Medical Device Reimbursement 101 Workshop
June 27-28, 2017
AdvaMed Offices | 701 Pennsylvania Avenue NW, Suite 800 | Washington, DC

June 27

8:00 – 8:30 am Registration Check-In and Continental Breakfast

8:30 – 8:35 am Welcome and Introductions

8:35 – 9:00 am Introduction to Reimbursement for Medical Technology
- Overview of CMS coverage, coding, & payment, and of other public and private sector plan and reimbursement schemes
- What are the key characteristics of reimbursement for medical technology (devices, diagnostics, and combination products)
- How do reimbursement considerations affect the development and introduction of new technologies?

9:00 – 9:45 am Coding Languages
- What are device, diagnosis, procedure, and other codes?
- How are they determined, what do they mean, and what impact do they have on medical technology companies?
- What resources are available?

9:45 – 10:00 am Break

10:00 – 11:00 am Maintaining an Ongoing Reimbursement Campaign
Brenda Boschetto, Health Policy Analyst, ReedSmith
- Reimbursement activities never end. Guidelines for creating billing guides, web sites, hotlines, communicating with hospitals about getting reimbursed for your products. What do you need to do to keep up on new reimbursement developments relevant to your products, and how can you maintain a nimble, dynamic, effective, ongoing reimbursement program?

11:00 – 11:30 pm CPT Process – Tips and Strategies
Gail Daubert, Partner, ReedSmith
- Beyond the basic “nuts and bolts” of CPT coding – how to decide whether to use an existing code or apply for a new code and the necessary strategies for getting a new code; Examples and actual cases will be provided

Important Notice
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11:30 – 12:15 pm   **Physician Payment Under the Physician Fee Schedule**  
*Mark Domyahn, Pursuance Consulting*  
- Physician fee schedules, practice expenses, professional and technical components, and the resource-based relative value scale system  
- Upcoming reforms -- merit-based incentives and Alternative Payment Models

12:15 – 12:45 pm   **Lunch**

12:45 – 1:30 pm  **Inpatient and Outpatient Payment**  
*Mark Domyahn, Pursuance Consulting*  
- The Inpatient Prospective Payment System (IPPS), DRGs, payment variations under DRGs, additional reimbursement for new technologies, and DRG reassignment  
- The Outpatient Prospective Payment System, APCs versus DRGs, how APCs work, APCs and new technologies, special issues for medical devices, ASCs

1:30 – 2:30 pm  **DMEPOS and Competitive Bidding: Progress to Date & Lessons Learned**  
*Richard Price, Senior Vice President, Payment and Health Care Delivery Policy, AdvaMed*

2:30 – 2:45 pm **Break**

2:45 – 3:30 pm  **Healthcare Payment and Delivery Reform**  
*Richard Price, Senior Vice President, Payment and Health Care Delivery Policy, AdvaMed*

3:30 – 4:30 pm   **Population Health**  
*Justin Crockett, Boston Scientific*  
- What is population health?  
- Who is using big data?  
- What are the sources of data and what are the various ways to utilize data?  
- Case study

4:30 – 5:15 pm   **Clinical Trials and Reimbursement**  
*Mark Domyahn, Pursuance Consulting*  
- In building evidence to support reimbursement, how can clinical trials be used to help educate payers?  
- When and how can you be reimbursed for clinical trials, and what are the advantages and drawbacks?

5:15 – 6:15 pm **Networking Reception**

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8:00 – 8:30 am  Continental Breakfast

8:30 – 9:30 am  The World Outside CMS
- While CMS is the single largest payer for medical technology, there are a number of other payers that pay for the great majority of health care costs. What are these other payers? How do their objectives and philosophies differ from those of CMS? When does thinking about these different payers become important in the early (strategic) and later (tactical) phases of a company?

9:30 – 10:00 am  Technology Assessments and Comparative Effectiveness
Andrew Van Haute, Associate, Food, Drug, and Medical Device Regulatory, Healthcare, Sidley Austin
- What are technology assessments, why are they important and who makes them?
- What is comparative effectiveness research and why is it important to medical device manufacturers?

10:00 – 10:15 am  Break

10:15 – 11:00 am  The CMS Coverage Process
Chandra N. Branham, Vice President, Payment & Health Care Delivery Policy, AdvaMed
- How is Medicare coverage determined at the national and local level? How is evidence translated into coverage decisions? What are the processes used to determine coverage? What are the roles of MEDCAC and CACs?
- Where do you find current information on coverage decisions, coding, payment, tech assessments, and other key topics?
- What free or subscription on-line or other sources of information exist?

11:00 – 12:00 pm  Group Case Study Interactive Exercise
Chandra N. Branham, Vice President, Payment & Health Care Delivery Policy, AdvaMed

12:00 pm  Closing Remarks and Adjournment

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