

## Centers for Medicare & Medicaid Services (CMS) Biographical Data Form

For development of the following Web-Based Training (WBT) activities:

- Diagnosis Coding Using the ICD-9-CM WBT
- Medicare Fraud & Abuse WBT
- Physician Quality Reporting Initiative WBT
- Understanding the Remittance Advice for Institutional Providers WBT
- Understanding the Remittance Advice for Professional Providers WBT

<b>Name</b>	Peggy McClain
<b>Date Submitted</b>	FEB 2009
<b>Degrees</b>	BS Health Care Administration; AD Nursing
<b>Business Address</b>	Strategic Health Solutions 10040 Regency Circle, Suite 150 Omaha, NE 68114
<b>Telephone</b>	402.452.3333
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<b>Email</b>	p.mcclain@strategichs.com
<b>Position/Title</b>	Medicare Outreach & QA Program Manager

### Education:

Degree/Year	Institution, City, State	Major Area of Study
2008	Bellevue University - Bellevue, NE	BS Health Care Administration
1993	Iowa Western Community College	AD Nursing

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

Throughout the last 12 years, Ms. McClain has worked in the Medicare field with extensive experience in developing educational materials and conducting training events. Currently, she works for Strategic Health Solutions supporting the Centers for Medicare & Medicaid Services (CMS) in the design, development, and production of educational products used to disseminate information to Medicare

providers.

Ms. McClain's experience includes:

Program Manager, Outreach & Quality Assurance Contract

- Responsible for managing work flow and projects related to education on such topics as Medicare coverage, payment, claims processing, and medical review
- Oversees and participates in the design, development, and production of plain language educational products, including brochures, fact sheets, reference guides, and WBTs for the CMS Medicare Learning Network (MLN)
- Oversees Quality Assurance activities, including the review of all CMS Transmittals and Change Requests to ensure the content and language of all MLN products is updated and maintained

Medicare Medical Review Manager, Senior Nurse Coordinator, and Nurse Coordinator

- Developed and managed a \$5M fiscal budget for a staff of 32 professionals
- Participated in Medicare provider education efforts to approximately 3,800 Skilled Nursing Facilities nationwide and 600 healthcare providers, utilizing multiple document formats in support of electronic and web-based systems, distance learning techniques, and provider education workshops
- Developed and provided oversight of articles, comparative billing reports, bulletins, PowerPoint presentations, and Local Coverage Determinations (LCDs)
- Conducted provider workshops and 1:1 provider conference calls on Medicare regulations and policy

Benefit Integrity Analyst, Medicare Drug Integrity Contract

- Conducted investigations involving potential Medicare fraud and/or abuse
- Maintained effective communication and coordination with all Medicare stakeholders such as Contractors, law enforcement agencies, advocacy groups, and other organizations involved in fraud and abuse work

Director of Health Services, Assisted Living Facility

- Directed the provision of resident care services in a 48 bed assisted living facility and a 28 bed memory support unit
- Conducted clinical training and education for a healthcare staff of 30
- Designed, developed, and produced a booklet on dementia for staff and resident families
- Conducted training for the public on the Medicare Prescription Drug Benefit

**Provide a brief explanation, no more than two or three sentences, explaining how you are qualified to develop content or train learners for this activity.** (This summary will be posted online so that learners have access to information regarding content developers or trainers before they engage in the CE activity).

Ms. McClain has the education, training, and experience managing complex systems and projects that qualify her to develop content and train learners. Ms. McClain has 12 years of experience managing and participating in the development of Medicare educational products, including print materials, PowerPoint presentations, and WBT courses. She has also developed and conducted local provider education training workshops for Medicare providers.

## Centers for Medicare & Medicaid Services (CMS) Biographical Data Form

For development of the following Web-Based Training (WBT) activities:

- Medicare Fraud & Abuse WBT

<b>Name</b>	Betty Johansen
<b>Date Submitted</b>	FEB 2009
<b>Degrees</b>	RN Diploma
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<b>Email</b>	<a href="mailto:b.johansen@strategichs.com">b.johansen@strategichs.com</a>
<b>Position/Title</b>	Medicare Outreach & QA Medical Review Subject Matter Expert

### Education:

Degree/Year	Institution, City, State	Major Area of Study
1968	Methodist College of Nursing	Nursing

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

During the past eleven years Ms. Johansen has worked in the Medicare field progressing through a series of positions that have increased her knowledge of Medicare policy. She has assisted in the design and development of educational training products for Medicare providers and Medicare Contractor staff.

Ms. Johansen's experience includes:

#### Medical Review Subject Matter Expert

- Develops content for plain language educational products, including brochures, fact sheets, and WBTs for the CMS Medicare Learning Network (MLN)
- Participates in Quality Assurance activities, including the review of CMS Transmittals and

Change Requests to ensure the content and language of MLN products is updated and maintained

Medical Review Supervisor/Transition Manager

- Assisted in providing training on Medicare regulatory compliance issues to internal staff
- Assisted in the development of a Durable Medical Equipment (DME) proposal and assisted with transition of DME Medical Review workload

Medicare Fair Hearing Manager

- Conducted Medicare fair hearings and made decisions in accordance with Medicare law
- Prepared formal written hearing decisions for all concerned parties

Medicare Part A Integrity Nurse and Medicare Part D Fraud Investigator

- Performed medical review and provided appropriate documentation to support decisions
- Interacted with outside agencies such as the Office of Inspector General (OIG), Department of Justice (DOJ), and Federal Bureau of Investigation (FBI) regarding potential and verified fraudulent cases and assisted with investigations as needed

Medicare Nurse Consultant/Medicare Senior Nurse Coordinator

- Reviewed and evaluated Medicare claims and supporting documentation submitted by providers
- Provided subject matter expertise on Medicare policy to Medical Review (MR) staff and Medicare providers
- Designed, developed, and delivered appropriate education and training to MR staff and Medicare providers
- Participated in provider workshops/CMS meetings regarding MR

**Provide a brief explanation, no more than two or three sentences, explaining how you are qualified to develop content or train learners for this activity.** (This summary will be posted online so that learners have access to information regarding content developers or trainers before they engage in the CE activity).

Betty Johansen is a licensed Registered Nurse and has eleven years of experience in Medicare Parts A, B, and D. In this capacity, Ms. Johansen has developed content for Medicare educational products, including print materials, PowerPoint presentations, and Web-based training courses.

## Centers for Medicare & Medicaid Services (CMS) Biographical Data Form

For development of the following Web-Based Training (WBT) activities:

- Diagnosis Coding Using the ICD-9-CM WBT
- Medicare Fraud & Abuse WBT
- Medicare Secondary Payer WBT
- Physician Quality Reporting Initiative WBT
- Understanding the Remittance Advice for Institutional Providers WBT
- Understanding the Remittance Advice for Professional Providers WBT

<b>Name</b>	Loren Minnich
<b>Date Submitted</b>	FEB 2009
<b>Degrees</b>	BS/Biology; MS/Biology
<b>Business Address</b>	CSC 15000 Conference Center Drive Chantilly, VA 20151
<b>Telephone</b>	703-818-4241
<b>Fax</b>	703-818-4601
<b>Email</b>	<a href="mailto:lminnich@fedcsc.com">lminnich@fedcsc.com</a>
<b>Position/Title</b>	Medicare Outreach and QA Contract Provider Education Manager

### Education:

Degree/Year	Institution, City, State	Major Area of Study
MS/1988	Virginia Commonwealth University, Richmond, VA	Biology
BS/1985	Virginia Commonwealth University, Richmond, VA	Biology

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

During the past 5 ½ years, Ms. Minnich has worked with CSC and Strategic Health Solutions supporting CMS in the development of educational products for Medicare Fee-for-Service providers. She also has over 15 years of progressive experience developing, coordinating, or managing a wide range of projects (including supporting the development of educational publications and training activities) for the EPA, commercial environmental testing laboratories, and environmental sampling contractors. Additionally, Ms. Minnich has experience teaching at the university level.

Ms. Minnich's experience includes:

Provider Education Manager/Team Leader for Medicare Outreach and QA

- Managed or supported the development of over 8 reference guides, 60 fact sheets, 25 brochures, and 15 charts/tip sheets for the CMS Medicare Learning Network (MLN)
- Evaluated storyboards for nine CMS MLN WBT courses covering topics including: Medicare Secondary Payer, the Physician Quality Reporting Initiative (PQRI), ICD-9-CM diagnosis coding, fraud and abuse, Medicare preventive services, and remittance advice
- Project Manager for the initial release of the Understanding the Remittance Advice: A Guide for Medicare Providers, Physicians, Suppliers, and Billers and two companion WBT courses
- Supported the development of multiple brochures, fact sheets, and journal ads for CMS' educational campaigns regarding Medicare Preventive Services, the Medicare Prescription Discount Card Program, and the National Provider Identifier

Project Leader/Analyst/Coordinator for the EPA Contract Laboratory Program (CLP) Sample Management Office (SMO)

- Developed over 1,500 documents and reports for the EPA CLP and served as a primary communication contact for the EPA CLP project officers and work assignment managers
- Provided on-site training for EPA Region V sampling contractors and Regional office personnel on sampling documentation
- Presented information on Special Analytical Services (SAS) data review/inspection procedures at conferences for EPA Regional and commercial environmental testing laboratory office managers
- Managed the on-site laboratory audit program for SAS laboratories

Laboratory Instructor/Graduate Assistant at Virginia Commonwealth University

- Instructor for over 20 general biology laboratory courses for both biology major and non-major college students
- Substituted as an instructor for genetics laboratories as well as genetics and general biology lecture courses

**Provide a brief explanation, no more than two or three sentences, explaining how you are qualified to develop content or train learners for this activity.** (This summary will be posted online so that learners have access to information regarding content developers or trainers before they engage in the CE activity).

Loren Minnich has over 20 years experience managing projects that include the development of educational products and training activities for Government agencies. She has 5 ½ years of experience developing reference guides, fact sheets, brochures, articles, and Web-Based Training (WBT) courses for CMS' Medicare Learning Network for Medicare Fee-for-Service providers.

## Centers for Medicare & Medicaid Services (CMS) Biographical Data Form

For development of the following Web-Based Training (WBT) activities:

- Medicare Fraud & Abuse WBT

<b>Name</b>	Colleen Seymore
<b>Date Submitted</b>	FEB 2009
<b>Degrees</b>	BS/Criminal Justice
<b>Business Address</b>	Strategic Health Solutions 10040 Regency Circle, Suite 150 Omaha, NE 68114
<b>Telephone</b>	402.452.3333
<b>Fax</b>	402.452.3334
<b>Email</b>	<a href="mailto:c.seymore@strategichs.com">c.seymore@strategichs.com</a>
<b>Position/Title</b>	Medicare Outreach & QA Medical Review Subject Matter Expert

### Education:

Degree/Year	Institution, City, State	Major Area of Study
BS/2002	Chestnut Hill College	Criminal Justice

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

Ms. Seymore has worked in numerous roles over the past 8 years, providing her with a well rounded view and understanding of all aspects of the Medicare Program. She has coordinated, developed, and implemented various tools and processes to assist others with the expansion of their knowledge and expertise.

Ms. Seymore's experience includes:

#### Medical Review Subject Matter Expert (SME)/Data Analyst

- Provides expert knowledge with specified Medicare rules, regulations, and policies
- Participated in content development for the Medicare Fraud & Abuse fact sheet and WBT
- Provides business intelligence for the development of computer programs that enable users to

complete work associated with Medicare contracts

- Assists in development and implementation of training materials for Part D review

#### Benefit Integrity (BI) Manager

- Developed and implemented training materials, such as work instructions, utilized by the BI department
- Contributed to newsletters for Medicare providers
- Provided Medicare fraud and abuse training for BI staff
- Developed training materials for new agents with the Office of Inspector General (OIG)
- Provided SME knowledge to the OIG, Assistant United States Attorneys (AUSA), and other Law Enforcement agents during investigations and development of cases

#### Senior Business Analyst

- Coordination, development, and implementation of processes and training materials for the growth and expansion of new and existing departments
- Quality Assurance (QA) for written and systemic processes
- Developed educational materials and provided training for claims processing, government rules and regulations, and new systems

**Provide a brief explanation, no more than two or three sentences, explaining how you are qualified to develop content or train learners for this activity.** (This summary will be posted online so that learners have access to information regarding content developers or trainers before they engage in the CE activity).

Colleen Seymore has a bachelor's degree in Criminal Justice and over 13 years experience in the medical insurance field. Ms. Seymore has seven years experience in developing and implementing training materials for various Medicare claims processing systems, quality assurance processes, and benefit integrity functions.



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- Understanding the Remittance Advice for Institutional Providers WBT
- Understanding the Remittance Advice for Professional Providers WBT

<b>Name</b>	Pam Douglas
<b>Date Submitted</b>	FEB 2009
<b>Degrees</b>	BS/Nursing
<b>Business Address</b>	Strategic Health Solutions 10040 Regency Circle, Suite 150 Omaha, Nebraska 68114
<b>Telephone</b>	402-452-3333
<b>Fax</b>	402-452-3334
<b>Email</b>	<a href="mailto:p.douglas@strategichs.com">p.douglas@strategichs.com</a>
<b>Position/Title</b>	Medicare Outreach & Quality Assurance Content Review Manager

### Education:

Degree/Year	Institution, City, State	Major Area of Study
1997	Fort Hays State University, Hays, Kansas	BSN Nursing
1978	Mary Lanning School of Nursing and Hastings College, Hastings, Nebraska	Diploma Nursing

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

Since April 2008, Ms. Pam Douglas has been responsible for analyzing and managing the content/language review of all Centers for Medicare & Medicaid (CMS) Change Requests/Transmittals. Ms. Douglas has been responsible for development of Errata sheets, recommendations for CMS training product updates, and development and quality assurance review of educational products requested by CMS.

Ms. Douglas' prior experience includes:

Medical Compliance Manager

- Assisted in the development and presentation of cost based Medicare MA medical review audit results to MA plans

Utilization Manager Benefit Integrity/Benefit Integrity Investigations Manager

- Responsible for the management and coordination of the Task Order activities with the internal units, subcontractors, and Law Enforcement
- Authored and provided required deliverables
- Participated in educational activities related to fraud, including case development, data analysis, and coordinating fraud referrals, at the local, state, and regional level

Medicare Part A and B Nurse Consultant/ Medical Review Quality Improvement Coordinator

- Developed provider educational provider products to address appropriate billing and reimbursement
- Worked directly with Medicare claims processing systems, including FISS, MCS, and VMS, and databases, include FID and CMS ARTS
- Participated in the monitoring of CMS Transmittals and National Coverage Determinations (NCDs) and the writing of Local Coverage Determinations (LCDs)
- Participated in state-wide education and implementation of the Outpatient Prospective Payment System
- Participated as the Medical Review representative in the Part A Local Provider Education Training (LPET) and the Carrier Advisory Committee (CAC)

Critical Care Outcomes Coordinator

- Responsible for the development, coordination, and delivery of didactic and clinical education of critical care nurses

**Provide a brief explanation, no more than two or three sentences, explaining how you are qualified to develop content or train learners for this activity.** (This summary will be posted online so that learners have access to information regarding content developers or trainers before they engage in the CE activity).

Ms. Pam Douglas has a bachelor's degree in nursing and 10 years of Medicare experience. Ms. Douglas' Medicare background includes Medicare Part A, B, C, and Benefit Integrity. Ms. Douglas has participated in the development of content for Medicare educational products, including printed material, PowerPoint presentations, and web-based training courses.

## Centers for Medicare & Medicaid Services (CMS) Biographical Data Form

For development of the following Web-Based Training (WBT) activities:

- Medicare Fraud & Abuse WBT

<b>Name</b>	Carolyn K. Johnson
<b>Date Submitted</b>	2/25/2009
<b>Degrees</b>	BS Journalism
<b>Business Address</b>	Strategic Health Solutions 10040 Regency Circle, Suite 150
	Omaha, Nebraska 68114
<b>Telephone</b>	402.452.3333
<b>Fax</b>	402.452.3334
<b>Email</b>	c.johnson@strategichs.com
<b>Position/Title</b>	Medicare Outreach & QA Technical Writer

**Education:**

Degree/Year	Institution, City, State	Major Area of Study
1961	University of Nebraska at Omaha	BS Journalism

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

While at StrategicHealthSolutions, LLC, Ms. Carolyn Johnson has been responsible for editing and finalizing proposals for submission to government entities and editing and updating guides, fact sheets, and web-based training materials.

Ms. Johnson's experience includes:

Eight years working as a technical communications consultant with the following responsibilities:

- Developing and updating manuals for a variety of software applications, included new software enabling agents to work at home, a document to answer over 100 user questions, manuals for financial software, help desk and training manuals, policy and procedures for a systems engineering department, work Instructions for a variety of procedures, training materials for a web portal project

- Editing and updating guides, fact sheets, and web-based training materials
- Documenting new software procedures for business and technical audiences
- Editing and finalizing proposals for submission to government entities
- Evaluating existing vendor documentation and updating it to meet current standards

Publications Editor at Nexterna, Inc.

Edited and wrote a wide variety of materials

- Created Standard Operating Procedures required for ISO 9001 certification
- Edited technical manuals, marketing material, Web pages, white papers, and sales proposals
- Produced and maintained company style guide and glossary

Project Manager at First Data Corporation

Managed test team and expedited projects for major financial institution

- Documented client-specific system code and built MS Access database
- Coordinated production and training of internal processes and procedures

Knowledge Engineer, Domain Expert, at First Data Corporation

Part of a team that developed and maintained a database of corporate knowledge to enable service representatives to answer client questions quickly and accurately

- Wrote questions and solutions used to build knowledge in help desk software
- Developed processes for acquisition and maintenance of online information

Documentation Supervisor at First Data Corporation

Supervised eight writers who updated fifteen user manuals revised six times per year

- Responsible for hiring, training, coaching, scheduling, reviewing performance, and terminating while maintaining low employee turnover

**Provide a brief explanation, no more than two or three sentences, explaining how you are qualified to develop content or train learners for this activity.** (This summary will be posted online so that learners have access to information regarding content developers or trainers before they engage in the CE activity).

Ms. Johnson has the education and experience required to write and edit a wide variety of materials. She is currently engaged in working with educational products, including printed materials and web-based training content.

**Biographical Data Form**

**Activity Title:** ICD-9-CM WBT

**Name:** Marilu Hue, RHIA, CCS

**Date Submitted:** September 1, 2009

**Business Address:** 7500 Security Boulevard, Baltimore, MD 21244

**Telephone:** 410 786 4510

**Fax:** 410 786 0169

**Email:** marilu.hue.@cms.hhs.gov

**Position/Title:** Health Insurance Specialist

**Education**

<b>Degree/Year</b>	<b>Institution, City, State</b>	<b>Major Area of Study</b>
<u>Degree/Year</u>	<u>Institution, City, State</u>	<u>Major Area of Study</u>
BS/ 1994	York College of Pennsylvania York, Pennsylvania	Health Records Administration

**Additional:** Registered Health Information Administrator (RHIA) – effective October 1995

Certified Coding Specialist (CCS) – effective September 1998

**Professional experience:** (please include experience and publications relevant to this educational activity)

I have over 15 years of experience working in the health information management field. Prior to joining CMS I was the manager at CSC CDAC (Clinical Data Abstraction Center) for the Hospital Payment Monitoring Program (HPMP) under contract through the agency's Office of Clinical Standards and Quality (OCSQ). I had a staff of approximately 10 coding specialists and 12 medical coverage reviewers.

As a Health Insurance Specialist at CMS I am currently responsible for the following:

- Evaluate Medicare payment policies relative to the hospital inpatient prospective payment system (IPPS)
- Develop and maintain the ICD-9-CM procedure classification system as a coding and DRG analyst
- Communicate complex coding changes, technical information and policy issues to the DRG team and Supervisor
- Develop written materials to ensure effective and timely communication of significant policy issues to senior leadership
- Lead discussions on coding policy proposals at the ICD-9-CM Coordination and Maintenance Committee meetings
- Provide oral communication to facilitate decision making support for Agency programs and policies
- Participate in inter-departmental meetings providing ICD-9-CM coding policy expertise
- Communicate with internal and external customers efficiently
- Assist in editing written materials for publication and for display
- Attend in-service training sessions

Mady Hue is a Health Insurance Specialist at the Centers for Medicare and Medicaid Services (CMS) located in Baltimore, Maryland. She reviews and prepares technical updates and revisions to the MS-DRG (Medicare Severity-Diagnosis Related Group) Classification System. In addition, she is a member of the Hospital Acquired Conditions (HAC) and Present on Admission (POA) indicator workgroup. She also prepares the procedure addenda documents for annual revisions to ICD-9-CM, creating and managing the Departments' official ICD-9-CM procedure code document and database that is used as the HIPAA standard.

**Biographical Data Form**

**Activity Title:** ICD-9-CM WBT

**Name:** Robin Sutton

**Date Submitted:** September 1, 2009

**Business Address:** 7500 Security Boulevard, Baltimore, MD 21244

**Telephone:** 410 786 8997

**Fax:** 410 786 0330

**Email:** robin.sutton@cms.hhs.gov

**Position/Title:** Health Insurance Specialist

**Education**

<b>Degree/Year</b>	<b>Institution, City, State</b>	<b>Major Area of Study</b>
<u>Degree/Year</u>	<u>Institution, City, State</u>	<u>Major Area of Study</u>
Anticipated	University of Maryland	B.A. Communications
Graduation date	University College	
2011		

**Professional experience and Additional Information:** (Include information about your professional experience that prepared you to plan, administer and/or conduct and deliver learning/training events. This detailed description will be kept in the CE file for documentation and tracking purposes.)

During the past 4 years that I have worked with the Division of Provider Information Planning and Development, I have been involved in the development of content and production of educational

training products. I have coordinated research and content development with various components and subject matter experts within the Centers for Medicare & Medicaid Services and with external agencies

**My experience includes:**

**Lead Staff**

Responsible for responding to electronic inquiries in the Medicare Learning Network (MLN) E-mail system. The MLN e-mail system was designed to provide learners an opportunity to make inquiries regarding MLN products and services and receive written or verbal communication to help them resolve issues with courses or products.

**Government Task Lead**

Monitor contractor performance of product review and update. Ensure that product updates comply with CMS guidelines for continuing education, clearance, web postings, printing, etc. Responsible for contributing to the overall enhancement of the MLN Web pages and promoting MLN products and services.

The extent of my involvement in these activities includes:

- Coordinate content development and review efforts between various entities internal and external to CMS
- Develop, design, evaluate, beta test, disseminate and update educational products
- Review products to make sure they comply with HHS/CMS guidelines

Ms. Sutton is a Health Insurance Specialist at the Centers for Medicare and Medicaid Services (CMS) located in Baltimore, Maryland. She develops and reviews Medicare Learning Network products used to inform and educate Medicare fee-for-service providers.