



AdvaMed

Advanced Medical Technology Association
Events & Education

MedTech Coverage, Coding, & Reimbursement 101 Workshop

September 11-12, 2018
Minneapolis Marriott City Center
Minneapolis, MN

September 11

- 8:00 – 8:30 am** **Registration Check-In and Continental Breakfast**
- 8:30 – 8:35 am** **Welcome and Introductions**
- 8:35 – 9:15 am** **Introduction to Medicare**
Chandra N. Branham, Vice President, Payment & Health Care Delivery Policy, AdvaMed
- 9:15 – 9:45 am** **Introduction to Reimbursement for Medical Technology**
Tom Gustafson, Senior Policy Advisor, Arnold & Porter LLP
- 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?
- 9:45 – 10:00 am** **Break**
- 10:00 – 10:30 am** **Coding Languages**
Patricia Christianson, Passel Ambit Consulting LLC
- 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?
- 10:30 – 11:15 am** **CPT Process – Tips and Strategies**
Patricia Christianson, Passel Ambit Consulting LLC
- 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
- 11:15 – 12:00 pm** **Physician Payment Under the Physician Fee Schedule**
Mark Domyahn, Pursuance Consulting LLC
- 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

Important Notice

The information provided in this course represents the personal opinions of the instructors and does not necessarily represent the opinions of AdvaMed staff. Companies relying on the information do so at their own risk and assume the risk of any subsequent liability that results from relying on the information. The information does not constitute legal advice.



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12:00 – 12:45 pm	Lunch
12:45 – 1:45 pm	Inpatient and Outpatient Payment <i>Tom Gustafson, Senior Policy Advisor, Arnold & Porter LLP</i> <ul style="list-style-type: none">• 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
1:45 – 2:30 pm	DMEPOS and Competitive Bidding: Progress to Date & Lessons Learned <i>Richard Price, Senior VP, Payment and Health Care Delivery Policy, AdvaMed</i> <i>Chris Salmen, Senior Manager, Market Access, ResMed</i>
2:30 – 2:45 pm	Break
2:45 – 3:30 pm	Healthcare Payment and Delivery Reform <i>Richard Price, Senior VP, Payment and Health Care Delivery Policy, AdvaMed</i> <i>Chris Salmen, Senior Manager, Market Access, ResMed</i>
3:30 – 4:15 pm	Clinical Trials and Reimbursement <i>Mark Domyahn, Pursuance Consulting LLC</i> <ul style="list-style-type: none">• 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?
4:15 – 5:00 pm	The World Outside CMS <i>Mark Telles, Director, Health Policy and Payer Relations, Health Economics and Reimbursement, Abbott</i> <ul style="list-style-type: none">• 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?
5:00 – 6:15 pm	Networking Reception

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September 12

8:00 – 8:30 am

Continental Breakfast

8:30 – 9:00 am

Technology Assessments and Comparative Effectiveness

Leslie Wise, Evidence Matters

- 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?

9:00 – 10:00 am

Maintaining Reimbursement: Ongoing Education and Advocacy

Stephanie Wimmer, Senior Director, Global Reimbursement, Medtronic

- 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?

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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