

From: Healthcare Education Associates <reply-309723@mailings.frallc.com>

To: Kester, Tonykester@aging.sc.gov

Date: 2/9/2016 12:31:16 PM

Subject: Limit Medicaid Financial Drains from Providing LTSS

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Medicaid Managed Care Leadership Summit

Hi Tony,

Evolving services and curbing costs for Medicaid members is on the top of health plans' to-do list. At the **Medicaid Managed Care Leadership Summit on April 18-19 in Baltimore, Maryland**, you will learn directly from health plans that are successfully implementing long-term services and supports (LTSS) for Medicaid members that have maximized efficiency and managed cost growth.

With demonstration waivers and delivery reform changes on the forefront, learning best practices from successful plans is vital to incorporating costly LTSS into your Medicaid managed care operations.

Get answers to these crucial questions:

- What does the successful integration of long-term services look like for Medicaid Managed Care organizations and states?
- How can you maximize care coordination with long-term services integration?
- How can you build and maintain community partnerships that address non-medical needs?
- Why should you engage the patient AND caregiver, and how do you do it successfully?
- How do you manage your staff and administrative costs when incorporating additional services?

With millions of Americans needing access to expensive LTSS, how will your Medicaid program include these critical services that will support the well-being of your members? You can't miss this event to learn best practices!

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

P.S. The Kaiser Family Foundation will dive into a current snapshot of state Medicaid decisions, enrollment, and managed care penetration to showcase plan opportunities and challenges in serving new adult groups!

Hot Topics

- Current access trends for expanded Medicaid states
- Special series featuring four case studies: engaging Medicaid customers that lead to proper care utilization and lower costs
- Effectively carving in behavioral health services
- Integrating long-term services with minimal adverse financial impact
- Alternative payment and delivery model successes throughout the nation
- A look at current state demonstrations and Medicaid innovations around the country

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 - PHN12-EM3

Service Provider Rate - \$2095

Health Plan/Provider Rate - \$1395

Government/Community Service Rate - \$895

*subject to HEA approval

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

Rhonda West at 704-341-2647 or rwest@frallc.com

For speaking and sponsorship opportunities, contact:

Jennifer Clemence at 704-341-2438 or jclemence@frallc.com

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