payments to the innovation of better medications, therapies and procedures. Our clients and partners include those who promote wellness, treat patients, pay for care, conduct research and develop, manage and deliver medications. With them, Optum is helping to improve the delivery, quality and cost effectiveness of health care.



Altegra Health™ is the result of the combination of five highly recognized healthcare industry leaders. Our suite of technology-enabled services includes proven solutions for risk adjustment, data analytics, encounter reporting, medical chart audit and coding, member engagement, eligibility and enrollment, and quality performance improvement. These solutions, combined with our reimbursement and advisory services professionals' knowledge of the payer and provider markets, enable us to deliver enhanced revenue, strengthened compliance, and improved overall performance to our health plan and provider clients. For additional information, please find us at www.altegrahealth.com.

About the Venue

Buena Vista Palace, an official Walt DisneyWorld® Resort, is a contemporary haven offering totally refurbished accommodations, a majestic new lobby and unsurpassed hospitality.



Footsteps from the Downtown Disney® area, guests can also enjoy complimentary transportation to the Walt Disney World® Theme Parks. Plus, park tickets are never a problem. Admission is guaranteed for Buena Vista Palace guests, even if the parks are full.

Important Information

To Register:

Fax: 704-341-2640
Mail: Healthcare Education Associates
18705 NE Cedar Drive
Battle Ground, WA 98604
Phone: 866-676-7689
Online: www.healthcare-conferences.com

The 3rd Annual Dual Eligibles Best Practices Summit -and- Reaching, Retaining & Serving Dual Eligible Beneficiaries
September 16-17, 2013

Buena Vista Palace Hotel and Spa

1900 Buena Vista Dr.
Lake Buena Vista, FL 32830
p: (407) 827-2727

We have a block of rooms reserved at a special rate of \$119/night. This rate expires on August 19, 2013, and we expect the block to sell out prior to this date. To ensure you receive a room at the negotiated rate, book as soon as possible. Mention the "HEA Dual Eligibles" conference when placing your room reservation by phone to receive the negotiated rate. Please note that once the block is full availability is at the hotel's discretion.

Fees and Payments:

All-access pass to both events:
Standard: \$2095
Plan/provider: \$1695
Government/non-profit: \$995 (non-profit health plans do not qualify)

The 3rd Annual Dual Eligibles Best Practices Summit OR Reaching Retaining and Serving Dual Eligible Beneficiaries ONLY:

Standard: \$1895
Plan/provider: \$1495
Government/non-profit: \$895 (non-profit health plans do not qualify)

All Access Pass:

Customize your attendance and maximize your time with the All-Access Pass! Bounce back and forth between all sessions being offered and receive conference documentation from BOTH events!

Please make checks payable to Healthcare Education Associates, and write code H185 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 **September 9, 2013.**

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 call Theresa Powers at 704-341-2437 or email tpowers@healthcare-conferences.com**

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 3RD Annual Dual Eligibles Best Practices Summit
And
Reaching, Retaining & Serving Dual Eligible Beneficiaries

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