2026 Stars Performance & Quality Excellence Summit

Strategies to Protect Revenue and Improve Outcomes

June 11-12, 2026 * Loews Vanderbilt Hotel * Nashville, TN

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About the Conference

Medicare Advantage Star Ratings are in crisis. Average ratings dropped from 4.37 in 2022 to 3.92 in 2025, with only 40% of plans achieving four-star status in 2024—a decline that directly threatens billions in quality bonus payments. CMS policy changes have contributed to increasing appeals and even litigation as plans fight to maintain financial viability.

The stakes have never been higher. Plans with fewer than four stars face reduced reimbursements, marketing restrictions, increased regulatory scrutiny and reputational damage that drives member attrition.

Business Research Intelligence Network's Stars Performance & Quality Excellence Summit brings together Medicare Advantage leaders, quality directors, HEDIS managers, provider network leaders and Stars program managers to address the urgent challenge of improving ratings while managing regulatory upheaval. The summit tackles the practical realities facing quality teams: inadequate IT infrastructure for digital quality measurement, provider resistance to engagement initiatives, member experience scores that don't align with internal surveys, medication adherence challenges with fluctuating measure weights, and cutpoint forecasting in an unpredictable environment.

This is a focused, tactical summit for leaders who need to protect their organization's Star Ratings, preserve quality bonus payments and deliver measurable improvement in the next measurement year. Join us to learn from plans that have reversed rating declines, implemented successful turnaround strategies and maintained four-plus stars despite industry-wide challenges.

Agenda
Day One – Thursday, June 11, 2026

7:30am – 8:00am
Conference Registration & Networking Breakfast

8:00am – 8:15am
Chairperson's Opening Remarks

8:15am – 9:00am
Beyond the Health Plan: Engaging the Entire Care Ecosystem to Drive Medicare Stars Performance

Traditional Stars improvement strategies have often focused on health plan–led interventions such as scorecards, incentives, and member outreach. While these approaches remain important, leading organizations are recognizing that maximizing Medicare Stars performance requires engagement far beyond the health plan itself. This session will explore how health plans can move beyond traditional interventions to

activate every member touchpoint across the care ecosystem; including providers, pharmacies, agents, and internal teams; to drive improved health outcomes and Stars performance. Attendees will hear practical examples of how organizations are aligning stakeholders around shared goals, leveraging data and insights to drive action, and embedding quality into everyday interactions with members. Through real-world examples and lessons learned, this session will demonstrate how coordinated engagement across the care continuum can transform fragmented efforts into a unified strategy focused on helping members achieve their best possible health outcomes while strengthening Medicare Stars performance. Participants will learn how to:

1. Expand the Stars strategy beyond the health plan.
2. Align stakeholders around shared quality goals.
3. Maximize every member touchpoint.
4. Move beyond scorecards and incentives.
5. Create a unified, member-centered Stars strategy.

Elizabeth Strachota Benz
Senior Vice President Strategy and Government Relations
Network Health

John Willis
Vice President-Quality and Clinical Integration
Network Health

9:00am – 9:45am
Aligning Product Strategy and Star Ratings: Driving Medicare Advantage Success Through Collaboration
Medicare Advantage Stars performance isn't just a quality team responsibility—it's deeply connected to product strategy. Annual collaboration between Stars and Product teams ensures that benefit design, member experience, and operational priorities all support quality outcomes. When those teams align early in the planning cycle, we can build products that not only compete in the market but also drive better Star ratings and member satisfaction.

Lisa Franklin, MS
Director of Medicare Business, Product, and Marketing | Strategic Growth and Government Programs
CareFirst BlueCross BlueShield

Becca Adam
Manager of Stars and Quality
CareFirst BlueCross BlueShield

9:45am – 10:15am
Networking & Refreshments Break

10:15am – 11:00am
Health Care Service Corporation

11:00am – 11:45am

Earning Trust in the Age of AI: Authentic Interaction™ to Improve CAHPS, Star Ratings, and Member Experience in the Age of AI

As Artificial Intelligence rapidly transforms how healthcare organizations engage with members we must hold onto the value of human connection. Efficiency gains do not always translate into better human experience or higher Star Ratings. This interactive session explores the critical link between trust, communication, and measurable performance across CAHPS, HOS, and broader Stars metrics. Drawing on research and real-world examples, participants will examine how everyday interactions (whether digital or human) shape member perceptions, adherence, and outcomes. Using the Authentic Interaction™ framework *(Attend, Appreciate, Align, Adapt),* this session provides practical strategies to strengthen communication across key touchpoints, reduce variation in member experience, and improve performance in areas that directly impact Star Ratings and revenue. Participants will leave with a set of guiding questions to reframe how they enable human connection and operationalize trust as a driver of both experience and quality performance.

Learning Objectives:

Participants will be able to:

- Explain the relationship between trust, communication, and CAHPS/Star Ratings performance
- Identify high-impact communication behaviors that influence member experience and engagement
- Apply the Authentic Interaction™ framework to improve human connection and consistency across member touchpoints

Laura Cooley, PhD
Editor-In-Chief
The Journal of Patient Experience

11:45am – 12:30pm

From Social Risk to Star Ratings: Making Social Health Deliver Results

Star Ratings are under pressure. Good intentions won't move the needle. This session shows how social health can be hard-wired into Stars execution to improve CAHPS, HOS, and care gap performance. Learn how clear ownership, workflow integration, and targeted interventions turn social risk into measurable quality results, without adding programs, staff, or complexity.

Lynn Deguzman, Pharm.D.
Senior Director, Program Management
Social Health Impact Programs (SHIP)
Primary Care & SHIP Administrative Team
Permanente Medicine

12:30pm – 1:30pm
Networking Luncheon

1:30pm – 2:15pm

From Data Acquisition to Action: Building Clinical Data Infrastructure That Drives Stars Performance

Health plans can't improve what they can't measure, yet many struggle to acquire the right clinical data at the right time to support Stars initiatives. This session explores the critical but often overlooked work of building robust clinical data infrastructure - from identifying essential data sources across claims, EMR, labs and pharmacy systems to establishing cross-functional

partnerships that ensure data quality and timeliness. Learn strategies for working with providers, IT teams and clinical stakeholders to acquire complete and accurate data, translating raw data into actionable insights that inform clinical interventions, overcoming common barriers including data delays, incomplete records and system incompatibilities, and creating feedback loops that continuously improve data capture and quality. The session addresses real-world challenges including stakeholder resistance, resource constraints and competing priorities, offering practical approaches for building the data foundation that enables effective Stars performance management.

Chayla Beason
Director Clinical Data Strategy & Execution
Blue Cross Blue Shield of Michigan

2:15pm – 3:15pm
Panel: AI and Predictive Analytics—Real Applications Beyond the Hype
Artificial intelligence promises to revolutionize quality improvement, but distinguishing practical applications from vendor hype remains challenging. Panelists discuss where AI delivers measurable value in Stars programs today including natural language processing for automated medical record review and HEDIS abstraction, predictive models identifying members at risk for gaps in care or adverse events, and member engagement optimization through personalized outreach timing and channel selection. The panel will share implementation lessons, ROI calculations and honest assessments of where AI falls short of marketing claims.
Panelists:

Karen L. Fortuna, PhD, LICSW
Assistant Professor of Community and Family Medicine and of Health Policy and Clinical Practice
Geisel School of Medicine at Dartmouth
Research Health Science Specialist, Veterans Affairs
White River Junction Healthcare System

Lisa Franklin, MS
Director of Medicare Business, Product, and Marketing | Strategic Growth and Government Programs
CareFirst BlueCross BlueShield

3:15pm – 3:45pm
Networking & Refreshments Break

3:45pm – 4:30pm
Building a Culture of Quality: Moving Beyond the Stars Team
Organizations that sustain high Star Ratings don't treat quality improvement as a departmental function—they embed it throughout the enterprise. This session examines how to build organizational cultures where quality becomes everyone's responsibility. Learn strategies for engaging C-suite executives who focus on financial performance rather than quality metrics, breaking down silos between Stars teams, care management, provider network and member services departments, creating cross-functional accountability that survives leadership changes and reorganizations, and developing quality champions across the organization who drive improvement without formal authority.
Erika Wong

Director of Stars
Independence Blue Cross

4:30pm – 5:15pm
Malpractice Data: The Link Between Claims, Quality and Patient Satisfaction
This session will dive into the world of hospital malpractice claims and how it is inextricably linked to quality care and outcomes and patient satisfaction. Medical malpractice trends will be shared including top risk and quality claim allegations, contributing factors and risk implications. Real world case studies involving quality of care concerns will be shared for learning insights. Recommendations will be provided to help improve quality and patient satisfaction.

Arlene Lu, RN, BSN, JD, CPHRM
Lead Senior Risk Solutions Consultant
Medical Protective

5:15pm
End of Day One

Day Two – Friday, June 12, 2026

7:15am – 8:00am
Networking Breakfast

8:00am – 8:15am
Chairperson's Recap

8:15am – 9:00am
Health Equity and Stars: The New Frontier in Quality Measurement
CMS introduced the Excellent Health Outcomes for All index for 2027, making health equity measurement a direct Star Ratings component rather than just an aspirational goal. This session prepares plans for equity-focused quality measurement including data collection requirements for race, ethnicity, language preference and social determinants, disparity identification methodologies that highlight performance gaps across populations, and intervention strategies that improve outcomes for underserved members without neglecting overall performance. Organizations that address health equity proactively will gain competitive advantage as measures expand.

Nebeyou Abebe
SVP, Social Determinants of Health
Highmark Health

9:00am – 9:45am
Innovations in Hospital Throughput: Proven Strategies for Moving Patients Through the System
Hospital throughput directly impacts patient outcomes, staff satisfaction and financial performance. This session examines innovative strategies implemented at Stanford Health Care that delivered measurable improvements during years of near double-digit growth. The presentation explores virtual visit tracks that safely see low acuity ED patients through remote telehealth providers, AI-powered tools predicting capacity constraints and workflow innovations accelerating decision-making at critical transition points. Attendees will learn about converting in-

person fast track zones to virtual models that improve throughput without consuming additional physical space and implementing sustainable process changes that scale across high-volume academic medical centers.

Ryan Ribeira, MD, MPH
Assistant Professor
Medical Director, Adult Emergency Department
Department of Emergency Medicine, Stanford University School of Medicine
Stanford Medicine

9:45am – 10:15am
Networking & Refreshments Break

10:15am – 11:00am
Provider Engagement That Actually Works: Moving Beyond Scorecards and Incentives
Provider engagement consistently ranks as the top challenge in Star Ratings improvement, with physicians citing "Stars fatigue," administrative burden and misaligned incentives as reasons for resistance. This session moves past theoretical engagement models to examine what actually changes provider behavior. Explore why traditional report cards and quality bonuses often fail to drive action, communication strategies that resonate with busy physicians focused on patient care, workflow integration approaches that make quality measures easier to address than ignore, and how to build collaborative relationships rather than compliance-focused mandates.

Karen L. Fortuna, PhD, LICSW
Assistant Professor of Community and Family Medicine and of Health Policy and Clinical Practice
Geisel School of Medicine at Dartmouth
Research Health Science Specialist, Veterans Affairs
White River Junction Healthcare System

11:00am – 11:45am
Connect the Stars: Strategies to Engage Providers that improve Health Plan Performance. This session explores Mid-Atlantic Permanente Medical Group's strategies for creating provider buy-in at scale, delivers actionable data through accessible dashboards, embeds quality improvement into clinical workflows and measures engagement effectiveness beyond participation rates to actual performance improvement.

Stephen P. Winn, CPHQ
Managing Director, Government Programs
Permanente Medicine
Kaiser Permanente Regional Headquarters, Capitol Hill

11:45am – 12:30pm
Leadership and Retention Communication Strategies: Getting Buy-In When Resources Are Constrained
Quality improvement requires investment during a time when Medicare Advantage margins are compressed and C-suites face pressure to reduce costs. This session provides communication strategies for securing leadership support including translating quality metrics into financial language executives understand, building business cases that demonstrate ROI before, during and after implementation, navigating competing priorities when leadership wants both cost reduction

and quality improvement, and managing expectations about timelines when rating improvement takes multiple measurement years.

Jonathan Dayton, DrPH(c), MS, CNE, NREMT
CEO
Maryland Rural Health Association
Community Relations Specialist
Maryland Wellness

12:45pm – 2:45pm
Workshop
Cracking the Code on Medicare Advantage Stars: A Whole-System Approach
Improvement in Medicare Advantage star ratings requires a comprehensive view into clinical operations across multiple domains and care settings. Aligning this work across complex systems of care is necessary to deliver improvements that drive better scores from CMS, improved outcomes for patients, and sustainable workflows for care providers. Bring your current approach, your challenges, and your questions. This interactive workshop will focus on the key concepts and the leading practices that help to align work across quality, safety, patient experience in a whole-system approach that drives sustainable improvement while simplifying work for care teams.

Vikki Choate, DNP, MSN, RN, NEA-BC, CPHQ, CPPS
Principal | Quality, Safety and High Reliability
Huron Consulting Group

Guido Bergomi
Huron Consulting Group

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