

AdvaMed Spring Payment Policy Forum

May 21-22, 2024

AdvaMed Office | 1301 Pennsylvania Ave., NW, Suite 400 | Washington, D.C. 20004

**Schedule reflects Eastern Daylight Time*

Tuesday, May 21

8:15 am – 9:00 am

Check in & Networking Breakfast

9:00 am – 9:05 am

Welcome Remarks

9:05 am – 11:00 am

Medicare Advantage Bootcamp

Jim Mathews, Principal, Health Policy Alternatives

Pierre Poisson, Principal, Health Policy Alternatives

- Contextualize recent and rapid growth of the Medicare Advantage Program and discuss similarities to/differences from Traditional Medicare
- Explore ins-and-outs of Medicare Advantage program administration, including supplemental benefits program
- Discuss ongoing concerns regarding Medicare Advantage plans, including increasing use of prior authorization
- Review recent CMS regulations and guidance on increased oversight of the Medicare Advantage program

11:00 am – 11:15 am

Break

11:15 am – 12:00 pm

Pre-Lunch Keynote: Medicare Technologies Ombudsman

TJ Sutphin, New Technology Liaison and Acting Pharmaceutical and Technology Ombudsman, Centers for Medicare & Medicaid Services

Remarks to include:

- Review role of the new technology ombudsman
- Discuss opportunities to receive assistance navigating CMS
- Provide introduction to CMS Guide to Medical Technology Companies

12:00 pm – 1:00 pm

Networking Lunch

1:00 pm – 2:00 pm

Commercial Payor Issues

Moderator: Chris Lyle, Partner, JD Lymon

Ben Finder, Vice President of Coverage Policy, American Hospital Association

A panel discussion of issues including:

- Current issues with commercial payors, including utilization management and customer service.
- Tips on interacting and obtaining coverage with commercial payer plans
- Study design and evidence generation

2:00 pm – 3:00 pm

Medicaid Issues

Julie Khani, Corporate Vice President, Government Affairs and Corporate Communications, Hologic

Andrey Ostrovsky, Managing Partner, Social Innovation Ventures; Former US Medicaid Chief Medical Officer

A panel discussion of issues including:

- Medicaid unwinding
- Medicaid coverage and payment for pediatric devices
- Impact of Medicaid reimbursement policy on women's health
- Coding implication for diagnostic tests

3:00 pm – 3:15 pm

Break

3:15 pm – 4:15 pm

Digital Health Tech Payment

Richard Frank, Principal, Frank Healthcare Advisors, LLC

Brian Lee, Partner, Alston & Bird

Paul Radensky, Senior Counsel at McDermott, Will & Emery LLP

A panel discussion of issues including:

- Payment for different types of digital health technology, including digital therapeutics and AI-enabled imaging
- Coverage of AI and ML technologies across settings of care
- Opportunities for improvement in CMS' durable medical equipment pathways to reflect innovative new technologies

4:15 pm

Networking Reception

Wednesday, May 22

8:15 am – 9:00 am

Networking Breakfast

9:00 am – 9:05 am

Welcome Remarks

9:05 am – 10:00 am

AMA CPT Session: Coding Change Application Process and Challenges

Zach Hochstetler, Vice President, Coding and Payment, American Medical Association

Josh Makower, Professor of Medicine & Bioengineering, Director & Co-Founder, Stanford Byers Center for Biodesign at Stanford University School of Medicine; Founder & Exec Chairman, ExploraMed

- Review code change application criteria (CCA) and process
- Overview of preliminary findings from Stanford Biodesign stakeholder survey on CPT application process
- Discuss CPT CCA process challenges

10:00 am -10:50 am

CMS Session #1: Medicare FFS

Jason Bennett, Director, Technology, Coding, and Pricing Group, Center for Medicare, Centers for Medicare & Medicaid Services

Ryan Howe, Director, Hospital & Ambulatory Policy Group, Centers for Medicare & Medicaid Services

TJ Sutphin, New Technology Liaison and Acting Pharmaceutical and Technology Ombudsman, Centers for Medicare & Medicaid Services

CMS leaders will provide an overview of their roles within Medicare Fee for Service and their policy priorities, highlighting opportunities for medtech engagement in policy development. Robust question-and-answer session to follow.

10:50 am – 11:10 am

Networking Break

11:10 am – 12:00 pm

CMS Session #2: Medicare Coverage

Tamara Syrek-Jensen, Director, Coverage and Analysis Group, Center for Clinical Standards and Quality, Centers for Medicare & Medicaid Services

Elizabeth Truong, Director, Division of Policy Coordination & Implementation, Centers for Medicare & Medicaid Services

CMS leaders will provide an overview of their roles in Medicare and Medicaid coverage policymaking, including the National Coverage Determination and Local Coverage Determination development processes, and their policy priorities. Robust question-and-answer session to follow.

12:00 pm

Program Concludes