



Medicare Advantage & Prescription Drug Plan

Spring Conference & Webcast
*“Collaborating, Communicating, and
Transforming”*



May 6, 2015
9:30 am – 4:30 pm EDT

CONFERENCE GUIDE

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Welcome

Welcome to the Centers for Medicare & Medicaid Services' **2015 Medicare Advantage & Prescription Drug Plan Spring Conference & Webcast.**

We, at the Center for Medicare, are excited to have you join us as we work to improve the Medicare Advantage and Prescription Drug programs for today and the future. We are committed to working with you to improve the quality of care provided to our beneficiaries and to expand the value of these programs for consumers.

As we all know, the Medicare Advantage and Prescription Drug Plan programs continue to grow and with that growth consumers are getting access to better care through more choice and greater competition. Through our collective efforts, seniors and people with disabilities, including the dual-eligible population, continue to have an extensive choice of plans and affordable premiums. We are proud of the accomplishments we have made over the past few years and are excited that the Medicare Advantage and the Prescription Drug programs' enrollment and quality continue to grow and improve. Medicare Advantage has reached record high enrollment each year since 2010, a trend that is continuing in 2015. At the same time, premiums have fallen and more than 90 percent of beneficiaries have access to a \$0 premium Medicare Advantage plan.

We have more work to do to build on this success and I know that you are committed to working with us so that Medicare beneficiaries continue to find value and understand their choice of plans and their associated benefits. This shared goal reflects Secretary Burwell's

Welcome, cont.

commitment to a Medicare program that delivers better care for lower cost and results in healthier people.

On January 26, 2015, Secretary Burwell [announced](#) a new initiative to move the Medicare program, and the health care system at large, toward paying providers based on the quality rather than the quantity of care they give patients. As a part of the Secretary's commitment, we are eager to work with you to move the Medicare Advantage and Part D programs even further toward value and quality.

We want to open a dialogue with you about the adoption of value-based payment models, driving improvements in the information available to beneficiaries about plan networks, including accuracy in member materials, such as provider directories and preferred pharmacies, and, we will continue to use the five-star rating system as a powerful tool in assessing plan performance and driving beneficiaries to select a high quality plan.

We have made tremendous progress in the past few years in improving plan sponsor compliance, performance, and accountability. These efforts include updating and revising our guidance, improving our monitoring projects, the Medicare C and D Star Rating system, our past performance review methodology, and our audit strategy. We have focused on being more transparent and using data to drive us in our oversight and compliance activities. We believe this has fostered increased trust and cooperation between CMS and the plan sponsor community.

In closing, thank you for attending the conference and sharing your expertise and feedback with us. Throughout the event and after you return to your organizations, please stay engaged with us with open communications, be proactive by collaborating with us on various initiatives, and we want you to help us to transform the future of the Medicare Advantage and Prescription Drug programs.



Sean Cavanaugh
Deputy Administrator and Director, Center for Medicare



Program Overview



CMS experts will be coming together to provide important new information for the Medicare Advantage and Prescription Drug Plan Sponsoring Organizations, CMS staff and other CMS partners, staff-level operations, mid-level management and senior executives regarding updates to existing Medicare policies, new policies, policy updates, and technology updates; provide enrollment and eligibility understanding for various Medicare beneficiaries; and how to fight fraud and abuse within the Medicare program.

This one-day event will be held on **Wednesday, May 6, 2015, from 9:30 am to 4:30 pm EDT** and will consist of sessions presented by subject matter expert speakers who will share information on the following topics:

- **2016 Policy and Technical Changes to the Drug Benefit Program**
- **2016 Call Letter Updates — Medicare Part C**
- **2016 Call Letter Updates — Medicare Part D**
- **QIP CCIP**
- **Network Management Module**
- **Update and Enrollment Information Session (Panel)**
- **Be Proactive: Support the Fight Against Fraud, Waste and Abuse (FWA)**



Agenda



8:00 am - 9:30 am	CHECK-IN/BADGING
9:30 am - 9:45 am	Welcome Stacey Plizga, PRI, Moderator
9:45 am - 10:00 am	Opening Remarks Sean Cavanaugh, MPP, Deputy Administrator and Director of the Center for Medicare, CMS
10:00 am - 10:30 am	2016 Policy and Technical Changes to the Drug Benefit Program LT. Marie E. Manteuffel, PharmD, MPH, Medicare Drug Benefit and C&D Data Group, Center for Medicare, CMS
10:30 am - 11:15 am	2016 Call Letter Updates — Medicare Part C Heather Kilbourne, JD, BA, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS
11:15 am - 12:00 pm	2016 Call Letter Updates — Medicare Part D Lucia R. H. Patrone, MA, Medicare Drug Benefit and C&D Data Group, Center for Medicare, CMS Andrea Bendewald, PharmD, Medicare Drug Benefit and C&D Data Group, Center for Medicare, CMS Elizabeth M. Flow-Delwiche, PhD, Medicare Drug Benefit and C&D Data Group, Center for Medicare, CMS
12:00 pm - 1:00 pm	LUNCH BREAK
1:00 pm - 1:30 pm	QIP CCIP Donna Williamson, RN, MSN, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS
1:30 pm - 2:15 pm	Network Management Module Gregory Buglio, MEd, BA, Medicare Drug Benefit and C&D Data Group, Center for Medicare, CMS Kady Flannery, PharmD, Medicare Parts C&D Oversight and Enforcement Group, Center for Medicare, CMS Nishamarie Sherry, JD, MPH, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS
2:15 pm - 2:30 pm	AFTERNOON BREAK
2:30 pm - 3:15 pm	Update and Enrollment Information Session (Panel) <ul style="list-style-type: none"> • Changes to Involuntary Disenrollment Requirements • Good Cause • Lawful Presence • Medicare and the Marketplace Jim Canavan, Medicare Enrollment & Appeals Group, Center for Medicare, CMS Cindy Falconi, MA, BA, Medicare Enrollment & Appeals Group, Center for Medicare, CMS Patty Helphenstine, Medicare Enrollment & Appeals Group, Center for Medicare, CMS
3:15 pm - 4:00 pm	Be Proactive: Support the Fight Against Fraud, Waste and Abuse (FWA) Rosalind Abankwah, PharmD, Investigations and Audits Group, Center for Program Integrity, CMS Beth Brady, MBA, BA, Investigations and Audits Group, Center for Program Integrity, CMS
4:00 pm - 4:25 pm	Open Q & A Session
4:25 pm - 4:30 pm	CLOSING REMARKS



Opening Remarks

Sean Cavanaugh, MPP, Deputy Administrator and Director of the Center for Medicare, CMS

2016 Policy and Technical Changes to the Drug Benefit Program

LT. Marie E. Manteuffel, PharmD, MPH, Senior Assistant Pharmacist, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

This session will provide participants with an understanding of the Part C and Part D regulation changes finalized in CMS-4159-F2, which published in the Federal Register on February 12, 2015. This will include a summary of the provisions included in the final rule that applies starting in Contract Year (CY) 2016.

2016 Call Letter Updates — Medicare Part C

Heather Kilbourne, JD, BA, Health Insurance Specialist, Division of Policy, Analysis, and Planning, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS

Each year, CMS releases operational and policy guidance for the Part C and Part D programs that Medicare Advantage Organizations (MAOs) and Part D sponsors need to take into consideration in preparing their bids through an annual Call Letter. During this session, we will provide an overview of key items announced in the CY 2016 Call Letter for the Part C program.

2016 Call Letter Updates — Medicare Part D

Lucia R.H. Patrone, MA, Health Insurance Specialist, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Andrea Bendewald, PharmD, Benefit Lead, Division of Formulary and Benefit Operations, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Elizabeth M. Flow-Delwiche, PhD, Social Science Research Analyst, Division of Consumer Assessment and Plan Performance, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Session Summaries, cont.

This session will provide participants with an overview of changes to be implemented for the Part D prescription drug benefit program. On April 6, 2015, CMS released the Final Call Letter for CY 2016 with updates intended to drive quality improvement in the care enrollees receive, as well as to strengthen beneficiary protections within the program. Among the issues to be discussed are changes to Star Ratings and beneficiary access to preferred cost-sharing pharmacies.

QIP/CCIP

Donna Williamson, RN, MSN, Health Insurance Specialist, Division of Policy, Analysis, and Planning, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS

During this session, we will provide an overview of the 2014 quality improvement project (QIP) and chronic care improvement program annual update findings along with lessons learned and best practices. We will also discuss new topic areas under consideration for the next three-year QIP cycle.

Network Management Module

Gregory Buglio, MEd, BA, Health Insurance Specialist/System Analyst, Division of Plan Data (HPMS), Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Kady Flannery, PharmD, Deputy Director, Division of Analysis, Policy and Strategy, Medicare Parts C & D Oversight and Enforcement Group, Center for Medicare, CMS

Nishamarie Sherry, JD, MPH, Acting Director, Division of Policy Analysis and Planning, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS

During this session, CMS will provide a technical introduction/walk-through of the new stand-alone Network Management Module (NMM), found in the Health Plan Management System (HPMS). This module is slated to go live at the end of July 2015 and will be used by organizations

and CMS to perform automated evaluations of various networks (such as Health Delivery Network tables, etc.)

Update and Enrollment Information Session (Panel)

Jim Canavan, Health Insurance Specialist, Division of Enrollment & Eligibility Policy, Medicare Enrollment & Appeals Group, Center for Medicare, CMS

Cindy Falconi, MA, BA, Health Insurance Specialist, Division of Enrollment & Eligibility Policy, Medicare Enrollment & Appeals Group, Center for Medicare, CMS

Patty Helphenstine, Director, Division of Enrollment & Eligibility Policy, Medicare Enrollment & Appeals Group, Center for Medicare, CMS

This session will provide participants with an understanding of the changes to enrollment and eligibility as recently codified by CMS for incarcerated beneficiaries as well as those beneficiaries who are not lawfully present in the United States and adjustments to the good cause process. The session will also focus on the key factors of the intersection of the enrollment policies of Medicare and the Marketplace.

Be Proactive: Support the Fight Against Fraud, Waste and Abuse (FWA)

Rosalind Abankwah, PharmD, Deputy Director, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS

Beth Brady, MBA, BA, Health Insurance Specialist, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS

When you receive notifications from CMS concerning FWA studies, are you incorporating the findings into your monitoring and auditing work plans? Using the information shared with you by CMS should be considered when testing and confirming your compliance with Medicare regulation and protecting your organization from future potential FWA.

During this presentation, we will discuss the high-risk prescribers and high-risk pharmacies assessment.

Speaker Bios

Rosalind Abankwah, PharmD

Deputy Director, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS

Rosalind Abankwah is Deputy Director in the Division of Plan Oversight and Accountability (DPOA) in CMS' Center for Program Integrity (CPI). Ms. Abankwah is responsible for detecting and preventing potential fraud, waste and abuse in the Medicare Parts C & D programs. She previously worked at a forensic psychiatric hospital in Maryland. Rosalind received her doctoral degree in pharmacy from the University of Maryland, School of Pharmacy.

Andrea Bendewald, PharmD

Benefit Lead, Division of Formulary and Benefit Operations, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Andrea Bendewald currently serves as the Benefit Lead for the Division of Formulary and Benefit Operations in the Medicare Drug Benefit and C & D Data Group. Andrea completed her Doctorate of Pharmacy from the University of Maryland School of Pharmacy. She went on to complete an Accredited Pharmacy Residency in Primary Care at the VA Maryland HealthCare System in Baltimore, Maryland. Following her

residency, she was hired as a clinical pharmacist by the Baltimore VA where her focus was disease state management. Prior to her arrival at CMS in 2010, Andrea served as the Director of the Outpatient Pharmacy Services Department of the Upper Chesapeake Medical Center in Bel Air, Maryland.

Beth Brady, MBA, BA

Health Insurance Specialist, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS

Beth Brady is a Health Insurance Specialist in the Division of Plan Oversight and Accountability in the Center for Program Integrity (CPI) in the Investigations and Audits Group. Beth is a liaison with law enforcement on issues related to NBI MEDIC operations and serves as the CPI lead for compliance and FWA audits in Medicare Part C and Part D. Beth has over 40 years of experience in healthcare auditing and FWA investigations and prior to joining CMS in 2011, worked at a number of Medicare contractors. She holds an MBA in health care administration from Adelphi University, NY, a bachelor's degree in accounting from Queens College, NY, and is presently pursuing a Master of Science degree in forensic studies at Stevenson University in Maryland. Beth is a Certified Fraud Examiner (CFE) and an Accredited Healthcare Fraud Investigator (AHFI).



Gregory Buglio, MEd, BA

Health Insurance Specialist/System Analyst, Division of Plan Data (HPMS), Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Gregory Buglio has been at CMS for almost eleven years and works as a Health Insurance Specialist/System Analyst for the Health Plan Management System (HPMS) in the Division of Plan Data/Medicare Drug Benefit and C & D Data Group. Greg's primary areas of expertise involve the contract management modules, including the online applications for MA, Part D, MMP, and SNPs. Additionally, Greg has worked on developing automated review systems for Health Services Delivery Network tables and Pharmacy Network tables. Most recently, Greg has developed the new Network Management Module. Greg also recently completed a three-month detail as the acting Deputy Division Director for the Division of Benefit Purchasing and Monitoring in the Medicare Drug Benefit and C & D Data Group. Greg holds a Bachelor of Humanities degree in secondary education — English, and a Master of Education degree in teaching and curriculum design, both from the Pennsylvania State University.

Jim Canavan

Health Insurance Specialist, Division of Enrollment & Eligibility Policy, Medicare Enrollment & Appeals Group, Center for Medicare, CMS

Speaker Bios, cont.



Jim is a Health Insurance Specialist for the Division of Enrollment & Eligibility Policy (DEEP) at CMS. Jim develops and maintains the documents that explain the rules for enrollment and disenrollment used by Medicare Advantage and Prescription Drug Plans across the country. Prior to coming to CMS, Jim worked for a health plan in upstate New York for fourteen years in many different capacities. He graduated from Canisius College in Buffalo, New York, with a degree in English literature. Yes, he is mentally correcting your grammar. While living in Buffalo, Jim studied voice acting. His voice was heard in diverse radio commercials. Jim and his girlfriend live in Maryland with two pugs who are as spoiled as he can make them.

Sean Cavanaugh, MPP

Deputy Administrator and Director of the Center for Medicare, CMS

Sean Cavanaugh is the Deputy Administrator and Director of the Center for Medicare at CMS. He is responsible for overseeing the regulation and payment of Medicare fee-for service providers, privately-administered Medicare health plans, and the Medicare prescription drug program. Medicare provides health coverage to 50 million elderly and disabled Americans, with an annual budget of over \$550 billion. Prior to assuming his current role, Sean was the Deputy Director for Programs and Policy in the Center for Medicare and Medicaid Innovation. In that capacity, he was responsible for overseeing the development and testing of new payment and

service delivery models, including accountable care organizations and medical homes. Previously, Mr. Cavanaugh was Director of Health Care Finance at the United Hospital Fund in New York City. He has also served in senior positions at Lutheran Healthcare (Brooklyn, NY), the New York City Mayor's Office of Health Insurance Access, and the Maryland Health Services Cost Review Commission. He started his career on Capitol Hill working for a member of the Ways and Means Health Subcommittee. He attended the University of Pennsylvania and the Johns Hopkins School of Hygiene and Public Health.

Cindy Falconi, MA, BA

Health Insurance Specialist, Division of Enrollment & Eligibility Policy, Medicare Enrollment & Appeals Group, Center for Medicare, CMS

Cindy Falconi is a Health Insurance Specialist for the Division of Enrollment & Eligibility Policy (DEEP) at CMS. Cindy develops policies related to enrollment for individuals who are incarcerated or unlawfully present. She also works on implementing a new Part B legislated special enrollment period for certain retirees of military service. Since coming to CMS in 2004, Cindy has worked in the Office of Communications managing the strategic development and implementation of various national education and outreach campaigns as well as partnership outreach and development for the Hispanic population. Prior to CMS, Cindy worked in Ecuador and Ann Arbor, Michigan, as a teacher of English to speakers of other languages (TESOL).

She is fluent in Spanish and has a Bachelor of Arts degree in sociology and cultural anthropology and an MA in TESOL. Cindy lives in Maryland with her husband, two kids and black cat, Lucky.

Kady Flannery, PharmD

Deputy Director, Division of Analysis, Policy and Strategy, Medicare Parts C & D Oversight and Enforcement Group, Center for Medicare, CMS

Kady Flannery is the Deputy Director of the Division of Analysis, Policy and Strategy, Medicare Parts C & D Oversight and Enforcement Group at CMS. She is primarily responsible for the overall development of a comprehensive audit strategy, objectives and measures for overseeing an effective compliance and oversight program for Medicare Advantage (MA) Organizations and Medicare Prescription Drug Plans as well as the development and implementation of policy related to audit, enforcement and compliance program effectiveness for the MA and Part D programs. Kady joined CMS in 2005 and served more than eight years in the Division of Formulary and Benefit Operations, Medicare Drug Benefit and C & D Data Group as a member of the Formulary Team, as the Benefit Team lead and lastly as the Division's Senior Technical Advisor. Before coming to CMS, Kady was a clinical pharmacist at the Baltimore VA Medical Center where she had earlier completed a clinical residency and fellowship program. She holds a Doctorate of Pharmacy from the University of Maryland, Baltimore.

CMS CONTINUING EDUCATION (CMSCE) DISCLOSURE STATEMENT: No one in a position to control the content of this activity has anything to disclose. The planners/developers of this activity have signed a disclosure statement indicating that he/she has no relevant financial interests. This activity was developed without commercial support.

Speaker Bios, cont.



Elizabeth M. Flow-Delwiche, PhD

Social Science Research Analyst, Division of Consumer Assessment and Plan Performance, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Elizabeth Flow-Delwiche is a Social Science Research Analyst in the Division of Consumer Assessment and Plan Performance in the Medicare Drug Benefit and C&D Data Group. She works on the Star Ratings team and is overseeing the development of the Emergency Department Experience of Care Surveys. While at CMS, she lead the design and development of the Quality Rating System for the health plans offered in the Marketplace. Before coming to CMS, Elizabeth held a math faculty position at a community college. Ms. Flow-Delwiche holds a Bachelor of Science in Civil and Environmental Engineering from the State University of New York at Buffalo, a Master of Arts in Teaching from Johns Hopkins University and a Master of Arts in Applied Sociology and a Doctorate in Public Policy from the University of Maryland, Baltimore County.

Ms. Flow-Delwiche has disclosed that she has a current association with the Community College of Baltimore County.

Patty Helphenstine

Director, Division of Enrollment & Eligibility Policy, Medicare Enrollment & Appeals Group, Center for Medicare, CMS

Patty Helphenstine is the Director of the Division of Enrollment & Eligibility Policy in the Center for

Medicare. Since her arrival, Ms. Helphenstine has led and implemented significant policies to the Part C and Part D program, including the Part D Income Related Monthly Adjustment Amount (IRMAA), good cause, and enrollment in the Medicare-Medicaid Financial Demonstration. Patty also oversees all enrollment policies related to the Part A and Part B programs, where she recently spearheaded efforts to expand Medicare Part B enrollment applications online and in Spanish as well as implement policies to recognize same-sex marriages when enrolling in Medicare. Prior to joining the Center for Medicare, she was responsible for strategic development and implementation of national education and outreach efforts in collaboration with various HHS agencies for initiatives such as Health Information Technology for Economic and Clinical Health (HITECH), Part D, annual open enrollment and the Low-Income Subsidy.

Heather Kilbourne, JD, BA

Health Insurance Specialist, Division of Policy, Analysis, and Planning, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS

Heather Kilbourne is a Health Insurance Specialist with the CMS Division of Policy, Analysis, and Planning in the Medicare Drug and Health Plan Contract Administration Group. She has over four years of experience working with Medicare Advantage policy, specializing in quality initiatives,

rewards and incentives programs, and various other policy issues. Heather has a bachelor's degree in English and economics from St. Mary's College of Maryland and a Juris Doctorate degree from American University Washington College of Law.

LT. Marie E. Manteuffel, PharmD, MPH

Senior Assistant Pharmacist, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Marie Manteuffel is the Senior Assistant Pharmacist in the Division of Part D Policy at CMS and a Lieutenant in the U.S. Public Health Service. In this role, she has assisted in the development and finalization of two Part C & D regulations, manual guidance, and Medicare Model Guidelines. LT. Manteuffel earned a Doctor of Pharmacy degree at the University of Wisconsin and a Master of Public Health degree in health policy & management from Emory University.

Lucia R.H. Patrone, MA

Health Insurance Specialist, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Lucia Patrone came to CMS in 2010 as a member of the Health Plan Management Systems team after a tenure in government relations with the International Council of Shopping Centers. In 2014, she joined the Division of Part D Policy and currently serves as the subject matter expert

Speaker Bios, cont.



Donna Williamson, RN, MSN

Health Insurance Specialist, Division of Policy, Analysis, and Planning, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS

Donna Williamson is a Health Insurance Specialist with the Division of Policy, Analysis, and Planning in the Medicare Drug and Health Plan Contract Administration Group. She currently works on Medicare Advantage quality initiatives and policy issues. She has worked at CMS for ten years and has led other quality initiatives. Prior to joining CMS, Donna worked as a registered nurse in various clinical settings. She also has a background in disease management and utilization review. Donna has both a bachelor's and a master's degree in nursing from the University of Maryland, Baltimore.

SPECIAL NOTE: For CMS' continuing education certification process, and because of the speaker disclosure, we must include the backup speakers bios below, although they are not listed on the agenda.

Craig Miner, RPh, JD

Deputy Director, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Craig Miner is the Deputy Director of the Division of Part D Policy in the Medicare Drug Benefit and C&D Data Group. He joined CMS in 2004 to work on drafting the proposed and final rules for the Medicare Prescription Drug Benefit. In his current position, Craig continues to serve as

on Part D marketing, the Plan Benefit Package and PACE and was the Part D coordinator for the 2016 Call Letter. Ms. Patrone graduated with honors with a Bachelor of Arts degree in political science and Spanish from American University in Washington DC. She also holds a Master of Arts degree in political science with a concentration in comparative politics from the same university.

Nishamarie Sherry, JD, MPH

Acting Director, Division of Policy Analysis and Planning, Medicare Drug & Health Plan Contract Administration Group, Center for Medicare, CMS

Nishamarie Sherry has been at CMS since 2012 with the Medicare Drug & Health Plan Contract Administration Group (MCAG) in the Division of Medicare Advantage Operations (DMAO), and is currently on detail in MCAG's Division of Policy Analysis and Planning (DPAP). Nisha's areas of work have included the oversight of Medicare Advantage plans and Special Needs plans, the Medicare Advantage Applications process and Appeals process and Change of Ownership transactions involving Medicare Advantage organizations. Nisha holds a Bachelor of Science in Biology from the University of Notre Dame, a Master's in Public Health from the Johns Hopkins Bloomberg School of Public Health, and a law degree from the University of Maryland, Francis King Carey School of Law.

a Part D subject matter expert and works on the development of Medicare Part D policy. Prior to joining CMS, Mr. Miner practiced pharmacy for nearly 15 years in both retail and mail service settings. His mail service experience included coordinating a drug utilization review department and assisting with the implementation of a drug utilization review program that targeted inappropriate drug use in the elderly. He has more than 20 years of pharmacy experience in hospital, retail, mail service and consulting practice. Mr. Miner received his Bachelor of Science in Pharmacy from Northeastern University and his Juris Doctor from Suffolk University Law School.

Sara Walters, MBA

Health Insurance Specialist/Lead Systems Analyst, Division of Plan Data (HPMS), Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Sara Walters is a Lead Systems Analyst in the Division of Plan Data within the Medicare Drug Benefit C & D Data Group. Ms. Walters serves as Lead Analyst in the Health Plan Management System (HPMS). Sara is a subject matter expert in the plan enrollment lifecycle and submission processes within the HPMS, especially the annual bid submission and review process and contract renewal/nonrenewal options. She has been with CMS since 2004. Ms. Walters graduated with a Masters of Business Administration degree and a specialization in Health Care Administration from the University of Baltimore. She also holds a Bachelor's degree from Virginia Tech.

On-site Participants



Housekeeping Rules

- All visitors must be in possession of a valid and current government issued form of photo identification, such as a driver's license, age of majority card, passport or visa; and will be subject to a thorough vehicular inspection.
- Conference attendees must restrict themselves to the first floor Central Building Lobby, Conference Room Center, and Lower Level Lobby/ Cafeteria in the Central Building.
PLEASE NOTE: VISITORS MUST BE ESCORTED BY A CMS EMPLOYEE OUTSIDE OF THE AREAS LISTED ABOVE.
- Food and beverages are not allowed in the Grand Auditorium, so please refrain from bringing items into these areas.
- Smoking is **not permitted** anywhere in the CMS complex. You must go offsite to smoke.
- Telephones and restrooms are located just outside the Pre-function Area on the left before you go back to the Central Building first floor lobby and also across the first floor lobby near the central building security desk.
- The cafeteria is located on the lower level of the Central Building. Lunch will begin at 12:00 pm. There will be an afternoon break at 2:15 pm. Please have your money ready for the cashier when you get in line.

Hotel and Travel Accommodations

Conference Venue

Centers for Medicare & Medicaid Services
Grand Auditorium
7500 Security Boulevard
Baltimore, MD 21244

Baltimore/Washington International Airport (BWI) serves as the most convenient airport in the Baltimore, MD area. For additional airport, ground transportation, car rentals, and shuttle information, please click [here](#).

For hotel accommodations, it is recommended that you lodge in [downtown Baltimore](#) or near the [Baltimore Washington International airport](#).

On-site Participants, cont.

Transportation

AMTRAK

Our city is served by AMTRAK which is located at Pennsylvania Station (Penn Station), five minutes north of the downtown area. The fast moving Metro liner has brought back the grand age of trains between Baltimore, Washington, DC, Philadelphia, and New York. The MARC commuter train operates weekdays along the Baltimore/Washington corridor with two lines that leave from Washington's Union Station and arrives in Baltimore at either Camden or Penn Station.

BWI Airport Shuttle and Taxi Service

Baltimore/Washington International Airport (BWI) is approximately 14 miles away — a 15-30 minute ride to CMS. The taxi fare from the airport vicinity to CMS can vary in price (approximately \$20-\$30). Also, there are various shuttle services available. You'll need to contact them directly to arrange for this service and confirm their current prices along with the departure/arrival schedules.

If a [taxi service](#) is required to and/or from the CMS Main Auditorium, it is recommended that you schedule your taxi service in advance for drop off and/or pick up. For helpful tips while visiting the Baltimore, MD area, please click [here](#).

Car Rental

The majority of car rental agencies listed below service BWI Airport:

- Alamo
- Avis*
- Budget
- Dollar*
- Enterprise*
- Hertz*
- National
- Thrifty*

*Provides vehicles with hand controls for drivers with special needs.

Directions

Southbound

From New York City: I-95 South to I-695 East (Baltimore Beltway) towards Glen Burnie. Follow I-695 to Exit 17 (Security Boulevard – West). Follow Security Boulevard to the end and CMS' main entrance will be located on your right.

From Central Pennsylvania: I-83 South to I-695 East (Baltimore Beltway) towards Glen Burnie. Follow I-695 to Exit 17 (Security Boulevard – West). Follow Security Boulevard to the end and CMS' main entrance will be located on your right.

Northbound

From Washington, DC: I-95 North to I-695 West (Baltimore Beltway) towards Towson. Follow I-695 to Exit 17 (Security Boulevard – West) toward Rolling Road. Follow Security Boulevard to the end and CMS' main entrance will be located on your right.

From BWI Airport: Baltimore and Washington Parkway (MD-295) to I-695 West (Baltimore Beltway) towards Towson to Exit 17 (Security Boulevard – West) toward Rolling Road. Follow Security Boulevard to the end and CMS' main entrance will be located on your right.

General Information

Check-in/Badging

Check-in is located in the main lobby at CMS for non-CMS participants, and will open Wednesday, May 6th, from 8:00 am until 9:30 am EDT. All Medicare Advantage & Prescription Drug Plan Spring Conference & Webcast attendees and sponsors are required to wear their badges at all times during the event. Badges are not transferable.



On-site Participants, cont.

Changes/Cancellations

If your organization's representative is unable to attend, please email us at CTEO@cms.hhs.gov immediately so that we can accommodate other participants on-site.

Accommodations for People with Special Needs*

- Assistive listening devices for the hearing impaired
- Captioning services
- Interpreters
- Foreign language services
- Special mobility service for the physically challenged
- Large print or Braille material
- Special access considerations
- Designated areas for wheelchairs and visually impaired

*May be available upon request by April 22, 2015.

Automated Teller Machine (ATM)

For your convenience, there is an ATM cash machine on the lower level next to the Credit Union.

Mobile Phone Use

Please be courteous to conference speakers and fellow attendees by silencing your mobile phones while attending sessions.

First Aid Information

Due to the large size of the facility, be prepared to identify the location of the emergency exits. A first aid station is available within CMS. We ask that conference attendees please contact event staff immediately should you require assistance.

Security/Emergency Information

Building security is available 24 hours a day, 365 days a year and is responsible for the overall protection of the CMS facility, property, visitors, and employees, as well as for providing service and assistance to all patrons.

Smoking Policy

CMS is a nonsmoking building. Smoking is prohibited in all areas.

Lunch Service Options at CMS

Order lunch from the CMS cafeteria from your mobile device or online and have it ready and waiting for you in the building! That's right — no need to spend money on gas — just beat the heat and relax at your seat as we prepare your lunch for you! The CMS cafeteria accepts all major credit cards.

PRE-ORDERS DEADLINE DATE: Tuesday, April 28th by 6:00 pm EDT.

On-site conference attendees can pre-order their lunch in advance in order to expedite the process. Pre-orders must be done online (see links below) no later than 6:00 pm EDT, Tuesday, April 28th.

You must create an account and password in order to place your order for pickup at 7500 Security Blvd.

- **Catering Made Easy:**
<https://cms.catertrax.com/shopcatgroup.asp?id=1&intOrderID=&intCustomerID=>
- **Simply to Go Catering:**
<https://cms.catertrax.com/shopcatgroup.asp?id=2&intOrderID=&intCustomerID=>

On-site Participants, cont.



CHECKLIST In preparation, we encourage you to take a few minutes to review the following:



ONLY PRE-AUTHORIZED EVENT ATTENDEES WILL BE ALLOWED ON-SITE: *Please arrive at CMS' Headquarters no later than one hour before the start of the event* in order ensure that all event attendees are able to clear the CMS security procedures and are comfortably prepared to attend the event.



Note: Please provide the CMS Security Guards at the front gate with your first and last name, valid and current photo ID and the nature of your visit (ex: CMS Medicare Advantage & Prescription Drug Plan Spring Conference & Webcast event.) Only registered/pre-authorized attendees on our list will be allowed to enter CMS.



Parking: Visitor parking is available and is indicated by white lines. Do not park between the yellow lines as there is the risk of your vehicle being ticketed and towed.



CMS Onsite Security Procedures: CMS security procedures comprise of a vehicle search, walkthrough scanning device, and X-ray scanning of personal items. All visitors must provide at least one form of a valid photo ID (ex: drivers license); and will be signed in by a member of the conference staff who will escort you to the CMS auditorium.



CMS Auditorium: All visitors will be briefed on the resources and amenities of CMS upon arrival and will have access to the CMS auditorium. The CMS Auditorium is equipped with a live video/audio feed of the webcast.



Lunch Service Options at CMS: **PRE-ORDERS DEADLINE DATE: Tuesday, April 28th by 6:00 pm EDT.** *You must create an account and password in order to place your order for pickup at 7500 Security Blvd.* **Catering Made Easy:** <https://cms.catertrax.com/shopcatgroup.asp?id=1&intOrderID=&intCustomerID=> or **Simply to Go Catering:** <https://cms.catertrax.com/shopcatgroup.asp?id=2&intOrderID=&intCustomerID=>.



Event Materials: In our efforts to "Go Green", we ask that you download and print event materials (i.e., agenda, presentations, conference guide, etc.) prior to your arrival to the event — click here: http://www.cms.gov/Outreach-and-Education/Training/CTEO/Upcoming_Current_Events.html.



Your Points of Contact: Should you encounter any difficulties during your travels to CMS Headquarters, please contact us via email at CTEO@cms.hhs.gov.

Webcast Participants



Viewing Tips for USTREAM

To learn more information regarding tips for the best viewing experience on "USTREAM," click this link: <https://ustream.zendesk.com/entries/22546906-Tips-for-Best-Viewing-Experience-on-Ustream>.

You will be able to obtain information and instructions on how to:

- Watch at a lower quality
- Update browser
- Install and update Adobe Flash
- Check internet and bandwidth
- Check computer resources
- Disable or enable hardware acceleration
- Check that USTREAM content is not blocked by an Ad-Blocker, Firewall, or being filtered on your local network
- Solve the most common problems
- View the event from a mobile device — most streams on USTREAM are available for viewing on iOS and Android devices

 **CHECKLIST** In preparation, we encourage you to take a few minutes to review the following:

- In order to join the live webcast, you must register for this event. Only confirmed registered participants will be able to access and join the live webcast.
- Click the following link to get more information regarding tips for the best viewing experience on USTREAM: <https://ustream.zendesk.com/entries/22546906-Tips-for-Best-Viewing-Experience-on-Ustream>.
- Report technical difficulties by contacting the CTEOTechSupport team via email at CTEOTechSupport@cms.hhs.gov during the webcast. If you need to utilize the call-in feature, the number will be provided to you at that time.

How to Join the Webcast

Please Note: In order to join the live webcast, you must register for this event. Only confirmed registered participants, will be able to access and join the live webcast.

The webcast will be held Wednesday, May 6, 2015, from 9:30 am – 4:30 pm EDT. **To facilitate easy access to the webcast, please log in between 9:00 am – 9:30 am EDT on May 6, 2015.** The webcast will begin at 9:30 am EDT.

All participants will be able to see and, using speakers and/or headphones, hear the webcast via their computer. Participants will not be able to participate verbally during the webcast.

Technical Support

CMS will provide a call-in feature for this event for use by those attendees who (1) cannot access sound from their computers, or (2) may experience technical difficulties. Attendees should not call the teleconference line unless it is necessary to hear the webcast.

Attendees should report **technical difficulties** by contacting the CTEOTechSupport Team via email at CTEOTechSupport@cms.hhs.gov during the webcast. If you need to utilize the call-in feature, the number will be provided to you at that time.

Continuing Education Activity Information & Instructions



Activity Description

The goal of this activity is to educate Medicare Advantage and Prescription Drug Plan Sponsoring Organizations, CMS staff and other CMS partners, staff-level operations, mid-level management and senior executives regarding updates to existing Medicare policies, new policies, policy updates, and technology updates; provide enrollment and eligibility understanding for various Medicare beneficiaries; and how to fight fraud and abuse within the Medicare program.

Target Audience

This activity is designed for Medicare Advantage and Prescription Drug Plan Sponsoring Organizations, CMS partners, Healthcare partners, and CMS staff-level operations, mid-level management and senior executives.

Learning Objectives

By the end of this activity, participants should be able to:

- Identify the Medicare Part C and D regulation changes finalized in CMS-4159-F2.
- Recognize key items announced in the CY 2016 Call Letter for the Medicare Part C and Part D programs.
- Identify the 2014 Quality Improvement Project (QIP) and Chronic Care Improvement Program (CCIP) annual findings.
- Select the 2014 QIP and CCIP best practices.
- Recognize and understand the Network Management Module (NMM), found in the Health Plan Management System.
- Identify and recognize enrollment and disenrollment requirements for incarcerated beneficiaries as well as those beneficiaries who are not lawfully present in the United States and adjustments to the good cause process.
- Describe quality improvements that strengthen beneficiary protection(s).

Participation

Registration for the in-person and/or webcast can be found at the CTEO website at http://www.cms.gov/Outreach-and-Education/Training/CTEO/Upcoming_Current_Events.html. All registered participants will receive

a confirmation based on their conference registration. The **Centers for Medicare & Medicaid Services Continuing Education (CMSCE) Instructions** for completing the requirements for continuing education credit and obtaining your certificate can be found on pages 19 -20.

Credits Available

CMS is evaluating this activity for continuing education units (CEU) and continuing medical education (CME) credit. The number of credits awarded will be calculated based on the actual learning time of the activity. Final CE information and instructions will be forwarded to participants after the activity is finished. Credit amount available for all registered participants will be sent via email prior to the start of the event.

Accreditation Statements

[Please click here for accreditation statements.](#)

Medicare Learning Network® (MLN) Learning Management System (LMS) Instructions

Participants will need to register or login, to access the post-assessment:

- **NEW USER** — Register to create a login and password for the Medicare Learning Network® (MLN).
- **EXISTING USER** — Use your login ID and password for courses or post-assessments you have taken previously on the Medicare Learning Network® (MLN).

To register (new user account):

1. Go to <http://go.cms.gov/MLNProducts> on the CMS website.
2. Under "Related Links" click on "Web-Based Training (WBT) Courses."
3. Click on **any** course title (not the icon next to the title) to open a Course Description Window.
4. At the top of the Course Description Window, click "Register."

Continuing Education Activity Information & Instructions, cont.



- You will be redirected to a page that instructs you to enter an email address and click "Submit."
- The screen returned will read: *No account was found matching your search criteria. Please click **here** to proceed with registration.* Click the word "Here" to continue with registration.
- After completing this registration, you will receive a confirmation email containing an activation link for the MLN LMS. Please note that the password you create must comply with the following requirements:
 - at least eight characters;
 - at least one number;
 - one lower case letter;
 - one upper case letter; and
 - one of the following symbols: ! @ \$ % & ?*No spaces are allowed, and you may not use any of your last six passwords as your new password. Your new password will be case sensitive and effective the next time you log into the site. For the first time, you may only log into the LMS using the link in the confirmation email.*
- Once your account is activated you may enter the LMS through the MLN LMS login page. Please add MLN@cms.hhs.gov to your address book to prevent MLN communication from going into your spam folder.

To login (existing user account):

- Go to <http://go.cms.gov/MLNProducts> on the CMS website.
- Under "Related Links" click on "Web-Based Training (WBT) Courses."
- Click on the course title or assessment title (not the icon next to the title) you are interested in to open a Course Description Window.
- At the top of the Course Description Window, click "Login."
- Enter your login ID and password. You will be re-directed to your home page.

Finding the Post-Assessment

Once you are logged into the LMS and are on your home page:

- Click on the "Web-Based Training Courses" link.
- At the top of the page on the right-hand side, you will see "Topic." Scroll through the topics and select "<Compliance Training, Education & Outreach (CTEO) >" and click "Search."
- Select "<2015 MA & PDP Spring Conference & Webcast >" in the left column.
- Scroll to the bottom of the page. Use the radio buttons to select "Certification of Completion" or "Certificate of Continuing Education."
- Click the "Take Course" button. The course will appear in a new pop-up window.

Viewing Your Transcript and Certificates

- Go to <http://go.cms.gov/MLNProducts> on the CMS website.
- Click on Web-Based Training Modules link at the bottom of the page.
- Click on the title of a course and click on "Login."
- Log in using your CMS LMS credentials.
- To access your certificate, click on "My Homepage" in the left hand menu.
- Click on "Transcript/Certificate."
- Click on the Certificate link next to the course title. The course evaluation will display. Once you complete the course evaluation, your certificate will display.

Hardware/Software Requirements

[Please click here for hardware and software requirements.](#)

CMS Privacy Policy

[Please click here for CMS' Privacy Policy.](#)

Help

For assistance, contact the CMSCE at CMSCE@cms.hhs.gov via email.

Additional Resources



CTEO Website

To learn more about this event and future events, please visit our website:

http://cms.gov/Outreach-and-Education/Training/CTEO/Compliance_Training_Education_and_Outreach.html.

Event Materials

Event materials can be found on our Outreach and Education web page at: http://www.cms.gov/Outreach-and-Education/Training/CTEO/Upcoming_Current_Events.html.

Post Event Online Survey

Please complete your *Medicare Advantage & Prescription Drug Plan Spring Conference & Webcast* evaluation survey online at: https://www.surveymonkey.com/s/2015_MA_and_PDP_Spring_Conference_and_Webcast_Participant_Survey_FINAL.

The survey will be available until 9:00 pm EDT, Monday, May 11, 2015.

Technical Support

Report technical difficulties by contacting the CTEOTechSupport Team via email at CTEOTechSupport@cms.hhs.gov during the webcast.

Special Thanks to...

- CM Leadership
- CMS Speakers (CM & CPI)
- OC – CMS Division of Design Services
- OOM – CMS Logistical & Technical Team
- CMS' Continuing Education (CMSCE) Team
- CTEO Team – CM/BOS2 Staff & PRI (CTEO Contractor Support)





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