

## **Gary A. Bailey**

### **Deputy Director for Plan Policy and Operations Center for Beneficiary Choices**

Gary Bailey is the Deputy Director for Plan Policy and Operations in the Center for Beneficiary Choices at the Centers for Medicare & Medicaid Services (CMS) in Baltimore, Maryland. Mr. Bailey is responsible for the administration of the Medicare Advantage, Medicare Prescription Drug Benefit, and the Employer/Retiree Subsidy programs. Mr. Bailey's primary responsibilities performed in close collaboration with CMS' 10 regional offices include the review of and ongoing contract management of Medicare Advantage, Medicare Prescription Drug, and Employer contract applications. In addition, he is also responsible for the development of National payment, enrollment, appeals, and other related policies for all Medicare Advantage Plans, Medicare Prescription Drug Plans, and Employer Plans.

Prior to his current position, Mr. Bailey served as the Director of the Health Plan Benefits Group where he was responsible for the operational aspects of the Medicare Managed Care Program.

Mr. Bailey has worked with the Medicare program for over 30 years. For the past nineteen years, he has served in a variety of leadership positions with CMS' Medicare Managed Care Program. He has received the Secretary of Health and Human Services award for Distinguished Service in both 1999 and 2000 and he is a graduate of the "Leadership for a Democratic Society" session at the Federal Executive Institute in Charlottesville, Virginia.

Mr. Bailey received his B.S. degree in Business Administration from the University of Maryland and his M.A. in Government Administration from George Washington University.

## **Randy Brauer**

### **Senior Policy Analyst, Division of Enrollment and Eligibility Policy**

Mr. Brauer has been working mostly on Part C and Part D eligibility and enrollment policy. Before joining CMS, Mr. Brauer spent 12 years at a Medicare HMO plan in upstate NY.

## **Bill Bucksten**

**Health Insurance Specialist, Division of Enrollment and Payment Operations**

Bill Bucksten worked seven years in Medicare Managed Care Systems prior to joining CMS in 2004.

## **Henry Chao**

### **System Implementation Manager, Medicare Part C/D**

Henry Chao is responsible for providing technical assistance to CMS components and external partners in the integration of systems. Mr.Chao is the liaison at conferences to further the understanding of critical issues relating to CMS systems and programs.

Mr.Chao also manages customer support for Medicare Modernization efforts as well as managing communications and outreach to provide guidance to MAs, MA-PDs, and PDPs for system implantation issues.

## **Sharon Donovan**

### **Lead Policy Analyst, Division of Enrollment and Eligibility Policy**

Sharon Donovan is the lead policy analyst for auto and facilitated enrollment of certain low-income populations into Medicare Part D plans. She has served in this role with the CMS Center for Beneficiary Choices, Medicare Enrollment and Appeals Group's Division of Enrollment and Eligibility Policy since July 2004. Prior to that, Ms. Donovan had 14 years of experience in Medicaid managed care and demonstrations including seven years with Montana Medicaid, three years with the CMS Seattle Regional Office, and most recently three years with the Center for Medicaid and State Operations.

## **Thomas Dudley, MS, RN**

### **Health Insurance Specialist, Division of Website Project Management, Centers for Medicare & Medicaid Services**

Tom Dudley is a Health Insurance Specialist in the Center for Beneficiary Choices component at CMS. He is the project lead for the development of the Price Comparison website and Online Enrollment Center for the Medicare drug benefit. Past CMS projects have included the development of the many databases on [www.medicare.gov](http://www.medicare.gov) including the prescription drug and other assistance programs for the Medicare-approved drug discount card program.

Mr. Dudley holds a M.S. in Nursing and Business Administration and a B.S. in Nursing from University of Maryland. Mr. Dudley's professional health care background spans over 19 years in the public and private sectors with experience in the planning, implementation and management of multi-disciplinary health care programs.

## **Carol Eaton**

### **Health Insurance Specialist, Division of Enrollment and Payment Operations**

Carol Eaton coordinates the contract with Integriguard (which is the payment validation contractor and processes retroactive adjustments). Ms. Eaton works on payment validation activities. Ms. Eaton previously worked with the Office of Financial Management coordinating the CFO audits for CMS. Prior to coming to CMS she worked as a civilian for the Department of the Army.

# **Harry Gamble**

## **Senior Technical Advisor for Coordination of Benefits (COB)**

Harry Gamble is the Project Officer for the COB contractor and has been actively involved in coordination of Medicare benefits for more than 10 years. Mr. Gamble has worked in the Medicare program for over 30 years.



## **Jeffrey Grant**

### **Director, Division of Program Analysis and Performance Evaluation**

Jeffrey Grant has worked at CMS since 1993 starting with fee-for-service claims operations and provider enrollment. Since 1999, Mr. Grant has worked on the implementation of risk adjustment for Medicare Advantage, focusing primarily on the systems that collect the data and process the factors for payment. Since 2004, Mr. Grant directed the development of Part D payment methodology, including the prescription drug event data collection requirements and the development of processing and payment reconciliation systems to support accurate payment calculation.

## **Mark Hogle**

### **Director, Division of Technology Innovation and Engineering (DTIE)**

Mark Hogle sets the strategic (IT) direction for CMS and develops associated plans for technological advances. He designs and implements IT solutions as common services that can be used enterprise-wide. He also serves as the focal point for the research and analysis of target technical IT standards and provides engineering design and review services.

Mr. Hogle's MMA-related responsibilities include the Enterprise Identity and Access Management system, Enterprise File Transfer system and Enterprise Content Management system.

**Anne Hornsby, Ph.D.**

**Policy Advisor, Medicare Plan Policy Group**

Anne Hornsby joined CMS in 2000 and focuses on MA bidding and payment policy.

## **George Linares**

### **Government Task Leader**

George Linares manages and provides technical direction on the software development activities for new applications that use CMS' 3 -Tier Architecture.

He is also responsible for Unified Eligibility Portal and Eligibility Inquiry User Interface (MBD UI) for both Internet and Extranet.

## **Laquia Marks**

### **Project Manager, Division of Medicare Advantage and Payment Systems**

Laquia Marks is the Project Manager for the Medicare Advantage Prescription Drug (MARx) System at CMS. Ms.Marks has been with CMS since 1999. She is responsible for the management of the development and implementation of the MARx System.

## **Jane McClard**

Jane McClard's 15 years at CMS have focused on managed care for both Medicare and Medicaid. Ms. McClard currently works on health policy issues for CBC's Division of Enrollment and Eligibility Policy. Ms. McClard is the policy lead for Special Needs Plans and wrote the MMA regulatory language for special needs plans. She is also responsible for various other Medicare Advantage enrollment issues.

## **Tracey McCutcheon**

### **Director, Division of Drug Plan Policy, Medicare Plan Policy Group, Center for Beneficiary Choices**

Ms. McCutcheon has earned Master of Health Services Administration and MBA (finance) degrees and is a Certified Internal Auditor. Ms. McCutcheon worked in the private sector before joining CBC's policy division in 2003. Her private sector experience includes operational management in both managed care and disease management organizations, as well as internal auditing and general management in a multi-institutional healthcare delivery system. Since joining CMS, she has participated in the review and analysis of the MMA legislation as it was being drafted, helping to identify the policy and operational implications of the provisions in both Title I (Prescription Drug Benefit) and Title II (Medicare Advantage Program). Following passage of the MMA, she coordinated the policy development for and drafting of both the Title I Medicare Prescription Drug Benefit Notice of Proposed Rule Making and Final Rule, and now directs policy development for the new Part D program.

## **Sherri McQueen**

### **Project Director for Medicare COB, Group Health Incorporated (GHI)**

Ms. McQueen works for GHI, New York, New York, CMS's Coordination of Benefits (COB) contractor. Ms. McQueen has over 15 years of experience in the health care industry. She has been Project Director for the COB since the contract was awarded in November 1999. Prior to assuming that role she served as Project Director for the IRS/SSA/CMS Data Match Project for four years. She is directly responsible for managing the activities of 424 employees. She is also the primary CMS contact.



## **Kim Miegel**

### **Technical Advisor, Division of Enrollment and Payment Operations**

Kim Miegel is responsible for MARx validation and MARX transactions, the Premium Withhold System Processing, and the MMA Qs and As from the plans. She is responsible for BIPA 606 exception processing and premium withhold interfaces with SSA and RRB. She has been at CMS since 1980 (where she worked in Medicare quality assurance and Part A bill processing operations). Prior to working at CMS Kim worked for the FBI and Department of Defense.

## **Deondra Moseley, Esq.**

### **Health Insurance Specialist, Medicare Plan Policy Group, Division of Managed Care Policy**

Deondra Moseley joined CMS in 2002. In the Medicare Plan Policy Group, she focuses on Medicare Advantage payment, bidding, and risk adjustment policy. Before coming to Medicare, Ms. Moseley worked at CMS on Medicaid's home- and community- based waivers.

## **Lynn M. Orlosky**

**Senior Policy Analyst, Division of Enrollment and Eligibility Policy in the Center for Beneficiary Choices at CMS**

For the past six years Ms. Orlosky has worked on enrollment and eligibility issues for the Medicare Managed Care Program, most recently on the Medicare prescription drug program and the Medicare-approved prescription discount card program.

Ms. Orlosky holds a Master of Public Administration degree from the University of Baltimore and received a Bachelor of Science degree in Business Administration from the University of Maryland.

## **Jennifer R. Shapiro, M.P.H**

### **Acting Director, Division of Drug Card Management at CMS**

Jennifer Shapiro oversees and coordinates the daily operations and policy development for the Medicare-Approved Prescription Drug Discount Card Program. Ms. Shapiro responsibilities for the Medicare Drug Benefit include creditable coverage and other operational areas within the Medicare Plan Accountability Group. Previously, Ms. Shapiro was a senior analyst in CMS' Office of Research, Development, and Information. Prior to joining CMS, she was a senior manager with The Lewin Group, where her work centered around policy analysis, evaluation design, and survey research in the areas of health services and public health. Ms. Shapiro received her Master of Public Health degree at Johns Hopkins University.

## **Mary Sincavage**

### **Director, Division of Medicare Advantage and Payment Systems (DMAPS)**

Mary Sincavage manages the development and maintenance of Medicare Advantage and Payment Systems. She has worked with Medicare Payment Systems at CMS for 17 years. DMAPS is responsible for the development and maintenance of the following systems: Medicare Advantage and Prescription Drug System (MARx) that processes beneficiary enrollments in the MA, MA-PD, and PDP's and calculates the Part C and Part D payments to the plans; Premium Withhold System (PWS) that processes beneficiary premiums withheld by SSA and RRB for payments to the plans; Payment Reconciliation System (PRS) (Future) that performs the future payment reconciliation's for Part D, and Risk Adjustment System (RAS) that calculates the beneficiary risk adjustment factor used in the calculation of the Part C and Part D payments to the plans.

## **Aaron Wesolowski**

### **Government Task Leader, Part D Benefit of the Coordination of Benefits (COB)**

Aaron Wesolowski has been involved in developing the data exchanges that has supported the Part D program for the last 16 months. Prior to his work in the Medicare program, he was a Peace Corps Volunteer in Mali, West Africa for two years.

## **Barbara Wintsch**

### **Senior Analyst for Coordination of Benefits (COB), ViPS, INC.**

Ms. Wintsch has been employed at ViP for over 17 years and has supported numerous CMS Medicare initiatives throughout her career. ViP is the system developer and maintainer for the COB project. For the past five years, Ms. Wintsch has been directly supporting the COB application and is currently the lead analyst for the Part D initiative.

## **Erin Zalusky**

### **Deputy Systems Implementation Manager, Medicare Part C/D.**

Erin Zalusky serves as a principal coordinator for the MMA Title I/II system development projects overseeing the integration efforts across multiple development teams. Ms. Zalusky also supports the Systems Implementation Manager. Ms. Zalusky was involved in managing the customer support for Medicare, which included a modernization effort ensuring Help Desk resources are available to MA's, MA-PD's, and PDP's. She also managed the communication and outreach to MAs, MA-PD's and PDP's for systems implementation issues. In addition, Ms. Zalusky provided guidance to MA's, MA-PD's, and PDP's on how to achieve high state of system operational readiness for implementation of the Part D benefit.