

The Fall 2003 "CMS Voice" Newsletter

1-800-Medicare Blimp Launched at the State Fair of Texas

By Rod Clark, Region VI

On October 10, the 1-800-Medicare blimp was officially launched in front of "Big Tex" at the State Fair of Texas, one of the largest State fairs in the nation. ("Big Tex," is a 52-foot tall figure constructed from iron-pipe drill casing and papier-mâché, the tallest "cowboy" in Texas.) Each fall, CMS kicks-off its national television advertising campaign to help the more than 40 million people on Medicare take advantage of resources available to answer their questions about Medicare options, including health plans and coverage.

The 1-800-Medicare blimp will tour many parts of the country throughout the fall providing aerial television coverage for selected sporting events as well as making appearances at major community events and senior activities.

Research has indicated that many seniors understand very little about their Medicare benefits including coverage, supplemental Medigap plans, co-pays and deductibles. Using a blimp to elevate public awareness is intended to be a fun way to advertise that the government has a toll-free phone number for the 35 million seniors in the program to call if they have questions.

The Dallas Regional Office staff assisted the CMS Public Affairs Office in organizing a press conference marking the inaugural launch of the 1-800-Medicare blimp at the State Fair. Regional Office staff invited approximately 30 seniors and special guests to participate in the press event. Additionally, the press event featured presentations by CMS Public Affairs Director Dallas "Rob" Sweezy; Roger Perez, Region VI Deputy Regional Administrator; and Kevin Warren, Director of Quality Improvement for Nursing Home and Home Health, Texas Medical Foundation. In addition, participants included a representative from AARP Texas and Jacob Locke, a Medicare beneficiary.

In Dallas, the 1-800-Medicare blimp was shown on a local television station. It was also mentioned on the Texas State Radio Network and was featured in the monthly newspaper, *The Senior News Source*. The

1-800-Medicare blimp floated over the State fair and the Texas vs. Oklahoma University football game on October 10–11. ABC Sports featured the blimp three times during its broadcast of the popular football game.

Some of the Dallas Beneficiary Services staff participated in the filming of stock photography for distribution to television stations and were featured in advertising shots for the national campaign riding on the blimp! A thrill of a lifetime!

Special thanks to Jenny McGihon and Katie Dziak of the CMS Public Affairs Office and to Dallas CMS staffers Rod Clark, Susan McLaughlin, Julia Lothrop, Roger Perez and Charna Pettaway for their work in pulling the event together and assistance with filming the blimp.

Please contact Julia Lothrop, ORA, (214) 767-6386, or Susan McLaughlin, DMO, (214) 767-6487, for more information.

History Creates Understanding

by Sheila Wolf, OOM

In the past, individuals retiring from CMS left the Agency taking years of knowledge and experience with them. Recently, however, many of our retirees have been taking the time to record job-related experiences and information onto CDs before they leave. This process is enabling the Agency to preserve the retirees' valuable expertise for CMS employees.

The CDs contain information on a variety of topics, including the background and history of how and why certain programs came about and the development of the Agency over the years. For example, one retiree's CD discusses the 1997 re-organization and provides insight as to how it came about and how it was developed. In addition, many retirees include professional advice and ideas about the future of CMS on their CDs. A sampling of these words of wisdom follows:

"No one's job is done until everyone's job is done." --*Joe Broseker*

"Be forthright and honest. Say where we are coming from. It doesn't mean you have to agree, but you have to be honest and willing to listen." --*Mary Anne Durham*

"My favorite part of this (focus groups on what is CMS' role) was a bunch of beneficiaries who stood up and said that CMS' role should be to enforce the Hippocratic Oath and then a bunch of doctors stood up and said CMS should

never talk to us because they just get in our way of delivering service. That was very interesting.” --*Liz Cusick*

“Sometimes executives or outside agencies ask for information. They may think of this in a minute. Gathering and analyzing can be a lot of work. Provide what you can easily provide. If it will take a long time, say it. If you want this, it will take this much time...” --*Milt Tipperman*

“Be accessible. Talk to everybody who wants to talk to you. Go to every national group that you are asked to go to if you can make it. Be with every constituent that wants to meet with you. Return all phone calls.” --*Tom Hoyer*

“Do try to have fun (at work) because you have to do this for a long time and you might as well enjoy your work.” --*Bob Christy*

“With CMS a lot of the knowledge we have is unique to us, particularly in the programs. Nobody knows programs like we do because that’s our stock and trade.” --*Joe Brodnicki*

San Francisco Regional Office Assists Victims of Southern California Wildfires

By Sharon Yee, Region IX

On October 27, President Bush declared the counties of Los Angeles, San Bernardino, Riverside, San Diego, and Ventura a Federal disaster area due to the devastation wrought by wildfires. The destructive path of the wildfires kept more than 15,000 firefighters at bay and claimed more than 20 lives, approximately 3,500 homes, and 750,000 acres of land. Almost half of San Diego County’s American Indians lost their homes or were forced to evacuate.

As the wildfires wreaked havoc on southern California, CMS and its contractors in Region IX provided assistance to carriers and providers throughout the region. Here’s a sample of reports provided daily to HHS:

- The Medicare Part B carrier received an inquiry from an ambulance provider on how to submit an ambulance claim when the beneficiary had no other way to leave the fire area. The question was on the proper code to use since the beneficiary's chronic condition was not the reason for the ambulance transportation. The contractor instructed all providers to document the reasons for such (special) claims.

- CMS received an inquiry from a facility that was approached by surrounding hospitals impacted by the fires to divert an overflow of patients to this facility. The hospital asked CMS for assurance that it would be reimbursed and would not be at risk of losing its status as a Long Term Acute Care Hospital. CMS notified the hospital CEO that staff will work with the Medicare fiscal intermediary to ensure reimbursement of these emergency patients and that any cost-reporting audits will consider this emergency period.
- The Medicare Part B carrier received a call from a beneficiary asking how to get a new Medicare card because hers was lost in the fire. In anticipation of this, Region IX developed a flyer to help beneficiaries who lost their Social Security, Medicare, or Medicaid card in the fires. The flyer included telephone numbers for agencies that could provide replacement documents. This information was distributed to the appropriate agencies in southern California (e.g., FEMA, American Red Cross, Tribal leaders) including the Social Security Administration to share with its field offices located in the affected and surrounding areas. Region IX also sent short articles summarizing the flyer content to local community and daily papers in the affected areas since most fire victims kept informed through the media.

CMS Data Users Group

By Cozette Pinkney, OCSQ

The CMS Data Users Group (CDUG) was founded August 13, 1993, as an outgrowth of the Office of Information Services (OIS) interaction with the Medicare data analyst and application developer community.

The CDUG is open to all CMS components. It is comprised of CMS Central and Regional Office management, staff, and Agency business partners. CDUG welcomes technical and non-technical staff to come together, on a monthly basis, to learn and discuss the uses of new and/or existing systems and to share data knowledge and experiences with all CMS data analysts.

Data analysts agree that the CDUG is the best CMS source to keep business analysts aware of new and pending data changes.

In honor of CDUG's 10-year anniversary, a celebration was held at its August 2003 meeting. Management sponsors Jared Adair and Regina McPhillips were recognized for their initial sponsorship and commitment to CMS data users.

Reaching Out to the Community

PHILADELPHIA Regional office DONATES EXCESS COMPUTERS

By Kathy Motto, Region III

Serving as the first Regional Office to upgrade its computer hardware under "CMS PC Refresh" gave the Philadelphia RO (RO) an opportunity to take advantage of the latest technology, while also doing good in the community. Under the direction of Regional Administrator Sonia A. Madison, the RO has been working diligently to clean up and clear out excess computers under a massive effort to donate the computers to worthy organizations.

Approximately 80 computers and monitors and more than 20 printers were donated to APPRISE, the Pennsylvania State Health Insurance Assistance Program. APPRISE will put these computers to good use by distributing some of them to its counselors. Other donated computers will be placed in senior centers, benefiting those who would not otherwise have access to technology.

The RO also plans to donate approximately 80 more computers to the University City High School in West Philadelphia, where the hardware will be used by the leaders of tomorrow. The RO is pleased to make these donations to such worthy recipients.

Philadelphia Regional Office Introduces Diversity Dialogue

By Jennifer Olsen and Kevin Berna, Region III

The Diversity Dialogue Series, introduced by the Philadelphia Regional Office (RO) in July 2003, promotes cultural awareness and provides a forum for RO staff to explore diversity-related issues. Encouraging interactive discussion, the series occurs quarterly and complements CMS commemorative programs held throughout the year.

The first Region III Diversity Dialogue Series was held on July 23, and focused on Asian awareness. Qien He of the Beneficiary Services Branch painted a demographic picture of the Asian community in America, and facilitated a staff discussion contrasting Asian and American cultures. Participants shared lively tips and "taboos" inherent in Asian customs.

In honor of Hispanic Heritage Month, Region III focused the second Diversity Dialogue Series during the Hispanic Heritage Celebration on October 7. An activity-filled day highlighted the contributions of the

Hispanic community. Ramon Suriz-Fernandez, OEOCR Director, shared his insights on the Hispanic experience in CMS, in the Federal workforce, and throughout the country.

Adding to the celebration, Jean Maldonado of the Medicaid Division's Program Oversight Branch hosted a "Journey with Jean" highlighting the influence and contributions of the Hispanic community. This wide-ranging presentation explored Hispanic accomplishments in the areas of politics, Nobel Prize awards, entertainment, writers and artists, social activism, sports, business, education, government and military service, and Medal of Honor awards. The presentation featured a slide presentation, Q&A session, program packets and door prizes.

The Honorable Pedro A. Cortes, Pennsylvania Secretary of State and first person of Puerto Rican descent to hold that office outside of Puerto Rico, was the special guest at the Hispanic Heritage Celebration and facilitated the Diversity Dialogue Series. Secretary Cortes sparked a fascinating discussion about diversity as the kind of proactive exercise contemplated by Dr. Martin Luther King, Jr.'s challenge that "change comes from concerted effort rather than wishful thinking."

Initiating programs like the Diversity Dialogue Series is one way the RO has been proactive in raising awareness of cultural diversity. A number of external outreach and education activities are also being coordinated with local communities. The RO looks forward to the continued success of its diversity awareness activities, both within the region and beyond.

"Take a Loved One to the Doctor Day" Health Fair Held

By Denesecia Green, OOM

The Department of Health and Human Services (HHS), under its Eliminating Racial and Ethnic Disparities initiative, has developed strategies to tackle clinical conditions that plague communities of color. One of those strategies includes the Closing the Health Gap education campaign, which provides health education to those communities. As a result, HHS, in conjunction with ABC Radio Networks, launched "Take A Loved One to the Doctor Day." This campaign is a national event designed to encourage individuals to visit a health professional and to obtain health information.

On September 16, CMS in Central Office, in partnership with Times Community Services (a local community-based organization), organized the "Take a Loved One to the Doctor Day" health fair held at the War Memorial Plaza in downtown Baltimore. This well attended fair included more than 40 community-based organizations, politicians,

community leaders, health officials, and celebrities. A variety of free health screenings, and health educational materials was provided. Interpreter services and translated health education materials were also provided to individuals that were limited-English proficient.

Supporters and attendees included Dr. Richard Carmona, U.S. Surgeon General; Martin O'Malley, Mayor of Baltimore; Dr. Peter Beilenson, Baltimore City Health Commissioner; and James Garner, Hempstead (New York) Mayor & Vice President of the U.S. Conference of Mayors.

"Charting Your Career" Education Fair

By Anna Johnson, OOM

The Office of Operations Management hosted the "Charting Your Career (CYC) Education Fair" at Central Office on November 18. Representatives from many local institutions were present: Johns Hopkins University; School of Professional Studies in Business and Education; USDA Graduate School; University of Maryland, Baltimore County; Community College of Baltimore County; Toastmasters; Loyola College; Villa Julie College; University of Phoenix; and New Horizons.

The Fair provided staff with information helpful in identifying and exploring educational options that could meet career development goals. Identifying and exploring options is the second phase of CMS' career development model. The model also includes three other phases: Self Assessment (Phase one), Goal Setting and Planning (Phase three) and Taking Action (Phase four). The Charting Your Career service provides a series of workshops designed to support each phase of the model. Workshops help you identify key landmarks in your career; develop your professional vision; assess your goals, dreams and wishes; conduct research; revise/prepare your resume; prepare for interviews; and sharpen your networking skills.

Update on HIGLAS

By Ilene London, OIS

The Healthcare Integrated General Ledger Accounting System (HIGLAS) is a major information technology investment with a total life cycle of about 10 years. When fully implemented, HIGLAS will provide CMS with a single, unified accounting system that will support all Medicare fee-for-service contractors and CMS Central Office administrative accounting. HIGLAS will establish standard financial processes, give CMS enhanced oversight of Medicare contractor

financial operations, and significantly reduce errors in financial reporting.

Major progress is being made in developing and implementing HIGLAS. Testing of the first portion of HIGLAS functionality, also referred to as HIGLAS Major Milestone 1 (MM1), began as scheduled on October 14, 2003, at the two pilot contractors, Empire and Palmetto, and is well underway. The pilot test teams will execute over 3,500 test scripts at Palmetto and Empire during MM1 testing.

We have achieved a number of key goals so far in testing this first portion of HIGLAS functionality. These include:

- Completion of the first "round-trip" of the full payment process from the receipt of the claim to the disbursement of payment.
- Successful deployment of onsite support to the pilot contractors.
- Implementation of the HIGLAS Help Desk and the processing of calls.
- Stabilization of support processes across the pilot.
- Implementation of a stable and available pilot-testing environment.
- Successful implementation of a problem reporting and resolution process.
- Daily calls to maintain efficient issue resolution and status.

While the pilot test for MM1 is occurring, the HIGLAS team is concurrently developing Major Milestone 2 (MM2), for which testing is scheduled to begin in April 2004. MM2 will add the balance of functionality needed to complete the full business "footprint" of the claims payment process. Major Milestone 3 (MM3) is scheduled for testing in September 2004. MM3 functionality includes a component piece called History, which delivers functionality for system and accounting auditability, and summary/detail document level history.

HIPAA Goes High Tech

By Richard Jones, Region IV

Did you know that if a physician closes his practice to attend a full day seminar it could cost him as much as \$20,000? (This figure is based on information from the Medical Association of Georgia.)

As the CMS Southern Consortium Health Insurance Portability and Accountability Act (HIPAA) team developed the 2003 HIPAA outreach campaign, they kept this costly figure in mind. They needed a mechanism that could reach a large number of providers. Hosting conferences and workshops only reached a limited number of

providers and the average cost per provider was high, totaling approximately \$100 per attendee (\$30,000 for a conference of 300).

The team selected video streaming via the Internet as their medium. This Web-based multimedia product would allow providers to view a HIPAA presentation similar to that of a conference setting, but at the provider's convenience. The PowerPoint slides were synchronized with the video-streaming presenter. This format is similar to television quality viewing, yet it doesn't require the long wait of a video file download.

Another benefit of this medium is that it allows providers unlimited viewings of the presentations. Since HIPAA is complicated, the ability to repeat a topic or an entire presentation is vital in the educational process.

The team, in collaboration with their industry partners, identified the topics for the educational series of HIPAA presentations. These presentations would be available to the providers 24 hours a day, 7 days a week at no cost. With the necessary approvals from Central Office, the team began working on the scripts and the PowerPoint slides for each of the presentations. Once the presentations were complete, the team arranged for studio time to record the videos. The team's educational Webcast presentations became the foundation for the entire 2003 HIPAA outreach campaign entitled "Achieving Compliance Together" or the ACT Campaign. Currently, this educational asset consists of 7 modules and approximately 196 minutes of video. These presentations can be viewed at www.eventstreams.com/cms/tm_001.

Within 5 months, the total number of registrants for these Webcast presentations nears 25,000, which doesn't include the possibility that additional viewers were present with the registrant. That number is expected to climb to 75,000-100,000 as the team's print advertising campaign begins this winter. The survey data received from these presentations indicate that 97 percent of the viewers feel the information is useful.

For more information, please contact any member of the Southern Consortium HIPAA Team: Cathy Benoit (404-562-7305); Brenda Denman (214-767-5171); Sharon Fisher (404-562-7377); Dale Ivey (404-562-7221); Rick Jones (404-562-7201); or Melissa Scarborough (214-767-5499).

In Memoriam

John Rajecki Hopkins

August 6, 1950 – November 28, 2003

John Hopkins, age 53, passed away on Friday, November 28, at Greater Baltimore Medical Center, Baltimore, MD, due to complications of muscular dystrophy (MD).

John joined CMS in 1988 with a health professional background as a licensed nursing home administrator. He collaborated with Central and Regional Offices on the Federal Oversight Surveillance Survey, and the Independent Improved Data Recording Project. Most recently, he developed summaries for each State using the data collected through the nursing home data compendium. At the time of his death, John was a Health Insurance Specialist in CMSO's Survey & Certification Group, Division of Nursing Homes.

John was born at Ft. Belvoir, VA, the son of a career Army officer, and raised in Washington, DC, and Arlington, VA.

In 1972, he earned a bachelor's degree in economics from the University of Virginia, and a master's in health care administration from George Washington University in 1974.

Diagnosed with MD at the age of 12, John was an advocate for the disabled and worked with CMS and HHS on disability issues.

He was involved in the Boy Scouts of America all of his life, having earned the highest rank attainable—Eagle Scout. In the true Scout tradition, he advanced into a leadership role and became a merit badge counselor.

John was a member and trustee of Towson Presbyterian Church, Towson, MD.

He is survived by his wife of 27 years, Joyce; and two sons: John Harvey Hopkins of Whittier, CA, and Nathan William Hopkins of New York.

Denver Regional Office Honors 2003 Francis T. Ishida Award Winners

By Helen Collins, Region VIII

On September 10, the Denver Regional Office presented the 2003 Francis T. Ishida Award for Excellence in Customer Service to six awardees. This annual award was established 7 years ago to honor the memory of former Regional Administrator Frank Ishida. Frank Ishida was widely known for his devotion to excellence in customer service. He devoted his Federal career to the most vulnerable citizens and provided an example of compassion and dedication to those who depend on the Medicare and Medicaid programs. The award recognizes individuals or groups who exemplify the same ideals of customer service modeled by Frank Ishida and gives recognition to those who perform work well beyond what is expected in providing service to beneficiaries of the Medicare, Medicaid, and State Children's Health Insurance programs.

The awardees' achievements were highlighted during the ceremony, and each received a plaque honoring them for their outstanding customer service:

Lorraine Blanchfield, President-Elect, Cortez Kiva Empowerment Center. Ms. Blanchfield is the first Medicare-Medicaid consumer to receive this award. She was recognized for her work in developing a drop-in center for mental health consumers in southwestern Colorado. Ms. Blanchfield worked with case managers to develop the concept, organize fund-raisers, and organize events to introduce the center to the community.

Nancy Clark, SSI Medicaid Policy Specialist, Montana Public Assistance Bureau. Ms. Clark was recognized for her outstanding work in improvements and cost savings in her agency as well as enhancing the role of government in the community. She developed a simplified Medicaid application for seniors and the disabled. Ms. Clark also played an important role in researching Medicaid eligibility cost savings, which led to recovery of \$1.1 million. She also wrote and executed a successful grant to expand awareness of senior and disabled Montanans concerning dual eligibility for Medicare and Medicaid. The execution of this grant placed Montana in the top 10 highest performing States for outreach and administrative simplification.

The Colorado Rural Health Center. The Center (represented by Shelly Collings, Monica Everheart, Suzie Herbka, and Dory Switzer)

was recognized for its work in enhancing health care services in Colorado by providing information, education, linkages, tools, and energy toward addressing rural health care issues. The Center has generated almost \$6 million since 1991 to identify and address rural health care issues in Colorado.

L. Charles Meyer, D.D.S., Wyoming Dental Health Program

Administrator. Dr. Meyer was recognized for his ongoing outstanding service to CMS beneficiaries by increasing access to dental care in Wyoming. With 50 years of service, Dr. Meyer has worked to provide access to dental care both directly and indirectly through his dental practice and also in his role as the State's dental director. His accomplishments include organizing a Head Start dental program, founding and directing an Indian-Chicano dental clinic, and serving as the clinic dentist for the dental hygiene program at a community college.

Donald Murphy, M.D. and Michael Wasserman, M.D., Seniors of

Colorado. These physicians were recognized for their comprehensive and compassionate care of Medicare beneficiaries. The physicians have made this their standard of care for every patient in their practice. They operate the largest primary care geriatric practice in the State with a 100 percent Medicare base. The physicians also participate in many physician outreach activities with CMS and are willing to work to identify and address specific issues that create barriers between physicians and the Medicare program.

The awards were presented by Alex Trujillo, Regional Administrator and Joe Nunez, Regional Director. Mark Gilbert, Deputy Regional Administrator, led the ceremony. Members of the Ishida family were in attendance.

Philadelphia Regional Office Nurses Achieve Certification

By Kevin Berna, Region III

In September, two nurses officially became the first Certified Legal Nurse Consultants in the Philadelphia Regional Office (RO). After successfully completing a 1-week training program and final examination, these nurse consultants joined an elite group of certified professionals by earning a credential that is recognized by attorneys, health care providers and other associated professionals nationwide.

The two nurses who achieved this certification are Maria Stewart, RN, BSN, MBA, of the Program Integrity Branch, and Anne Servantez, RN,

BSN, MA, of the Survey Branch. The specialized training affords them a more comprehensive knowledge of the litigation process as it applies to the medical system and standards of patient care. The course also enhances their skills in screening medical cases in an effective and efficient manner, working as liaisons between the medical and legal communities, and detecting medical record tampering.

Stewart and Servantez will use the knowledge and skills they developed on a daily basis. Stewart reviews the medical component of Workers' Compensation cases under Medicare Secondary Payer. In this role, she advises CMS staff and attorneys by projecting future medical care and the associated expenses for injured workers who also are Medicare beneficiaries. Working in the survey area, Servantez conducts nursing facility reviews that include patient medical record reviews for residents.

Considering the benefits of Certified Legal Nurse Consultant training and certification, the nurses have recommended that the program be made available to other interested nurse consultants in the RO. For more information about this program, please visit the Web site for the National Alliance of Certified Legal Nurse Consultants at: www.LegalNurse.com.

Seattle RO Hosts Pre-Review Conferences

By John Toth and Lydia Skeen, Region X

The Seattle Regional Office (RO) began offering education conferences prior to onsite reviews of State Home and Community Based Waiver Services (HCBS) this past September. The conferences are held about 4 to 6 weeks before an onsite review and can be conducted in person, by phone or videoconferencing.

The concept of the pre-review conference was developed in response to Central Office's current objectives for HCBS waivers, including finding ways to do more with less travel dollars, creating less of a need for periodic full management reviews, and opening the door for continuous quality requirements in the final reviews.

In addition to meeting these objectives, the conferences also facilitate a forum for State technical assistance prior to the formal onsite reviews. Specifically, States benefit from the chance to assess and present their systems/procedures and to make any necessary corrections or adjustments prior to those reviews.

From the RO's perspective, the pre-review conferences help to ensure that State requirements are being met. In addition, the RO is given an opportunity to inform the States of their expectations for the pre-review conference, as well as the subsequent entrance and exit conferences. The free flowing discussions held between the States and RO give both parties the chance to improve communication and remove preconceived notions of the rigidity of current management protocols.

So far, staff from both Alaska and Oregon have participated in the pre-review conferences. For the Alaska conference, the waiver managers and the long term care liaison came to the RO from Juneau and Anchorage for an in-person day conference. Similar personnel were in attendance for the Oregon conference, which was held at the State's offices. Both conferences were very well received and enabled the subsequent onsite review to flow more efficiently. Rather than having to return for several visits, the RO was able to review all of the waivers in each State at one time. This type of consolidation establishes the interest and commitment at the State level to maintain an efficient and effective review system.

Creative Outreach in Seattle Regional Office

By Shawn Hanson, Region X

The Seattle Regional Office's (RO) Beneficiary Services Outreach team has been looking for creative ways to reach the RO's "LLLC" populations, that is, those who have difficulty receiving or understanding Medicare information because of **language, literacy, location, or culture**. Because the RO's team is small and travel funds are limited, the group has enlisted the help of partners to provide Medicare information to beneficiaries, soon to be beneficiaries, and their families.

One of most effective approaches to getting our message out has been to tap into the labor union network in Washington State. Team member Andrew Tartella started researching local unions and calling union officials to introduce them to CMS and make them aware of the kinds of information we can provide to their members and retirees. At the time, we had a caregiver poster, produced in conjunction with the Administration on Aging, which listed both the Medicare toll-free line and Web site and the Eldercare Locator number and Web site. Tartella sent out posters and letters to 125 unions describing the services provided by the RO's Beneficiary Services Branch (BSB). BSB developed relationships with 23 of these locals, including many serving rural members and one serving Spanish-speaking members. Many

have asked BSB to provide Medicare training and publications to their members.

Tartella developed a database with contact information for these unions and communicates with them on a regular basis. As a result of the union outreach project, BSB was a key player in an Amalgamated Transit Union Local's decision to hold an election to determine if union members wanted to retroactively choose to have Medicare coverage. Eight union locals have participated in Medicare training. BSB has made valuable connections with several large union coalitions such as the Washington State Labor Council and the King County Labor Council. In addition to contacting the unions, Tartella also contacted all of the public employee retirement systems throughout Washington State to offer Medicare information to their members.

We also expanded our view by looking at companies that we originally had not thought of as needing Medicare information, such as high tech companies like Intel and Microsoft. We dismissed these businesses at first because we thought that most of their employees were too young to have an interest in Medicare. How wrong we were! At a recent meeting with Intel in Oregon (Intel is Oregon's largest private employer), Tartella made a presentation before a room crowded with employees and recent retirees. Although 2 hours were allotted for the meeting, Tartella stayed an additional 2 hours to answer questions from the audience, including Intel's Human Resources staff. Many of the questions pertained to situations that the employees and retirees were experiencing. It is clear that there is a vital need for Medicare information among this group, either for themselves or for their families. The RO plans to continue working with Intel to make sure the company's employees and retirees know how to find accurate Medicare information.

If you have any questions regarding this outreach program, please contact Michelle Dillon Sawtell at 206-615-2368.

New Employees:

CBC—William Lehrman.

CMM—Carol Bazell and Dionne Wainwright-Powell.

CMSO—M. Kathleen Blume.

OA—Teresa Houser.

OAA—Denise Brown.

OACT—Paul Spitalnie.

OCSQ—Jesse Polansky

OFM—Angela Huynh.

OHS—Jamel Sparkes.

OMA—Anjali Mulchandani.

OOM—Barbara Erbe.

ORDI—Penny Mohr.

OSORA—John Burke.

Region III (Philadelphia)—Gregory Greene.

Region IV (Atlanta)—Ann Pfeiffer Huffman and Gail Richardson.

Region X (Seattle)—Carolyn Kendall and Barbara Subert.

Retirees:

CBC—Marianne Pindell and Paul Wrabel.

CMM—Kathleen McCabe and Arthur Suekoff.

OIS—Doris Biondo.

OMA—John Herbst and John Lemieux.

OOM—Mary Fisher.

Region I (Boston)—Herve Guerette

Region III (Philadelphia)—Catherine McCoy

Region IV (Atlanta)—Rita Brock-Perini.

Region V (Chicago)—Maurice Coffey; Margaret Enright; and Jim Stevens.

Region X (Seattle)—Michael Coblentz.

***CMS Voice* Board of Directors and Editorial Team**

Published quarterly by the Centers for Medicare & Medicaid Services to provide timely information to its employees.

CMS Voice Board: Tod Anderson, Denver RO; Charlene Brown, CMSO; Nancy O'Connor, Philadelphia RO; Linda Schmidt, OOM; Julie Day, CBC; Wes Perich, OFM; Stewart Streimer, CMM; and Pierce Vandegrift, OOM.

Editorial Team: Linda Dauses, OFM; Erin Gordon, CBC; Susan Hahn-Reizner, Chicago RO; Angela James, CBC; Beverly Mohr, OOM; Cindy Pelter, CMSO; Rita Reinsel, OFM; and Kim Sullivan, OFM.

Logo: CMS Graphics, PAO.

Photographer: Michael Forton, OIS.

Consultant: Ann Marie Chesney, ORDI.

Project Officer, Designer & Pagemaster: Beverly Mohr, OOM.