



DAY ONE - <b>WEDNESDAY</b>				
11:00 am - 5:00 pm	Registration Open / Visit Sponsors			
1:00pm - 2:15pm	Welcome, Opening Remarks, and Keynote Address			
2:15 pm - 2:30 pm	Marketplace Meet Up Networking			
2:30 pm - 3:45pm	Option 1 I-SNP Partners: Build, Partner, Consortiums	Option 2 Achieving Stars and Quality Success Amidst Dramatic Regulatory Changes	Option 3 Starting at the Basics: Primary Care and Assisted Living	
3:45 pm - 4:00 pm	Marketplace Meet Up Networking			
4:00pm - 5:00pm	Structured Networking			
	Option 1 I-SNP Partner Speed Networking	Option 2 PACE: Trends and Opportunities	Option 3 Medicare Advantage Risk Adjustment: How Best to Adapt to the V28 CMS-HCC Model	
5:00pm - 6:00pm	Reception			
	Dinner on Your Own			

#### PHM Building Blocks:

This track content provides sessions that focus on the tools and knowledge required to improve the health outcomes of an entire population. Sessions will focus on systematic and strategic management of health information, resources, and interventions.



#### Advanced I-SNP/PHM:

Content in this track is designed to advance attendee knowledge of plans designed to meet the unique healthcare needs of individuals residing in institutional settings.



#### Assisted Living:

The goal of this track is to provide sessions that provide the skills to create a proactive and coordinated approach to healthcare that prioritizes the unique needs of individuals within assisted living communities.



#### Care Transformation:

In this track, leaders can gain valuable insights and tools to navigate the evolving landscape of healthcare delivery to drive positive changes that result in improved health outcomes, enhanced patient experiences, and increased efficiency in caring for entire populations.





Population Health Management (PHM) Summit Day One - **Wednesday, May 22** 

#### 11:00 am - 5:00 pm

**Registration Opens and Visit with Sponsors**Note: Lunch on your own

#### **General Sessions**

#### 1:00 pm - 1:15 pm

Welcome and Opening Remarks

**Speaker**: **Mark Parkinson**, President & Chief Executive Officer, AHCA/NCAL

#### 1:15 pm - 2:15 pm

#### More Chat, Less Bot: How Humans Unleash the True Power of Al in Innovation

Speaker: Jeremy Utley

In this groundbreaking session, longtime school adjunct professor Utley (a Thinkers50 Top Ten Innovation Leader for 2023) challenges the conventional Alas-oracle mindset and encourages professionals to embrace Al as a collaborative thought partner.

Drawing on groundbreaking research recently featured by Harvard Business Review, Utley demonstrates why Al-assisted teams often underperform, and how shifting to a conversational approach can unlock Al's full potential for innovation. Leveraging interactive exercises with generative Al, participants will gain personal realizations, and build confidence to spearhead meaningful organizational change.

This unique, personal journey pushes beyond high-level theories, providing participants with the tangible tools and resources to become an adept Al conversationalist. Participants will be equipped with both strategic frameworks and the practical knowhow and credibility to be convincing change-makers in their organizations.

Transform your understanding of AI from a mere tool to a catalyst for behavioral and cultural transformation in this deeply insightful and empowering session.

#### 2:15 pm - 2:30 pm

#### Marketplace Meet Up Networking

#### 2:30 pm - 3:45 pm

#### **Breakout Sessions**

Attendees, please choose one session for this time block.

### **OPTION 1: I-SNP Paths: Build, Partner, Consortiums**

Speaker(s): Hank Watson, Chief Development Officer, American Health Plans (moderator); Steve Flatt, Chief Executive Officer, National HealthCare Corporation; Lynne Katzmann, Founder and CEO, Juniper Communities; Donn Kump, Chief Financial Officer, Majestic Care

**Session Description**: While the I-SNP model and considerations have evolved in the last few years, its value proposition is clearer than ever. However, navigating HOW to engage with an I-SNP remains challenging given the options and various models. Join this session to hear from an expert panel of your peers on the different paths to participation and the important considerations for providers. Options to be discussed include ownership, owner/partner, across state consortiums, and pure contracting arrangements.

## OPTION 2: Achieving Stars and Quality Success Amidst Dramatic Regulatory Changes

**Speaker**: **John Willis**, Vice President, Consulting and Professional Services, Healthmine

Session Description: The Centers for Medicare and Medicaid Services is significantly changing Medicare Advantage and Star Rating beginning in measurement year 2024 and beyond. For plans to continue to be successful, it is important that key stakeholders stay on top of the guidance provided by CMS. This session will provide a deep dive into current and pending changes to be expected for Medicare Advantage plans:





- Overview of current and proposed changes coming to Star Ratings;
- Tips and Tricks on being successful in implementing these changes in your health plan;
- Review of domains being impacted by regulatory changes (i.e., HEDIS, Part D, CAHPS, etc.);
- Implementing deep thinking and problemsolving during periods of rapid innovation and transformation

### **OPTION 3: Starting at the Basics: Primary Care and Assisted Living**

**Speaker: Dr. Rajiv Patel**, Chief Executive Officer, Bluestone Physician Services; **Alan Fairbanks**, Executive Vice President of Operations, Bickford Senior Living

Session Description: Assisted Living (AL) is a setting that naturally lends itself to population health management strategies and models. By investing early in preventive and primary care, Assisted Living providers can prevent residents from having to move to higher level care settings such as Skilled Nursing or hospitals. In this session, the panel will explore how physicians and AL providers are collaborating to avoid higher health care costs, achieve better health outcomes, and integrate AL into value based structures to participate in the shared savings opportunities.

3:45 pm - 4:00 pm

Marketplace Meet Up Networking

4:00 pm - 5:00 pm

## **Structured Networking Sessions**

Attendees, please choose one session for the structured networking sessions.

## **OPTION 1: I-SNP/IE-SNP Partner Speed Networking**

Speaker(s): Hank Watson, Chief Business Development Officer, American Health Plans; Rick Grindrod, President & CEO, Provider Partners Health Plan; Marc Hudak, Chief Growth Officer and IPA Business Lead, Longevity Heath Plans; Amy Kaszak, Executive Vice President, Strategic Initiatives, Curana Health **Session Description**: As you consider your options in the I-SNP/IE-SNP space, understanding the different paths and partners is critical. No two partners share the same business model, culture, or experience. This session, designed as a speed networking session, provides you with the opportunity to speak with partners that are spearheading partnerships for LTC/PAC provider plans. This session continues to be a staple at the PHM Summit.

#### **OPTION 2: PACE: Trends and Opportunities**

**Speaker(s)**: **Francesca O'Reilly**, Vice President, Advocacy, National PACE Association; **Seth Fisher**, Interim Executive Director, Benedictine Living Community - Dickinson

Session Description: This structured networking session will be a conversation with experts on the Program of All-Inclusive Care for the Elderly (PACE) model of care. Explore the PACE model, how providers and states are using the model within a continuum of care to improve outcomes for seniors as an alternative to Skilled Nursing.

#### OPTION 3: Medicare Advantage Risk Adjustment: How Best to Adapt to the V28 CMS-HCC Model

**Speaker(s)**: **Tom Kornfield**, Founder and CEO, MAST Health Policy Solutions

Session Description: In 2024, CMS introduced a new risk adjustment model, also called the V28 model, that dramatically changes the diagnosis codes that are used for risk adjustment. The risk scores produced by this model are used for plan payment. For 2025, CMS will phase-in the model at 67% of the risk score and will likely move to 100% in 2026. During this session, attendees will learn more about the new model, how it differs from the old model, best practices and approaches for health plans and their contracted providers in terms of coding approaches, potential pitfalls and compliance risks, and what steps plans may want to take in order to ensure their risk coding is accurate.

5:00pm - 6:00 pm

**Networking Reception** 





DAY TWO - <b>Thursday</b>				
8:00 am - 5:00 pm	Registration Open			
8:15 am - 9:15 am	Breakfast Buffet			
9:15 am - 10:30 am	Option 1 Unleashing Synergy: The Art of Creative and Strategic Partnerships	Option 2 Exploring Innovative and Care Management Models (Making Care Primary, GUIDE, AHEAD)	Option 3 Bridging Gaps, Breaking Barriers: Advancing Health Equity Through Social Determinants of Health and Supplemental Benefits in SNPs	
10:30 am - 10:45 am	Marketplace Meet Up Networking			
10:45am - 12:00pm	General Session The Future of Medicare and Medicaid Integration			
12:00pm - 1:00pm	Lunch			
1:00pm - 2:00pm	Option 1 Collaborative Excellence: Navigating the Future Through Effective ACO Partnerships	Option 2 Medicare Advantage Marketing and Compliance: What You Need To Know	Option 3 Elevating Healthcare Excellence: The Pivotal Role of Clinical Care in Population Health Management	
2:15pm - 3:00pm	General Session and Wrap up			

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Population Health Management (PHM) Summit Day Two - **Thursday, May 23** 

8:15 am - 9:15 am

**Breakfast** 

9:15 am - 10:30 am

#### **Breakout Sessions**

Attendees, please choose one session for this time block.

### OPTION 1: Unleashing Synergy: The Art of Creative and Strategic Partnerships

**Speaker(s)**: **Marty Grabijas,** Senior Director, National Contracting, AHCA|NCAL (moderator); **Rev. Dr. Kenneth V. Daniel**, President and Chief Executive Officer, United Church Homes; **Matt Kinne**, COO | VP of Growth, Lifespark

**Session Description**: Join us as we explore the dynamic intersection of creativity and strategy in forging powerful partnerships. In this engaging session, thought leaders, industry experts, and creative minds will converge to unravel the secrets of successful collaborations, particularly between LTC providers and payers, providing insights and strategies that explore new partnership models advancing quality improvement and value based models.

# OPTION 2: Exploring Innovative and Care Management Models (Making Care Primary, GUIDE, AHEAD)

**Speaker(s)**: **Tina Hansen Pickett**, Managing Director, Complex Care Programs, Policy, and Research Practice

Session Description: In the last year, CMS has intensified its efforts to move all Medicare beneficiaries into accountable and coordinated relationships through the release of several models aimed at providers, states, and other systems of care. Join this session to hear from a national expert on some of the recently released models such as Making Care Primary, GUIDE, AHEAD, TEAM, and others and potential impacts on the healthcare infrastructure and how long-term care and senior housing providers can align their strategies accordingly.

#### OPTION 3: Bridging Gaps, Breaking Barriers: Advancing Health Equity Through Social Determinants of Health and Supplemental Benefits in SNPs

**Speaker(s)**: **Brian Fuller**, Managing Director, Value-Based Care Design and Delivery; **Amy Kaszak**, Executive Vice President, Strategic Initiatives, Curana Health; **Angela Tolbert**, Vice President, of Operations, PruittHealth Premier

Session Description: Health equity, social determinants of health and transparency in supplemental benefits are a key focus of CMS, advocates and some members of Congress. Join us for a compelling exploration of the critical intersections between Health Equity, Social Determinants of Health (SDOH), and Supplemental Benefits as it relates to provider-led plans. In this session, policy and industry experts will cover the developments in the space, considerations for plans and applications to improve overall member outcomes and experience.

#### 10:30 am - 10:45 am

#### Marketplace Meet Up Networking

#### 10:45 am - 12:00 pm

#### General Session - The Future of Medicare-Medicaid Integration

Speaker(s): Suzanne Gore, Principal, State Health Partners (moderator); Erin Weir Lakhmani, Principal Researcher, Mathematica and Project Director, Integrated Care Resource Center; Ron Chaffin, Chief Executive Officer, Associated Care Ventures, Inc., Simpra Advantage, Inc., Alabama Select Network, LLC

Session Description: As the healthcare landscape continues to evolve, the integration of Medicare and Medicaid emerges as a pivotal strategy to enhance accessibility, improve patient outcomes, and streamline healthcare delivery. In this dynamic session, industry leaders, policymakers, and healthcare experts will discuss the challenges, opportunities, and innovations that lie ahead in achieving seamless integration between these two vital pillars of the American healthcare system and implications for long-term care.





12:00 pm - 1:00 pm

Lunch

1:00 pm - 2:00 pm

#### **Breakout Sessions**

Attendees, please choose one session for this time block.

#### OPTION 1: Collaborative Excellence: Navigating the Future Through Effective ACO Partnerships

Speaker(s): Sarah Sugar, Director, Sirona Strategies (moderator); Kendra Fauth Edwards, Vice President and Chief Growth Officer, CarDON & Associates; Andrea Osborne, SVP, Delegated Services & ACO Operations, VillageMD; Keith Persinger, Chief Operating Officer, Provider Partners Management Services, LLC

Session Description: Embark on a journey into the world of Accountable Care Organizations (ACOs) as we delve into the intricacies of building and sustaining effective partnerships within this healthcare model. In this session, healthcare leaders, ACO experts, and industry influencers will converge to explore strategies, best practices, and success stories that define the path to collaborative excellence in accountable care.

### **OPTION 2: Medicare Advantage Marketing and Compliance: What You Need To Know**

**Speaker(s)**: **Raghav Aggarwal**, Vice President, BGR Group (moderator); **Ashley A. Hashem**, Group Director, Boston and New York Drug and Health Plan Operations, Office of Program Operations and Local Engagement, Centers for Medicare & Medicaid Services

Session Description: How Medicare Advantage plans market to beneficiaries has come under significant scrutiny both by CMS and Congress. Given this environment, what can plans do? As providers participating in or owning plans what can you say and do? What constitutes marketing versus communication in this environment. How do plans stay compliant? Join this session to learn more and take away some do's and don'ts.

#### OPTION 3: Elevating Healthcare Excellence: The Pivotal Role of Clinical Care in Population Health Management

**Speaker(s)**: **Katie Colgan**, Executive Director, Integrated Networks, AHCA|NCAL (moderator); **Dr. David Gifford**, Chief Medical Officer, AHCA|NCAL; **Heidi Wold**, Chief Population Health Officer, Longevity

Session Description: Join us as we dive into the clinical side of Population Health Management (PHM), unraveling the indispensable role of clinical care in achieving success within this dynamic healthcare framework. This session focuses on the critical elements that drive positive patient outcomes, improve population health, and optimize the delivery of care. A panel of experts will explore the clinical elements, strategies and examples that transcend PHM models including VBP, provider owned networks, Institutional Special Needs Plans and more.

#### **Closing Keynote Session**

#### 2:15 pm - 2:45 pm

### Fireside Chat: Looking Beyond the 2024 Elections

Speaker(s): Steve Fogg, Chief Financial Officer, Marquis Companies and Consonus Healthcare and AHCA|NCAL PHM Council Chair (moderator); Mike Bassett, Vice President, Government Relations, AHCA|NCAL; Dan Farmer, Principal, BGR Group; Raghav Aggarwal, Vice President, BGR Group

**Session Description:** In this insightful session, we will delve into the dynamic landscape that could unfold beyond the 2024 elections, exploring the implications on Medicare Advantage and PHM. Our expert panel will engage in an analysis of the political and administrative shifts that may influence the trajectory of MA and PHM policies. Join us to gain valuable perspectives on strategic planning, adaptability, and innovative approaches crucial for providers and plans amidst the evolving political landscape.

#### 2:45 pm - 3:00 pm

#### Wrap Up and Adjourn

**Speaker: Steve Fogg**, Chief Financial Officer, Marquis Companies and Consonus Healthcare and AHCA|NCAL PHM Council Chair