

THE STATE OF HEALTHCARE:
What's Next
for Healthcare Policy

NEW YORK HEALTH PLAN ASSOCIATION
2017 ANNUAL CONFERENCE

HILTON GARDEN INN, TROY, NY
NOVEMBER 16, 2017
8AM–3:30PM





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Welcome

Welcome to the New York Health Plan Association's (HPA) 2017 Annual Conference. **"The State of Healthcare: What's Next for Healthcare Policy."**

As I write this letter, the fate of the ACA continues to remain unclear. What is clear is that changes will either lead to improvements and a stronger healthcare system or bring about instability and more uncertainty in the marketplace. Policymakers, providers and plans must be prepared to meet whatever the future brings.

Today's conference will provide an opportunity to hear and learn from industry and policy leaders about the current and future direction of healthcare policy both at the national and state level. Panel discussions will explore where we need to be heading in healthcare as well as the shifting landscape of health policy in New York State and the challenges and opportunities this creates for health plans and providers.

Over the years HPA's conferences have brought together state and national healthcare policy leaders to explore current healthcare topics of the day. We hope you find today's discussions useful, thought provoking and helpful to you and your organization. It is especially important during these uncertain times that we continue working together to find solutions to assure access to affordable quality healthcare for all New Yorkers. We encourage you to join in what we believe will be lively and informative conversations throughout the day.

Please take a moment during the conference breaks to visit our exhibitors and sponsors. We thank them for their generous support of this conference.

And thank you to all of the conference attendees for your continued interest and participation.

Sincerely,



Paul F. Macielak, Esq.
President and CEO



Paul F. Macielak
addressing the 2016
NYHPA Conference.

About the New York Health Plan Association



Who We Represent

The New York Health Plan Association (HPA) is an industry voice for healthcare plans across the state. HPA was established for the purpose of promoting the development of managed healthcare plans within New York State and is an advocate for quality healthcare for all New Yorkers.

Currently HPA has 29 member health plans. Our members provide healthcare coverage to New Yorkers enrolled through their employers, those enrolled through government sponsored programs such as Medicaid and Child Health Plus, Medicare enrollees, frail elderly and chronically disabled New Yorkers who receive coordinated services through a Managed Long Term Care (MLTC) plan, and individual New Yorkers and small businesses who shop for coverage on the New York State of Health, the State's official Marketplace, or directly from plans. HPA also has a number of Affiliate members that include dental and behavioral health plans, pharmaceutical companies and other companies that contract with health plans. HPA membership represents all types of health plans and includes for-profit and non-profit companies.

Our Members at Work

All of HPA's member health plans share a commitment to meeting the healthcare needs of New York State—providing quality healthcare services, serving residents healthy and sick, and communities rural and urban. HPA member plans also participate in innovative programs and research that promote the health and well-being of New York State residents.

Our Educational Foundation

The HPA also maintains an educational foundation that serves as a resource for businesses, labor, government and the media. Major foundation activities include development and ongoing operation of numerous collaboratives aimed at improving quality of care for all New Yorkers.

Our Members

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THE STATE OF HEALTHCARE:

What's Next for Healthcare Policy

NEW YORK HEALTH PLAN ASSOCIATION 2017 ANNUAL CONFERENCE AGENDA

8 am–9 am **Registration, Breakfast, Exhibitors**

9 am **Welcome**

Paul F. Macielak, Esq., President and CEO, New York Health Plan Association

Robert R. Hinckley, Chair, New York Health Plan Association Board of Directors; Executive Vice President, Strategy Communications/Chief Strategy Officer, Capital District Physicians' Health Plan

9:15 am **Keynote Address**

The Future of Healthcare Reform in Washington and Albany

Avik Roy, President of the Foundation for Research on Equal Opportunity

10:15 am **Break—Visit Exhibitors**

10:45 am **Panel Discussion**

Where We Need to Be Heading in Healthcare: Perspectives from Industry Leaders

Moderator: Cindy Goff, Vice President of Policy, EmblemHealth, New York

Michael S. Costa, Executive Vice President and Market Executive Director of Aetna's New York and New Jersey markets

Howard Gold, Executive Vice President and Chief Managed Care Business Development Officer, Northwell Health

Noon **Lunch and Exhibitors**

1 pm **Lunch Speaker**

Wall Street Perspectives on Managed Care

Edward S. Fishman, Managing Director, Cain Brothers & Company, LLC

1:45 pm **Panel Discussion**

The Shifting Landscape of Health Policy in New York State: Challenges and Opportunities

Moderator: Bill Hammond, Director of Health Policy, Empire Center for Public Policy

Paul Francis, Deputy Secretary for Health and Human Services, Office of the Governor

Peter Newell, Director, Health Insurance Project, United Hospital Fund

James H. McNeil, Partner, PwC Health Industries Advisory Practice

3 pm **Closing Remarks**

Paul F. Macielak, Esq., President and CEO, New York Health Plan Association

3:15 pm **Raffle Drawing**

3:30 pm **Adjourn**

Keynote Speaker



Avik Roy

President of the Foundation for
Research on Equal Opportunity

Avik Roy is a journalist, editor, researcher, policy advisor, political strategist, and investment analyst. He offers a thoughtful perspective on policy, including healthcare policy, and economics that combines strong backgrounds in finance and medicine and is widely praised by both the right and the left.

Avik Roy has also served as advisor on policy to three Republican presidential candidates. Avik Roy was a healthcare policy advisor to Mitt Romney's 2012 presidential campaign. He was the senior advisor to Rick Perry's 2016 campaign, for whom he was the lead author for major policy speeches and developed plans to address persistent black poverty, reform Wall Street, and combat radical Islamist terrorism. After Rick Perry withdrew from the race, Roy joined Marco Rubio as a policy advisor.

As Opinion Editor at *Forbes*, he writes on politics and policy, and manages *The Apothecary*, the influential *Forbes* blog on healthcare policy and entitlement reform. He is the author of *Transcending Obamacare: A Patient-Centered Plan for Near-Universal Coverage and Permanent Fiscal Solvency*, (later elaborated upon

in *The Case Against Obamacare*) and *How Medicaid Fails the Poor*. An early critic of the Affordable Care Act, Roy is a passionate believer in the conservative case for universal coverage, the idea that markets and competition can bring quality healthcare to every American.

Roy is Co-Founder and President of the Foundation for Research on Equal Opportunity, a think tank focused on expanding economic opportunity to those who least have it. He is also founder and Managing Partner of the startup healthcare investment advisory firm Roy Healthcare Research.

Avik Roy's research interests include the Affordable Care Act, universal coverage, entitlement reform, veteran's healthcare, international health systems and FDA policy. Roy was Senior Fellow at the Manhattan Institute for Policy Research from 2011 to 2016.

Roy was formerly an investment analyst and portfolio manager for Bain Capital and J.P. Morgan, and was Managing Partner at the hedge fund Mymensingh Partners.

Guest Speakers

Cindy Goff

Vice President of Policy EmblemHealth, New York

Cindy Goff has worked in health policy for nearly 30 years. Before moving to New York City to become the Vice President of Policy at EmblemHealth, a non-profit health plan serving more than three million members. Ms. Goff spent seven years in Washington, DC as VP of Product Policy for America's Health Insurance Plans (AHIP) the national trade association representing most health insurance companies in the country. There she directed public policy development and advocated to federal and state legislators and regulators on behalf of member plans participating in the individual, small group and supplemental health insurance markets. She has served as a consultant for the medical device and pharmaceutical industry, submitting procedure code requests, research and reimbursement strategies, and assuring compliance with complex Medicare regulations. Her early career included sixteen years as Director of Public Policy at Blue Cross Blue Shield of Minnesota, where she was responsible for developing policy and legislative positions and advocacy strategies for the health insurance industry during the early years of healthcare reform.

Ms. Goff has served on a variety of boards and health policy committees including the Northeast Business Group on Health, the New York Health Plan Association, the Minnesota Council of Health Plans, the Minnesota Chamber of Commerce, the Healthier Minnesota Community Clinic Fund and LifeScience Alley. Ms. Goff is a graduate of the University of Minnesota, a former Peace Corps volunteer, and an avid sports fan—Minnesota teams first.

Michael S. Costa

Executive Vice President and Market Executive Director of Aetna's New York and New Jersey markets

Mike Costa is Executive Vice President and Market Executive Director of Aetna's New York and New Jersey

markets. He is responsible for all business operations across New York and New Jersey, where Aetna serves 2.5 million members with a comprehensive range of health, wellness, dental, group and specialty products and services—from individuals to Fortune 500 companies.

Included under his oversight are all aspects of network development and innovation, clinical operations, product sales and customer satisfaction and retention, regulatory affairs and financial management.

Prior to being named Executive Director in January 2015, Mr. Costa was responsible for Aetna's Network Management and clinical transformation team, inclusive of value based contracts, and innovative provider-product partnership strategies.

Mr. Costa joined Aetna in 2008 from UnitedHealthcare where he led the New York State Health Insurance Plan (NYSHIP), servicing the State's active and retired employees and dependents nationwide. Before joining United Healthcare, he held various management roles for Oxford Health Plans of New York and New Jersey.

Mr. Costa holds a Bachelor of Science degree and a Master's in Healthcare Administration from the University of Scranton. He proudly volunteers on various local boards and spends time coaching youth sports.

Howard Gold

Executive Vice President, Chief Managed Care and Business Development Officer Northwell Health

Howard Gold oversees all business matters related to managed care and business development, including contractual relationships with third-party payers. Prior to joining the health system in 1995, he was vice president-vice provost for strategic planning, The New York Hospital-Cornell Medical Center.

From 1991-1993, Mr. Gold was executive director of Governor Mario Cuomo's Health Care Advisory Board. Prior

to that, he held several positions with the New York State Office of Mental Retardation and Development Disabilities, culminating in his serving as deputy commissioner, office of policy and planning.

Mr. Gold received his Bachelor of Arts degree from the State University of New York at Buffalo and his Master's degree from the New School for Social Research.

Edward S. Fishman

Managing Director Cain Brothers & Company, LLC

Ed Fishman co-leads Cain Brothers managed care advisory practice. He joined Cain Brothers in 1996, and has 30 years' experience advising both public and private companies in a variety of merger and acquisition, strategic advisory, and valuation transactions throughout the country. He has worked with close to half of the Blue Cross Blue Shield licensees, numerous Medicaid and Medicare managed care plans, as well as commercial plans including John Deere Health, Medical Mutual of Ohio, American Enterprise. His New York clients have included EmblemHealth, Lutheran Medical Center/Health Plus, Senior Health Partners, Hudson Health Plan, VNSNY, and Isabella Geriatric Center. He has also worked with hospital clients on both managed care and provider engagements, including the University of Michigan and the University of Toledo.

Prior to joining Cain Brothers, Mr. Fishman worked at one of the predecessor banks of J.P. Morgan Chase, where he directed the public finance healthcare investment banking activity, and served as financial advisor to the New York City Health and Hospitals Corporation.

Mr. Fishman is a Phi Beta Kappa graduate of Oberlin College. He received his MBA from Harvard Business School.

Bill Hammond

Director of Health Policy Empire Center for Public Policy

As the Empire Center's director of health policy, Bill Hammond tracks fast-moving developments in New York's massive healthcare industry, with a focus on how decisions made in Albany and Washington affect the wellbeing of patients, providers, taxpayers, and the state's economy.

Mr. Hammond has authored reports critiquing a proposed state-run single-payer healthcare system, documenting Albany's excessive reliance on health insurance taxes, analyzing the pros and cons of "block-granting" Medicaid, and examining the regulatory missteps surrounding the collapse of Health Republic Insurance.

Before joining the Empire Center in 2016, Mr. Hammond spent almost three decades in newspaper journalism, most recently as a columnist and editorial board member at the New York Daily News from 2005 to 2015.

Before joining The News, Mr. Hammond previously wrote for The New York Sun, The Daily Gazette of Schenectady and The Post-Star of Glens Falls.

Paul Francis

Deputy Secretary for Health and Human Services Office of the Governor

Paul Francis, who became the Deputy Secretary for Health and Human Services under Governor Andrew Cuomo in July 2015, has a varied background in both business and government. He previously held three other positions in New York State government. Mr. Francis served as the Director of the Budget under Governor Eliot Spitzer, Director of State Operations during Governor David Paterson's first legislative term, and Director of Agency Redesign for Governor Cuomo in 2011-12. Mr. Francis's business career includes serving as the Chief Financial Officer of both Ann Taylor Stores Corporation

and Priceline.com. Earlier in his career, Mr. Francis spent seven years as an investment banker at Merrill Lynch, and between his stints in New York State government, he was the COO of the Financial Products Division at Bloomberg LP. Mr. Francis began his career as a lawyer, working for Shearman & Sterling and Skadden, Arps, Slate, Meagher & Flom from 1980-1986.

After leaving the Cuomo administration in February 2013, Mr. Francis was a Distinguished Senior Fellow at NYU Law School, where he worked on a variety of public policy issues from outside of government. He served as Governor Cuomo's appointee on three boards—the New York State Health Foundation (as Chairman), the Gaming Facility Location Board, and the Utility Debt Securitization Authority (as Chairman). Mr. Francis's activities involving healthcare included serving on the boards of the New York e-Health Collaborative (the health information exchange of New York State), New Yorkers to Cure Paralysis, Greater New York Hospital Association Ventures, and as Chairman of Interfaith Medical Center in Brooklyn. Mr. Francis was also the Co-chairman of the Fourth Regional Plan of the Regional Plan Association during this time.

Peter Newell

Director, Health Insurance Project, United Hospital Fund

Peter Newell is the Director of the Health Insurance Project for the United Hospital Fund, a 136-year old nonprofit that works to build a more effective health care system for every New Yorker. Newell joined the Fund in 2007 after a long tenure as executive director of the New York State Assembly Committee on Insurance and staff director for Assemblymember Pete Grannis. During that time, he represented the Assembly Majority in negotiations on a series of major health care reforms, including the Community Rating/Open Enrollment law (1992), the Point of Service law (1995), the Managed Care Consumer Protection Act (1996), the Prompt Payment law (1998), and HCRA 2000, which created the Family Health Plus and Healthy NY programs. Earlier in his Assembly career, Mr. Newell directed the Assembly's Committee on Housing and worked to implement affordable housing programs and strengthen tenant protections.

Newell's work at the Fund focuses on public and private insurance markets, as well as health insurance coverage. He is the co-author of the Fund's Big Picture reports analyzing health plan enrollment and financial results, and beginning in 2010, authored a series of issue briefs exploring key issues in New York's implementation of the Affordable Care Act and the establishment of the health benefit exchange. Recent works include *As 2018 Open Enrollment Begins*, *Trump Administration Adds New Challenges for New York's Individual Market* and *Rewind: New York State Faces Familiar Issues and New Challenges in the "Repeal and Replace" Era*. A former reporter and editor for weekly newspapers in Manhattan, Newell holds a BA in English from the University of Notre Dame.

James H. McNeil

Partner, PwC Health Industries Advisory Practice

James is a Partner in PriceWaterhouse Coopers' (PwC's) Health Industries Advisory Practice. Mr. McNeil is the Overall Healthcare leader in New York responsible for health services clients and health industries talent development. He leads PwC's national cross functional Pharmacy Benefit Management (PBM) Service Team, assisting PBM's with technology, operational, compliance and integration needs. Mr. McNeil participates on PwC's Payer Deal's team that assists payer and provider clients with pre deal diligence and post deal integration. He also participates on PwC's Government Programs team, assisting health plans with planning and executing new strategies for Medicare, Medicaid and State/Federal Health Insurance Exchanges and is the lead Partner for five New York State healthcare clients, in that role, he is responsible for the quality all PwC services performed with these clients. Mr. McNeil has held numerous client service and Internal roles at PwC and maintains a network of professional relationships with deep experts in tax, assurance, information technology, actuarial sciences, internal audit, privacy and related technical matters. Mr. McNeil has also had the opportunity to provide client service in Europe, Puerto Rico and Asia during his career.

Mr. McNeil earned a Bachelor of Science in Communications at Rensselaer Polytechnic Institute.

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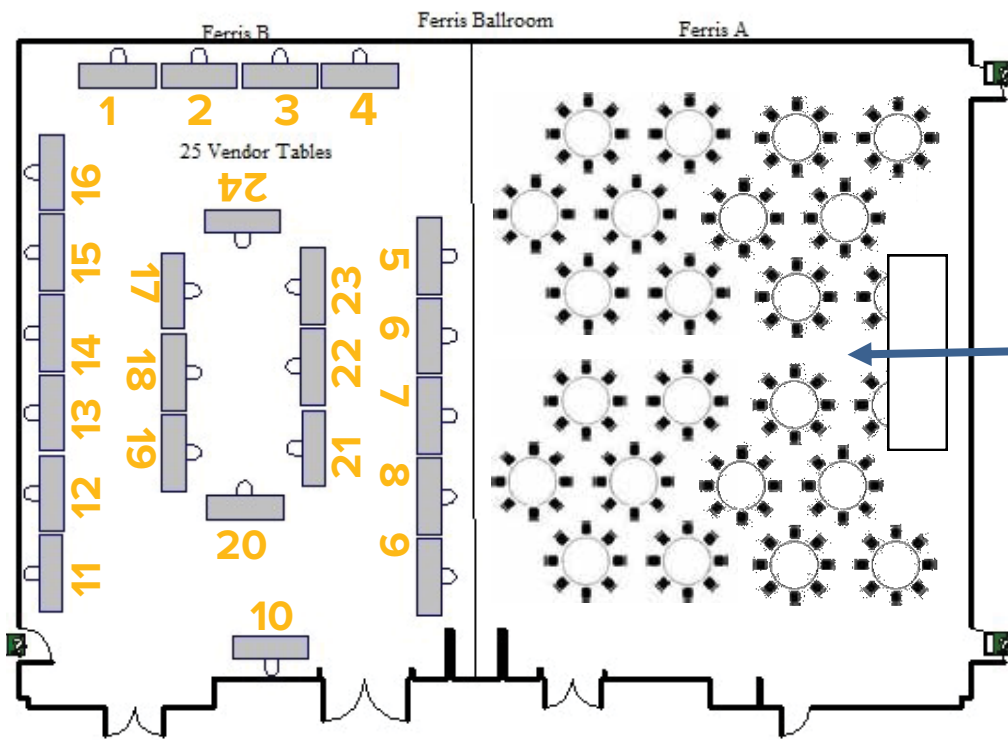
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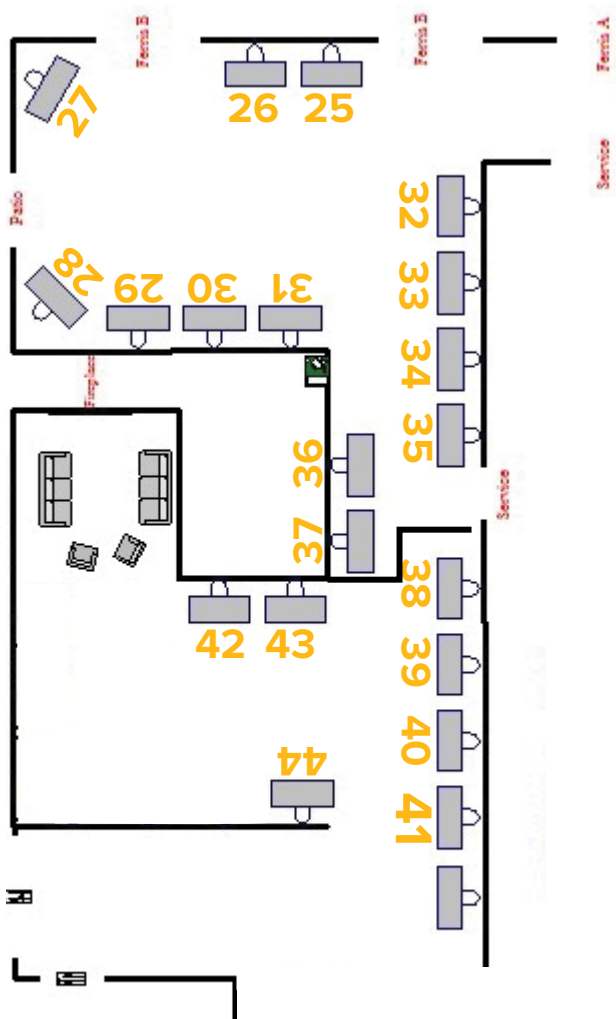
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LOCATION OF 11/15
PRE-CONFERENCE
DINNER AND 11/16
FULL CONFERENCE

Exhibitor Areas

Exhibitor tables are numbered
in gold.



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SUN PHARMA

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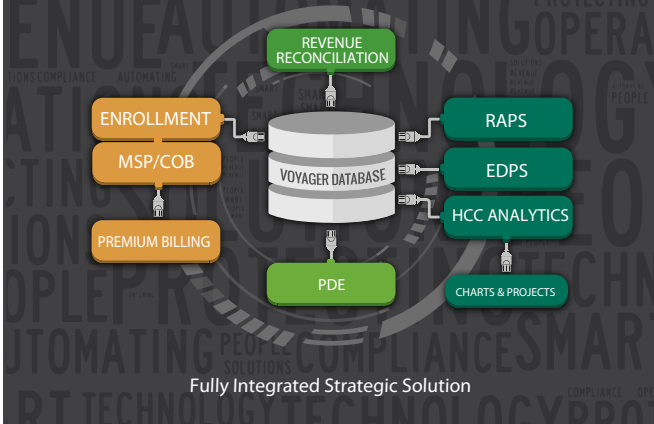
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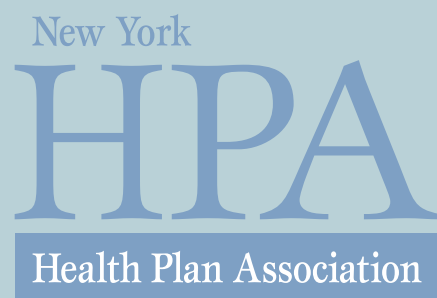
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