



2021 SNP Alliance 18th Annual Fall Leadership Forum

“Advancing Partnerships: Connecting the Whole-person Approach to Complex Needs across Communities”

October 25-26, 2021

Virtual Meeting

(Web link will be sent to those registered, prior to the meeting)

Open to Non-members, Closed to Media

Each session will be recorded, unless otherwise noted

Preliminary Agenda

All times listed are Eastern Daylight

Monday, October 25

10:00 am – 10:15 am

Opening Session Announcements and Welcome

- *Eve Gelb, SNP Alliance Board of Directors Chair*
- *Cheryl Phillips, MD, AGSF, President and CEO, SNP Alliance*

10:15 am – 10:30 am

Recognition of Co-Founder, Rich Bringewatt

Many of you in attendance have worked with Rich since the beginning of this SNP Alliance journey. It was his vision and leadership that provided much of the foundation – not only to this organization, but the very concept and value of special needs plans. While this is not goodbye to Rich, he is now exploring new areas of social impact to make our world a better place. He has laid out an amazing framework for all of us seeking to make change in his recent book: *Big Change: Using Soft Power to transform Social Systems*. During this portion of our meeting we will be hearing from some of our current and past members and leaders who will reflect on the impact Rich has had on us all. Please join this special portion and a fantastic way to start our meeting.

10:40 am – 11:10 am

Session: Role of Medicare Agents and Brokers in Helping Dually Eligible Beneficiaries Select Integrated Coverage

- *Julie Faulhaber, MBA, Principal, Health Management Associates*

11:15 pm – 12:00 pm

Session: Building an Integrated Care Model for Individuals with Mental Illness

The Mental Health Cooperative, Inc (MHC) is an innovative not-for-profit healthcare organization based in Nashville, Tennessee. MHC was established to address the complex needs of individuals experiencing severe and persistent mental illness who also struggle with the effects of living at or below poverty. MHC will discuss how their organization was challenged to transform into an integrated model of care to address the needs of their complex patient population. By embracing the integration of physical health care into their established behavioral health team model, MHC has demonstrated improved clinical outcomes, financial outcomes, and built on their reputation as an innovative, solution focused organization.

- *Amanda Bracht, Senior Vice President of Public Relations and Community Development*
- *Mark Wisniewski, Chief Data Officer*
- *Andrea Westerfield, Vice President of Integrated Care*

12:00 pm – 12:30 pm

BREAK

12:05 pm – 12:25 pm

Business Member Presentation: ExactCare

- *Larry DeCaria, Pharm D. SVP, Business Development. ExactCare Pharmacy*

12:30 pm – 1:30 pm

Break Out A: Model of Care : Creating an Enterprise -Wide Approach

This session focuses on how health plans can create an enterprise-wide approach for the Model of Care, with key departments of the health plan involved (quality, care management, clinical services, member services, compliance). This is to ensure that the Model of Care is not just a document, but that the plan has the structures and processes across the enterprise which enable its commitment to care, quality improvement, and service to SNP members.

- *Debra Corbett, Senior Advisor and Consultant, QualOrg (NY)*
- *Dr. Deborah Paone, Lead, Performance Evaluation & Policy Consultant, SNP Alliance*

Plan Discussants:

- *Kathy Albrecht, Sr Manager, Regulatory Oversight & Improvement, Medica Health Plans (MN)*
- *Cynthia Lentz, BSN, RN, Associate VP, Population Health and Clinical Transformation, UPMC Health Plan (PA)*

12:35 pm – 1:35 pm

Break Out B: Aligning Health Care and Social Services through the Growth of Sustainable, Locally Governed CBO Networks.

This session will feature a panel discussion with community-based organization (CBO) and health plan leaders, as well as other national experts, highlighting the benefits of partnering with CBO networks to address needs related to the social determinants of health (SDOH). The 'value add' of these partnerships to Special Needs Plans will be articulated, as well as the importance of scaling such networks to meet the growing demand for SDOH services.

- *Kelly Cronin, Deputy Administrator, Center for Innovation and Partnership, Administration for Community Living*
- *Timothy McNeill, Principal, Freedmen's Health*
- *Mark Cullen, Vice President of Strategy and Operation, Trellis*
- *Nikki Kmicinski, Executive Director, Western New York Integrated Care Collaborative*
- *Dawn Odrzywolski, Vice President Medicare Programs, Independent Health*

1:40 pm – 2:30 pm

Person Driven Outcome Measures: Implementation in a Special Needs Plan

This session will explore how special needs health plans can implement person centered outcome measures. Our focus will be on the practical steps with a "what would it take" approach to having plans work with their special needs plan providers and "what could we gain" in articulating member-driven goals and capturing goal attainment toward meaningful measurement, performance evaluation, and quality improvement. We want to not only raise the operational or other barriers, but how NCQA and other organizations (including health plans) can address these barriers and what strategies may be particularly effective in working with special needs populations.

- *Dr. Caroline Blaum, Research Scientist, NCQA*
- *Eve Gelb, Senior Vice President, Member and Community Health, SCAN Health Plan*
- *Dr. Deborah Paone, Lead, Performance Evaluation & Policy Consultant, SNP Alliance*
- *Tom Von Sternberg, M.D, Senior Medical Director of Geriatrics, Home Care, Hospice and Case Management, HealthPartners*
- *Sarah Way-Messer, Health Plan Quality Director, My Choice Wisconsin*

2:35 pm – 3:25 pm

Break Out C: Next Level Alignment: Executing Provider and Payor Synergy from the Beginning

Leveraging the strengths of a well-established Provider group in a Payor-owned I-SNP Model of Care can ensure your product is well designed, executed, and delivered to the customers. This partnership creates a valuable synergy, beginning with mission and vision alignment. An early partnership with a Provider Group can allow the focus to remain firmly planted on the needs of the patient, reduce duplicative work, and create an environment that allows all

players to be aligned in strategic goals down to the day-to-day execution. Learn from a case study in Genevive: a geriatric medical practice who partnered with new regional I-SNP partners to offer a unique product to the customers.

- *Amanda Tufano, MHA, FACHE, CMPE, CEO, Genevive*
- *Andrea Voss, RN, BSN, PHN, Director of Nursing, Genevive*

2:40 pm – 3:30 pm

Break Out D: Using Race, Ethnicity, and Other Data to Improve Health Equity

This session will explore ways health plans use data to identify underserved members and work in collaboration with their communities to reach those members. We will also share resources on improving health equity and provide time for open discussion.

- *Kimberly Smathers, Vice President, The Lewin Group*
- *Kyle Allen, DO, AGSF, Medical Director, Institute for Seniors and Post-Acute Care, Professor of Internal and Family Medicine*

3:40 pm – 4:30 pm

HCBS and Medicare Integration: Where Are States Headed

Hear from experts on the “state” of HCBS policy expansions and how it’s impacting state approaches to integrating with Medicare. Session will include a discussion on the federal conversation as well as state trends related to S-MACs, leaning into supplemental benefits, HCBS spending plans, program redesigns, and broader approaches to working with Medicare across the spectrum of FFS, MA, and special needs plans.

- *Brianna Ensslin Janoski, ATI Advisory*
- *Arielle Mir, Vice President, Complex Care, Arnold Ventures*
- *Katherine Rogers, Program Manager, DC DHCF*

4:40pm – 5:15 pm

E-prognosis tool for predicting outcomes for co-morbid older adults (Johns Hopkins) – potential for connecting patients, families and providers.

Tools to assist in providing prognostic information for clinicians are not new. However, an approach that incorporates a patient's prognosis and the lag-time to benefit of a given intervention can help clinicians and patients make difficult decisions about whether to undergo cancer screening or even how aggressive to manage conditions such as diabetes or hypertension. The team of geriatricians from Johns Hopkins, UC San Diego, and UC San Francisco will explore the use of ePrognosis as a tool to assist clinicians and care managers in developing person-centered care planning for those with complex and co-morbid conditions. We will also explore how such prognostic information might be used to better target HEDIS quality measures and exclusions.

- *Nancy Li Schoenborn, M.D., Johns Hopkins University School of Medicine*
- *Lindsey Yourman, M.D., UC San Diego Health*

Tuesday, Oct 26

10:00 am – 10:20 am

Sponsored Educational Session: Vital Decisions Advance Care Planning (ACP) in SNP Populations: A View of Data on Choices and Shift Points

Explore how SNP members define specific care paths via their ACP, what they identify as their shift points between levels of care, who they choose to speak for them, and what factors contribute to the choices they make. The analysis offers insights into SNP members' willingness to consider specific treatment measures, under what circumstances and for what duration, and sheds light on the goals of care and preferences of certain subgroups.

- *Connie Ducaine, PhD, Senior Vice President of Strategic Solutions*

10:30 am – 11:05 am

Utilizing Data to Drive Competitive Decisions

Julia Friedman and Mary Yeh, Actuaries from Milliman, are excited to provide you competitive analysis insight, with a focus on utilizing the wide array of CMS data to drive competitive decisions. Some takeaways include:

- Explore the key factors you should know about your market and where to find the data to gain a strategic edge on your competition
- Learn best practices for analyzing competitive intelligence
- How to best understand your market to secure differentiation and growth
- *Julie Friedman, Consulting Actuary, Milliman*
- *Mary Yeh, Consulting Actuary, Milliman*

11:15 am – 12:15 pm

Session: "An Ongoing Conversation with CMS MMCO" (Not Recorded)

MODERATOR:

- *Pamela J. Parker, MPA, Medicare-Medicaid Integration Consultant, SNP Alliance*

PANELISTS:

- *Tim Engelhardt, Director, Medicare-Medicaid Coordination Office, CMS*
- *Marla Rothouse, Senior Technical Advisor with Medicare-Medicaid Coordination Office*
- *Paul Precht, Senior Advisor, Medicare-Medicaid Coordination Office*
- *Lindsay Barnette, Director, Models, Demonstrations, and Analysis Group, Medicare-Medicaid Coordination Office*
- *Tobey Oliver, Health Insurance Specialist, Medicare-Medicaid Coordination Office*
- *Kerry Branick, Medicare-Medicaid Coordination Office, CMS*
- *Michele Rucker, Medicare-Medicaid Coordination Office, CMS*
- *Melissa Seeley, Medicare-Medicaid Coordination Office, CMS*

12: 15 pm – 12:35 pm

Sponsored Session: Patient Pattern

12:40 pm – 1:35 pm

State Perspectives on D -SNP Contracting and Partnership Strategies

This session will explore ways that states can use D-SNP contracting to advance Medicare-Medicaid integration and how D-SNPs can partner with states to help them overcome potential barriers and challenges they may face. To begin the session, Danielle Chelminsky will provide an overview of Mathematica's recent MACPAC report Advancing Integrated Care for Dually Eligible Individuals: Factors Influencing State D-SNP Contracting Decisions that examined factors influencing states' use of 11 D-SNP contracting strategies to facilitate integration of Medicare and Medicaid benefits. After the presentation, the session will shift to a moderated discussion with Camille Dobson and Jack Rollins focusing on how D-SNPs might help states to implement some of the D-SNP contracting strategies in the report.

MODERATOR:

- *Nancy Archibald, Associate Director, Integrated Care, Federal Programs, Center for Health Care Strategies*

PANELISTS:

- *Danielle Chelminsky, Researcher, Mathematica*
- *Camille Dobson, Deputy Executive Director, ADvancing States*
- *Jack Rollins, Director of Federal Policy, National Association of Medicaid Directors*

1:40 pm – 2:30 pm

Session: State of Integration – View from the Associations

Building integrated health options takes involvement of many different voices and stakeholder groups. Partnerships with other stakeholders are critical to improving care and access for the dually eligible populations we all serve. The SNP Alliance is fortunate to have long standing partnerships with other associations working to advance integration, including ACAP and the LTQA. Panelists will outline their organization's priorities for the coming months, share perspectives on hot topics, and identify areas of alignment for potential partnership efforts.

MODERATORS:

- *Michelle Herman Soper, MHS – Vice President of Policy Development, Commonwealth Care Alliance*

PANELISTS:

- *Christine Aguiar Lynch, VP for Medicare and LTSS Policy, ACAP*
- *Mary Kaschak, Executive Director, LTQA*
- *Pamela Parker, Integration Consultant, SNP Alliance*

2:40 pm – 3:30 pm

Session: Congressional Update and setting an Advocacy agenda

MODERATORS:

- *Ginger G. Loper, Principal, Loper Consulting*
- *Elizabeth M. Barnett, Partner, Avenue Solutions*

PANELISTS:

- *Eva DuGoff, Senior Health Advisor, Chairman Ron Wyden (D-OR), Senate Finance Committee*
- *Caleb Graff, Senior Health Policy Advisor, Ranking Member Mike Crapo (R-ID), Senate Finance Committee*

3:40 pm – 4:30pm

National Quality Forum: Driving Desired Outcomes Through Measurement

- *Dr. Dana Gelb Safran, President and CEO, National Quality Forum*

4:30 pm – 5:00 pm

Session: Comparing Outcomes for Dual Eligible Beneficiaries in Integrated Care – ASPE Report

Analyzing and comparing dual eligible beneficiaries enrolled in integrated models (SNPs, FIDE-SNPs, and PACE) relative to their counterparts enrolled in regular, non-integrated Medicare Advantage is integral to better serving this population and advancing integration. Jhamirah Howard will present ASPE's research utilizing Medicare encounter data to compare selected measures of service utilization and outcomes for duals enrolled in integrated models to duals in regular, non-integrated Medicare Advantage.

- *Jhamirah M Howard, Social Science Analyst, Office of the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services*

5:00 pm – 5:15 pm

Wrap up – Setting the Course for 2022

- *Cheryl Phillips, M.D., President and CEO, SNP Alliance*

Thank you to the sponsors of the 2021 Fall Forum



HGS AxisPoint Health is a whole-person care management services company focused on identifying and addressing the root causes of behaviors that worsen physical health.

APH reduces medical costs, improves regulatory compliance, and increases member satisfaction. Trust and relationship building is at the core of our approach, which combines industry-leading predictive analytics, a proprietary rules-engine, specialized clinical content, and passionate clinicians who care about the members' success. [Click here](#) to learn how AxisPoint Health can reduce your cost of care while making your health plan compliant.



[Patient Pattern software](#) improves outcomes by helping healthcare professionals identify and communicate patient risk across care settings.

Their leading product, Care Coach, is an all-inclusive clinical platform designed specifically for the SNP and PACE markets. It addresses gaps in code capture, delivers actionable insights and resource access, and provides a highly-configurable, interoperable framework.

Care Coach's technology platform addresses the whole person across the care continuum, while comprehensively supporting team efforts to improve outcomes one member at a time.

You have a voice in your care. What matters most to you? Vital Decisions helps you think about, document and communicate your wishes so you receive the care you want.



[Vital Decisions](#) helps health plans support their members through a range of Advance Care Planning programs that seamlessly complement the plan's own services. Through our telehealth and web-based solutions, we help members and their families clarify decision making, and communicate and document their preferences to ensure the member's care experience matches what is most important to them now and in the future. We also work closely with health plans to refer individuals to palliative care, hospice and other available services.

Their mission is to be the force, the catalyst in this country, to fundamentally change how individuals are cared for during an advanced illness.