



About Our Presenters

C.F. "SPIKE" MOORE

*Deputy Chief Administrative Law Judge
Office of Medicare Hearings and Appeals
U.S. Department of Health and Human Services*



Judge C.F. Moore was appointed Deputy Chief Administrative Law Judge for the Office of Medicare Hearings and Appeals (OMHA) effective November 6, 2011. In this capacity, he serves as the alter-ego to Chief Administrative Nancy J. Griswold, OMHA's agency head and presides over the second largest federal administrative adjudicative system in the nation. OMHA's administrative law judges resolve disputes involving coverage and payment issues under the Medicare act and regulations.

Judge Moore has extensive management experience having served not only as a Hearing Office Chief ALJ, but also in acting capacities as the Associate Chief ALJ and Deputy Chief ALJ in the Office of the Chief ALJ, for the Social Security Administration (SSA). In these capacities, he was a key figure in SSA's ALJ hiring, designing the interview

process as well as the background investigation process for administrative law judge candidates referred by the Office of Personnel Management. From 2004-2011, Judge Moore was involved in the selection of over 750 ALJs for SSA, over half of the SSA ALJ Corps. In his role as the acting Associate Chief ALJ, he developed and directed the program of service area realignment to transfer approximately 40,000 cases nationally, along with related service areas and their receipts from heavily backlogged hearing offices to hearing offices with better capacities to be held via video teleconferencing. He also designed the decision writer statistical index, a mechanism to enhance case assignments to SSA attorneys and paralegals. As the acting Deputy Chief ALJ from December 2003 through July 2004, Judge Moore was the alter-ego to SSA's Chief ALJ and presided over SSA's administrative adjudicative system. In addition to his other duties for SSA, Judge Moore served a course designer and instructor for the national hearing office chief ALJ training and national docket management training. He has also been an instructor for new ALJ training, decision writer training, as well as other management training classes and seminars for SSA.

Prior to his appointment as an Administrative Law Judge in 1994, Judge Moore served for 11 years as the District Attorney for the 156th Judicial District of Texas. In this capacity, he was the chief felony prosecutor for three rural counties in Texas.

Judge Moore was awarded a B.A. in Government with high honors from the University of Texas at Austin and was inducted into Phi Beta Kappa. He holds a J.D. from the University Of Texas School of Law and worked for most of the period of his graduate and undergraduate career as a Legislative Aide in the Texas House of Representatives.



About Our Presenters

NANCY J. GRISWOLD

**Chief Administrative Law Judge
Office of Medicare Hearings and Appeals
U.S. Department of Health and Human Services**



Judge Nancy Griswold was appointed Chief Administrative Law Judge for the Office of Medicare Hearings and Appeals on March 1, 2010. In this capacity, she oversees the third level review for Medicare appeals within the U.S. Department of Health and Human Services and has responsibility for the second largest Administrative Law Judge (ALJ) corps in the federal system.

Chief Judge Griswold graduated from Baylor University Law School then entered private practice as a labor lawyer in Dallas, Texas. She then moved to Shreveport, Louisiana where her general civil practice centered on personal injury, products liability and aircraft accident trial litigation. In 1990, she left private practice to work with the State of Louisiana where she assisted in the development of the Louisiana's worker's compensation administrative court system, established the Office of the Chief Judge, and created a Workers' Compensation Mediation Program. Judge Griswold became the first Chief Judge of the Louisiana Workers Compensation Court, a post she held for three years.

In June 1995, Judge Griswold was appointed as a federal Administrative Law Judge and served in the Social Security Office of Hearings and Appeals, Shreveport, Louisiana, becoming one of the youngest judges ever appointed to serve in this capacity. In January, 2002, she became the Hearing Office Chief Administrative Law Judge in Shreveport, Louisiana, where she continued to serve until her appointment as acting, and then permanent, Regional Chief Judge for the Boston Region in July of 2004. As Regional Chief Administrative Law Judge in Boston, Judge Griswold was the national lead for implementation of the Commissioner's Disability Service Improvement initiative where she oversaw the formulation of training, requirements development for computer enhancements, and formulation of procedural rules and templates for hearing operations. She also worked on the Medicare transition team, which effectuated the smooth transition of the Medicare workload to the Office of Medicare Hearings and Appeals in July, 2005. Judge Griswold continued to serve in Boston until her appointment as Deputy Chief Administrative Law Judge for the Social Security Administration in December, 2006. As Deputy Chief Administrative Law Judge for Social Security, she assisted in the management of over 8000 employees, including 1200 Administrative Law Judges and 142 hearing offices. In this capacity, she also worked on the formulation of Social Security's extremely successful backlog elimination plan, supervised the appointment of over 300 new Administrative Law Judges, and engineered the implementation of five new state of the art video conferencing offices, called the National Hearing Centers for Social Security's Office of Disability Adjudication and Review. Chief Judge Griswold is a member of the Texas, Louisiana and Colorado State Bar Associations.



About Our Presenters

MARY K. WAKEFIELD, Ph.D.

Acting Deputy Secretary

U.S. Department of Health and Human Services



Mary Wakefield, Ph.D., R.N., serves as the Acting Deputy Secretary of the Department of Health and Human Services.

Prior to becoming Acting Deputy Secretary, Dr. Wakefield was administrator of the Health Resources and Services Administration (HRSA) from 2009 to 2015. HRSA, an agency of the U.S. Department of Health and Human Services, works to strengthen the health care workforce, build healthy communities, increase health equity, and provide health care and support services to people who are geographically isolated, economically or medically vulnerable, or live in a health professional shortage area.

Dr. Wakefield joined HRSA from the University of North Dakota (UND), where she was associate dean for rural health at the School of Medicine

and Health Sciences.

In the 1990s, she served as chief of staff to two North Dakota senators: Kent Conrad (D) and Quentin Burdick (D).

She also has served as director of the Center for Health Policy, Research and Ethics at George Mason University in Fairfax, Virginia, and worked on site as a consultant to the World Health Organization's Global Programme on AIDS in Geneva, Switzerland.

Dr. Wakefield is a fellow in the American Academy of Nursing and a member of the Institute of Medicine (IOM). She served on the IOM committee that produced the landmark reports *To Err is Human* and *Crossing the Quality Chasm*. She also co-chaired the IOM committee that produced the report *Health Professions Education* and chaired the committee that produced the report *Quality through Collaboration: Health Care in Rural America*.

In addition, she has served on the Medicare Payment Advisory Commission, as chair of the National Advisory Council for the Agency for Healthcare Research and Quality, as a member of President Clinton's Advisory Commission on Consumer Protection and Quality in the Health Care Industry, and as a member of the National Advisory Committee to HRSA's Office of Rural Health Policy.

Dr. Wakefield is a native of Devils Lake, North Dakota. She has a bachelor of science degree in nursing from the University of Mary in Bismarck and master's and doctoral degrees in nursing from the University of Texas at Austin.



About Our Presenters

MICHAEL CROCHUNIS

***Deputy Director for the Medicare Enrollment and Appeals Group
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services***

Michael Crochunis is the Deputy Director of the Medicare Enrollment and Appeals Group (MEAG) at the Centers for Medicare & Medicaid Services (CMS). As MEAG's Deputy Director, Mr. Crochunis is responsible for all enrollment and appeals policy under the Medicare Fee-for-Service (FFS), Medicare Advantage (MA), and Medicare Prescription Drug (Part D) programs, and has shared responsibility with the Social Security Administration on Medicare eligibility, enrollment, and low-income subsidy issues. He also has oversight responsibility for all Medicare appeals operations for the FFS, MA, and Part D Qualified Independent Contractors, the appeals units of the Medicare administrative contractors, and CMS' Beneficiary Notice Initiative, which includes provider-issued notices such as the Important Message from Medicare and the Advance Beneficiary Notices of Non-coverage.

Mr. Crochunis previously worked on program integrity issues, including overseeing the implementation of several new program safeguard contractors. He began his federal career in budget formulation, where his main area of concentration was the Medicare managed care program. Mr. Crochunis has been at CMS for 18 years and holds a B.S. in Finance from the University of Baltimore.

LATESHA WALKER

***Provider Relations Coordinator
Centers for Medicare & Medicaid Services
U.S. Department of Health and Human Services***

Latesha Walker RN has been with CMS for over 15 years and currently serves as the Program Relations Coordinator for the Provider Compliance Group in the Office of Financial Management. Most recently, she was Director of Medical Review and Education in PCG, and prior to that she served as Special Assistant in the Office of Administrator in Washington, DC. In previous years, she worked in the Center for Medicare on many payment policy issues related to hospital, ambulatory, and chronic care services.

Latesha received her BSN from Hampton University and MS in Health Policy from the University of Maryland. Her professional background comprises 12 years of fulltime clinical experiences which includes practice at Johns Hopkins Hospital's Neuro ICU unit in Baltimore, Maryland.



About Our Presenters

JASON GREEN

*Director, Program Evaluation and Policy Division
Office of Medicare Hearings and Appeals
U.S. Department of Health and Human Services*

Jason Green has been the Director of the Program Evaluation and Policy Division, within the Office of Medicare Hearings and Appeal since February 2013. The Program Evaluation and Policy Division develops internal guidance and business processes in coordination with the OMHA Office of Operations; works with the Centers for Medicare & Medicaid Services (CMS) and the Departmental Appeals Board (DAB) to coordinate appeals processing and to develop claims appeals policies; administers OMHA's internal program integrity initiatives; coordinates the OMHA ethics program and supports the OMHA Deputy Ethics Counselor; and provides advisory services on appeals adjudication issues to the OMHA senior leadership team and other divisions.

Jason graduated from The Ohio State University Moritz College of Law in 2003, and served as the Executive Editor of the Ohio State Law Journal. Jason worked at a staff attorney at Porter, Wright, Morris & Arthur LLP in Columbus, Ohio, before beginning with the OMHA Western Field Office as an attorney advisor in 2005. Jason moved to OMHA Program Operations in 2006, serving as an attorney advisor working on policy and business process matters. In 2010, Jason accepted a position with the I.R.S. Office of Chief Counsel, as an attorney in the Procedure and Administration section, providing advisory and review services to I.R.S. field staff on a range of tax policy related matters. At the end of 2010, Jason re-joined OMHA as the Special Advisor to the Chief Administrative Law Judge.



About Our Presenters

JOHN ADAMS, Ph.D.

Principal Senior Statistician

Kaiser Permanente Center for Effectiveness and Safety Research, Pasadena, California

EDUCATION

Ph.D., Statistics, 1990, University of Minnesota, Minneapolis

M.S., Statistics, 1988, University of Minnesota, Minneapolis

B.S., Physics, 1982, University of Minnesota, Minneapolis

PROFESSIONAL EXPERIENCE

2012-present: Principal Senior Statistician, Kaiser Permanente Center for Effectiveness and Safety Research, Pasadena, California

1990-2012: Senior Statistician, RAND, Santa Monica, California

1993-2000: Head, Statistical Consulting Service, RAND Statistics Group, Santa Monica, California

1994-1997 Adjunct Assistant Professor, School of Business, University of Southern California, Los Angeles, California

1988-1989 Consultant, The World Bank, Washington, D.C.

1985-1989 Statistician, Center for Urban and Regional Affairs, University of Minnesota, Minneapolis, Minnesota

1985-1989 Research Associate, The Management Information Division, University of Minnesota, Minneapolis, Minnesota

1987 Consultant, Northwest Airlines, Inc., Minneapolis, Minnesota

1985-1986 Consultant, First Bank Systems, Inc., Minneapolis, Minnesota

1985 Consultant, Republic Airlines, Inc., Minneapolis, Minnesota

1982-1987 Instructor/Teaching Assistant, School of Statistics, University of Minnesota, Minneapolis, Minnesota

RESEARCH INTERESTS

Health Care. Quality measurement systems using both process and outcomes. Quality of cancer care. Profiling care providers and organizations. The determinants of patient access to care. Studies of costs and utilization. Disease management program evaluation.

Research Methodology. Sampling and study design. Evaluation methods. The construction and evaluation of simulation models with a special focus on characterization and quantification of sources of uncertainty. Statistical and econometric methods.

ADVISORY POSITIONS

Panel Member, AHRQ's Prevention Quality Indicators (PQI) Composite Measure Workgroup, 2006.

Technical Advisor, The AHRQ Quality Indicators Composite Measure Workgroup, 2006.

Vice President for Academic Affairs, Southern California Chapter of the American Statistical Association, 2004 – 2008.

Committee member, Committee on Improving Evaluation of Anti-Crime Programs, National Research Council, 2004 – 2005.



CONSTANCE B. TOBIAS

Chair

Departmental Appeals Board

U.S. Department of Health and Human Services



Judge Constance B. Tobias was appointed as the Chair of the Departmental Appeals Board (DAB) at the U.S. Department of Health and Human Services on April 29, 2007. The DAB provides impartial, independent review of disputed decisions in a wide range of Department programs under more than 60 statutory provisions. The DAB has three adjudicatory divisions, each with its own set of judges and staff, as well as its own areas of jurisdiction. One of those divisions, the Medicare Operations Division, provides the legal and administrative support to the Administrative Appeals Judges of the Medicare Appeals Council. As the Chair of the DAB, Judge Tobias also serves as the designated Dispute Resolution Specialist for HHS under the Administrative Dispute Resolution Act of 1996. The DAB's leadership role in implementing Alternative Dispute Resolution across the Department is supported by the DAB Alternative Dispute Resolution Division.

Prior to her appointment in 2007, Judge Tobias served at the Department of Veterans Affairs as a Chief Veterans Law Judge of the Board of Veterans' Appeals, as Counsel to the Chairman, and as a staff attorney. She received her J.D. from Cornell University and a Bachelor's Degree from Saint Augustine's College.

