



## ACAP Exchange Meeting October 13-14, 2015

**JW Marriott Austin**  
110 East 2nd Street  
Austin, TX 78701  
(512) 474-4777

**Tuesday, October 13**

7:00 a.m.	<b>Organized ACAP Run/Walk</b> Open to all attendees who would like to run or walk on a scenic route through Austin! <i>Meet in hotel lobby at 6:55 a.m.</i>
8:00 a.m.	<b>Breakfast Available</b> <i>Room 205</i>
9:00 a.m.	<b>Welcome and Introductions</b> <ul style="list-style-type: none"><li>• Meg Murray, CEO, ACAP</li><li>• Wesley Durkalski, President &amp; CEO, Sendero Health Plans</li><li>• Heather Foster, Vice President, Marketplace Policy, ACAP</li></ul> <i>Room 203/204</i>
9:15 a.m.	<b>Levers for Profitability &amp; Sustainability</b> <p>With “commercial-type” offerings as a new endeavor for traditionally Medicaid-focused plans, as well as new approaches to coverage set out in the ACA, there are numerous components of plan offerings that must be factored into plan design to ensure your plan options are sustainable in both the short and long term.</p> <p>Ross Winkelman from the Wakely Consulting Group will discuss the different levers necessary to ensure profitability and sustainability (including the 3 Rs and a variety of marketplace trends), as well as research they are conducting on this front.</p> <ul style="list-style-type: none"><li>• Ross Winkelman, Director, Wakely Consulting Group</li><li>• Moderator: Wesley Durkalski, President &amp; CEO, Sendero Health Plans</li></ul>



10:15 a.m.	<p><b>Break</b> <i>Foyer Area, Second Floor</i></p>
10:30 a.m.	<p><b>90 Day Grace Period – Working with Your Patients &amp; Providers</b></p> <p>This session will consider best practices for working with both plans and providers during the 90 day grace period—including enrollee outreach, lessons learned, and how plans are working with in-network providers once enrollees enter the grace period. Sendero Health Plans has performed significant outreach to patients and will review their insights and strategies for dealing with the grace period; L.A. Care Health Plan will highlight their innovative PayNearMe “7-11” cash payment program as a strategy for increasing enrollee premium payments, as well as delving into L.A. Care’s process for communicating with providers about non-payment by enrollees.</p> <ul style="list-style-type: none"> <li>• Wesley Durkalski, President &amp; CEO, Sendero Health Plans</li> <li>• Laura Jaramillo, Director of Commercial &amp; Group Plan Operations, L.A. Care Health Plan</li> </ul> <p><i>Room 203/204</i></p>
11:15 a.m.	<p><b>High Cost Specialty Drugs and Special Populations</b></p> <p>Complex, high-acuity populations—such as HIV+ patients, as well as recent specialty drug innovations, such as for Hepatitis C and cholesterol, have the potential to drive up plans’ Medical Loss Ratios—perhaps even to an unsustainable level. Yet patient protections in the ACA include a number of discriminatory plan design requirements that plans must not run afoul of. This session will explore how best to manage high cost populations, including narrow networks, formulary design, and the 3 Rs, as well as a discussion on areas for caution.</p> <ul style="list-style-type: none"> <li>• Laurie Goss, Director of Marketing and Commercial Products, Denver Health Medical Plan, Inc.</li> <li>• Alan Lederman, Chief Administrative Office, Community Health Plan of Washington</li> <li>• Heather Foster, Vice President, Marketplace Policy, ACAP</li> </ul>
12:15 p.m.	<p><b>Lunch</b> <i>Affinity Table: Provider Directories</i> <i>Room 205</i></p>



<p>1:15 p.m.</p>	<p><b>Speed Dating</b></p> <p>Attendees will pick two sessions to attend and then we will have a roundup session of key points.</p> <ul style="list-style-type: none"> <li>• Marketing &amp; Consumer Engagement</li> <li>• Network Adequacy</li> <li>• Top IT Challenges</li> </ul> <p><i>Room 203/204</i></p>
<p>2:00 p.m.</p>	<p><b>Strategies For Effectively Managing the 3 Rs—Today &amp; in the Future</b></p> <p>This session will focus on numerous facets of the 3 Rs: Reinsurance, Risk, Corridors, and Risk Adjustment—including the EDGE server submission process and planning ahead for 2017 when only Risk Adjustment will remain in place for Exchange plans. We will delve into estimating risk adjustment payables/receivables, managing MLR, and planning QHP offerings for future years.</p> <p>UPMC will review their participation in CCIIO’s EDGE Server Advisory Group and Community Health Choice will address the 3 Rs in the context of their growth from small to large enrollment.</p> <ul style="list-style-type: none"> <li>• Patrick Tracy, Senior Director of CHIP, Individual Advantage, and Marketplace Compliance, UPMC Health Plan</li> <li>• Richard Lee, Senior Vice President — Finance, Community Health Choice</li> </ul>
<p>2:45 p.m.</p>	<p><b>Break</b></p> <p><i>Foyer Area, Second Floor</i></p>
<p>3:15 p.m.</p>	<p><b>Working With Your Local FQHCs to Serve the Safety Net</b></p> <p>Community Health Centers and Safety Net Health Plans have a storied, joint history, yet often find themselves on the opposite side of payment and contracting policies. In this session, ACAP’s Vice President for Marketplace Policy will evaluate different ways in which FQHCs and health plans can work together more harmoniously—as well as the variety of payment and contracting policies set out in statute and regulation that impact such a working relationship.</p> <p>Founded over twenty years ago by 13 Community Health Centers, Neighborhood Health Plan of Rhode Island has a unique relationship working with its local health centers as essential partners for primary care delivery—serving 50% of its enrollees. NHPRI will share data from their</p>



	<p>partnerships with FQHCs and what health centers can bring to the table in caring for your most complex enrollees.</p> <ul style="list-style-type: none"> <li>• Heather Foster, Vice President, Marketplace Policy, ACAP</li> <li>• Brenda Seagrave-Whittle, Vice President, Exchange &amp; Chief Marketing Officer, Neighborhood Health Plan of Rhode Island</li> </ul> <p><i>Room 203/204</i></p>
4:15 p.m.	<p><b>Partnerships as “Baby Steps” Toward Entering an Exchange</b></p> <p>Whether a State-based or Federally-facilitated Marketplace, entering a new market is not a simple decision and is fraught with complex requirements unfamiliar to many Medicaid managed care plans. Family Health Network’s path to entering the Exchange has been somewhat unconventional—testing the waters through a partnership with the Land of Lincoln Co-Op in its first year, with plans to enter the Exchange on its own for 2017. This session will explore the pros and cons of a partnership, including differing product requirements, and will be useful for plans considering entering the Exchange or entering in a new state.</p> <ul style="list-style-type: none"> <li>• John Haley, Vice President, Corporate Development, Family Health Network</li> </ul>
5:00 p.m.	<b>Adjourn</b>
6:30 p.m.	<p><b>Dinner Sponsored by ACAP Strategic Ally Verisk Health</b>  <b>Truluck’s Downtown</b>  400 Colorado Street  Austin, TX 78701  Tel (512) 482-9000  <i>ACAP will meet in the hotel lobby at 6:15 p.m.</i></p>
<p><b>Wednesday, October 14</b></p> <p><i>Morning meetings will cover topics of joint interest to Exchange and Quality meeting participants</i></p>	
7:00 a.m.	<p><b>Organized ACAP Run/Walk</b></p> <p>Open to all attendees who would like to run or walk on a scenic route through Austin!</p> <p><i>Meet in hotel lobby at 6:55 a.m.</i></p>



8:00 a.m.	<p><b>Breakfast Available</b>  <i>Brazos/Room 206</i></p>
9:00 a.m.	<p><b>Quality Meeting Welcome and Introductions</b></p> <ul style="list-style-type: none"> <li>• Meg Murray, CEO, ACAP</li> <li>• Deborah Kilstein, Vice President, Quality Management and Operational Support, ACAP</li> <li>• Wesley Durkalski, President &amp; CEO, Sendero Health Plan</li> </ul> <p>In this session, we will welcome you all to Austin. To make your networking easier, it will be followed by introductions of all attendees who will be asked to <b>share their biggest quality-related accomplishment or headache</b> for 2015!</p> <p><i>Room 203/204</i></p>
9:30 a.m.	<p><b>Coming Soon to Medicaid in Your Area – The Marketplace Quality Improvement Strategy (QIS) and Quality Reporting System (QRS)</b></p> <p>For plans participating in the federal and state marketplace, understanding the role of the federally-mandated Quality Improvement Strategy and the impact it has on the Quality Reporting System is critical. However, it is also important for ALL Medicaid Managed Care Plans to understand since the Notice of Proposed Rulemaking on Medicaid Managed Care recently released by CMS anticipates using the Exchanges’ QIS/QRS approach as the model for Medicaid quality reporting in the near future.</p> <p>In this session, Deborah will provide an overview of the Exchange QIS/QRS rules and how they may impact Medicaid in the future. We will also hear from MDwise about their Quality Improvement Strategy for their marketplace line of business, their experience participating in the beta test and what it means for their future quality improvement efforts.</p> <ul style="list-style-type: none"> <li>• Deborah Kilstein, VP QM and Operational Support, ACAP</li> <li>• Laurie Weinzapfel, Director of Program and Quality Improvement, MDwise</li> </ul>
10:30 a.m.	<p><b>Break</b>  Video – NCQA Award Winner  <i>Foyer Area, Second Floor</i></p>



<p>10:45 am</p>	<p><b>Bridging the Gap between Health and Health Care</b></p> <p>Trust for America's Health (TFAH) is a non-profit, non-partisan organization dedicated to saving lives by protecting the health of every community and working to make disease prevention a national priority. Their work includes identifying practices to advance population health models in a reformed health system. They are currently working to develop educational materials on bridging health and health care and multi-sector engagement in prevention and population health improvement.</p> <p>In this session, we will learn from Trust for America's Health about the pathways to spread and scale successful population health innovations. We will also hear from an ACAP health plan on population management in the real world and how they are using data and information technology to advance population health.</p> <ul style="list-style-type: none"> <li>• Anne DeBiasi, Director of Policy Development, Trust for America's Health</li> <li>• Trudi Carter, CMO, and Katrina Miller, Medical Director for Clinical Informatics, L.A. Care Health Plan</li> </ul> <p><i>Room 203/204</i></p>
<p>12:00 p.m.</p>	<p><b>Lunch</b></p> <p><i>Affinity Tables:</i></p> <ul style="list-style-type: none"> <li>• CAHPS</li> <li>• Telemedicine</li> </ul> <p><i>Brazos/Room 206</i></p>