



# 2019 Medicare Star Ratings & Quality Management Forum

*Achieve and Maintain Higher Star Ratings: Enhancing Quality & Performance, Optimizing Reimbursement Levels, Creating Viable Partnerships with Providers, and Managing Changes within the CMS Five Star Quality Rating System*

**January 14 – 15, 2019 • Loews Portofino Bay Hotel • Orlando, FL**

## Overview

Due to mandates aimed at improving the nation's healthcare while reducing spending, health plans are creating and implementing new approaches to achieve success under the evolving CMS Five-Star Quality Rating System. In order to obtain and maintain the desired 4 or 5 Star Rating, health plans have implemented programs and other initiatives to improve patient outcomes, quality, performance, and collaborative relationships with providers. Health plans report on all aspects of services offered, and optimizing member engagement and satisfaction. As the Star measures continue to change and evolve, health plans are also following suit in order to achieve high star ratings which will determine reimbursement revenues, bonus payments, member enrollment and marketing opportunities.

We have created an exciting, high-level forum featuring knowledgeable leaders and executives from the nation's leading health plans who will share their perspectives, valuable insights and expertise on how to be best equipped for critical changes in achieving high Star Ratings. Attendees will benefit from learning about new best practices, initiatives and strategies that have been deployed to address the challenges presented under the current healthcare environment to improve the quality and delivery of healthcare while reducing costs and improving member satisfaction. This exclusive event targets senior-level executives in order to maximize educational and networking opportunities.

By attending the 2019 Medicare Star Ratings & Quality Improvement Forum you will learn about innovative programs and initiatives that have been implemented at leading health plans to successfully achieve and maintain high star ratings.

## Intended Audience

From Health Plans, Medicare Advantage Plans & Managed Care Organizations:

*Chief Executive Officers, Chief Operating Officers, Chief Financial Officers, Chief Marketing Officers, Chief Medical Officers, Chief Strategy Officers, Chief Pharmacy Officers & Chief Information Officers*

*Also, Presidents, Vice Presidents, Directors & Managers of:*

- Star Ratings
- Medicare
- Senior Products
- Quality Improvement
- Marketing
- Managed Care
- Compliance
- Care Management
- Operations
- Strategy
- Medicare Stars
- Medicare Advantage
- Government Programs
- Data & Analytics
- Value-Based Health
- Sales
- Medical
- Product Development
- Finance
- Quality

- Business Development
- Regulatory Affairs
- Risk Management
- Utilization Management
- Business Development

- Pharmacy
- Disease Management
- Community Health
- Network Management
- Pharmacy

*This program is also geared towards Hospitals & Health Systems, Vendors, Healthcare Consultants, Solution Providers, Pharmacy Benefit Managers, Disease Management Organizations, Third Party Administrators, Pharmaceutical & Medical Device Companies, IT & Business Process Outsourcing Companies and Enrollment Brokers*

### **Preliminary Agenda**

#### **Day One – Monday, January 14, 2019**

7:15 *Conference Registration & Morning Breakfast*

8:00 *Chairperson's Opening Remarks*

#### **8:15 Examining the 2019 Star Ratings Landscape**

**Melissa Smith**

*Senior Vice President, Star Ratings*

**Gorman Health Group**

#### **9:00 Aligning Population Health Management and Physician Engagement to Boost Quality, Patient Satisfaction and Star Ratings**

**John Johnson, MD, MBA, FACP**

*Chief Medical Officer*

**Virginia Premier Health Plan**

9:45 *Networking Break & Refreshments*

#### **10:15 How Caring for People with Serious Illness Can Improve Medicare Star Ratings**

**Torrie Fields, MPH**

*Senior Manager, Advanced Illness & Palliative Care*

*Healthcare Quality & Affordability*

**Blue Shield of California**

#### **11:00 Successfully Overcome the Barriers to Personalized Care Delivery to Achieve Higher Star Ratings**

#### **11:45 Engaging Employees to Reach for the Stars: Getting Everyone Involved in Quality**

**Rebekah Dube, PharmD**

*Vice President, Health Plan Clinical Programs*

**Martin's Point Health Care**

12:30 *Luncheon for All Attendees & Speakers*

**1:30 Changing Provider Behavior through Care Pathway Implementation: Boost Star Ratings & Enhance Quality of Care**

**Brian Justice, DC**

*Medical Director, Pathway Development & Spine Care*

**Excellus BlueCross BlueShield**

**2:15 Panel Discussion: Examining the Current Healthcare Landscape and its Impact on Star Ratings for Health Plans**

**John Johnson, MD, MBA, FACP**

*Chief Medical Officer*

**Virginia Premier Health Plan**

**Cynthia Weiss, RN**

*Director, Quality, Accreditation & Wellness*

**AvMed Health Plans**

**Rebekah Dube, PharmD**

*Vice President, Health Plan Clinical Programs*

**Martin's Point Health Care**

3:15 *Networking Break & Refreshments*

**3:45 Adopt an Integrated Approach to Medical Management, STARS, and Risk Adjustment**

**Ann Wehr, MD**

*SVP, Population Health & Provider Alliances*

*Chief Medical Officer*

**AvMed Health Plans**

**Cynthia Weiss, RN**

*Director, Quality, Accreditation & Wellness*

**AvMed Health Plans**

**4:30 Implementing an Effective Engagement Program to Boost Star Ratings**

**Jennifer Hawkins, MSW**

*Director, Clinical Integration*

**CareOregon**

5:15 *End of Day One*

**Day Two – Tuesday, January 15, 2019**

7:15 *Morning Breakfast*

8:00 *Chairperson's Recap of Day One*

**8:15 Best Practices on Year-Round Health Plan Star Ratings Management**

**Stuart Rosenblum**

*Director, Strategic Alliances*

**Anthem**

**9:00 Enhancing Provider-Payer Collaboration to Boost Stars, Risk Assessment and Clinical Performance while Maximizing Resources**

**Chelsea Hammers, MBA**

*Clinical Quality Improvement Strategist*

**PacificSource Health Plans**

**Charity Kennedy, RN**

*Clinical Quality Improvement Strategist*

**PacificSource Health Plans**

9:45 *Networking Break & Refreshments*

**10:15 Improving Quality Scores by Integrating your Quality and Risk Adjustment Programs**

**Kyle Mendez, MBA**

*Director, Operations & Quality*

**Golden State Medicare Health Plan**

**11:00 Behavioral Health and Physical Health Integration: Effective Management of Complex Members and its Effect on Quality Scores**

**Lauren Easton**

*Senior Director, Behavioral Health*

**Commonwealth Care Alliance**

**11:45 Achieving Higher Star Ratings through Effective Compliance Management for Medicare Health Plans**

12:30 *Conference Concludes*

**Workshop Session**

Monday, January 14, 2019 • 5:30 p.m. – 7:30 p.m.

**How to Effectively Earn and Keep High Star Ratings: A Practical Guide to Implementing Key Initiatives that Drive Superior Performance**

The Workshop will discuss practical strategies and tactics that are proven to achieve superior Star rating performance. The Workshop will cover the following topics:

- Stars Overview – A discussion of the Stars program and what it means to your organization
- Organizational Dynamics – Develop an organization that nurtures champions, embraces accountability, and rewards performance.
- Setting Annual Goals – With a moving target, where should we look for improvement?
- “Why don’t our members love us?” – Boost member impressions for the CAHPS survey
- Plan Management Pitfalls – Discover internal risks and chart corrective action before it is too late
- Measuring Provider Performance - Combine claims and clinical data, with robust analytics and effective chart reviews, to accurately and cost effectively measure provider performance
- The Provider Improvement Process - Engage providers to improve on the fly

We encourage the sharing of experiences and a spirited discussion to help all become 5 Star performers!

**ABOUT THE WORKSHOP LEADER:**

**Richard Trembowicz** is an *Associate Principal* at **ECG Management Consultants**. Richard is a visionary consulting executive whose clients value his ability to translate complex business concepts into winning strategies and actionable plans. He builds strong and lasting relationships with physicians and C-suite leaders, deftly encourages stakeholders to embrace change to address current challenges, and facilitates non-contentious resolution of thorny issues in the complex healthcare system. In a career spanning more than 25 years, Richard has consulted to hospitals, health systems, and insurers on such diverse topics as network development, acquisitions and affiliations, insurer relations, member/patient acquisition and retention, practice transformation, and implementation of quality incentives.

Richard has transitioned his deep knowledge of law, healthcare finance, and successful direct-to-consumer marketing and sales strategies to guide insurers and providers to successfully manage the convergence of accountable care, financial risk, and population health management. He has tremendous insight on the application of digital communication in medicine, and he values savvy market and operational assessment as the foundation for development of comprehensive, and measurable, strategic and operational plans for high-growth insurance services in a dynamic healthcare market.