NEW KEY TOPICS
AT THE 2ND PAYER PARTNERSHIP FORUM:

- Develop and Assess Successful Value-Based Agreements With Payers That Impact Health Outcomes, Patient Experience and Net Savings
- Leverage Opportunities for Data Intersections and Personalized Medicine Methods That Incorporate Health System, Pharma, and Payer Resources
- Utilize Real-World Evidence (RWE) to Enhance Payer Decision-Making and Collaboration
- Develop Disruptive Tactics the Change Pharma’s Place in the Healthcare Ecosystem From Producer to Partner
- Cultivate a Value-Saving Task Force Through Pharma, Health System and Payer Unions
- Identify Proactive Strategies That Expand Patient Access in an Era of Increasing Cost Controls and Utilization Management
Dear Colleague,

Manufacturers understand that the transition to a patient-centric, value-oriented system does not merely rely on pharmaceutical access, but hinges on payers, providers, pharma, and other sectors of the healthcare ecosystem working collaboratively. Yet life science, payer, and health system professionals can be overwhelmed by the implications and requisites of the transition from fee-for-service healthcare to a value-oriented system. These leaders are charged with successfully collaborating with payers to realize optimal healthcare delivery approaches, navigating the regulatory and legal barriers to achieve the best methodology for reimbursement, and expanding patient access in an era of increasing cost controls and utilization management.

The 2nd Payer Partnership Forum breaks down barriers between siloed sectors of the U.S. healthcare ecosystem by providing an expert speaking faculty that includes pharma, payers, and health systems, to arm attendees with the knowledge and skills to navigate a legislative landscape that impedes progress toward optimal payment and delivery approaches; balance value, access and affordability; and ultimately initiate and manage patient-centric, value-oriented payer partnerships. Our agenda breaks away from basic topics and proves why the Payer Partnership Forum is the select event for life science, healthcare, and payer professionals by analyzing:

- Challenges and Solutions to Improving Care and Outcomes in Rare Disorders Through Multi-Sector Collaboration
- Best Practices in Value-Based Contracting to Ensure Success From Initiation to Execution and Evaluation
- Successful Value-Based Agreements With Payers That Impact Health Outcomes, Patient Experience and Net Savings
- Strategies to Advance the Common Political and Structural Ground to Act As One Integrated Industry Instead of Insurers, Providers, and Pharma

…and more!

Join an elite gathering of life science, health system, and payer decision-makers ready to learn, network and engage in best practices in aligning health systems, life science organizations and payers. To be an active and relevant player in this space, your company must be part of the discussion at the 2nd Payer Partnership Forum.

I look forward to welcoming you to Los Angeles this fall!

Sincerely,

Mercy Lister
Conference Production Director
ExL Events, a division of Questex, LLC

VENUE INFORMATION

Sofitel Los Angeles at Beverly Hills
8555 Beverly Boulevard
Los Angeles, CA 90048

To make reservations, guests can call 301-278-5444 and request the rate for “ExL’s November Meetings” in group reservations or email michelle.zavala@sofitel.com. The group rate is available until October 11, 2017. Please book your room early, as rooms available at this rate are limited.

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WHO SHOULD ATTEND

This conference is designed for representatives from life science organizations, health systems and payers with responsibilities in the following areas:

- Payer Strategy/Contracting/Access
- Market Access
- Patient Services and Pricing
- Value-Based Payment Initiatives
- Managed Care
- Account Management
- Patient Support and Assistance
- HEOR
- Pharmacy Programs
- Managed Markets
- Utilization Management

This conference is also of interest to:

- Data Management Solution Providers
- Population Health Management Organizations
- Rebate and Claims Processing Vendors
- Product Reimbursement/Market Access Solution Providers

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THURSDAY, NOVEMBER 2, 2017 // AGENDA DAY ONE

8:00 Registration and Continental Breakfast

8:45 Chairperson’s Opening Remarks
Joanne Chia, Pharm.D., Director, Medical Managed Care, SANOFI GENZYME

9:00 Apply Lessons Learned From IDNs Successful in the “Real World” to Re-Engineering for Value
Thomas Graf, M.D., Chief Medical Officer and Vice President, HORIZON BLUE CROSS BLUE SHIELD OF NEW JERSEY

9:45 PAYMENT REFORM TO DRIVE BETTER QUALITY AND PERFORMANCE IN US TEACHING HOSPITALS
Gregg Pane, MD, Senior Director, Health Innovation and Quality, ASSOCIATION OF AMERICAN MEDICAL COLLEGES

10:30 Networking Break

EXECUTIVE PAYER ASSEMBLY

11:00 Uncover Best Practices in Value-Based Contracting to Ensure Success From Initiation to Execution and Evaluation
- Define the essential elements that need to be in place for value-based contracts to be successful
- Consider what kind of analytics capabilities need to be present to track outcomes
- Examine supportive activities that will enhance the likelihood of successful value-based contracts
- Address issues of longer-term time frames when setting up the details for the contracts

Moderator:
Joanne Chia, Pharm.D., Director, Medical Managed Care, SANOFI GENZYME

Panelists:
Fred Brownfield, Director, Trade Relations, HUMANA
Thomas Graf, M.D., Chief Medical Officer and Vice President, HORIZON BLUE CROSS BLUE SHIELD OF NEW JERSEY
Linda Hines, Chief Executive Officer, VIRGINIA PREMIER HEALTH PLAN
John Lovelace, President, Government Programs and Individual Advantage, UPMC Health Plan
Michael Ruiz, Vice President, Provider Relations, UCARE

12:00 Networking Lunch

1:00 Use Real-World Evidence (RWE) to Enhance Payer Decision-Making and Collaboration
Deb Profant, Ph.D., Associate Director Managed Care, JAZZ PHARMACEUTICALS

1:45 Panel: Unify Payer-Pharma Objectives to Create One Succinct Market Access Plan
John Liu, Head, New Product Planning and Payer Marketing, TAKEDA
Joanne Chia, Pharm.D., Director, Medical Managed Care, SANOFI GENZYME

2:30 Uncover Best Practices for Innovative Contracting Between Pharma and Payers
Fred Brownfield, Director, Trade Relations, HUMANA

3:15 Networking Break

3:45 Case Study: Align Quality and Financial Incentives to Move From Volume to Value
John Lovelace, President, Government Programs, UPMC HEALTH PLAN

4:30 Develop and Assess Successful Value-Based Agreements With Payers That Impact Health Outcomes, Patient Experience and Net Savings
Thomas Malone, National Director, Payer Relations, ENDO PHARMACEUTICALS

5:15 Day One Concludes

“The Payer Partnership Forum was excellent! The agenda was well-organized with informative speakers.”
—Director, Managed Care, AMBER PHARMACY
HEALTHCARE EXECUTIVE THINK TANK // THURSDAY, NOVEMBER 2, 2017

10:15 Define Strategies to Advance the Common Political and Structural Ground to Act As One Integrated Industry Instead of Payers, Providers, and Pharma
- Unite pharma, payers, and healthcare providers to behave like integrated delivery systems through stronger value-based models
- Stabilize the insurance market and merge views on premium adequacy, subsidies and the inherent dangers of insurance products sold that don’t have consumer protections or comprehensive coverage through collaboration
- Develop strategies that address payers, pharma and providers existing in an industry that faces new types of competition from non-traditional forces

Jeffrey Gold, Senior Vice President and Special Counsel, HEALTH ASSOCIATION OF NEW YORK STATE

Panelists

GENZYME

SANOFI

Joanne Chia, Pharm.D., Chairperson’s Recap of Day One

Joanne Chia, Pharm.D., Director, Medical Managed Care, SANOFI

Consider Challenges and Solutions to Improving Care and Outcomes in Rare Disorders Through Multi-Sector Collaboration
- Understand current rare disorder challenges from a payer perspective
- Review emerging new — and expensive — treatment options for patients with rare and uncommon disorders
- Explore creative and innovative solutions that improve patient care outcomes and address increasing financial barriers

Peter Dehnel, M.D., Medical Director, CENTRACARE HEALTH SYSTEMS

AGENDA DAY TWO // THURSDAY, NOVEMBER 3, 2017

Continental Breakfast

Chairperson’s Recap of Day One
Joanne Chia, Pharm.D., Director, Medical Managed Care, SANOFI

Panelists

Daniel McCabe MD, CEO, ARIZONA CONNECTED CARE ACO

Michael Lombard, CEO, CORKERSTONE HOSPITAL SOUTHWEST LOUISIANA

George Hong, National Medical Director, DaVita Medical ACO, DAVITA MEDICAL GROUP

Michael Hunt, CEO, HEALTH PARTNERS, INC.

12:15 Luncheon

Improve Quality Through Health Plan, PBM and Pharmacy Collaborations
- Recognize importance of direct access to members in improving their engagement in healthcare
- Explain why health plans are looking to PBM to collaborate with network pharmacies to message members
- Understand how quality messages delivered by the pharmacy network can impact quality performance
- Review the case study of a health plan that worked with the PBM and pharmacy providers to improve quality

Ginny Yates, Pharm.D., Senior Director, State Pharmacy Performance, WELLCARE HEALTH PLANS, INC.

2:00 Cultivate a Value-Saving Task Force Through Pharma, Health Systems and Payer Unions
- Go beyond contracting with payers to ensure the right patient is getting the right product at the right time
- Discuss different compliant tactics to engage payers when frameworks are inconsistent, and reimbursement is difficult for specialty drugs

Sankar Mahadevan, Payer Strategy Lead, ACORDA THERAPEUTICS, INC.

Use Third-Party Solutions to Manage Cost While Enhancing Quality of Care
- Align health plans, manufacturers and health systems to expand market access through technological advancements
- Develop a profound patient population profile by combining data from health systems, payers and pharma to better treat and target high risk populations

If you are interested in leading this session, please contact Dor Peled at dpeled@exlevents.com.

Conference Concludes

“Great presentations with actionable insights and excellent takeaways”
—Regional Director, Managed Care, UNIVERSAL HEALTH SERVICES
REGISTRATION INFORMATION

REGISTRATION FEES
EARLY BIRD PRICING EXPIRES SEPTEMBER 22, 2017

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Establish a payer-industry partnership that balances value and affordability to expand market access, improve health outcomes, and decrease healthcare expenditures.

2ND PAYER PARTNERSHIP FORUM

CHAIRDED BY:
Joanne Chia, Pharm.D., Director, Medical Managed Care, SANOFI GENZYME
Fred Brownfield, Director, Pharma Innovative Contracting, HUMANA
Peter Dehnel, M.D., Medical Director, CENTRACARE HEALTH SYSTEMS
Thomas Graf, M.D., Chief Medical Officer and Vice President, BLUE CROSS BLUE SHIELD OF NEW JERSEY
Thomas Malone, National Director, Payer Relations, ENDO PHARMACTEICALS
Vidya Raman-Tangella, Head, Innovation Center, UNITEDHEALTH GROUP
Michael Ruiz, Vice President, Provider Relations, UCARE
Jeffrey Gold, Senior Vice President and Special Counsel, HEALTH ASSOCIATION OF NEW YORK STATE

November 2-3, 2017
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