Staying AHEAD of the Game
Beyond Fee-for-Service Reimbursement:
Roundtable Summit on Integration and Value-Based Purchasing

October 3, 2017
Robert Wood Johnson Wellness Center, Hamilton, NJ

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New Jersey Association of Mental Health and Addiction Agencies, Inc.
Staying AHEAD of the Game
Beyond Fee-For-Service Reimbursement:
Roundtable Summit on Integration and Value-Based Purchasing
October 3, 2017 from 9:00 a.m. to 4:00 p.m.
at the Robert Wood Johnson Wellness Center, Hamilton, NJ
3100 Quakerbridge Rd, Hamilton Township, NJ 08619

While value-based reimbursement has arrived in the behavioral health and social services realm more slowly and later than in the general healthcare arena, make NO mistake about it: The shift to value-based reimbursement will continue, regardless of other changes in national healthcare policy. Value-based purchasing is just the reimbursement model that moves fee-for-service to episodes of care, bundled payments, partial capitation and full capitation.

To stay ahead of the game, you will need to move your organization to this new model of healthcare integration.

Join NJAMHAA’s summit to hear how some of the companies that participate in our Health Maintenance Organization (HMO) Council and Integrated Healthcare Council are ready to work with providers to move behavioral health in this direction. Together, HMO representatives and providers in this forum will explore the parameters of that relationship to foster mutual understanding of each entity’s role, the preparation steps and what skills will be needed.

Agenda

Welcome and Opening Remarks
9:35 am - 9:45 am
Debra L. Wentz, PhD
President and Chief Executive Officer, NJAMHAA
James Lape, MA, MBA, FACHE
Consultant and Former NJAMHAA Board President

Plenary Session
9:50 am - 11:05 am
Getting Ahead of the Curve: How to Modify your Operations to Maximize Service Delivery in New Value-based Models of Care
Marty Waters, LCSW, Vice President, Clinical Thought Leadership & Innovation, Beacon Health Options, and Suzanne Kunis, Director of Behavioral Health, Horizon Blue Cross Blue Shield of New Jersey, will present strategies for changing and reinforcing business operations to foster ongoing viability and delivery of enhanced services.
Concurrent Workshops
11:10 am - 12:30 pm

Improving the Health of Populations with Integrated Care and Value-based Reimbursement: Preparing to Succeed
Manny Arisso, Staff Vice President, Medicaid Strategy and Development, Anthem

While fee-for-service has dominated the discussion in New Jersey this past year, providers need to focus on quality, outcomes, the customer experience, collaboration with others, seamless handoffs, different levels of care, use of data analytics and more.

Manny Arisso will share strategies and recommendations for the managed care system and how providers can improve the quality of care through collaboration.

Trends in Value-based Purchasing and Using Data to Improve Care
• Marcia Guida James, MS-CH, MBA, MS-HP, CPC, Executive Director, National Lead, Value Based Solutions, Aetna Medicaid
• Glenn MacFarlane, CEO, Aetna Better Health of NJ

Representatives from Aetna Better Health of New Jersey will discuss different models that help providers understand data, develop skills to enhance care management, review and manage utilization, and ensure that claims are paid.

Lunch
12:30 pm - 1:30 pm

Concurrent Workshops
1:30 pm - 2:45 pm

Build it and They Will Come
• Victoria Herzberg, Vice President, Field Network Management, WellCare Health Plans
• Hania Schwartz, Senior Manager, Behavioral Health, WellCare Health Plans
• Cort Adelman, Director, Government Affairs, WellCare Health Plans
• Consuelo Taveras, Manager, Network Management, Managed Long-Term Services and Supports, WellCare Health Plans

Representatives from WellCare Health Plans, Inc. will present on a 360 degree approach to the multi-faceted and delicate partnership between providers and health plans, including the importance of creating large behavioral health provider networks and providing accessible, quality care to our members – your patients.

Managed Medicaid: Capabilities Providers Need to Ensure their Readiness to Operate in This New System
Kelly Champ, Vice President, Network Strategy and Innovation, Optum

Kelly Champ will explain the skills and capabilities providers need to maximize their effectiveness and the viability of their organizations in the new Managed Medicaid system. Participants will receive valuable resources, including an assessment tool and a checklist of needed competencies, to facilitate their preparation for and success in this new environment.

Plenary Session
2:50 pm - 3:50 pm
Moving to Value-based Care
Rachael Matulis, MPH, Senior Program Officer, Center for Health Care Strategies

Ms. Matulis will share lessons learned from the experiences of other states that have implemented value-based reimbursement in managed care systems.

Closing Remarks
3:50 pm - 4:00 pm
James Lape, MA, MBA, FACHE

Many thanks to our sponsors to date!
* Aetna Better Health of NJ
* Amerigroup
* Beacon Health Options
* Horizon NJ Health
* Optum
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