THE 19TH PRINCETON CONFERENCE
STATES’ ROLE IN HEALTH CARE: OPTIONS FOR IMPROVING ACCESS, QUALITY AND LOWERING THE COST OF CARE
MAY 22-24, 2012

TUESDAY, MAY 22, 2012
SESSION I: THE ECONOMIC HEALTH OF STATES
States are facing huge economic challenges. What are they and how are they coping? How large are the deficit they facing and what are they doing to pay the bills? What are the ramifications of some of these decisions and how can states address their long-term fiscal health? What will it be like for states if Accountable Care Act (ACA) is repealed or implemented? What about the 20+ million people who will not benefit from ACA?

7:00 P.M. PANEL DISCUSSION
Stuart Altman, Ph.D., Sol C. Chaikin Professor of National Health Policy
The Heller School for Social Policy and Management, Brandeis University

Alan Weil, J.D., Executive Director
National Academy for State Health Policy

WEDNESDAY, MAY 23, 2012
8:30 A.M. WELCOME
Stuart Altman, Ph.D., Sol C. Chaikin Professor of National Health Policy
The Heller School for Social Policy and Management, Brandeis University

SESSION II: MEDICAID: CURRENT AND FUTURE CHALLENGES
What are the Medicaid economic pressures? What are the pros and cons of limiting eligibility and services? Can Medicaid really cover more lives? How will limitations affect the overall short and long term fiscal health of the states? What roles do the uninsured and underinsured have? How are safety net providers facing the decisions that states are making? What are the key barriers to ensure appropriate quality services for Medicaid beneficiaries?

8:45 A.M. Moderator: Mary Ella Payne, Vice President, System Legislative Leadership Ascension Health

PANEL DISCUSSION
Andrew Allison, Ph.D., Director, Division of Medical Services State of Arkansas
Stephen Fitton, Medicaid Director State of Michigan
Kathleen Gifford, JD, Principal, Health Management Associates
Chad Westover, Vice President, State Sponsored Business Wellpoint, Inc.

SESSION III: MANAGING COSTS AND QUALITY OF CARE IN MASSACHUSETTS
With well over 95% of its population currently insured, how is Massachusetts addressing cost and quality? How are managed care and limited networks being used
to bring cost under control and how do these models maintain appropriate access and quality? What role does quality and cost transparency have in successful health care reform?

10:30 A.M. Moderator: Robert Mechanic, Executive Director, The Health Industry Forum
PANEL DISCUSSION;
Deborah Devaux, Senior Vice President of Strategic Services Blue Cross Blue Shield of Massachusetts
Thomas O’Brien, J.D., Assistant Attorney General, Health Care Division Massachusetts Attorney General’s Office
Ellen Zane, CEO Emeritus & Vice Chairman of the Board of Trustees Tufts Medical Center

12:00 P.M. LUNCH
SESSION IV: HIGH COST BENEFICIARIES: WHAT CAN STATES DO?
Who are the high cost beneficiaries and what acute and long-term care challenges do they present? How do issues in both acute and long-term care increase the cost and decrease the quality of health care for dual eligible patients? Care transitions and hospital-acquired conditions have been identified as adding significantly to the cost of care. What efforts have worked and what must occur to address the financial burden of those with complex health care needs?

1:00 P.M. Moderator: Murray N. Ross, Ph.D. Vice President, Kaiser Permanente
PANEL DISCUSSION
Cathy Schoen, Senior Vice President for Policy, Research, and Evaluation The Commonwealth Fund
Melanie Bella, Director, Medicare-Medicaid Coordination Office Centers for Medicare and Medicaid Services
Bruce Vladeck, Ph.D., Senior Advisor, Nexera, Inc.

SESSION V: STATES VARIED APPROACHES TO MANAGING COSTS
How are states managing costs in the current economic environment? What can be learned from Maryland’s All Payer rate setting system? What lessons can states learn from Vermont and the move toward a single payer system? What kind of challenges are states facing in moving toward one of these policy agendas?

3:00 P.M. Moderator: Robert Murray, President, Global Health Payment LLC
Former Executive Director, Maryland’s Hospital All Payer Rate Setting System
PANEL DISCUSSION
Joseph Antos, Ph.D., Wilson H. Taylor Scholar in Health Care and Retirement Policy American Enterprise Institute
Anya Rader Wallack, Ph.D., Chair, Green Mountain Care Board
Ann Monroe, President, Community Health Foundation of Western & Central New York Member, New York State Governor Andrew Cuomo’s Medicaid Redesign Team

WEDNESDAY, MAY 23, 2012 – DINNER PROGRAM
SESSION VI: A TWO TIERED HEALTH CARE SYSTEM: ARE WE THERE YET?
If you were a Medicaid beneficiary who required a medically necessary transplant, stent, medication, etc. how would the clinical outcome vary depending on where you live? Have the current economic pressures set the stage for solidifying a two-tier system? What considerations must be explored to mitigate this trend?

Uwe Reinhardt, Ph.D., James Madison Professor of Political Economy Professor of Economics and Public Affairs Princeton University
THURSDAY, MAY 24, 2012
SESSION VII: HOW ARE STATES PROGRESSING IN SETTING UP STATE-BASED EXCHANGES?

Why are some states opting out? What role can state exchanges have in providing affordable care to the uninsured and under insured? How can this role integrate with Medicaid and private insurance? How can States address eligibility integration and churning? For states that cannot have an exchange running by 2014, what are their options?

8:45 A.M. Moderator: Jay Himmelstein, M.D., Director, New England States Collaborative for Insurance Exchange Systems, University of Massachusetts Medical School
PANEL DISCUSSION
Jon Kingsdale, Ph.D., Managing Director, Wakely Consulting Group
Jennifer Kent, Principal, Health Management Associates
Stan Dorn, J.D., Senior Fellow Urban Institute

SESSION VIII: STATES’ BARRIERS TO INNOVATION

Which regulations present the most challenges and the likelihood that any of them will change? What impact do Medicaid waivers have on state level innovation? How can antitrust laws limited or protect the ability of states to devise solutions to address cost and quality? Many stakeholders would like to reengineer the health care workforce. What prevents redefining the division of labor in health care? What innovations do states want to implement?

10:30 A.M. Moderator: Karen Wolk Feinstein, Ph.D., President and CEO, The Jewish Healthcare Foundation
PANEL DISCUSSION
Michael Doonan, Ph.D., Assistant Professor, The Heller School for Social Policy and Management, Brandeis University
Dan Crippen, Ph.D., Executive Director, National Governors Association
Ann Torregrossa, J.D., Executive Director, Pennsylvania Health Funders Collaborative, Former Director of Pennsylvania Governor's Office of Health Care Reform
Sanne Magnan, M.D., Ph.D., President & CEO, Institute for Clinical Systems Improvement

12:15 P.M. CLOSING REMARKS
Stuart Altman, Ph.D., Sol C. Chaikin Professor of National Health Policy
The Heller School for Social Policy and Management, Brandeis University