



# Medicare Advantage & Prescription Drug Plan

*Collaborating  
Communicating  
Transforming*

SPRING CONFERENCE & WEBCAST

May 5, 2016 ■ 9:30 am – 4:30 pm EDT

# CONFERENCE GUIDE



# Table of Contents



<b>Program Overview</b> .....	4
<b>Agenda</b> .....	5
<b>Session Summaries</b> .....	6
<b>Speaker Bios</b> .....	9
<b>On-Site Participants</b> .....	14
Housekeeping Rules .....	14
Hotel and Travel Accommodations .....	14
Transportation .....	15
Directions .....	15
General Information .....	15
Preparation Checklist .....	17
<b>Webcast Participants</b> .....	18
Viewing Tips for YouTube and USTREAM .....	18
How to Join the Webcast .....	18
Technical Support .....	18
Preparation Checklist .....	18
<b>Continuing Education Activity Information &amp; Instructions</b> .....	19
Activity Description .....	19
Credits Available .....	19
Accreditation Statements .....	19
Additional Continuing Education Activity Information .....	19
<b>Additional Resources</b> .....	20
CTEO Website .....	20
Event Materials .....	20
Post Event Online Survey .....	20
Technical Support .....	20

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# Program Overview



**C**MS 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 **Thursday, May 5, 2016, 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:

- **Building Effective Relationships with Your Account Managers**
- **Encounter Data Update**
- **Reporting of National and Contract Level Quality Scores by Race and Ethnicity**
- **PDBM Chapter 6, The Part D Formularies Awaken**
- **Effective Strategies for Addressing Overutilization and Abuse of Prescription Drugs in Medicare Part D**
- **PBM Migration: Lessons Learned in Part D**
- **Combatting Fraud, Waste and Abuse in Medicare Parts C and D**
  - Parts C and D FWA Schemes
  - PLATO
  - Part D Self-Audits



# Agenda



7:00 am - 9:30 am	<b>CHECK-IN/BADGING</b>
9:30 am - 9:35 am	<b>Welcome</b> Stacey Plizga, PRI
9:35 am - 9:45 am	<b>Opening Remarks</b> Sean Cavanaugh, Deputy Administrator and Director, Center for Medicare, CMS
9:45 am - 10:30 am	<b>Building Effective Relationships with Your Account Managers</b> Judith Flynn, Kansas City Division of Medicare Health Plan Operations, CMS Brenda Suiter, MHA, Seattle Division of Medicare Health Plan Operations, CMS
10:30 am - 11:15 am	<b>Encounter Data Update</b> Shruti Rajan, MPP, Division of Encounter Data and Risk Adjustment Operations, Medicare Plan Payment Group, Center for Medicare, CMS
11:15 am - 12:00 pm	<b>Reporting of National and Contract Level Quality Scores by Race and Ethnicity</b> Madeleine A. Shea, PhD, Office of Minority Health, CMS
12:00 pm - 12:45 pm	<b>LUNCH BREAK</b>
12:45 pm - 1:30 pm	<b>PDBM Chapter 6, The Part D Formularies Awaken</b> LCDR Marie Manteuffel, PharmD, MPH, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS Robert Dombrowski, PharmD, Division of Part D Policy, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS
1:30 pm - 2:15 pm	<b>Effective Strategies for Addressing Overutilization and Abuse of Prescription Drugs in Medicare Part D</b> Diane McNally, RPh, MS, Division of Clinical and Operational Performance, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS Anna Polk, PharmD, Division of Formulary and Benefit Operations, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS
2:15 pm - 2:30 pm	<b>AFTERNOON BREAK</b>
2:30 pm - 3:15 pm	<b>PBM Migration: Lessons Learned in Part D</b> Linda Anders, MPH, Division of Benefit Purchasing and Monitoring, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS Arianne Spaccarelli, JD, Division of Benefit Purchasing and Monitoring, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS Michael Yount, JD, BS, Senior Vice President and Chief Compliance Officer, WellCare Laura Hungiville, PharmD, Chief Pharmacy Officer, WellCare Lee Genco, MBA HCM, Vice President of Pharmacy Benefit Relations, WellCare
3:15 pm - 4:00 pm	<b>Combatting Fraud, Waste and Abuse in Medicare Parts C and D</b> <ul style="list-style-type: none"> <li><b>Parts C and D FWA Schemes</b> Beth Brady, MBA, BA, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS</li> <li><b>PLATO</b> Dominca Howard, MA, Division of Plan Oversight and Accountability, Center for Program Integrity, CMS</li> <li><b>Part D Self-Audits</b> Camille Brown, MS, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS</li> </ul>
4:00 pm - 4:25 pm	<b>Open Q &amp; A Session</b>
4:25 pm - 4:30 pm	<b>CLOSING REMARKS</b>

# Session Summaries

## Opening Remarks

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

## Building Effective Relationships with Your Account Managers

**Judith Flynn, Associate Regional Administrator, Kansas City Division of Medicare Health Plan Operations, CMS**

**Brenda Suiter, MHA, Associate Regional Administrator, Seattle Division of Medicare Health Plan Operations, CMS**

While the relationship with an Account Manager is a relationship between a regulator and a contractor, we will suggest and inform on ways to better enhance the relationship and drive it to being more collaborative. In the presentation, we will offer suggestions on how to work more collaboratively with your Account Manager and share vital information on what the Account Manager needs to know to assist in process improvements. We will cover information regarding "Strategic Conversations," what they are, what the purpose behind them is and how they make a difference in driving improvement at CMS.



## Encounter Data Update

**Shruti Rajan, MPP, Health Insurance Specialist, Division of Encounter Data and Risk Adjustment Operations, Medicare Plan Payment Group, Center for Medicare, CMS**

This session will provide participants with an understanding of the Medicare Advantage Encounter Data submissions nearly four years since data collection began. The focus of the session will be on the technical and operational aspects of encounter data submission and CMS' current and planned efforts to assess and improve the data collection process and data quality.





# Session Summaries, cont.

## Reporting of National and Contract Level Quality Scores by Race and Ethnicity

**Madeleine A. Shea**, PhD, Deputy Director, Office of Minority Health, CMS

To comprehensively address and eliminate health disparities for racial and ethnic groups, it is first necessary to be able to measure and publicly report — in a standardized and systematic way — the nature and extent of these differences. In April 2016, the CMS Office of Minority Health released national level results for certain Medicare quality measures stratified by race and ethnicity for 2014, and Medicare Advantage contract level results stratified by race and ethnicity using the two most current years of pooled data (initial release combines 2013 and 2014). This session will present an overview of this reporting effort and discuss how these data may be used for quality improvement efforts.

## PDBM Chapter 6, The Part D Formularies Awaken

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

**Robert Dombrowski**, PharmD, Lead Pharmacist, Division of Part D Policy Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

Chapter 6 of the Medicare Prescription Drug Benefit Manual provides a wide range of guidance on topics including Part D drugs, exclusions, formulary requirements and transition fills. This session will provide participants with an understanding of the revisions made in the 2016 update, as well as respond to questions CMS received about the update. In this session we will also review the formulary reference file and HPMS formulary update processes and timeframes, and the operational details for formulary updates before the start of and during the plan year.

## Effective Strategies for Addressing Overutilization and Abuse of Prescription Drugs in Medicare Part D

**Diane McNally**, RPh, MS, Health Benefit Specialist, Division of Clinical and Operational Performance, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

**Anna Polk**, PharmD, Pharmacist, Division of Formulary and Benefit Operations, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

This session will provide participants with an overview of strategies to help reduce inappropriate overutilization of opioids. We will go over the formulary review process with a focus on formulary management strategies used to reduce opioid overutilization. We will also describe policies and expectations for sponsors to reduce the unsafe overutilization of medications by Part D beneficiaries and CMS' monitoring through the Overutilization Monitoring System (OMS). Finally, we will describe the results of Part D sponsors' implementation of improved drug utilization controls to prevent overutilization and improve medication use.

## PBM Migration: Lessons Learned in Part D

**Linda Anders**, MPH, Director, Division of Benefit Purchasing and Monitoring, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

**Ariane Spaccarelli**, JD, Supervisory Health Insurance Specialist, Division of Benefit Purchasing and Monitoring, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS

**Michael Yount**, JD, BS, Senior Vice President and Chief Compliance Officer, WellCare

**Laura Hungville**, PharmD, Chief Pharmacy Officer, WellCare

**Lee Genco**, MBA HCM, Vice President of Pharmacy Benefit Relations, WellCare

# Session Summaries, cont.

WellCare changed PBM (pharmacy benefit manager) vendors on January 1, 2016. WellCare is pleased to have an opportunity to share with the industry key areas of focus relating to Part D that contributed to the overall success in moving from one PBM to another.

The key areas include:

- Active engagement both internally with WellCare's executive and management teams and externally with CMS and advocacy groups
- Extensive communications strategies including Peer to Peer dialogue, member and provider communications
- Strategic project planning that included a multi-pronged approach for minimizing beneficiary disruption

## Combatting Fraud, Waste and Abuse in Medicare Parts C and D

### Parts C and D FWA Schemes

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

This session will provide participants with information on the current FWA schemes that plans and the National Benefit Integrity Medicare Drug Integrity Contractor (NBI MEDIC) are investigating. In this presentation we will discuss the schemes so the participants can conduct their own data analysis and identify potential FWA affecting their contracts and take appropriate actions.

### PLATO

**Dominca Howard, MA, Health Insurance Specialist, Division of Plan Oversight and Accountability, Center for Program Integrity, CMS**

PLATO is an anti-fraud detection tool used for identifying and assessing

Medicare Advantage and Part D pharmacies and providers at risk for engaging in fraud, waste and abuse (FWA). It offers leads for potential high-risk pharmacies and providers identified through data projects that assist users in conducting investigations and other compliance program activities. CMS would like to encourage all plan sponsors to utilize PLATO, to enhance compliance and program integrity activities.

### Part D Self-Audits

**Camille Brown, MS, Director, Division of Plan Oversight and Accountability, Investigations and Audits Group, Center for Program Integrity, CMS**

This session will provide participants with a high-level overview of the Medicare Part D Self-Audits. In this presentation we will discuss the self-audit process and lessons learned to educate participants on improving oversight on prescription drugs inappropriately paid through the Medicare Part D program.





# Speaker Bios



## Linda Anders

*MPH, Director, Division of Benefit Purchasing and Monitoring, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS*

Linda is the Director of the Division of Benefit Purchasing and Monitoring (DBPM) in the Medicare Drug Benefit and C & D Data Group (MDBG). In this role, she oversees the Part D application process, application appeals, Part C and D monitoring efforts, compliance and the Past Performance Analysis. In Linda's nearly nine years at CMS, she served as the DBPM Deputy Division Director, led the Medicare Part D Application development and review processes and worked on high-risk insurance risk pool benefits with the Center for Consumer Information and Insurance and Oversight (CCIIO). Prior to CMS, Linda was the Director of the Maryland AIDS Drug Assistance Program. While there, she worked closely with the state's pharmacy benefit manager to bring the program online with electronic claims processing. Linda has extensive experience in health services and program development for non-profits, local government organizations and community healthcare programs.

## Beth Brady

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

Beth 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).

## Camille Brown

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

Camille has been employed by CMS from January 2012 to the present and has held a variety of positions with the agency. Camille has served as the Marketing Technical Director in the Medicare Drug and Health Plan Contract Administration Group, Division of Surveillance and Compliance, where she was responsible for implementation of the Medicare Marketing Guideline Requirements, development of regulatory requirements and agent broker requirements. Camille also worked in the Medicare Parts C and D Oversight Enforcement Group as the Technical Director where she was responsible for implementing the auditing elements for Part C and D plans and conducting education and outreach. Camille has also worked in the Center for Consumer Information and Oversight, Marketplace Management Group where she was responsible for developing and implementing policy manuals. Presently, Camille is the Director of the Division of Plan Oversight & Accountability in the Investigations and Audits Group, Center for Program Integrity.

## Sean Cavanaugh

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

Sean is the Deputy Administrator and Director of the Center for Medicare at CMS. He is responsible for

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# Speaker Bios, cont.



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.

## **Robert Dombrowski**

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

Robert is currently the formulary lead pharmacist in the Division of Formulary and Benefits Operations in the Medicare Drug Benefit and C & D Data Group in the Center for Medicare at CMS. Robert is involved in the annual formulary review and approval process, as well as monthly formulary updates. He is also involved with the continuing education program for pharmacists at CMS. Prior to working at CMS, he was the Primary Care Residency Director at the VA Maryland Healthcare System. He received his undergraduate degree in pharmacy at the University of Rhode Island and his Doctor of Pharmacy degree at the Medical University of South Carolina.

## **Judith Flynn**

*Associate Regional Administrator, Division of Medicare Health Plan Operations, CMS*

Judith serves as the Regional Office Business Function Lead (BFL) for the Marketplace Account Managers. She works collaboratively with the CCIIO staff in implementing the role of the Regional Office Account Manager and serves as the liaison between CCIIO and the Account Managers. Previously Ms. Flynn served as the Regional Office BFL for the Medicare Account Managers and as a team member of the Application and Audit teams, working collaboratively with the Centers for Medicare. Prior to joining CCIIO, she was the Director of Government Programs at a provider-

owned, local Kansas City managed care plan, and that perspective and understanding of the industry has been valuable in the development of CMS' Account Management roles.

## **Lee Genco**

*MBA, HCM, Vice President of Pharmacy Benefit Relations, WellCare*

Lee is Vice President of Pharmacy Benefit Relations for WellCare. He has a bachelor's degree from the University of South Florida in political science and a master's degree in business administration and healthcare management from the University of Phoenix. Lee joined WellCare in 2008 and has over 15 years of experience in pharmacy benefit management and managed care and is a member of the National Council of Prescription Drug Programs (NCPDP).

His responsibilities include managing the Pharmacy Benefit Management (PBM) relationship and oversight of delegated functions to the PBM. This oversight includes pharmacy claim processing, benefits/formulary programming, network management, Medicare Part D Operations, rebates and pharmacy fraud and abuse. Lee also maintains WellCare's relationship with legacy PBM vendors, Employer Group Waiver Plans (EGWPs) and State Pharmacy Assistance Programs (SPAPs).

# Speaker Bios, cont.



## **Dominca Howard**

*MA, Health Insurance Specialist, Division of Plan Oversight and Accountability, Center for Program Integrity, CMS*

Dominca is currently the alternate Contracting Officer Representative (COR) for the Part D Recovery Audit Contractor (RAC) and the National Benefit Integrity Medicare Integrity Contractor (NBI MEDIC) for the Division of Plan Oversight and Accountability in the Center for Program Integrity. Her division is responsible for combatting fraud, waste and abuse in the Medicare Advantage (MA) and Prescription Drug (Part D) programs. Ms. Howard is responsible for performing oversight for the Recovery Audit Contractor for Part D and overseeing the NBI MEDIC contract. She has been responsible for performing this task from 2014 to present. She has been with CMS for six years and has worked in various positions that include providing oversight for Zone Program Integrity Contractors (ZPIC) in the Division of Medicare Integrity Contractor Operations and managing, coordinating and serving as the spokesperson for administrative functions in the Division of Executive Support in the Office of Information Services. Ms. Howard is a certified level III COR and holds a master's degree in operations/organizational management roles.

## **Laura Hungiville**

*PharmD, Chief Pharmacy Officer, WellCare*

Laura is the Chief Pharmacy Officer at WellCare Health Plans, Inc. She graduated summa cum laude with a BS of Pharmacy from the University of Pittsburgh and graduated magna cum laude with a Doctor of Pharmacy from the University of Florida.

Dr. Hungiville joined WellCare in 2004, as the Director of Pharmacy Operations. She was instrumental in the development and implementation of WellCare's Part D plans in 2006. She was promoted to Vice President of Pharmacy Operations in 2006 and to Chief Pharmacy Officer in 2015. She has responsibility for the oversight and management of the pharmacy benefit for all of WellCare's lines of business.

Prior to joining WellCare, she spent 19 years with the Eckerd Corporation, where she served as Staff Pharmacist, District Pharmacy Manager and Clinical Operations Manager. She developed and received accreditation for a Pharmacy Residency Program at Eckerd, which focused mostly on providing medication therapy management services in the retail setting. She is a member of AMCP and FSHP.

## **LCDR Marie Manteuffel**

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

Marie is the Senior Assistant Pharmacist in the Division of Part D Policy at CMS, and a Lieutenant Commander 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. LCDR 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.

## **Diane McNally**

*RPh, MS, Health Benefit Specialist, Division of Clinical and Operational Performance, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS*

Diane has been employed by CMS since September 2012 as a Health Benefit Specialist within the Medicare Drug Benefit and C & D Data Group. Prior to CMS, Ms. McNally was employed by the University of Maryland as the Assistant Director of Pharmaceutical Research Computing, a research center within the School of Pharmacy (2004 to 2012) and was a Drug Utilization Review (DUR) Program Coordinator (1994-2004). Ms. McNally worked in the retail setting as both a staff and manager pharmacist from 1981 to 1994.



# Speaker Bios, cont.



## **Anna Polk**

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

Anna is a pharmacist working in the Division of Formulary and Benefit Operations in the Medicare Drug Benefit and C & D Data Group in the Center for Medicare at CMS. Anna is involved in the annual formulary review and approval process, as well as monthly formulary updates. She also oversees the CMS Transition Monitoring Program Analysis. Prior to joining CMS, Anna was a clinical pharmacist at Commonwealth Care Alliance.

## **Shruti Rajan**

*MPP, Health Insurance Specialist, Division of Encounter Data and Risk Adjustment Operations, Medicare Plan Payment Group, Center for Medicare, CMS*

Shruti has extensive experience developing and directing data analysis and critically evaluating and interpreting findings relating to payment policy and program operations. During her time with CMS, she developed an actuarial model to predict costs and enrollment for the Pre-existing Condition Insurance Plan as well as a payment processing system to collect and process data from insurance companies

and calculate payments subsidies for coverage through the Marketplaces.

## **Madeleine A. Shea**

*PhD, Deputy Director, Office of Minority Health, CMS*

Madeleine is the Deputy Director of the Office of Minority Health at CMS where she is developing infrastructure, policies, partnerships and programs to reduce disparities in access to health care, and in the quality and outcomes of Medicare and Medicaid coverage. Prior to this position, Dr. Shea was the Director of the Disparities National Coordinating Center for Medicare Quality Improvement Organizations where she led Medicare disparities analytics and the diffusion of evidence-based interventions to reduce racial and ethnic disparities in chronic disease, adverse drug events, and preventive health care access.

Dr. Shea was a lead architect for Maryland's framework for health reform, which included developing 39 performance measures from 19 data sources to chart the State's and local jurisdictions' progress in meeting population health goals and coaching 18 local health improvement coalitions, encompassing the entire state, to align action to meet locally determined health targets. Dr. Shea

has held leadership positions in Baltimore City and the State of Maryland in healthy homes, asthma, HIV/AIDS and chronic disease. She has served on numerous national and state committees, advisory groups, and boards. She is a champion of performance measurement, improving social health determinants and advocacy for disadvantaged groups. Madeleine's service career started in the Peace Corps in Liberia. She holds degrees in Economics, Management and Public Policy.

## **Arianne Spaccarelli**

*JD, Supervisory Health Insurance Specialist, Division of Benefit Purchasing and Monitoring, Medicare Drug Benefit and C & D Data Group, Center for Medicare, CMS*

Arianne has been employed by CMS since January 2011 as a Health Insurance Specialist. Along with other duties, Ms. Spaccarelli works on PBM transition and compliance issues. Prior to joining CMS, she worked for the DHHS OIG (2009-2010), the University of Maryland Center for Health and Homeland Security (2007-2009) and the Baltimore City Health Department (2000-2007).

# Speaker Bios, cont.



## **Brenda Suiter**

*MHA, BA, Associate Regional Administrator, Seattle Division of Medicare Health Plan Operations, CMS*

Brenda serves as the Regional Office Business Function Lead for Medicare Parts C & D Account Managers. She works collaboratively with the Center for Medicare in implementing the role of the Regional Office Account Manager. Prior to joining CMS in 2012, Brenda had over 20 years of policy, managed care, government relations, health care delivery system and public health leadership experience in Washington State. As the Vice President of Rural and Public Health at the Washington State Hospital Association, where she spent 14 years, she led policy initiatives and partnered with state and federal government agencies to improve public health, access to care in rural areas and the regulatory environment. She started her career at a large, Seattle-based Health Maintenance Organization.

## **Michael Yount**

*JD, BS, Senior Vice President and Chief Compliance Officer, WellCare*

Michael has served as Senior Vice President and Chief Compliance Officer for WellCare since April 2014. He leads and directs the company's corporate compliance and ethics program and oversees the

company's compliance with the laws and regulatory requirements applicable to the company and all of its divisions, subsidiaries and affiliates. He reports to the CEO and the Regulatory Compliance Committee of the WellCare Board of Directors.

Michael joined WellCare in 2011. Before assuming his current position, he served as Vice President, Regulatory Compliance Counsel and Chief Privacy Officer. Prior to joining WellCare, he spent nine years with Rite Aid Corporation, Camp Hill, Pennsylvania, first as Government Affairs Attorney, then as Director, Government Affairs, and ultimately as Vice President, Regulatory Law & Compliance Monitoring and Privacy Officer. Prior to joining Rite Aid, he was an attorney with the Illinois Department of Professional Regulation.

Michael holds a bachelor's degree in pharmacy and a law degree, both from Ohio Northern University, Ada, Ohio. He is admitted to the bars in Illinois and New Jersey and is a registered pharmacist in Illinois, Ohio and Pennsylvania.

# 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 **Thursday, May 5<sup>th</sup>, from 7:00 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](mailto: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 **Tuesday, April 26, 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:

**Friday, April 29<sup>th</sup> by 11:59 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 **11:59 pm EDT, Wednesday, April 27<sup>th</sup>**.

***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: Friday, April 29<sup>th</sup> by 11:59 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](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](mailto:CTEO@cms.hhs.gov).



# Webcast Participants



## Viewing Tips for YouTube and USTREAM

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

**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, May 5, 2016, from 9:30 am – 4:30 pm EDT. **To facilitate easy access to the webcast, please log in between 8:00 am – 9:30 am EDT on May 5, 2016.**

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](mailto: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](mailto: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

[http://www.cms.gov/Outreach-and-Education/Training/CTEO/Upcoming\\_Current\\_Events.html](http://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](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](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/r/2016spring\\_participantsurvey\\_FINAL](https://www.surveymonkey.com/r/2016spring_participantsurvey_FINAL).

**The survey will be available until 9:00 pm EDT, Monday, May 9, 2016.**

## Technical Support

Report technical difficulties by contacting the CTEOTechSupport Team via email at [CTEOTechSupport@cms.hhs.gov](mailto: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 &

PRI & Poll Everywhere  
(CTEO Contractor Support)



7500 Security Boulevard  
Baltimore, MD 21244