CMS Speaking Engagement Request Form

The public is invited to request CMS representatives from the Physician Quality Reporting Programs to participate in upcoming events. To request CMS representation at an upcoming event, complete as much of the CMS Speaking Engagement Request Form as possible. ALL fields are important to complete, but those with asterisks (*) are required to process your request. Forms that do not contain the required information will be returned to the submitter to be updated. Completed CMS Speaking Engagement Request Forms must be sent via e-mail to CMSSpeakingRequest@pqrs-speakers.com at least six weeks, but no more than six months before the event. CMS will NOT accept CMS Speaking Engagement Request forms that are mailed via the postal service or any other mailing service to the CMS Office.

If a speaking request is approved, the point of contact listed in the CMS Speaking Engagement Request Form will be contacted for additional information and to further coordinate CMS's participation in the event. Submission of a CMS Speaking Engagement Request Form does not guarantee that a CMS representative will attend the upcoming event.

Sponsoring Organization Information

Organization Name*:

Mailing Address*:

Suite/Floor Number:

City*:

State*:

Zip Code*:

Phone Number*:

Website*:

Profit Classification*

For-Profit

Nonprofit

Brief Description of Services Provided by Company*:

Point of Contact Information

Name*:

Phone Number*:   E-mail*:

Event Information

Name of Event*:

Event
Description*:

Date(s) of   Time of Event: Time Zone*:
Event*:

Location of
Event*:

Street Address*:   Suite/Floor Number:

City*:   State*:   Zip Code*:

Presentation Information

Length of   Length of Q&A
Presentation*:   Session*:

Presentation   Yes   Presentation
Requested?*:   Due Date*:
                        No

Please note that CMS will attempt to meet all presentation request dates; however, there may be instances in which request dates cannot be accommodated.

Disclaimer: CMS will be delivering the PDF version of the presentation only. CMS is unable to distribute the PowerPoint version because of branding policies and non-508 compliance (the PDF is 508 compliant, as required by CMS).

Topic of Presentation*:	Overview of Physician Quality Reporting Programs
	Physician Quality Reporting System (PQRS)
	EHR Incentive Program
	Physician Compare

Specific Discussion Topics for Presentation* (please provide specific information)*:

Presenter Information

Requesting a speaker attend*:	In Person
	Virtual Webinar
	Conference Call

| Specific CMS representative requested?*: | Yes | If yes, Who?: |
| | No | |

| Are other CMS representatives presenting*? | Yes | If yes, Who?: |
| | No | |

Audience Information

Event Open to Public or Invite Only:	Public		Event Open to Press:	Yes
	Invite Only			No
	Other			

Target Audience:

| Estimated Number of In-Person Attendees*: | | Estimated Number of Virtual Attendees*: |

Additional Information

Provide any
additional
information that
may be relevant
to the event: