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MTM 2016

2nd Annual Medication Therapy Management & Outcomes Summit

Enhance MTM Models to Improve Care Coordination and Star Ratings

SEPTEMBER 15-16, 2016 | PIER 5 HOTEL | BALTIMORE, MD

Distinguished Chairman

Jon C. Easter, Director, Center for Medication Optimization through Practice & Policy, Eshelman School of Pharmacy, University of North Carolina

Keynote Speaker

Anne Burns, Vice President, Professional Affairs, American Pharmacists Association

Multi-Stakeholder Perspectives

Troy Trygstad, Vice President, Pharmacy Programs, Community Care North Carolina

Shelly Spiro, Executive Director, Pharmacy HIT Collaborative

Nick Calla, Vice President, Industry Relations, Cardinal Health

Mark Loafman, M.D., MPH, Chair, Department, Family and Community Medicine, Cook County Health and Hospitals System

Lisa Hines, Director, Performance Measurement, Pharmacy Quality Alliance

Brian J. Litten, Esq, General Counsel, Chief of Strategy Officer & Chief Compliance Officer, Tabula Rasa HealthCare, Inc.

Key Takeaways and Insights from Industry Leaders:

- Capture timely and relevant patient information for actionable data and analyze intervention methods and patient health outcomes
- Identify various sources of health IT for streamlined delivery and documentation of MTM services
- Develop performance measures that effectively address MTM program quality measures
- Gain insights into collaborative, team-based healthcare models for the evolution to a pay-for-value healthcare system

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Media Partners:

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REGISTER AT WWW.CBINET.COM/MTM  800-817-8601
Join your peers from health plans, PBMs, managed care organizations, hospitals and pharmacies to maximize MTM models for improved quality measures and patient health outcomes.

Medication Therapy Management programs are the next generation approach to expanding health plan success. Now, more than ever, there is a need to optimize forward-thinking design, development and implementation of collaborative care models by improving patient outcomes within a coordinated system of stakeholders to prepare for the future of value-based healthcare. Learn best clinical and business practices to effectively design and deliver advanced MTM programs to achieve higher star ratings and cost savings.

Who You Will Meet:

You will benefit from attending this event if you are a Health Plan Provider, PBM, ACO, Hospital/ Health System, Specialty Pharmacy or senior-level director from the healthcare and pharmaceutical industries with responsibilities or involvement in the following areas:

- MTM
- Medication Adherence
- Quality Improvement
- Case Management
- Pharmacy Programs
- Pharmacy Operations
- Alternative Payment Models
- Disease Management
- Performance Measures
- Clinical and Wellness Services
- Star Ratings
- Health Information Technology
- Medical Systems
- Government / Non-Profit
- Bio / Pharma
- Bio / Pharma
- Pharmacy Programs
- Pharmacy Operations
- Alternative Payment Models
- Disease Management
- Performance Measures
- Clinical and Wellness Services
- Star Ratings
- Health Information Technology
- Medical Systems
- Government / Non-Profit
- Bio / Pharma
- Bio / Pharma

This meeting will also benefit MTM solutions providers, health IT developers and integrated health services providers.

“Who You Will Meet:

- Healthplans 20%
- Pharmacies 17%
- Bio / Pharma 15%
- Medical Systems 10%
- Government / Non-Profit 10%
- PBM 3%

2015 Delegate Breakdown

“As a seasoned veteran of Pharmacy Policy, including MTM, I know that this topic is evolving rapidly, and found CBI’s conference a most efficient way to learn from cutting edge speakers sharing policy considerations, innovative practices and professional challenges and opportunities.”

Enhance Value

“The meeting was the perfect size to allow for a great amount of networking and an excellent level of group discussion.”

Independent Health

“This conference was great for hearing ideas from colleagues and for building a more cross-functional network with clear experts in the field.”

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DAY ONE
THURSDAY, SEPTEMBER 15, 2016

7:30  Conference Registration & Continental Breakfast

8:30  Chairman’s Welcome & Opening Remarks
Jon C. Easter, Director, Center for Medication Optimization through Practice and Policy, Eshelman School of Pharmacy, University of North Carolina

Keynote Address:

8:45  Evolving Models that Promote Care Coordination and Better Health Outcomes in a Value-Based Healthcare Landscape
The healthcare system is rapidly moving to value-based care delivery models that aim to provide better care for patients, better health for communities and lower costs through healthcare system improvements. This session highlights trends that are driving transformation, core elements needed for success and innovations in optimizing medication use and outcomes.
• Describe trends in healthcare delivery driving value-based care models
• Recognize the need to integrate accountability and reform payment mechanisms to improve coordination and outcomes of patient care
• Leverage strategies to streamline workflow and measure quality of care
• Strengthen stakeholder access to information to optimize care coordination and patient engagement
• Describe innovative care coordination models that improve medication-related and patient health outcomes
Anne Burns, Vice President, Professional Affairs, American Pharmacists Association

9:30  Achieving Medication Effectiveness and Safety by Leveraging Quality Improvement Initiatives and Innovations
The Centers for Medicare & Medicaid Services have implemented multiple initiatives and innovations to prioritize medication safety and patient health outcomes. These efforts have successfully reduced adverse drug events and hospital readmissions by a significant percent, nation-wide. The investments by CMS optimize the way healthcare providers provide patients with comprehensive, high quality care by evaluating best practices and implementing cross-functional accountability in medication management. The effective transition toward a pay-for-value healthcare system is enabled by the collaborative networks founded by CMS and leveraged by community stakeholders. Maximize outcomes by combining evidence based medicine with quality improvement measures to evaluate clinical and economic best practices
• Ideas, solutions and opportunities for improving clinical and economic effects
• Execute Three-Part aim: better care, better outcomes, lower cost
• Quality improvement Organizations and Initiatives
• Hospital Engagement Networks (HEN)
• Transform Clinical Practice Innovation (TCPI)
• The art and science of combining evidence with principle
• Partnerships for Patients (PfP)
Co-presenters
Alister A. Rubenstein, Pharm.D., MPH, LCDR, USPHS, U.S. Department of Health and Human Services, Center for Clinical Standards and Quality, Quality Improvement and Innovation Group/DQIIMT, Center for Medicare and Medicaid Services
Anita Thomas, Pharm.D, U.S. Department of Health and Human Services, Quality Improvement and Innovation Group, Centers for Medicare & Medicaid Services
Q/A Moderator
Brian Isetts, Ph.D, B.C.P.S., F.A.Ph.A., Professor, Pharmaceutical Care & Health System, University of Minnesota College of Pharmacy

10:30  Networking and Refreshment Break

11:00  Value Based Care Delivery and Reimbursement in the Medical Neighborhood
Discuss the emerging role of outcomes-based reimbursement models for pharmaceutical manufactures along with the emergence, design, regulatory issues and why they rely on a functional Medical Neighborhood. Link best medical quality standards and measures to system sustainability for improved plan performance and star ratings by attending to innovation initiatives
• Examine best practices of extending the medical home model and its implementation to achieve cost-reductions and improve access
• Identify the leading role of the physician and how to introduce population management tools to strengthen case management and clinical support to reduce recipient reliance on hospital and institutional care delivery
• Capture value of timely and relevant patient information for actionable data to optimize feedback for ideal patient health outcomes and assess intervention methods and opportunities for improvement
• Discern local, regional and statewide partnership opportunities to cultivate the formation of networks for program efficiency and effectiveness
Troy Trygstad, Vice President of Pharmacy Programs, Community Care North Carolina
Implement Best MTMP Practices for Effective Program Delivery

The increasingly complex healthcare landscape has created an immediate need for mutual transparency of business practices and clinical operations. Identify best practices of Medicare Advantage plans for medication therapy management program design and implementation to drive automation and streamline healthcare business practices.

- Define enrollment methods and identify eligibility criteria
- Bolster current services and identify strategies for growth
- Integrate pharmacy services into traditional outpatient model

Moderator
Jon C. Easter, Director of Center for Medication Optimization through Practice & Policy, University of North Carolina

Panelist
Nick Calla, Vice President Industry Relations, Cardinal Health
Nickole H. Mitchell, PharmD., VP House Calls Pharmacy Services, Optum Care
Robert Nauman, Principle, BioPharma Advisors
Jeff Pohler, RPh, Director of Strategic Development, MTM Communication and Care Center, University of Florida

CMMI’s Enhanced MTM Model to Improve Outcomes While Reducing Net Medicare Expenditures

In September of 2015, CMS announced that, starting January 1, 2017, it will provide stand-alone Prescription Drug Plans with monetary incentives and regulatory flexibility to test targeted practices in MTM. This initiative will span over the course of 5 years in (5 regions) 11 states. Understand the background on “EMTM,” explore an EMTM case study, and highlight opportunities for expansion of the EMTM model.

- Promote transparency of intent and best practices to maximize evolution of a pay-for-value system and increase likelihood of future incentive bases initiatives
- Translate CMS expectations for patient experience quality measure
- Tactics to optimize medication use and therapeutic outcomes
- Leverage core competencies and facilitating team based care delivery models
- Realize benefits of regulatory flexibility and expansion incentives

Brian J. Litten, Esq, General Counsel, Chief of Strategy Officer & Chief Compliance Officer, Tabula Rasa HealthCare, Inc.

Advance Measurement Development and New Directions for MTMP Outcomes

The 2017 Final Call Letter released in April 2016 states that CMS looks forward to development and endorsement of outcomes-based MTM measures as potential companion measures to the Completion Rate for Comprehensive Medication Review (CMR) measure. Learn how to develop quality and performance measures for medication therapy management programs as well as new directions for reporting, outcomes and monitoring of enhanced MTM’s.

- What it takes to develop performance measures that effectively and efficiently address the quality of medication therapy management programs – challenges, expectations and management
- Describe the current CMR measure used in the Star Ratings and address cut point expectation to move beyond CMR limitations.
- Identify proposed monitoring measures for Enhanced MTM Model Encounter Data and specification plan and leverage SNOMED CT coding within measures to optimize data sources for meaningful use

Lisa Hines, Director of Performance Measurement, Pharmacy Quality Alliance

Navigate MTM from Co-located and Condition Specific to Fully Integrated and Comprehensive

Develop highly effective pharmacy models to implement streamlined systems that improve member health outcomes and person satisfaction. Learn about collaborative clinical best practices to effectively evolve from a pay-for-service to a value-based health system starting with the development of integrated care teams.

- Clinical pharmacy models for sustainable clinical pharmacy services
- Community based medical home models for integrated care teams
- Recognize pharmacist perspective and cultivate transparent objectives to improve implementation process
- Promote appropriate drug labeling and costs to reduce hospital readmissions
- Cultivate medication synchronization for person satisfaction

Mark Loafman, MD, MPH, Chair, Department of Family and Community Medicine, Cook County Health and Hospitals System
4:00 Reaching for the Stars: Increasing Medicare MTM CMR Completion Rates
The Medication Therapy Management (MTM) Comprehensive Medication Review (CMR) completion rate was recently added to the Medicare Star Part D measures. This process measure scores Medicare MTM programs to assess the impact that the pharmacist (or other healthcare professional) had with the patient to optimize medication therapy and reduce the risk of adverse effects. This session will summarize the data requirements and the results from the first year of reporting and describe methods MTM programs can use to increase the number of CMRs performed.
• Summarize data requirements for the Medicare Stars MTM CMR completion rate measure
• Describe methods Medicare Part D MTM programs can use to increase the number of CMRs

4:45 Prioritize Medication Safety and Effectiveness for Real Results
Investigate the instrumental role of the pharmacist in medication use to better understand how to minimize harm, reduce medical costs and manage the effective transition to a value-based healthcare system. Learn how to translate alternative payment models to actively include pharmacists in the conversion to team based healthcare.
• Respond to impact of appropriate drug costs for real person inclusion
• Investigate beneficiary incentives and alternative documentation methods
• Strengthen access to organized delivery services and bolster reporting
• Strengthen vendor involvement and maximize outcomes conversation
• Address beneficiary access and performance problems measure

5:30 Close of Day One

DAY TWO
FRIDAY, SEPTEMBER 16, 2016
7:30 Continental Breakfast
8:00 Chairman's Review of Day One
Jon C. Easter, Director, Center for Medication Optimization through Practice and Policy, Eshelman School of Pharmacy, University of North Carolina

8:15 Enhance Primary Care Medical Practice through Medication Optimization
Improving the safe, effective, and affordable use of medications is key to improving healthcare and lowering total health care costs. There is a clear need to integrate the pharmacist into the primary care medical team to facilitate the optimization of medications and improve care. Highlight research ongoing to identify, replicate, and scale best practices in the delivery of comprehensive medication management (CMM) in primary care. Join us to describe the role of implementation science in guiding research to advance CMM in value-based primary care delivery models.

Mary Roth McClurg, PharmD, MHS, Associate Director for Academic Innovation, Eshelman Institute for Innovation, University of North Carolina at Chapel Hill

9:00 Stay Ahead of the Curve — Establish a Forward-Thinking MTM Model for Sustainability
On April 27, 2016, the Department of Health and Human Services issued a Notice of Proposed Rule Making to bolster foundational aspects of the Medicare Access and CHIP Authorization Act of 2015 (MACRA) which will implement these changes through a lateral structure called the “Quality Payment Program” (QPP). Navigate the ACA value-based healthcare system to manage financial viability of MTM model implementation and explore advanced practices in service delivery to effect long-term change with a team oriented approach.
• Discuss strategies to transform current healthcare system design to cultivate a coordinated framework
• Understand dual system of Quality Payment Program—Merit Based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (AMPS)
• Describe the relationship of Medical Homes to the APM Quality Payment Program

Brian Isotts, Ph.D., B.C.P.S., F.A.Ph.A., Professor, Pharmaceutical Care & Health System, University of Minnesota College of Pharmacy

Networking, Wine and Cheese Reception
immediately following the final session on day one
10:30  Networking and Refreshment Break

11:00  Examine the Meaningful Use of Electronic Health Records and Leverage Role of the Pharmacist

Assure the meaningful use of standardized electronic health records (EHR) that supports safe, efficient and effective medication use and continuity of care. Understand how to provide access to the patient-care services of pharmacists with other members of the inter-professional patient-care team. Learn how to integrate the role of the pharmacist in providing patient-care services into National HIT framework.

- Identify a common clinical data set for health IT certification requirement for delivery and documentation leading to payment for MTM services
- Benchmark against the Pharmacy Practitioner Health IT Road map
- Optimize collaborative relationships among key stakeholders for streamlined definitions and workflow

Shely Spiro, Executive Director, Pharmacy HIT Collaborative

12:30  Close of Conference
Enhance MTM Models to Improve Care Coordination and Star Ratings

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