

Jacques Knez Biography

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Since July 2016 Jacques Knez has served Highmark Inc., one of the largest health insurance companies in the nation, as the leader of Highmark Medicaid Markets.

In his current position as Senior Vice President of Medicaid Markets, Jacques is responsible for the performance and growth of Highmark's Medicaid business, which serves over 145,000 Medicaid members. He also serves as the Chairperson of Highmark Health Options board and is President of West Virginia Family Health.

Prior to joining Highmark Inc., Jacques held a number of leadership positions in managed care organizations. Most recently, he served as the Vice President of Strategic Initiatives at Aetna Medicaid where he led business expansions in new and existing markets as well as large-scale business and technology programs. Jacques also has extensive leadership experience in managed care at Schaller Anderson, where he

served as Vice President of Operations, and CIGNA where he held multiple roles in finance and operations.

Jacques was born in Vancouver, Canada, and raised in Nebraska and Arizona. He is a graduate of the University of Arizona (B.A., Economics, B.S.B.A. Finance) and The Wharton School of the University of Pennsylvania (M.B.A, Strategic Management).

Thought Leadership Topics:

Importance of Medicaid

- In Medicaid we work to ensure the health and care for those most vulnerable in our society - our fellow citizens with less socio-economic means and very challenging health conditions who need the care and support they deserve. As consequence, Medicaid plans are often on the leading edge of care management practices and social determinants of health.

Transformational Leadership

- Buzzwords like “re-imagining” and “bots” fill transformation change efforts, but these are just some of the tools of change. Achieving meaningful change requires patience and persistence. Patience is required to push through the disruption that comes with all change and persistence is required to drive through these challenges to achieve the vision for our constituents.

Interviews/Articles:

State to focus on patient outcomes, can now penalize insurers under Medicaid contract

<https://www.delawareonline.com/story/news/health/2018/01/30/state-focus-patient-outcomes-can-now-penalize-insurers-under-medicaid-contract/1074118001/>

"More care activity is not necessarily better care."

About Highmark Blue Cross Blue Shield

Highmark Inc., doing business as Highmark Blue Cross Blue Shield, serves approximately 2.5 million members through the company's health care benefits business and hundreds of thousands of additional members through the BlueCard® program. Highmark Blue Cross Blue Shield is the market leader in commercial market share, and through its affiliated Blue companies has strong Medicare Advantage market share as well. All of Highmark's Medicare Advantage plans in Pennsylvania received a Centers for Medicare & Medicaid Services quality rating of 4.5 out of 5.0 stars. Every year, Medicare evaluates plans based on a 5-star rating system. In western Pennsylvania, its unaided brand awareness, brand preference and overall brand rating are significantly higher than its closest competitor. Highmark Blue Cross Blue Shield employs more than 4,000 people in western, north central and northeastern Pennsylvania. Highmark Blue Cross Blue Shield is an independent licensee of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield companies. For more information, visit www.highmark.com.