

EDUCATION | KNOWLEDGE | NETWORKING

Tuesday, September 25th

Developing and Launching a Medicare Advantage Plan: An Executive Workshop for Skilled Nursing Facility Operators (Institutional Special Needs Plans - I-SNP)

10:20 am	Introductions	NCHCFA	
10:30 am – 11:15 am	Environmental Context	Anne Tumlinson, Innovations	
11:15 am – 12:15 pm	Medicare Advantage/Special Needs Plans 101	Anne Tumlinson, Innovations	
12:15 pm – 1:15 pm	Luncheon		
1:30 pm – 2:45 pm	Forming and Operating a Health Plan	Anne Tumlinson, Innovations	
2:45 pm – 3:00 pm	Break		
3:00 pm – 4:45 pm	Partner Panel	Panel Moderator: Anne Tumlinson,	
	Panel	Panel	
	Provider Partners Health Plans	Rick Grindrod	
	American Health Plans	Tom Coble	
	AllyAlign	Jill Sumner	
	Centene Corporation	Michael Monson	
	Marquis Companies/Consonus Healthcare	Steve Fogg	
4:45 pm	Discussion & Closing Remarks	NCHCFA	
5:00 pm – 6:15 pm	Welcome Reception		

Wednesday, September 26th

8:00 am – 9:00 am	Breakfast	
9:00 am – 9:15 am	Welcome Remarks	Adam Sholar, Jim Martin John Barber
9:15 am – 10:00 am	OPENING KEYNOTE SPEAKER Driving the Conversation- A Look at the Future of Health Care in America	Mark McClellan, MD, PhD
10:15 am- 12:00 pm	Medicaid Managed Care Presentation & Panel Discussion	Presentation Jay Ludlam, Dave Richard
	Panel North Carolina Provider Owned Plans United Health Care Wellcare Healthy Blue Centene/Carolina Complete Care	Panel Moderator: Sam Clark Lisa Farrell Anita Bachmann Mark Henry Ryan Rhoads Rick Fredrickson
12:00 pm – 1:15 pm 1:15 pm – 2:30 pm	Networking Luncheon "APPROVED": Understanding What Lenders and Investors Need to Know in Long Term Care Lending	Panel Moderator Ken Burgess
	Panel Lancaster Pollard Berkeley Point Capital, LLC Pinnacle Financial Partners National Health Investors, Inc. Poyner Spruill, LLP	Panel Kevin Oakley Rob Ferguson Michael Daly Kevin Pascoe Brian Corbett
2:45 pm – 3:45 pm	Define Your Value Through Data	Anthony Laflen
4:00 pm – 5:00 pm 5:00 pm – 6:15 pm	Patient-Driven Payment Model Networking Reception	Mike Cheek

Thursday, September 27th

Closing Remarks

8:00 am – 9:00 am	Breakfast -3.77 25.85	
9:00 am – 11:00 am	The Complex World of Medicaid Eligibility and Reimbursement	Becky Hewitt
11:15 am – 12:30 pm	Provider Audits: Current Issues and Best Practices	∠Andy Page ⇒ ∠ ≤ ∠ ≤
12:30 pm – 1:45 pm	Networking Luncheon	
2:00 pm – 4:00 pm	CLOSING KEYNOTE SPEAKER Disruptive Demographics: Implications for Long Term	Dr. James H. Johnson Jr., PhD

Agenda

Dear Members,

The 2018 NCHCFA Financial Summit is designed to educate attendees on a wide array of topics, all related to the financial aspect of operating nursing facilities. These topics include:

- The transition to Medicaid Managed Care
- The Patient-Driven Payment Model (PDPM)
- Institutional Special Needs Plans (I-SNP)
- Nursing facility lending and investing
- The impact of changing demographics on long term care
- The importance and use of performance data
- · Provider audits
- And other important topics

Having the latest information and sharing of best practices and trends across our industry has become more important than ever. NCHCFA has gathered reliable and timely information from financial service providers, state government agencies and other trusted resources to share with our members. Our experts have set a high standard for themselves when it comes to the quality of the information they share, the access to trusted partners they provide and the content they deliver.

NCHCFA is delighted to have Mark McClellan, MD, PhD, former Administrator of the Centers for Medicare and Medicaid Services (CMS), and currently the Robert J. Margolis Professor of Business, Medicine, and Policy and Director of the Duke-Margolis Center for Health Policy at Duke University as our opening keynote speaker. We are also excited to welcome back Dr. James H. Johnson, Jr., PhD, the William R. Kenan Jr. Distinguished Professor of Strategy and Entrepreneurship and Director of the Urban Investment Strategies Center at the Frank Hawkins Kenan Institute of Private Enterprise with UNC Chapel Hill as our closing keynote speaker.

Whether you are representing one nursing facility or a large nursing facility chain, we all have a common goal and that is to be able to continue to provide our residents with the care they need.

- Independent Owners
- Corporate Office Staff
- Administrators
- Business Office Staff
- Nursing Facility Accounting Staff
- Any other persons involved in post-acute care/long term care
 - **Who Should Attend**

- Latest and most up-to-date information
- Hear presentations and panel discussions from experts in their field
- Informative panel presentations that provide and encourage provider and panel interaction
- Ample networking opportunities with colleagues and NCHCFA Financial Summit Exhibit Partners

Why You Should Attend



Attendance Packages, Pricing & CEUs

NCHCFA Affiliation	Package One (One Day Only) September 25, 2018	Package Two (Three Days) September 25 - 27, 2018
Member Rate	\$185.00	\$395.00
Non-Member Rate	\$555.00	\$1,185.00
Trade Associate Member Rate	N/A	\$125.00
Guest Rate	\$50.00	\$125.00

- Member Rate includes all education sessions, meals, and networking/social functions.
- Non-Members must pay in advance by credit card or by check. Non-Member Rate includes all education sessions, meals, and networking/social functions.
- Trade Associate Member Rate includes networking/social functions only.
- Guest registration may include spouse, family member, significant other, etc..., but does not apply to
 colleagues or any others in the long term care industry or a provider of services for the long term care
 industry. Guest Rate includes networking/social functions only.

This event offers up to 5 contact hours for nursing home administrators on day one (Package One) and up to 16.25 contact hours for nursing home administrators for all three days (Package Two). NCHCFA will issue a certificate of course completion for each package for all other disciplines. The North Carolina Health Care Facilities Association is a Registered Sponsor of continuing education with the NC State Board of Examiners for Nursing Home Administrators. Comments regarding the Registered Sponsor Course may be addressed to: NCBENHA, 3733 National Drive, Suite 110, Raleigh, NC 27612

Summit Registration Cancellation

Written cancellations received on or before September 12, 2018 will not be subject to a cancellation fee. Written cancellations received on or after September 13, 2018 will be subject to a 50% cancellation fee. This applies to all members, non-members, trade associate members, and guests regardless of registration fee paid. Any written cancellations received after September 18, 2018 will not receive a refund. Written cancellations must be received via email to Donna Snyder at donnas@nchcfa.org.

Ways to Register

Visit our Website at www.NCHCFA.org and click on 2018 NCHCFA Financial Summit Fax your registration form to (919) 787-8418

Email your registration form to Donna Snyder at donnas@nchcfa.org

Special Considerations

Please e-mail or call Donna Snyder at the Association office at donnas@nchcfa.org or (919) 782-3827 should you require any special arrangements including special menu considerations, hearing devices, wheelchair access, or if you have any additional questions regarding this program.

Event Disclaimer

By entering the event premises, you consent to interview(s), photography, audio recording, video recording and its/their release, publication, exhibition, or reproduction to be used for promotional purposes, advertising, inclusion on Websites, social media, or any other purpose by NCHCFA. Images, photos and/or videos may be used to highlight and/or promote similar NCHCFA events in the future. You release NCHCFA, its officers and employees, and each and all persons involved from any liability connected with the taking, recording, digitizing, or publication and use of interviews, photographs, video and/or sound recordings. You waive all rights you may have to any claims for payment or royalties in connection with any use, exhibition, streaming, or other publication of these materials.

Attire

Attire for this event is business casual. For your comfort, please bring a sweater or jacket as temperature in meeting rooms fluctuate.



Hotel Information

NCHCFA has reserved a limited block of rooms at the Sheraton Chapel Hill Hotel for the following dates for a discounted group rate:

The night of September 24th (Monday)
The night of September 25th (Tuesday)
The night of September 26th (Wednesday)

Participants are responsible for making their own overnight accommodations and payment. Please call the Sheraton Chapel Hill Hotel at (919) 968-4900 to make your overnight reservations today! To receive the special \$129.00 per night room rate, mention the North Carolina Health Care Facilities Association Conference 2018. Unused rooms will be released for general sale on September 22, 2018.

Sheraton Chapel Hill Hotel
1 Europa Drive
Chapel Hill, NC 27517
www.sheratonchapelhill.com

About Chapel Hill

The Town of Chapel Hill is a community where a diversity of ideas, people, and opportunities converge. It is a place where its citizens feel a vitality and pride that stem from Chapel Hill's history, traditions, and unique characteristics. Nicknamed the "Southern Part of Heaven," Chapel Hill was named after New Hope Chapel which stood upon a hill at the crossing of two



Chapel Hill Without UNC - ECHO - East Chapel Hill Observer

primary roads (where The Carolina Inn currently stands). Town lots were auctioned in 1793 when work began on the first University building, although it was 1795 before any residents occupied permanent homes.

The history of the Town is inextricably linked to the University. The Town was, in fact, created to serve the University. When the University of North Carolina Board of Trustees chose the area around New Hope Chapel as the site for the first State university in 1793, they also named a committee to lay out a town adjacent to the site.

The population of 57,233 is diverse, consisting of University faculty and staff, students, business people, and retirees from all over the world, not to mention the native Chapel Hillians. The Town's transformation from a small, relatively rural, turn-of-the-century village to a thriving, cosmopolitan University city has occurred since 1940, largely in concert with corresponding growth and change in the University. In response to the demands of the rapidly growing population, Town government has undergone a thrust toward modern business professionalism to meet the higher levels of service needed.



Do you need to make dinner plans? Check out these nearby Chapel Hill restaurants and make reservations with friends and colleagues.

Carolina 1663 (Located inside of the Sheraton)

Serves American, Contemporary Cuisines www.sheratonchapelhill.com – click on dining

Squid's Seafood Market and Restaurant (0.8 Miles from Sheraton)

Serves American, Seafood, Vegetarian Friendly, Gluten Free Options (Has Oyster Bar)
Closes at 9:00 pm

1201 Fordham Blvd., Chapel Hill, NC

Phone: (919) 942-8757 www.squidsrestaurant.com

Stoney River (1.1 Miles from Sheraton)

Serves American, Steakhouse, Vegetarian Friendly, Gluten Free Options Closes at 10:00 pm

201 S. Estes Drive, Ste. 100A, Chapel Hill

Phone: (919) 914-6688

www.jalexandersholdings.com/stoneyriver

Il Palio (1.2 Miles from Sheraton- located inside the Siena Hotel)

Serves Italian, Gluten Free Options Closes at 10:00 pm

1505 E. Franklin Street, Chapel Hill, NC

Phone: (919) 918-2545

www.ilpalio.com

Weathervane Restaurant at Southern Season (1.1 Miles from Sheraton)

Serves American, Contemporary, Vegetarian Friendly, Vegan Options, Gluten Free Options Closes at 9:00 pm

University Place, 201 S. Estes Drive, Chapel Hill

Phone: (919) 929-9466 www.southernseason.com

What our members are saying about the 2018 NCHCFA Financial Summit...

"Our membership has been requesting education that deals with the complex financial issues of operating a nursing facility, which our members deal with daily. I look forward to attending and learning more at the NCHCFA Financial Summit."

Jim Martin, Chairman and CEO Tullock Management Company

Mark McClellan, M.D.

Mark McClellan, MD, PhD, is the Robert J. Margolis Professor of Business, Medicine, and Policy, and Director of the Duke-Margolis Center for Health Policy at Duke University.



McClellan is a doctor and an economist whose work has addressed a wide range of strategies and policy reforms to improve health care, including payment reforms to promote better outcomes and lower costs, methods for development and use of real-world evidence, and approaches for more effective drug and device innovation. McClellan is a former administrator of the Centers for Medicare & Medicaid Services (CMS) and former commissioner of the U.S. Food and Drug Administration (FDA), where he developed and implemented major reforms in health policy.

McClellan has served as a member of the President's Council of Economic Advisors and as Deputy Assistant Secretary of the Treasury for Economic Policy. He was also a senior fellow at the Brookings Institution and a professor of economics and medicine at Stanford University where he directed the Program on Health Outcomes Research.

Dr. James H. Johnson, Jr.

James H. Johnson Jr. is the William R. Kenan Jr. Distinguished Professor of Strategy and Entrepreneurship and Director of the Urban Investment Strategies Center at the Frank Hawkins Kenan Institute of Private Enterprise at UNC Chapel Hill.



Dr. Johnson's research interests include community and economic development, the effects of demographic changes on the U.S. workplace, interethnic minority conflict in advanced industrial societies, urban poverty and public policy in urban America, and workforce diversity issues.

Dr. Johnson and Dr. John D. Kasarda coauthored "The Economic Impact of the African American Population on the State of North Carolina" and a study on the economic impact of North Carolina's Hispanic population. With support from the Russell Sage Foundation, Dr. Johnson published research on the economic impact of September 11th on U.S. metropolitan communities. Currently he is researching the economic and employment impact of white collar job shifts offshore on U.S. competitiveness.

Dr. Johnson examines the causes and consequences of growing inequality in American society, particularly as it affects socially and economically disadvantaged youth; entrepreneurial approaches to poverty alleviation, job creation, and community development; inter-ethnic minority conflict in advanced industrial societies; and business demography and workforce diversity issues. He has published more than 100 scholarly research articles and three research monographs and has co-edited four theme issues of scholarly journals on these and related topics.

Thank You To Our 2018 NCHCFA















HALL BOOTH SMITH, P.C.













Financial Summit Exhibit Partners







Healthy **Blue**



















Tuesday, September 25, 2018

Developing and Launching a Medicare Advantage Plan (Institutional Special Needs Plans - I-SNP) 10:30 am - 3:00 pm

Around the country, a growing number of skilled nursing facility (SNF) organizations have launched their own Medicare managed care plans. This trend reflects growing frustration among SNFs about the reluctance of managed and accountable care organizations to share in savings that result from high quality SNF care. In response, SNFs are forming health plans to finance better care delivery for their residents, and benefit directly from the savings they create.

NCHCFA is offering our members the chance to learn more about this trend. Join us for an in-depth executive learning session, led by Anne Tumlinson, on developing and launching a Medicare Advantage or Special Needs Plan. At this special educational workshop, you will learn:

- The reasons SNFs have seized this opportunity, and key drivers of success
- Medicare Advantage 101, including basic payment rules and methodologies, and options for offering Special Needs Plans
- A step-by-step process for forming a health plan, including clinical keys to success, how a good care model works, and different types of administrative partnerships

Anne Tumlinson, Chief Executive Officer of Anne Tumlinson Innovations, is a nationally recognized expert in the economics and aging society. She advises government officials, business leaders, and investors on innovations in financing and delivery of health and long term care to older adults. Anne's work helps organizations respond successfully to payment and delivery reform, and develops innovative ideas and strategies for public policy change. Anne served previously as a Senior Vice President at Avalere Health, where she founded and led Avalere's post-acute and long term care consulting practice for 14 years. She created, developed and launched a data-based provider navigation tool for post-acute care placement and led many analytic and modeling projects for a wide variety of clients. Prior to that, Anne led Medicaid program oversight at the federal Office of Management and Budget.

Provider Innovations in Care Integration and Managed Care Panel 3:00 pm – 4:45 pm

Day one will conclude with a panel discussion presentation from leading organizations offering administrative capabilities and partnerships. The purpose of this panel is to give the audience an opportunity to learn about and from the organizations that are offering administrative capabilities and partnerships for provider-led insurance formation. Members of this panel will share their experiences partnering with skilled nursing facility providers, and what they offer provider organizations interested in forming health plans. The panel will also include a SNF operator that launched its own I-SNP.

Takeaways:

- Learn the role of administrative partners in forming and operating a health plan, and how to assess the one that's right for you.
- Understand the options for taking advantage of the I-SNP opportunity.
- · Hear about the successes, failures and what contributes to each.

Panelists:

Rick Grindrod

Provider Partners Health Plan

As the President and CEO of Provider Partners Health Plan (PPHP), Rick leads the company's overall business strategy, creating strategic relationships between hospitals, long term care providers and physicians to provide high quality care to some of the most vulnerable Medicare beneficiaries.

Rick has 33 years of experience managing all aspects of the operations and marketing of senior living and health care facilities. He began his career in 1985 with Erickson Retirement Communities, which grew to be a \$1.5 billion management and development company. His positions with Erickson included serving as President of its Health & Operations Division and as CEO of the company. Under his leadership, Erickson's 11,000 employees served 23,000 residents at 19 communities in 10 states.

While growing the operation's organization to include Independent Living, Assisted Living, Skilled Nursing, Home Health Care, Home Support Care, Rick also led the Erickson Health Medical Group physicians practice and managed the highly successful Erickson Medicare Advantage Health Plan. Additionally, Rick led the creation of the Erickson Way culture, staff development and HR practices that resulted in Erickson being recognized nationally as a Fortune Magazine Top 100 Employer in 2008 and 2009.

Tom Coble

American Health Plans

Tom C. Coble is the Chief Strategy Officer for American Health Plans. American Health Plans works with other nursing home providers around the country in the development, design and operation of Medicare Advantage Institutional Special Needs Plans. Tom pioneered the 1st provider owned I-SNP in the country in Oklahoma in 2005. He is also the President and CEO of Elmbrook Management Company, which owns and operates seven long term care and assisted living communities in southern Oklahoma.

Gaining recognition as a leading professional and spokesman in the fields of long term and post-acute care, Coble has delivered expert testimony before committees of the U.S. Congress and the Oklahoma State Legislature. He represented the American Health Care Association (AHCA) at The White House Conference on Aging in 2015, which marked the 50th anniversary of Medicare and Medicaid. Tom was also a featured keynote speaker at the 6th Annual Retirement Living World China in Shanghai, China in October 2016 focusing on his "Nursing Home without Walls" model.

Coble also speaks nationally to the investment community, insurance conferences, national trade associations and provider groups on important topics such as future payment models, population management, risk management and the "Nursing Home without Walls" model. Coble's work and dedication to the field have brought him national recognition and honors, including the first-ever AHCA Steve Chies Future Leader Award in 2013 and AHCA's Joe Warner Patient Advocacy Award in 2014.

Tom currently serves as the Immediate Past Chair of the American Health Care Association (AHCA) Board of Governors. He has served on AHCA's Board of Governors since 2011 and has also served as chairman of the AHCA Independent Owners Council. Tom has also served as President of the Oklahoma Association of Health Care Providers and has had several legislative appointments to health-related task forces, councils and state boards.



Jill Sumner AllyAlign

Jill Sumner is the EVP of Health Plan Management, for AllyAlign. She is responsible for supporting long term care and senior housing partners in the development of Medicare Advantage Plans. She also leads the organization in areas related to health policy and strategic analysis of new business opportunities. Jill has over 20 years of experience in long term care and managed care. Before her work with AllyAlign Jill was the Vice President of Health Policy and Integrated Services at LeadingAge, a national association that represents not for profit aging services providers. At LeadingAge Jill developed the organization's strategy for supporting providers in understanding and participating in value-based payment models and managed care. Her work was a catalyst for the development of long term care provider networks in several LeadingAge state affiliates. Alongside the CEO, she was responsible for supporting the organization's pivotal work in long term care financing, Pathways, through a collaborative that included the SCAN Foundation and AARP. Jill has developed and operated several dual eligible special needs plans and was one of the first individuals to lead a Medicare/Medicaid Plan (MMP) as part of the CMS' Financial Alignment Demonstration.

As a licensed nursing home administrator and VP for Research and Program development for a large privately owned long term care organization, Jill led the company in developing evidence based programming for dietary, social services, activities and quality. She created the education and training platform for the organization securing designation as a NAB approved education provider and holding annual leadership conferences.

Michael Monson

Centene Corporation

Michael Monson is the Senior Vice President of Medicaid & Complex Care at Centene Corporation. Operating in 31 states and with revenue of \$60 billion, Centene Corporation, a Fortune 61 company, is a leading multi-line healthcare enterprise that provides programs and related services to the rising number of under-insured and uninsured individuals. Michael has national product responsibility for Centene's Medicaid and Complex Care product lines – TANF; CHIP; Foster Care; Medicaid Expansion; Aged Blind & Disabled (ABD); Managed Long Term Services & Supports (MLTSS); and Medicare-Medicaid Plans (CMS Financial Alignment Demonstration). These products operate across 22 states and collectively comprise more than 8.5 million members and ~\$43 billion in revenue. Centene is #1 or #2 in national market share for these products.

Previously, Michael was the Chief Administrative Officer & Vice President of Residential Services at Village Care of New York where he had responsibility for a \$60 million P&L as well as multiple corporate functions. Village Care is a New York City based integrated health system with more than \$200 million in revenue.

Steve Fogg

Marquis Companies and Consonus Healthcare

Steve Fogg has been Chief Financial Officer for Marquis Companies and Consonus Healthcare since 2001. A skilled financier who has closed more than \$500 million in transactions over the course of his career, he's strengthened the companies' financial positions and accounting practices, given strategic guidance and nurtured relationships with lenders, suppliers, insurers and regulators. Steve is a nationally recognized expert and frequent speaker on industry issues such as property valuation, risk management and reimbursement methodology. He is a graduate of Portland State University and holds degrees in Accounting and Business Administration with finance emphasis. After college, Steve took an accounting position with Prestige Care, eventually working his way to Chief Operating and Financial Officer. During his tenure, the company grew to 42 skilled nursing and assisted living facilities.

Steve has been active on behalf of the long term care profession at both a state and national level. He is a past president of the Oregon Health Care Association, and is currently a member of its board. He also serves on the finance and reimbursement committees for AHCA and Cedar Sinai Park.

Wednesday, September 26, 2018

OPENING KEYNOTE!

Driving the Conversation – A Look at the Future of Health Care in America 9:15 am – 10:00 am

The state of healthcare and the ongoing implementation of the Affordable Care Act have the U.S. at a unique crossroad. As research breakthroughs result in potential cures and better treatments, patients and health professionals are frustrated by bureaucracy and other factors that drive up the costs and availability of beneficial health care even as policymakers have tried to address many of these long-standing issues. Drawing on his experience as administrator for both the Centers for Medicare & Medicaid Services and the Food & Drug Administration, Dr. Mark McClellan reviews the Affordable Care Act, what's working, not working and all the trends in the U.S. health care system, explaining how these trends can potentially transform the health care landscape. He provides audiences with key insight on the issues shaping our health care debate and outlines specific steps—such as transparency of the system and "ownership" by its users—that public and private sectors should take to promote better care now and in the future.

Mark McClellan, MD, PhD, is the Robert J. Margolis Professor of Business, Medicine, and Policy, and Director of the Duke-Margolis Center for Health Policy at Duke University. McClellan is a doctor and an economist whose work has addressed a wide range of strategies and policy reforms to improve health care, including payment reforms to promote better outcomes and lower costs, methods for development and use of real-world evidence, and approaches for more effective drug and device innovation. McClellan is a former administrator of the Centers for Medicare & Medicaid Services (CMS) and former commissioner of the U.S. Food and Drug Administration (FDA), where he developed and implemented major reforms in health policy. McClellan has served as a member of the President's Council of Economic Advisors and as Deputy Assistant Secretary of the Treasury for Economic Policy. He was also a senior fellow at the Brookings Institution and a professor of economics and medicine at Stanford University where he directed the Program on Health Outcomes Research.

Medicaid Managed Care Presentation 10:15 am - 11:00 am

Following the passage of Session Law 2015-245, North Carolina began the process of transitioning its Medicaid program to managed care. Beginning in late 2019, nursing facility services for Medicaid enrollees who stay in a nursing facility for less than 90 days will be reimbursed by private insurers awarded contracts to manage North Carolina's Medicaid program. Over the subsequent five year period, long-stay residents enrolled in Medicaid and residents enrolled in both Medicaid and Medicare will begin having their Medicaid-covered nursing facility care covered by private managed care companies.

In this session, Dave Richard, North Carolina's Deputy Secretary of Health and Human Services for Medicaid, and Jay Ludlam, North Carolina's Assistant Secretary of Health and Human Services for Medicaid Transformation, share what nursing facilities need to know about the transition to managed care, as well as

the Department of Health and Human Services' priorities for the Medicaid nursing facility services program leading up to the transition to managed care.

Dave Richard is the Deputy Secretary for the Division of Medical Assistance (DMA), where he leads North Carolina's \$14 billion Medicaid and NC Health Choice programs for the state's Department of Health and Human Services (DHHS). Richard's vision for Medicaid is to ensure a sustainable, person-centered and innovative program for more than two million North Carolinians. As the programs undergo transformation to even better fit the needs of state and its residents, he is





committed to the fundamental goal of improving the health and well-being of all residents. Richard believes the right way to achieve success is to work closely with stakeholders in all aspects of Medicaid. Prior to leading Medicaid, Richard was the Deputy Secretary for DHHS Behavioral Health and Developmental Disability Services and the State Operated Healthcare Facilities divisions. He joined DHHS in May 2013 as the Director of the Division of Mental Health, Intellectual and Developmental Disabilities and Substance Abuse Services. Richard joined DHHS after leading The Arc of North Carolina, an advocacy and service organization for people with intellectual and developmental disabilities, as its Executive Director for 24 years.

Jay Ludlam joined the NC Department of Health and Human Services (NC DHHS) as the Assistant Secretary for Medicaid Transformation in August 2017. Mr. Ludlam is an attorney and executive with extensive experience in Medicaid Managed Care, health care delivery reform and quality and care management innovations. He most recently served as Missouri's acting state Medicaid director and in May 2017, oversaw a managed care implementation affecting 750,000 lives. In his role at NC DHHS, he is helping to lead the state's transformation from a fee-for-service Medicaid program to a managed care program. Mr. Ludlam's prior work included serving as Deputy Director of Missouri HealthNet (the state's Medicaid agency); Director of Operations at Missouri Care; and Assistant Attorney General with the Missouri Attorney General's Office, Medicaid Fraud Control Unit.

Medicaid Managed Care Panel Discussion 11:00 am - 12:00 pm

During this panel discussion, representatives from five companies, with hopes of securing one of North Carolina's Medicaid managed care contracts, will make opening comments about their respective companies and the transition process and take questions from the audience.

Panel Moderator

Sam Clark NCHCFA

Sam Clark is the Vice President of Finance for the North Carolina Health Care Facilities Association (NCHCFA). Sam is primarily responsible for issues related to reimbursement of nursing facility services. In addition to acting as an information resource on matters pertaining to reimbursement, Sam is also the staff contact for the Health Insurance Portability and Accountability Act (HIPAA), Certificate of Need and Life Safety Code. He acts as staff liaison for the Association's Payment for Services Committee. Sam serves on the American Health Care Association's Reimbursement Committee and represents NC residents of the 2nd Congressional District on the Medical Care Advisory Committee.

Before joining NCHCFA in 2002, Sam was employed as a Senior Auditor with Myers and Stauffer PLLC. Sam holds Bachelor's and Master's degrees in Business Administration. He is licensed as a Certified Public Accountant in Kansas and North Carolina.

Lisa Farrell

North Carolina Provider Owned Plans

Lisa Farrell is the President and CEO of My Health by Health Providers, a new provider-owned and led health plan intending to bid to serve North Carolina's Medicaid Population. The plan is owned by twelve North Carolina not-for-profit health systems known as Provider-Led and Patient-Centered Care. Lisa has over 20 years of experience in integrated healthcare systems.

Lisa previously served as President of Presbyterian Network, Inc. and Presbyterian Health Plan where she was responsible for overseeing a provider-owned and led health plan serving more than 430,000 New Mexicans. During her time with Presbyterian, Lisa oversaw the implementation of high-profile programs, including Centennial Care, New Mexico's expanded managed Medicaid program. Presbyterian Health Plan is the only locally owned health plan that provides coverage under Centennial Care.

In previous roles, Lisa focused on leveraging Presbyterian's integrated system of hospitals, physicians and health plans to redesign traditional healthcare delivery. Her accomplishments during her tenure include the design and implementation of an innovative Emergency Department Navigation program resulting in a 20 percent reduction in Emergency Department visits and the development of serval provider-based care management programs. She also oversaw design and implementation of a successful patient transfer center that resulted in a 75 percent increase in referrals from tertiary facilities, keeping patients in New Mexico, closer to their families and at a more affordable cost.

Anita Bachmann

UnitedHealthcare/Optum

Anita Bachmann is the CEO of UnitedHealthcare Community Plan, North Carolina. With more than 30 years of experience in the industry, Anita is an accomplished Executive with extensive, progressive experience in healthcare administration, business operations, healthcare delivery systems, business development, technology, clinical strategy and regulatory/legislative affairs. Prior to this role, Anita served as Vice President of Business Development for UnitedHealthcare Community & State nationally and Market Leader in North Carolina. Anita has also served as Senior Vice President of Health Reform Strategy at Optum, where she was responsible for development of the reform strategy to support state government business growth, and Vice President of Health Care Reform at UnitedHealthcare. In recognition of her efforts, Anita was named an Outstanding Woman in Business by Triad Business Journal in 2017.

Mark Henry WellCare

Mark Henry is the Director of LTC and HCBS Contracting for WellCare Health Plans, Inc. Mark is a veteran of long term care and began his career as a nursing home administrator in Tennessee for National Health Care. He also managed home health, assisted living and outpatient rehab. He later moved to managed care, developing and managing a Long Term Services and Supports (LTSS) provider network for UnitedHealth Care in Tennessee and overseeing LTSS network development nationally for Humana. Mark is currently responsible for overseeing the development and management of LTSS provider networks for WellCare, as well as supporting business development in its responses to state Medicaid Requests For Proposals (RFP).

Ryan Rhoads Healthy Blue

Ryan Rhoads, LMHC, is the Director of Provider Network Management at Healthy Blue. Ryan completed his graduate studies at Indiana State University in Counseling Psychology and has dedicated the last 20 years working in the behavioral health field. Throughout his career he's administered clinical programs in both community and mental health settings. He is considered a subject matter expert and has proficiency in administering various clinical and community based programs such as intensive wrap around, therapeutic foster care, programs servicing individuals with Intellectual and developmental disabilities (IDD), substance abuse treatment, and outpatient services. Additionally, Ryan is fluent in leading case management programs, clinical implementations across the country, and provider network support and training within managed care settings. Throughout his tenure with Amerigroup and Healthy Blue, Ryan has passionately committed his time and efforts on serving individuals with IDD, those receiving Long Term Services and Supports, as well as behavioral health challenges, and in supporting providers servicing these highly specialized populations.

Rick Fredrickson

Centene / Carolina Complete Care

Rick Fredrickson serves as Senior Vice President, LTC Programs, for Centene Corporation, a Fortune 200 HealthCare Enterprise. Rick is engaged with Centene's strategic and developmental direction in serving people with disabilities and the elderly. With a career encompassing more than 30 years in developing and operating Long Term Care Managed Care Programs, his experience includes programs in several states.

"APPROVED": Understanding What Lenders and Investors Need to Know in Long Term Care Lending 1:15 pm – 2:30 pm

New payment models, revised survey and enforcement regulations, Medicare Advantage plans, changing demographics, Medicaid Managed Care – these are just a few of the foundational tides tugging at the long term care industry and potentially reshaping it. This session will focus on how lenders and investors who provide the financing for acquisitions, mergers, renovations and other capital long term care projects are eyeing the market. Representatives from the lender, investor and legal communities will share their thoughts on who's lending and who's not and why; the factors that attract lenders and investors to long term care projects; HUD financing; the "due diligence" portion of long term care financing including what borrowers must demonstrate and what lenders/investors need to know about a potential transaction; what lending products are currently on the market and available to long term care providers; and how some of today's industry trends, such as the new Patient Driven Payment Model, reduced average lengths of stay, managed care (Medicaid and otherwise) and the regulatory climate impact of the long term care lending forecast.

Panel Moderator

Ken Burgess

Ken Burgess is a healthcare attorney with the law firm of Poyner Spruill, LLP in Rocky Mount, NC where he heads the firm's Health Law Section. Ken has represented healthcare providers for 30 years. He previously served as the Senior Director of Legal Services and Facility Operations for the American Health Care Association and as general counsel to the Assisted Living Federation of America in Washington, DC. Ken is former president (twice) of the NC Society of Healthcare Attorneys; was the 2009 National Volunteer of the Year for the Jessie F. Richardson Foundation in Portland, OR; and a member of the NC Bar Association Health Law Council. He currently serves as Chair of a steering committee developing a public education campaign for end of life issues sponsored by the NC Bar Association and numerous private donors. Ken is a widely-recognized state and national lecturer and author on health law issues and has authored two authoritative books on long term care legal issues.

Panelists

Kevin Oakley Lancaster Pollard

Kevin Oakley is a vice president with Lancaster Pollard, a financial services firm based in Columbus, Ohio, that specializes in providing capital funding to the senior living and health care sectors. Kevin works from the firm's Atlanta office. In addition to underwriting tax-exempt bond offerings, Lancaster Pollard provides a complete range of funding alternatives through its Fannie Mae/FHA /GNMA/USDA-approved, mortgage lender subsidiary. He is the lead investment banker in charge of the firm's efforts in North Carolina and South Carolina, with responsibility for all details involved in the structuring, underwriting, and closing processes.

Kevin has diverse experience in advising organizations on capital funding strategies and improving access to the capital market; including optimal capital structure, developing debt polices and adopting asset liability management plans. His transactional experience includes bond underwriting, mergers and acquisitions, origination of government agency loans, development consulting, and financial advisory services. Prior to joining Lancaster Pollard, Kevin held multiple positions with the listed derivatives trading desk and North American interest rate swaps group at Deutsche Bank in New York City.

Berkeley Point Capital, LLC

Rob Ferguson is Assistant Vice President - Originations for Berkeley Point Capital. In this role, Rob's responsibilities include originating new loan opportunities in FHA-insured multifamily and healthcare sector. Rob also works to originate Fannie Mae, Freddie Mac, and CMBS loans for Berkeley Point Capital. Rob started with Berkeley Point Capital in 2016 and brings a diverse background of experience having spent the last 15 years in insurance analytics and Risk Management. Rob has originated and closed over \$150 million in his first two years in the business.

Prior to joining Berkeley Point Capital, Rob's primary roles were analyzing insurance risks for corporations of various sizes. As part of this role, Rob and his team implemented a variety of risk management strategies to protect and enhance the overall business and succession plan for owners across the Mid-Atlantic region.

Michael Daly

Pinnacle Financial Partners

Michael Daly is currently a Senior Vice President with Pinnacle Bank based in Raleigh, North Carolina, and manages the Pinnacle Healthcare and Corporate Banking Group for the Carolinas and Virginia, which is responsible for the development and maintenance of banking relationships with skilled nursing, assisted living, memory care, independent living facilities, life plan communities and hospitals.

Prior to joining Pinnacle Bank, formerly BNC Bank, Mr. Daly worked as a Senior Vice President for large National and Regional Banks focusing on senior housing in the Southeast. He entered the banking industry in 1998 and has over 20 years of experience lending to the healthcare industry.

Kevin Pascoe

National Health Investors, Inc.

Kevin Pascoe is the EVP of Investments at National Health Investors (NHI). Kevin joined NHI in June 2010. Kevin oversees NHI's portfolio of assets, business development, relationship management with existing tenants and conducts operations due diligence on NHI's new investment opportunities. He has over 13 years of healthcare real estate background including his experience with General Electric- Healthcare Financial Services (GE HFS) where he most recently served as a vice president. He moved up through the organization of GE HFS while working on various assignments including relationship management, deal restructuring, and special assets.



Session Description



Brian Corbett Poyner Spruill, LLP

Brian Corbett is a financial services' attorney with the law firm of Poyner Spruill, LLP in Raleigh, NC. Brian represents banks, financial institutions and other corporate clients in a wide array of commercial, corporate and real estate finance transactions, banking transactions and loan portfolio sales, purchases and servicing arrangements.

His experience includes representing lenders in commercial real estate loan transactions, including acquisition, development and construction financing of office, retail, hotel, industrial, healthcare, multi-family, mixed-use, low income housing tax credit and historic tax credit-based projects; representing lenders and borrowers in secured and unsecured commercial and industrial financing; representing lenders in cross-border financing, financing to healthcare, knowledge-based, venture and private equity backed companies and subordinated and mezzanine debt financings.

Define Your Value Through Data 2:45 pm - 3:45 pm

The number of seniors on a Managed Care stay has been steadily increasing over the past few years. What will this mean to you, our members? In an effort to get a glimpse into the future, the Association has invited a multi-facility West-Coast Provider who is heavily steeped in Managed Care, to share their insights.

Anthony Laflen will share the details of their eight year journey in becoming more transparent with their Health Systems and Managed Care payers. He will share their mistakes and triumphs as they learned to measure a SNF's impact to a health plan. Learn how they leveraged their results through data sharing to achieve collaborative agreements with major health systems and higher rates from payers.

This group understands that true episodic payments are on the horizon and have even proposed a single lump sum payment to their major Managed Care Payers. Learn the key areas of focus to managing your facility in an episodic payment world.

Learning Objectives

- 1. Utilize live data for LOS, functional outcomes, and readmissions to make informed decisions.
- 2. Identify how to negotiate with Managed Care payers to create strong partnerships.
- 3. Deploy best practices for tracking progress with the KPI's.

Anthony Laflen is the Director of Data Analytics at Marquis Companies and Consonus Healthcare. Anthony and his team aid customers in achieving the triple aim objective through analytical reporting on readmissions, functional improvement, quality measures, and even customer satisfaction. Anthony and his team of consultants guide customers in each category to help outperform the competition, capture more market share, and thrive. Anthony's consulting division targets the specific areas of quality improvement and helps

you apply best practice solutions. Analyzing data, looking for areas to improve, and implementing a systematic approach have helped Anthony and his team consistently improve Quality Measures, 5-Star Ratings, and even a facility's census.

Before coming to Consonus, Anthony owned his own advertising company, successfully negotiating with Comcast for the rights to manage all digital real estate content in the Pacific Northwest. Under his leadership as President and CEO of Capstone NW Real Estate, the organization grew to be one of the largest firms in Oregon and SW Washington.

An accomplished presenter, his topics include reducing readmissions, measuring market share, increasing census and revenues, visualizing complex data and understanding values-based marketing. He encourages audiences to think innovatively, and to see customer relationships as mutually beneficial partnerships.

Patient-Driven Payment Model 4:00 pm - 5:00 pm

In this nuts and bolts session, participants will learn about the conceptual shifts Patient-Driven Payment Model (PDPM) presents relative to the Resource Utilization Group IV Prospective Payment System (RUG IV PPS) and how PDPM fits into broader Medicare payment policy. Participants also will learn about PDPM case mix group classification, Variable Per Diems, new Minimum Data Set items likely needed, and new policies including the Interrupted Stay Policy and the Interim Payment Assessment.

Learning Objectives

- 1. Understand the key payment policy differences between RUGS and PDPM
- 2. Learn about PDPM payment methodology and structure
- 3. Understand new PPS policies included in PDPM which will impact payment
- 4. Learn about PDPM Interactions with Existing SNF Policies and Programs

Mike Cheek is the American Health Care Association's (AHCA) Senior Vice President for Reimbursement Policy. He oversees a small team responsible for Medicaid policy and payment research, managed care — Medicare and Medicaid, as well as alternative payment methods such as ACOs and bundled payment. Prior to joining AHCA, Mike was the Medicaid Director for the District of Columbia. He also was worked for a variety of associations including the National Association of Medicaid Directors and worked as a consultant with The Lewin Group and Avalere Health.

Thursday, September 27, 2018

The Complex World of Medicaid Eligibility and Reimbursement 9:00 am – 11:00 am

As part of the Medicaid Reimbursement Program, Hall Booth Smith (HBS) has prepared education to assist long term care facilities and rehab centers achieve financial success collecting over \$5 million dollars in revenue each year throughout the Southeast. The objectives of the trainings are to assist Operations, Executive Directors, Administrators, Admissions Directors, Social Workers, and Business Office staff to recognize Medicaid eligibility concerns from the point of admission as well as streamline and update Admission and Business Office Practices. Participants will learn to assist the residents and family members to secure Medicaid approval in a more timely manner, in turn improving the cash velocity for each facility.

HBS will provide detailed education on North Carolina Medicaid policy specifically related to Medicaid eligibility and discuss common Medicaid denials and penalties, and how to avoid them. Additionally, HBS will discuss alternatives to discharge for non-payment including Guardianship petitions. We will specifically talk through when a Guardian/Conservator petition should and should not be considered as possible resolution. The training will outline the different legal authorities of a Power of Attorney, Guardian of the Person, Guardian of the Estate, and a General Guardian. This training is perfect to assist all reimbursement staff to recognize trends, as well as train new employees, cross-train existing staff, or refresh and update seasoned partners. Either way, they will become a skilled resource for your residents and their families, as well as your company.



Becky Hewitt has worked in medical reimbursement for over 22 years, specifically in the long term care industry for 19 years. She has worked at the facility level as a Business Office Manager and at the operations level as a Regional Consultant to Admissions, Marketing, and Business Office staff. Currently, Becky is the Regional Long Term Care Reimbursement Specialist with Hall Booth Smith, P.C. Since joining the firm in 2011, she has assisted facilities throughout the southeast in recovering several million dollars each year in Medicaid revenue.

Provider Audits: Current Issues and Best Practices 11:15 am – 12:30 pm

This session will cover all of the current regulatory audits providers are facing today; ranging from cost report compliance, payroll-based journal, clinical audits, and post-payment intermediary reviews. We will address the financial impacts and institutional compliance risk factors as well as the best practices to consider when managing various third party audits and compliance reviews.

Andy Page is a Partner with DHG Healthcare – the National Healthcare Practice of Dixon Hughes Goodman, LLP. He has over 18 years of experience working exclusively within post-acute healthcare and senior living. Andy's industry-specific portfolio includes a wide range of advisory services related to third party reimbursement, regulatory compliance alternative payment models, post-acute health care reform, and operations advisory for skilled nursing facilities, assisted living providers, home health agencies, continuing care retirement communities, and hospice providers.

Andy is a regular speaker within the post-acute and long term care industry, presenting on numerous topics related to provider operations, reimbursement, regulatory compliance, and alternative payment models. Andy also contributes through capital specific to post-acute healthcare for DHG Healthcare's "Center for Industry Transformation".

CLOSING KEYNOTE! Disruptive Demographics: Implications for Long Term Care 2:00 pm – 4:00 pm

The Duke Endowment commissioned Dr. James H. Johnson, Jr., PhD, from the University of North Carolina at Chapel Hill, to develop a report on aging demographics and evidence-based programs in the Carolinas. In this program, Dr. Johnson will report on his findings, including highlighting the major demographic drivers that shaped the size, composition, and geographic distribution of the elderly population (65 and older) in the Carolinas at the end of the first decade of the new millennium; and identifying both promising initiatives and programmatic gaps where new and innovative efforts are needed to foster and facilitate successful aging in place.

Dr. Johnson is the William R. Kenan Jr. Distinguished Professor of Strategy and Entrepreneurship and Director of the Urban Investment Strategies Center at the Frank Hawkins Kenan Institute of Private Enterprise with UNC Chapel Hill. Dr. Johnson will highlight the major demographic drivers that shaped the size, composition, and geographic distribution of the elderly population (65 and older) in the Carolinas.

Our 2018 NCHCFA Financial Summit Exhibit Partners will be set-up right outside of the education room. Stop by and visit our Partners on Wednesday and Thursday, or set up a time to "meet-up" during one of the networking opportunities. More "meet-up" details will be included with the NCHCFA Financial Summit App instructions that attendees will receive closer to the event!

Showcase Schedule

Wednesday, September 26, 2018 Exhibit Hours 8:00 am – 4:30 pm Thursday, September 27, 2018 Exhibit Hours 8:00 am – 4:00 pm

2018 NCHCFA Financial Summit Exhibit Partners

Alliant Quality Allied Health Resources Blue Ridge Pharmacy **BOK Financial Brame Specialty Carolina Therapy Services** Carolina Complete Health **Consonus Healthcare** Dixon Hughes Goodman, LLP Hall Booth Smith, P.C. **Healthy Blue HPSI Purchasing Services, LLC** McMillan Pazdan Smith Architecture **Medipack Pharmacy Medline Industries** My Health By Health Providers **PGIM Real Estate Finance** Pharmacare Services. Inc. QMX Mobile Health **Senior Dental Care** Southern Pharmacy Services **TridentCareRX** UnitedHealth/Optum





The 2018 NCHCFA Financial Summit provides an excellent opportunity for long term care professionals to connect with peers in the profession. The meals, receptions and networking times offered during the summit will help you reenergize your commitment to quality care, learn about the latest products and services from our Financial Summit Exhibit Partners, and unwind.

NCHCFA has made sure to include breaks in between each presentation for networking time! Please be sure to use these opportunities to spend more quality time with our Financial Summit Exhibit Partners. Plan to visit our exhibitors displaying the latest in long term care products and services in the foyer near registration!

Along with providing valuable education, NCHCFA wants to help you enhance your professional career as you continue striving for excellence in long term care.

Tuesday, September 25, 2018

Networking Lunch

12:15 pm - 1:15 pm

Take a break and unwind with a delicious lunch! Join your friends and colleagues for more networking time!

Welcome Reception

5:00 pm - 6:15 pm

Kick-off the summit with our welcome reception! This reception will allow you to catch up with old friends and meet new ones. All attendees, exhibitors and sponsors are encouraged to attend and will enjoy complimentary beverages and light hor d'oeuvres.

Wednesday, September 26, 2018

Continental Breakfast

8:00 am - 9:00 am

Join your peers for a continental breakfast and spend time networking and meeting new people.

Networking Lunch

12:00 pm - 1:15 pm

Take a break and unwind with a delicious lunch! Join your friends and colleagues for more networking time!

Networking Reception

5:00 pm - 6:15 pm

This reception will allow you to catch up with old friends and meet new ones. All attendees, exhibitors and sponsors are encouraged to attend and will enjoy complimentary beverages and light hor d'oeuvres.

Thursday, September 27, 2018

Continental Breakfast

8:00 am - 9:00 am

Join your peers for a continental breakfast and spend time networking and meeting new people.

Networking Lunch

12:30 pm - 1:45 pm

Take a break and unwind with a delicious lunch! Join your friends and colleagues for more networking time!

Make the most of your meeting – download the NCHCFA 2018 Financial Summit Event App! Attendees will be given the app download instructions and log in prior to the summit!

With the NCHCFA Financial Summit Event App, You Can:

- Mark your personal calendar with events you want to attend.
- View the full event and session schedule.
- · See detailed information about speakers, exhibitors, and sponsors.
- Connect with fellow attendees
- View speaker slides/handouts
- Use interactive maps to find your way around
- Instructions for Wi-Fi access





GIVEAWAY CHALLENGE!

Download and log into the NCHCFA Financial Summit App, go to Giveaway Challenge and answer three questions there to enter for a chance to win a Kindle Fire HD 10 (32 GB) or one of two Amazon Echo Dots (2nd Generation). Winners will be chosen at random Thursday afternoon and do not need to be present to win.

Save The Date

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