Male Speaker:

I’m honored now to introduce the Chief Operating Officer of the Centers for Medicare and Medicaid Services, Charlene Frizzera. Prior to becoming Chief Operating Officer, Ms. Frizzera held leadership roles in both program management and policy positions as Regional Administrator in the Philadelphia Administrative Office as well as Deputy Director of the Center of Medicaid and State Operations.

Now if you all think your job is a piece of cake, in her current position, Ms. Frizzera has the relatively stress-free job operating an agency with over 4,500 employees and a payroll of $10.2 million each week. Please join me in welcoming Charlene Frizzera.

Charlene Frizzera:

Wow. Now I’m afraid of what I do.

[laughter]

First of all, let me start out with thanking you for attending the 2008 Medicare Advantage, Quality Measurement, and Performance Assessment Training Conference.

Quality is an important priority across all of the healthcare settings in America. If you have any other interaction with CMS other than just Managed Care plans, you’ll see we’re working on quality across all settings: hospitals, physicians, nursing homes. And we’re working very hard to have information up on our Website to help beneficiaries and stakeholders and partners make better choices in healthcare. So quality is bigger than just managed care, but that’s obviously the focus of this conference here.

As you’ve gathered this morning, you’ve seen the many faces of our Medicare beneficiaries. Many of these individuals, as well as your friends and loved ones, I’m sure, are among the nine million beneficiaries enrolled in 523 Part-C contracts and the 25 million beneficiaries enrolled in 1,875 Part-D plans.

You know I have an Aunt Kathy [spelled phonetically] in Colorado, and when MMA was passed, she called not knowing what in the world to do except she got bombarded with a lot of stuff that she needed to pay attention to Part-D. So she called and said, “Gee, I have no idea what to do,” you know, “Should I come to the east coast? Should you fly here? I need a lot of help.”

Well, fortunately for Aunt Kathy, we had lots of tools available cross-country; I could actually help Aunt Kathy find a Part-D plan that worked for her with the help of the Plan Finder and some partners in Colorado, who actually visited her.

Aunt Kathy has diabetes and a bad heart. So from across the country, almost literally coast-to-coast, I was able to find a plan for her that, one, covered most of her drugs, which is a huge, huge advantage for her; second, I found a plan that not only educated her about her diabetic condition but also provided the supplies and made sure that she regularly checks her sugar. I also found a plan that helped her understand what her heart condition was, helped her have a better diet; that
is a huge contributor to part of her heart problems. And I found a plan that has her on a regular routine of preventative care services. It doesn’t get much better than that for a niece across country with an aunt in Colorado who has some pretty severe illnesses with some assurances that I know that a Part-D plan is actually helping to take care of her.

You know, personally and professionally, I am committed to ensuring that all of our beneficiaries assure the best quality care possible. And your presence here today assures me that our partners are also concerned.

Ascribing to the adage that what gets measured gets done, CMS has developed an approach to quality measurement and performance assessment in the Medicare Advantage incorporating sound, scientific principles and methods and developed in cooperation with all of our stakeholders. Our goal is to work collaboratively with you to gather valid, reliable, and clinically meaningful data that are used by managed care organizations and prescription drug plans, healthcare providers, and quality improvement organizations to monitor and improve healthcare quality; to be used by CMS to assess the performance of MCOs and PDPs and reward high performers; to be used by our Medicare beneficiaries like my Aunt Kathy and families like myself and advocates when making healthcare purchasing decisions; and healthcare researchers to advance the science of public health measurement and quality improvement interventions and strategies.

Throughout the next two days, you will explore each of these goals in greater detail. At the end of the conference, I am confident that you will not only understand our quality reporting requirements but also gain insight into how CMS uses the data and, perhaps most importantly, insight into how you can use the experience in case studies, best practices, and practical insights into how your organization may want to use the data internally.

By providing these types of forums, knowledge, and tools, we know that working together, we can continue to build on the success of the last decade and continue to measure and improve quality of care in new and innovative ways.

As Peggy said earlier, we’ve come a long way, but we still have a long way to go. Remember, we are all in this together, and collectively we will improve the healthcare of our beneficiaries.

I want to thank Peggy for opening the conference and laying out the challenges for the future. I also want to thank Carolyn Clancy, who will be the keynote speaker at lunch, who I’m sure will share with you the importance of the public-private partnership and speak to you about the agenda on value-driven healthcare.

As Peggy said, we’ve come a long way, we have a long way to go. You know, thinking back when MMA was passed, and there were -- Abby came to CMS to help us figure out how to manage through all of this, you know, people, including lots of people at CMS, didn’t think we could do it. But you know what? We did.

And the goal for all of us now is to continue to improve on those successes and to ensure that our beneficiaries have good quality care. We have proven that we can change the healthcare system
in this country if we keep up our dedicated spirit and our continuous dialogue, a dialogue within CMS across all of our components, of which many of you are represented here today, and the continuous dialogue with all of our partners and stakeholders across the country. Conferences like this are an important part of that plan.

I want to thank you for spending the next few days with us, sharing your wisdom and experience. I assure you we’ll all leave with a better understanding of the challenges we all face and a continued commitment to work on them together to help CMS ensure that the beneficiaries of this country have better healthcare.

Thank you very much.

[applause]

[end of transcript]