



2026 National Medicare Advantage Congress

Implementing Successful Strategies that Focus on Member Enrollment, Revenue Enhancement, Medical Management, Compliance and Operations!

May 7 – 8, 2026 • Hilton San Diego Bayfront Hotel • San Diego, CA

Overview

Medicare Advantage is currently facing unprecedented challenges. The changes and cuts for Medicare Advantage have ushered in a much tougher climate for health plans and providers. The cuts render revenues challenging and margins tight. It's more important than ever in this era of pay for performance that medical management, operations, customer service and the financial side all work together to both advance the metrics needle for Star Ratings and provide actual value-based services and improved outcomes. How to run a tighter ship to protect margins, provide real outcomes, and increase your plan payments?

The *2026 National Medicare Advantage Congress* promises to set standards within the industry, and will prove to be a game changer for leaders, experts, as well as policymakers involved within Medicare Advantage. In addition to having a strong focus on the larger issues facing Medicare Advantage – such as quality improvement, member acquisition/retention, profitability enhancement, compliance, etc. – the conference will feature topics focused on Product Development, Innovation and Value-Based Healthcare.

In this premier event, we bring together leaders and innovators to share their insights and offer solutions on the abundant challenges facing Medicare Advantage. By attending the *2026 National Medicare Advantage Congress*, you will learn what others in your industry are doing to be better prepared for the challenges that lie ahead in 2026 and beyond.

Intended Audience

From Health Plans, Medicare Advantage Plans & Managed Care Organizations:

Chief Executive Officers, Chief Operating Officers, Chief Financial Officers, Chief Marketing Officers, Chief Medical Officers, Chief Strategy Officers, Chief Pharmacy Officers & Chief Information Officers

Also, Presidents, Vice Presidents, Directors & Managers of:

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|--------------------------|-----------------------|
| • Medicare | • Medicare Stars |
| • Star Ratings | • Medicare Advantage |
| • Senior Products | • Government Programs |
| • Quality Improvement | • Data & Analytics |
| • Marketing | • Value-Based Health |
| • Managed Care | • Sales |
| • Compliance | • Medical |
| • Care Management | • Product Development |
| • Operations | • Finance |
| • Strategy | • Quality |
| • Business Development | • Pharmacy |
| • Regulatory Affairs | • Disease Management |
| • Risk Management | • Community Health |
| • Utilization Management | • Network Management |

- Business Development

- Pharmacy

This program is also geared towards Hospitals & Health Systems, Vendors, Healthcare Consultants, Solution Providers, Pharmacy Benefit Managers, Disease Management Organizations, Third Party Administrators, Pharmaceutical & Medical Device Companies, IT & Business Process Outsourcing Companies and Enrollment Brokers

Preliminary Agenda

(Topics Subject to Change Based on Final Speaker Presentations)

Day One – Thursday, May 7, 2026

7:15 *Conference Registration & Morning Breakfast*

8:00 *Chairperson's Opening Remarks*

8:15 The Future of Medicare and Its Impact on Your Medicare Advantage Strategy

9:00 Medical Management, Operations and Utilization: How to Work Towards a Value-Based Model for Medicare Advantage Plans

9:45 *Networking Break & Refreshments*

10:15 What Medicare Advantage Plans Should Do to Achieve and Maximize Profitability in a Changing Market

11:00 Developing a Competitive Medicare Advantage Design and Pricing Structure that is Appealing to Current and Potential Members

11:45 Best Practices for Provider and Payer Relationship on Medicare Advantage

12:30 *Luncheon for All Attendees & Speakers*

1:30 Engaging Physicians: Innovative Processes and Communications for Medicare Advantage Plans

2:15 Panel Discussion: Expanding Value-Based Healthcare within Medicare Advantage

3:15 *Networking Break & Refreshments*

3:45 Developing a Robust and Comprehensive Compliance Program within Medicare Advantage to Achieve Optimal Plan Performance, Member Satisfaction and Profitability

4:30 Improving Health Outcomes with Data Analytics within Medicare Advantage

5:15 *End of Day One*

Day Two – Friday, May 8, 2026

7:15 *Networking Breakfast*

8:00 *Chairperson's Recap of Day One*

8:15 Regulatory Updates to Utilization Management and their Impact on MAOs

9:00 Reducing Costs and Readmission Rates with Holistic Approach to Medical Management for Medicare Advantage

9:45 *Networking Break & Refreshments*

10:15 Charge-Up Your Medicare Advantage Customer Service for Improved Service, Metrics and Retention

11:00 Effectively Integrating Clinical Management with Financial Management for Medicare Advantage

11:45 Developing Effective and Compliant Models of Care Such as Medical Home and Hospice within Medicare Advantage

12:30 *Conference Concludes*

Workshop Session

Thursday, May 7, 2026 • 5:30 p.m. – 7:30 p.m.

Monitoring & Auditing 101 for Medicare Advantage Plans: Staying out of the CMS Crosshairs