



Programs of All-Inclusive Care for the Elderly

CONFERENCE & WEBCAST

July 7, 2016

9:30am - 4:30pm EDT

July 8, 2016

9:30am - 12:00pm EDT

CMS Auditorium

*“Supporting Collaboration &
Communication for Better Care Delivery”*



CONFERENCE GUIDE



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Program Overview



CMS experts and sponsors will be coming together to provide important new information on the 2016 Programs for All Inclusive Care of the Elderly (PACE) Conference & Webcast held on site at CMS in Baltimore, Maryland. This event is designed for staff-level operations, mid-level management, and senior executives as CMS provides important new information for PACE organizations and industry stakeholders.

This event will be held on **July 7, 2016** from **9:30 am to 4:30 pm EDT** and **July 8, 2016** from **9:30 am to 12:00 pm**. The PACE conference will consist of sessions presented by subject matter expert speakers who will share information on the following topics:

Day 1

- **QUALITY REPORTING - TODAY AND TOMORROW (PANEL)**
- **PACE - A VISION FOR THE FUTURE (PANEL)**
- **BUILDING A RELATIONSHIP WITH YOUR ACCOUNT MANAGER (PANEL)**
- **STATE ROLES AND RESPONSIBILITIES RELATED TO PACE ELIGIBILITY**
- **CHANGE OF OWNERSHIP (CHOW)**
- **FINANCIAL CONSIDERATIONS**
- **PACE INNOVATION ACT (UPDATE)**

Day 2

- **APPLICATIONS AND WAIVERS**
- **OVERSIGHT AND AUDITS - 2016 AND BEYOND (PANEL)**



Agenda July 7, 2016



8:00 am - 9:30am

CHECK-IN/BADGING

9:30 am - 9:40 am

WELCOME AND INTRODUCTIONS

Stacey Plizga, PRI

9:40 am - 9:45 am

OPENING REMARKS

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

9:45 am - 10:15 am

QUALITY REPORTING - TODAY AND TOMORROW (PANEL)

Tamika Gladney, MSN, Division of Medicare Advantage Operations, MCAG, CMS

Daniel Deisroth, RN, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Gretchen Kane, MS, Division of Medicare Health Plan Operations, Consortium for Medicare Health Plan Operations, CMS

Lynne Clark, BSN, RN, WCC, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

10:15 am - 11:00 am

PACE - A VISION FOR THE FUTURE (PANEL)

Tamika Gladney, MSN, Division of Medicare Advantage Operations, MCAG, CMS

Mark Stewart, MPH, Econometrica, Inc.

Kristie McNealy, MD, Econometrica, Inc.

11:00 am - 11:45 am

BUILDING A RELATIONSHIP WITH YOUR ACCOUNT MANAGER (PANEL)

CDR Amy Hesselgesser, OTR, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Annemarie Anderson, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

Maryann Ligotti, RN, BA, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

11:45 am - 12:30 pm

LUNCH BREAK

12:30 pm - 1:15 pm

STATE ROLES AND RESPONSIBILITIES RELATED TO PACE ELIGIBILITY

Cindy Proper, Division of Health Homes, PACE and Coordination of Benefits (COB)/Third Party Liability (TPL), Disabled and Elderly Health Programs Group, CMS

Carrie Smith, MBA, Division of Health Homes, PACE and Coordination of Benefits (COB)/Third Party Liability (TPL), Disabled and Elderly Health Programs Group, CMS

1:15 pm - 2:00 pm

CHANGE OF OWNERSHIP (CHOW)

Kelley Ordonio, MPA, Division of Medicare Advantage Operations, MCAG, CMS

2:00 pm - 2:15 pm

AFTERNOON BREAK

2:15 pm - 3:00 pm

FINANCIAL CONSIDERATIONS

Yasmin Galvez, BS, Division of Finance and Benefits, MCAG, CMS

Amando Virata, MS, Division of Capitated Plan Audits, Financial Services Group, CMS

3:00 pm - 3:45 pm

PACE INNOVATION ACT (UPDATE)

Paul Precht, PACE Demo Workgroup, Medicare-Medicaid Coordination Office, CMS

3:45 pm - 4:25 pm

OPEN Q&A SESSION

4:25 pm - 4:30 pm

CLOSING REMARKS

Agenda July 8, 2016

8:00 am - 9:30 am

CHECK-IN/BADGING

9:30 am - 9:45 am

WELCOME AND INTRODUCTIONS

Stacey Plizga, PRI

9:45 am - 10:00 am

OPENING REMARKS

Martha Hennessy, MPH, Division of Medicare Advantage Operations, MCAG, CMS

10:00 am - 10:45 am

APPLICATIONS AND WAIVERS

Martha Hennessy, MPH, Division of Medicare Advantage Operations, MCAG, CMS

Cindy Proper, Division of Health Homes, PACE and Coordination of Benefits

(COB)/Third Party Liability (TPL), Disabled and Elderly Health Programs Group, CMS

Gregory Buglio, M.Ed., Division of Plan Data, Medicare Drug Benefit C&D Data Group, CMS

10:45 am - 11:30 am

OVERSIGHT AND AUDITS - 2016 AND BEYOND (PANEL)

Caroline Baker Zeman, J.D., Division of Analysis, Policy & Strategy (DAPS), MOEG, CMS

**CDR Amy Hesselgesser, OTR, Division of Medicare Health Plans Operations,
Consortium for Medicare Health Plans Operations, CMS**

Annemarie Anderson, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

11:30 am - 11:55 am

OPEN Q & A SESSION

11:45 am - 12:00 pm

CLOSING REMARKS

Day 1 - Session Summaries

July 7, 2016

Quality Reporting - Today and Tomorrow (Panel)

Tamika Gladney, MSN, Nurse Consultant, Division of Medicare Advantage Operations, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Daniel Deisroth, RN, Nurse Consultant, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Gretchen Kane, MS, San Francisco Region IX Nurse Consultant, Division of Health Plan Operations, Consortium for Medicare Health Plan Operations, CMS

Lynne Clark, BSN, RN, WCC, Nurse Consultant/PACE Account Manager, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

This session will provide participants an overview of past and present (Level I and Level II) quality data reporting processes and recent modifications. In addition, we will provide participants with an understanding of how we are aligning the PACE quality reporting process/program with the CMS Quality Strategies. We will also discuss the move toward establishing the first PACE quality measures.

PACE- A Vision for the Future (Panel)

Tamika Gladney, MSN, Nurse Consultant, Division of Medicare Advantage Operations, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Mark Stewart, MPH, Lead, Measurement and Improvement, Econometrica, Inc.

Kristie McNealy, MD, Project Manager, Econometrica, Inc.

This session will provide participants with an understanding of why new quality measures are being developed for PACE Organizations. We will discuss the uniqueness of PACE, the consideration of measure domains and the process of developing, testing and implementing the new measures. The current status of measures being developed, the alignment of measures with the CMS 2016 Quality Strategy as well as plans for future implementation and development of additional measures will also be reviewed.

Building a Relationship with your Account Manager (Panel)

CDR Amy H. Hesselgesser, OTR Technical Advisor, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Annemarie Anderson, Health Insurance Specialist, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

Maryann Ligotti, RN, BA, RN/Nurse Consultant/Account Manager, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

This session and panel discussion will describe the role of the regional office account manager as the 'hub' for communications with the PACE Organizations and State Administering Agencies. The panel will provide feedback on how the account manager facilitates communication, addresses issues and coordinates information for successful collaboration with all stakeholders.

Day 1 - Session Summaries

State Roles and Responsibilities Related to PACE Eligibility

Cindy M. Proper, *PACE Technical Director, Division of Health Homes, PACE and Coordination of Benefits (COB)/Third Party Liability (TPL), Disabled and Elderly Health Programs Group, Center for Medicaid and CHIP Services (CMCS), CMS*

Eligibility for PACE includes specific basic requirements as well as the requirement that at the time of enrollment, an individual must be able to live in a community setting without jeopardizing his or her health or safety. In this presentation, we will discuss the state roles and responsibilities related to PACE eligibility, the interface between the PACE organization and the state related to eligibility requirements and the various components related to the determination of continued eligibility, including the annual recertification requirement, waiving and deemed continued eligibility.

Change of Ownership (CHOW)

Kelly Ordonio, MPA, *Health Insurance Specialist, Division of Medicare Advantage Operations (DMAO), Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS*

This session will provide participants with an understanding of the Programs of All Inclusive Care for the Elderly (PACE) Change of Ownership (CHOW) Guidance and Notification process. In this presentation, we will discuss the purposes of the PACE CHOW, the process for the PACE CHOW and CMS' expectations for the novating and acquiring entities.

Financial Considerations

Yasmin Galvez, BS, *Deputy Director, Division of Finance and Benefits, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS*

Amando J. Virata, MS, *Auditor, Division of Capitated Plan Audits, Financial Services Group, Center for Medicare, CMS*

Fiscal Soundness

This session will provide participants with a basic understanding of fiscal soundness as related to PACE organizations. We will cover CMS' fiscal soundness requirements and the overall reporting and financial review process.

One Third Financial Audits

This session will provide participants with a basic understanding of the one third financial audits, the audit process and typical findings.

PACE Innovation Act (Update)

Paul Precht, BA, *Policy Advisor Team Leader, Medicare-Medicaid Coordination Office, PACE Demo Workgroup, CMS*

The session will describe the provisions of the PACE statute and regulations that CMS can waive under a test of the PACE model under 1115A, the Innovation Center authority. The session will describe the options under consideration by CMS, including the populations that could be eligible for enrollment in a test of the PACE model under 1115A. The session will be a forum for how the PACE model might be adapted to better serve these populations.

Day 2 - Session Summaries

July 8, 2016

Applications and Waivers

Martha Hennessy, MPH, Deputy Director, Division of Medicare Advantage Operations, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Cindy M. Proper, PACE Technical Director, Division of Health Homes, PACE and Coordination of Benefits (COB)/Third Party Liability (TPL), Disabled and Elderly Health Programs Group, Center for Medicaid and CHIP Services (CMCS), CMS

Gregory Buglio, MEd, Health Insurance Specialist, Division of Plan Data, Medicare Drug Benefit C&D Data Group, Center for Medicare, CMS

Beginning in 2016, the initial PACE application is now web-based in the Health Plan Management System (HPMS). This session will provide an overview of how to complete the web-based initial and the submission process.

Oversight and Audits - 2016 and Beyond (Panel)

Caroline Baker Zeman, JD, Health Insurance Specialist, Division of Analysis, Policy and Strategy (DAPS), Medicare Oversight and Enforcement Group (MOEG), Center for Medicare, CMS

CDR Amy H. Hesselgesser, OTR Technical Advisor, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Annemarie Anderson, Health Insurance Specialist, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

This session will give an in-depth overview of the 2017 PACE audit process improvements. The session will cover the new audit protocol, including an overview of the new elements, new compliance standards and all documentation requests that will be made during the audit process. The session will also cover the merger of PACE into the new HPMS module and an overview of standardized conditions which will be applicable in 2017.



Speaker Bios



Annemarie Anderson

Health Insurance Specialist, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

Annemarie Anderson has been employed with the Centers for Medicare & Medicaid Services since April 2005. Prior to that Annemarie Anderson worked for several Medicare Managed Care organizations since 1995.

Gregory Buglio, MEd

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

Greg Buglio has been a system analyst with the HPMS team for close to 12 years and has led the systems development of automated applications for PACE organizations, as well as numerous other contracting related modules.

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.

Lynne Clark, BSN, RN, WCC

Nurse Consultant/PACE Account Manager, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Lynne Clark began her government service

with CMS in 2010 as a Nurse Consultant/Long-Term Care Surveyor in the Division of Survey and Certification. She joined the Division of Health Plan Operations in 2012 as a PACE Account Manager/Nurse Consultant. Prior to her career with CMS, Ms. Clark worked 20 years in the clinical setting in critical care and home care. Ms. Clark is a Wound Care Certified RN.

Stacy Davis

Health Insurance Specialist, Division of Medicare Advantage, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Stacy Davis has been employed by CMS for 13 years. She currently serves as the Contracting Officer's Representative (COR) on a contract awarded to Econometrica, adapting quality measures for the PACE program. Throughout her career, she has served in various positions overseeing operations of Fee-For-Service contractors, Medicare Advantage Organizations and PACE organizations.

Daniel Deisroth, RN

Nurse Consultant, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

Daniel Deisroth has worked as a nurse

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Speaker Bios



consultant and account manager for the Centers for Medicare & Medicaid Services (CMS) since January 2013. From November 2006 – January 2013, Dan worked as a contractor for the Commonwealth of Pennsylvania conducting Medicaid financial and medical record audits for the Department of Public Welfare.

Yasmin Galvez, BS

Deputy Director, Division of Finance and Benefits, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Yasmin Galvez is the Deputy Director for the Division of Finance and Benefits and has been employed with CMS and working with the Medicare Advantage Organization (MAOs), formerly known as Medicare+Choices Organizations (M+COs) since 2002. She has performed several roles in bid and fiscal soundness reviews, including lead auditor. She has also worked in various accounting and comptroller positions for private sector companies prior to joining CMS. Mrs. Galvez holds an undergraduate degree from the Inter American University of Puerto Rico in accounting and is a Certified Public Accountant (CPA) from the State of Maryland.

Tamika Gladney, MSN

Nurse Consultant, Division of Medicare Advantage Operations, Medicare Drug & Health Plan Contract Administration Group (MCAG),

Center for Medicare, CMS

Tamika Gladney has been employed by CMS from July 2012 to present as a Nurse Consultant for the Medicare Drug & Health Contracts Administration Group in the Division of Medicare Advantage Operations. A large part of her work has been involved in improving the PACE quality program.

Martha Hennessy, MPH

Deputy Director, Division of Medicare Advantage Operations, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Martha Hennessy is the Deputy Director of the Division of Medicare Advantage Operations. Martha came to MCAG from the New York Regional Office where she has served as a member of the Consortium for Medicare Health Plan Operations and has worked on all aspects of Medicare Advantage Operations and Oversight, including Account Management, applications, beneficiary and provider casework, marketing material review, among other things. In addition, for the past three years, Martha has served on the joint Regional Office/Central Office Medicare Advantage Applications Steering Committee. Prior to joining the CMS New York Regional Office, Martha served in capacities both inside and outside of CMS, including serving as a consultant to the San Mateo County Department of Mental Health Department,

as a Medicare Benefits Analyst for PacifiCare Health Systems, as a member of the CMS San Francisco Regional Office staff and, for nearly 10 years at the beginning of her CMS career, as an analyst on a wide-range of Medicare policy matters in Baltimore. Martha holds a master's degree in Public Health from the University of California at Berkeley and a bachelor's degree from the State University of New York at Albany.

CDR Amy H. Hesselgesser, OTR

Technical Advisor, Division of Medicare Health Plans Operations, Consortium for Medicare Health Plans Operations, CMS

CDR Amy Hesselgesser has been employed by the Centers for Medicare & Medicaid Services since 2007. During her federal career she has served as a health insurance specialist, PACE account manager/auditor and most recently as a technical advisor. Prior to CMS, CDR Hesselgesser worked in the private sector as a Rehabilitation Director and Occupational Therapist in skilled nursing, sub-acute, home health and outpatient settings.

Gretchen Kane, MS

San Francisco Region IX Nurse Consultant, Division of Health Plan Operations, Consortium for Medicare Health Plan Operations, CMS

Gretchen Kane has been employed by CMS in Region IX since 1998. She was employed

Speaker Bios



as a Health Quality Review Specialist from 1998-2006 in the Division of Survey and Certification and was responsible for auditing and providing education, technical assistance to Region IX skilled nursing facilities, both general acute care and psychiatric hospitals, partial hospitalization psychiatric programs and the EMTALA program. From 2008 until 2012 Ms. Kane was employed as a Medicaid Integrity Specialist in the Division of Medicaid Integrity, Centers for Program Integrity. In this position she was responsible, on a national level, for the auditing of compliance programs of State Administrating Agencies. Ms. Kane was employed in the Division of Health Plan Operations providing clinical oversight and technical assistance to Region IX PACE organizations from 2006 to 2008 and again from 2012 to present.

Maryann Ligotti, RN, BA

RN/Nurse Consultant/Account Manager, Division of Medicare Health Plan Operations, Health Plans Branch, CMS

Maryann Ligotti has had an extensive Federal Career that spans 20+ years specializing in clinical areas. From October 2013 to the present she has functioned as an Account Manager for the Program of All-Inclusive Care for the Elderly (PACE) in the New England area.

In February 2009 through October 2013, as a Nurse Consultant, she took the lead in organizing and developing the ongoing

performance evaluation of Medicare contractors and their deliverables, partnering with outside agencies in conjunction with new initiatives and priorities.

She worked as a Program Analyst for the Office of Inspector General from May of 2000 to February 2009, where she lead and provided technical clinical expertise to four audit teams on specific assignments as well as assisted the Office of Investigations as Clinical Lead preparing and presenting cases to the US District Attorney for possible criminal proceedings.

She has served as a CMS Federal Surveyor on the clinical team in the Survey and Certification Branch from 2006-2009.

Kristie McNealy, MD

Project Manager, Econometrica, Inc.

Dr. Kristie McNealy has been employed by Econometrica, Inc., since August 2013 as a Senior Staff Associate and has served as Project Manager for the Measure and Instrument Development and Support (MIDS) contract for PACE since March 2016. She has also been employed by Sundance Research Institute since October 2013 as a Senior Researcher performing program evaluations.

Kelly Ordonio, MPA

Health Insurance Specialist, Division of Medicare

Advantage Operations (DMAO), Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Kelly Ordonio has been employed by the Centers for Medicare & Medicaid Services (CMS) from March 2013 to the present as a Health Insurance Specialist in the Division of Medicare Advantage Operations (DMAO).

Paul Precht, BA

Policy Advisor Team Leader, Medicare-Medicaid Coordination Office, PACE Demo Workgroup, CMS

Paul Precht is a member of the cross-component workgroup at CMS exploring the potential for testing the PACE model to new populations under the authority provided by the PACE Innovation Act.

Cindy M. Proper

PACE Technical Director, Division of Health Homes, PACE and Coordination of Benefits (COB)/ Third Party Liability (TPL), Disabled and Elderly Health Programs Group, Center for Medicaid and CHIP Services (CMCS), CMS

Cindy Proper is currently the PACE Technical Director within the Division of Health Homes, PACE and COB/TPL in the Disabled and Elderly Health Programs Group, Center for Medicaid and CHIP Services. She has been with the Centers for Medicare and Medicaid Services since July 2010. Prior to that she worked for

Speaker Bios



more than 25 years for the Commonwealth of Pennsylvania for the Medicaid Agency, and for fourteen of those years was actively involved in leading the development, implementation and management of the Programs of All-inclusive Care for the Elderly in Pennsylvania.

Mark Stewart, MPH

Lead, Measurement and Improvement, Econometrica, Inc.

Mark Stewart has more than 20 years of experience leading projects focused on improving health, ensuring quality of care and improving outcomes. He has worked for both nonprofit medical professional societies and government contractors on health projects funded by the U.S. Department of Health and Human Services and the National Institutes of Health, including Econometrica, Inc., since 2012.

Amando J. Virata, MS

Auditor, Division of Capitated Plan Audits, Financial Services Group, Center for Medicare, CMS

Amando Virata is a CPA and has worked at CMS since 2009 as an auditor overseeing the audits of Medicare Advantage Organizations, Prescription Drug Plans and Managed Care Organizations. Prior to CMS, Amando worked for the MD General Assembly in the Legislative Auditor's Office for 10 years.

Caroline Baker Zeman, JD

Health Insurance Specialist, Division of Analysis, Policy and Strategy (DAPS), Medicare Oversight and Enforcement Group (MOEG), Center for Medicare, CMS

Caroline Baker Zeman has been employed by the Medicare Oversight and Enforcement Group (MOEG) in the Division of Analysis, Policy and Strategy (DAPS) since October 2014. Her role in DAPS includes creating and revising audit protocols and audit documents for Part C and D program audits, PACE audits and the MA deeming program. In addition to the creation of audit protocols, DAPS is responsible for developing risk assessment tools, publishing annual audit reports and answering questions relating to the audit process. Prior to working in MOEG, Caroline was a subject matter expert in the Division of Appeals Policy where she worked on Part D coverage determinations, appeals and grievances.

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.

Lauren Brandow, MPP

Health Insurance Specialist, Division of Analysis, Policy & Strategy (DAPS), Medicare Part C & D Oversight and Enforcement Group (MOEG), Center for Medicare, CMS

Lauren Brandow began working in

the Medicare Part C & D Oversight and Enforcement Group (MOEG) Division of Analysis, Policy & Strategy (DAPS) in January 2016. Prior to her position with DAPS, Lauren worked at the Center for Medicare & Medicaid Innovation (CMMI) in the Division of Payment Models, where she served as a Project Officer in the Bundled Payments for Care Improvement (BPCI) initiative. Before joining CMMI, Lauren worked for CMS in the Division of Medicare Health Plans Operations (DMHPO) at the Dallas Regional Office, where she served as the Special Assistant to the DMHPO Associate Regional Administrator. While at the Dallas RO, she was also a caseworker for Medicare Part C & D and the Health Insurance Marketplace.

Frank Chartier, MBA

Deputy Director, Division of Capitated Plan Audits (DCPA), Financial Services Group, Office of Financial Management (OFM), CMS

Frank Chartier is the Deputy Director of the Division of Capitated Plan Audits (DCPA) in the Office of Financial Management (OFM) assisting in the oversight of the regulatory mandated "1/3rd" financial audits of Medicare Advantage Organizations (MAOs), Part D sponsors and Managed Care Organizations (MCOs).

Emily Davis, BS

Health Insurance Specialist, Division of Finance and Benefits, Medicare Drug & Health Plan Contract Administration Group (MCAG), Center for Medicare, CMS

Speaker Bios



Emily Davis has been employed by the Centers for Medicare & Medicaid Services (CMS) from February 2003 to the present, spending nearly 10 years working in the Medicare Contractor Management Group (MCMG) in MAC Contract Administration and the most recent three years in the Medicare Drug & Health Plan Contract Administration Group (MCAG) working on Part C Benefits and Finance.

Tim Engelhardt, MHS

Director, Medicare-Medicaid Coordination Office, CMS

Tim Engelhardt is the Director of CMS' Medicare-Medicaid Coordination Office. This office was created in the Affordable Care Act to improve services for individuals dually eligible for Medicaid and Medicare. Prior to joining CMS in 2010, Tim was a consultant with The Lewin Group, where he supported a variety of health and long-term care initiatives for federal, state and local government agencies. Tim previously served as the Deputy Director for Long-Term Care Financing at the Maryland Department of Health and Mental Hygiene (the state Medicaid agency). Tim received a BA in Sociology from the University of Notre Dame and a MHS from the Johns Hopkins School of Public Health.

Randy Fansler, BA

Senior Staff Associate, Econometrica, Inc.

Randy Fansler is a Senior Staff Associate with more than 20 years of financial management

and data/credit analysis experience. He currently supports the development, implementation and maintenance of quality measures under the Programs of All-Inclusive Care for the Elderly (PACE) project through the Centers for Medicare & Medicaid Services (CMS), providing the elderly with support and quality care while remaining in their homes. Mr. Fansler also serves as the Section 508 Compliance Officer for Econometrica and is proficient in performing Section 508 compliance checks on all Microsoft Office and Adobe Acrobat documents, allowing accessibility to all Federal Government electronic and information technology documents.

Monique A. Sheppard, PhD

Health Director, Econometrica, Inc.

Dr. Monique Sheppard has been employed by Econometrica, Inc., since August 2010 and has been Health Director since 2012. For the Measure and Instrument Development and Support (MIDS) contract for PACE, she serves as the Corporate Monitor.

Carrie Smith, MBA

Division Director, Division of Health Homes, PACE and Coordination of Benefits (COB)/Third Party Liability (TPL), Disabled and Elderly Health Programs Group, Center for Medicaid and CHIP Services (CMCS), CMS

Carrie Smith is the Director of the Division of Health Homes, PACE and Coordination

of Benefits and Third Party Liability in the Disabled and Elderly Health Programs Group in the Center for Medicaid & CHIP Services. Carrie has been with CMS since 1999 with responsibilities in various programs including the Programs of All-Inclusive Care for the Elderly (PACE), Managed Care, Self-Direction programs, Section 1115 demonstrations and State Plan Amendments.

Sara Walters

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

Sara Walters is a Senior Health Insurance Specialist and has been working at CMS since 2004. Sara has extensive knowledge on the Health Plan Management System (HPMS) and is a subject matter expert in the annual contracting/bid submission lifecycle for the Medicare Part C and Part D programs. Sara earned a Bachelor of Science from Virginia Tech and a Master of Business Administration from the University of Baltimore.

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 11:45 pm. There will be an afternoon break at 2:00 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](#).

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](#).

On-site Participants

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 Thursday, July 7th and Friday, July 8th from 8:00 am until 9:30 pm EDT. All Programs of All-Inclusive Care for the Elderly (PACE) Conference & Webcast attendees and sponsors are required to wear their badges at all times during the event. Badges are not transferable.



On-site Participants

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 July 1, 2016.

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: Thursday, June 30th by 11:59pm 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 11:59 pm EDT, Thursday, June 30th.

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

- ✓ **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 Programs of All- Inclusive Care for the Elderly (PACE) 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: Thursday, June 30th by 11:59pm EDT 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

This conference can be viewed virtually by using two different application platforms, YouTube and USTREAM.

To view and access the webcast, use Google Chrome.

YouTube: In order to view the live stream of the conference via YouTube, make sure you have the most up to date browser and a good Internet connection. If you are having difficulty playing the following live stream please either use Internet Explorer to view the live stream or change your YouTube player from Flash to HTML5 and refresh your browser window. The Flash based YouTube player is currently not accessible to screen readers. [Click here to visit the YouTube HTML5 page to switch your player if you are having trouble playing this video.](#)

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

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 Thursday, July 7, 2016 from 9:30 am – 4:30 pm EDT and Friday, July 8, 2016 from 9:30 am – 12:00 pm. **To facilitate easy access to the webcast, please log in between 9:00 am – 9:30 am EDT on July 7th and 8th.** 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.

- ✓ **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.

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.

Credits Available

The Centers for Medicare & Medicaid Services (CMS) is evaluating this activity for continuing education (CE) credit. The number of credits awarded will be calculated following the activity based on the actual learning time. Final CE information on the amount of credit and post- activity assessment and evaluation will be available to participants after the live activity.

Accreditation Statements

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

Additional Continuing Education

Activity Information

https://www.cms.gov/Outreach-and-Education/Training/CTEO/Upcoming_Current_Events.html

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 *CMS Programs of All-Inclusive Care for the Elderly (PACE) Conference and Webcast* evaluation survey online at:

Day 1

https://www.surveymonkey.com/r/2016PACE_ParticipantSurvey_July7_FINAL

Day 2

https://www.surveymonkey.com/r/2016PACE_ParticipantSurvey_July8_FINAL

The survey will be available until 9:00 pm EDT, Wednesday, July 13, 2016

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



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7500 Security Boulevard
Baltimore, MD 21244