

**From:** Healthcare Education Associates <reply-311919@mailings.frallc.com>  
**To:** Kester, Tonykester@aging.sc.gov  
**Date:** 3/3/2016 2:02:32 PM  
**Subject:** Prep Now for Major Medicaid Game Changer: CMS Proposed Rule

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## Medicaid Managed Care Leadership Summit

Hi Tony,

After a 10-year hiatus of Medicaid Managed Care regulation updates, CMS has proposed new guidelines for Medicaid care. Get ahead of the changes and understand the future requirements for your health plan to maintain Medicaid contracts by joining us at the **Medicaid Managed Care Leadership Summit** on April 18-19 in Baltimore, Maryland.

Jeff Myers, President and CEO of Medicaid Health Plans of America, will kick off our engagement and care management event by highlighting the upcoming changes and anticipated challenges due to the CMS' Medicaid Managed Care Proposed Rule.

Gain powerful insight that will allow you to:

- Prepare to meet beneficiary protection requirements
- Discover what payment and delivery methods are successful
- Understand new medical-loss ratios and rate setting
- Intergrate care with private coverage
- Mitigate enrollment churn
- Get a peek into possible quality improvement guidelines and oversight

Plus, our unique event will address engagement and communication issues with new populations and outline strategies to incorporate behavioral and long-term services into your Medicaid plans. As CMS is poised to make significant changes to Medicaid, the future of your Medicaid plan is at stake and you can't afford to miss this event!

[Website](#) | [Brochure](#) | [Register](#)

*P.S. Inland Empire Health Plan will share their lessons learned during a 24-month behavioral health integration initiative to improve the whole health of individuals with complex conditions by piloting the development of population-based health homes in 35 clinics across 13 healthcare organizations.*

### Top Reasons to Attend

- Reduce financial uncertainties with new strategies to bring long-term care services into your Medicaid plan
- Comprehend possible quality reporting and financial implications of CMS' Mega Rule for Medicaid Managed Care
- Reduce unnecessary costs with turn-key engagement solutions to move members towards the correct type of care needed
- Hear directly from plans that have successfully built community partnerships and used technology to enhance the care of Medicaid members
- Get insight into the progress of Medicaid demonstrations to understand trends that will affect state Medicaid managed care policies and regulations
- Reduce costs with innovative strategies to reduce Medicaid member churn and provide policies that match these members' needs
- Refine and simplify behavioral health integration to ensure your plan meets proposed CMS regulations

### Who Should Attend

This program is designed for senior-level personnel from Medicaid plans and state Medicaid programs.

Medicaid Health Plans and State Programs:

- Chief Executive Officers
- Chief Finance Officers
- Chief Medical Officers
- Medical Directors
- Medicaid Directors

Vice Presidents, Directors, and Managers with responsibilities in:

- Enrollment
- Engagement
- Business Development
- Government Programs
- Communications
- Care Management
- Community Relations
- Mental/Behavioral Health
- Long-term Services

### Registration Details

**Priority Code** - PHN48-EM5

**Service Provider Rate** - \$2095

**Health Plan/Provider Rate** - \$1395

**Government/Community Service Rate** - \$895

\*subject to HEA approval

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For more information and to register, visit the [website](#) or contact:

Rhonda West at 704-341-2647 or [rwest@frallc.com](mailto:rwest@frallc.com)

For speaking and sponsorship opportunities, contact:

Jennifer Clemence at 704-341-2438 or [jclemence@frallc.com](mailto:jclemence@frallc.com)

**Healthcare Education Associates**

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200 Washington Street, Suite 201

Santa Cruz, CA 95060 USA

800-280-8440

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