

John D. Meerschaert

FSA, MAAA

Principal, Consulting Actuary



CURRENT RESPONSIBILITY

John is a principal and consulting actuary with the Milwaukee office of Milliman. He joined the firm in 1994.

GENERAL EXPERIENCE

John has a diverse background in health insurance and managed healthcare programs. He has advised state government agencies, health systems, insurance companies, HMOs, and other healthcare clients. His experience with commercial, Medicare, and Medicaid coverage from the perspective of insurers, providers, and government stakeholders allows him to provide unique insight on a wide range of issues.

PUBLIC PROGRAM CONSULTING EXPERIENCE

John has extensive experience working with public healthcare programs and is recognized as a Medicaid industry expert. He currently serves as the state Medicaid agency's actuary in Florida, Mississippi, New Hampshire, and South Carolina. He works with his clients to:

- Develop new Medicaid managed care programs
- Develop and certify Medicaid managed care rates and risk adjustment calculations
- Provide financial oversight of Medicaid managed care organizations
- Evaluate the impact of PPACA on state Medicaid programs, including detailed analysis of the 2014 expansion population
- Develop Medicaid budget projections and financial analysis of new initiatives
- Evaluate Medicaid managed care rates and provide negotiation support for Medicaid health plans and provider organizations
- Analyze the feasibility of starting a provider-owned Medicaid MCO
- Assess the feasibility of participating in CMS dual eligible integration opportunities

HEALTH SYSTEM CONSULTING EXPERIENCE

John works with health systems to analyze the financial risk of alternative contracting arrangements and provide other analytical support. He works with his clients to:

- Review proposed contract language and support payer negotiations
- Evaluate alternate contracting opportunities for the commercial and Medicare Advantage populations, including shared savings arrangements, capitation, quality incentive programs, bundled payments, and other structures
- Identify and model alternate contracting arrangements with state Medicaid agencies and Medicaid MCOs, including direct contracting opportunities, accountable care organization structures, and capitation arrangements
- Analyze the feasibility of starting a provider-owned health plan
- Evaluate the impact of PPACA on health systems
- Provide utilization and volume benchmarks for budgeting and planning

EDUCATION

- BBA, Actuarial Science, Risk Management and Quantitative Analysis, University of Wisconsin

PROFESSIONAL DESIGNATIONS

- Fellow, Society Actuaries
- Member, American Academy of Actuaries

PROFESSIONAL AFFILIATIONS

- American Academy of Actuaries Medicaid Workgroup

