

MEDICAID MANAGED CARE LEADERSHIP SUMMIT APRIL 2-3, 2025 VIRTUAL

PAST AGENDA

WEDNESDAY

THURSDAY

TIME ZONE: EST

WEDNESDAY - APRIL 2, 2025

9:00 AM Welcome Remarks

Teresa Hottle, Director

CareSource

9:10 AM

9:10 AM

Confronting the Impact of Rate Suppression and Economic Headwinds

- Examine the structural drivers behind rate suppression in Medicaid financing
- Evaluate inflationary pressures on service utilization and cost trends
- Explore the 2025 rate negotiation landscape and its implications for Medicaid plans

Michael Bagel, Associate Vice President, Public Policy

* Alliance of Community Health Plans 10:05 AM

10:05 AM

Break

10:10 AM

10:10 AM

Telehealth in Medicaid: Overcoming Regulatory Barriers and Expanding Access to Care

- Explore innovative telehealth models aimed at reducing disparities in access to care
- Identify key opportunities to enhance telehealth reimbursement and quality oversight
- Analyze the current regulatory framework surrounding telehealth services within Medicaid

Neil Batlivala, CEO

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11:00 AM

Break

11:20 AM

11:20 AM

Leveraging Data Analytics for Medicaid Population Health Management

- Review predictive modeling techniques that improve risk stratification and outcomes
- Identify state-level initiatives using data-driven approaches to enhance quality of care
- Analyze how data integration can enhance care coordination and reduce disparities

Sarina Master, Director of Adult Special Populations

New York State Department of Health

Elizabeth Montgomery, National VP

12:20 PM

National Kidney Foundation

12:20 PM

Lunch Break

1:20 PM

1:20 PM

Aligning Policy and Practice: How Social Care Networks Are Driving Medicaid **Transformation**

- Outline the role of social care networks in closing care gaps and how to build scalable referral models that improve care coordination and health outcomes
- Learn how New York's 1115 Medicaid Waiver is being used to drive value-based care, address non-medical drivers of health, and expand community-based services
- Explore actionable strategies for aligning Medicaid policy, provider incentives, and community- based interventions to drive sustainable health improvements.

Scott Emery, Chief Strategy Officer

Healthy Alliance

Elena Rosenbaum, Medical Director, MD

Healthy Alliance 2:10 PM

2:10 PM

Break

Cityblock

2:15 PM

2:15 PM

Risk Adjustment Methodologies in Medicaid Managed Care

- Evaluate evolving risk adjustment models
- Review the impact of social determinants of health on risk-adjusted Medicaid populations
- Identify best practices for optimizing risk adjustment processes to enhance quality of care

Raphael Cices, Head of BOI, Coding and Billing

3:15 PM

3:15 PM

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- Evaluate integrated care models that promote continuity of care across prenatal, delivery, and postpartum phases
- Explore clinical innovations, such as home visiting programs and community-based doulas that support Medicaid covered pregnancies
- Examine strategies for improving maternal health data collection and reporting to enhance outcome tracking and inform evidence-based policy changes

Tiedra Marshall, Director of Expansion

Parents as Teachers

Christa Moss, VP, Clinical & Payer Strategy

4:45 PM

Maven Health Clinic

4:45 PM Closing Remarks

Joe Lee, Founder and Principal Consultant

5:00 PM

THURSDAY - APRIL 3, 2025

9:00 AM Welcome Remarks and Day One Takeaways

Teresa Hottle, *Director*

9:10 AM

9:10 AM Value-Based Care in Medicaid: Charting the Future of Managed Care Innovations

- Review payment reform strategies that incentivize quality care and outcomes
- Identify barriers and opportunities for expanding value-based care
- Evaluate state-level initiatives to transition Medicaid programs to value-based models

Jatin Dave, Chief Medical Officer

MassHealth

John Zweifler, Medical Director

Central Valley Medical Providers

9:55 AM

9:55 AM

Break

10:00 AM

10:00 AM Leveraging Social Needs Screening to Improve Outcomes in Medicaid and Dual-Eligible Populations

- Discuss the role of data collection and reporting in supporting ongoing program funding and sustainability
- Explore how managed care organizations can offer community-based resources as an extension of traditional benefits
- Analyze strategies for assessing and addressing social determinants

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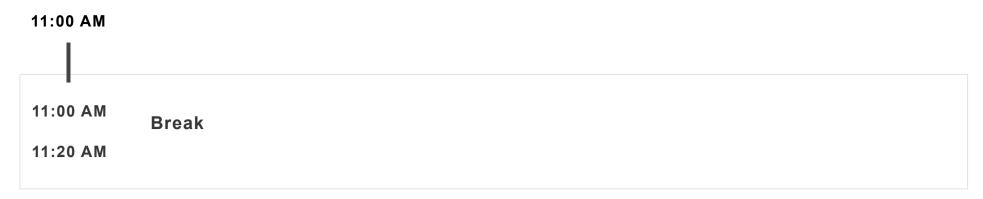
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11:20 AM

The CalAIM Model: A Collaborative Approach to Social Care Integration in Medicaid

- Assess the operationalization of Cal-AIM's wraparound services
- Explore the model's data-sharing strategies to monitor service usage, quality, and outcomes across stakeholders
- Identify actionable insights from Cal-AIM's collaborative approach that can be applied to other state Medicaid programs

Meryl Price, President

Health Policy Matters

12:35 PM

12:35 PM Lunch Break 1:35 PM

1:35 PM

Implementing a Health Equity Framework in Medicaid: Standardizing Demographic Data Collection and Reporting

- Analyze the current Medicaid guidelines for capturing demographic and social determinant data to inform health equity strategies
- Identify best practices for engaging providers in demographic data collection and incorporating it into care quality assessments
- Discuss strategies for leveraging demographic insights to address disparities and improve health outcomes

Lawanna Gaddy, Principal Consultant

LTMG Health Care Consulting

Rebecca Yanniello, Vice President of Population Health

Regal Medical Group

2:35 PM

2:35 PM

Closing Remarks

Joe Lee, Founder and Principal Consultant

2:40 PM

Community Health Synergy

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Health Equity Explained

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