



**Office of Financial Management/Financial Services Group**

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August 5, 2011

**Implementation of Medicare Secondary Payer Mandatory Reporting Provisions in  
Section 111 of the Medicare, Medicaid, and SCHIP Extension Act of 2007**  
(See 42 U.S.C. 1395y(b)(7))

**Teleconference Events for Mandatory Reporting for  
Group Health Plan Arrangements**

Please note the schedule below that CMS will be hosting GHP Policy & Technical and Health Reimbursement Accounts (HRA) related teleconferences. The call format will start with opening remarks or a presentation by CMS, followed by a question and answer session with the audience.

Dates: August 10, 2011 – Policy & Technical  
September 7, 2011 - HRA

Call in time for all calls: 1:00 PM – 3:00 PM Eastern Time

Participation is by telephone only. (The Centers for Medicare & Medicaid Services (CMS) will not have space for individuals/entities to participate onsite at CMS).

Call-in line for all calls: (800) 603-1774

Pass code for all calls: SECTION 111

Please begin dialing in approximately 20-30 minutes before the call due to the large number of participants.

Agenda: These are open sessions with questions pertaining to the subject matter.

Questions for the call: Please submit questions as soon as possible to [PL110-173SEC111-comments@cms.hhs.gov](mailto:PL110-173SEC111-comments@cms.hhs.gov).