



# CMS Interoperability Mandate Steering Committee Charter

**Overview:** [Sections below describe the reason for the committee including information on its purpose and whether it is supporting any corporate strategic goals, mandates or other business requirements]

**COMMITTEE GOAL/MISSION:** [Describe vision for the committee and how it supports business functions such as strategic goals, mandates or other business requirements.]

The Steering Committee mission or goal is to provides strategic oversight, prioritize competing initiatives, communicate and socialize the program status (timelines, key milestones, financials, risks/issues, and decisions) to senior leadership, facilitate stakeholder engagement and alignment with various value-streams.

**COMMITTEE PURPOSE:** [Describe what the committee will do, and at a high level outline the work the committee is expected to accomplish.]

The primary purpose of the Steering Committee is to serve as the key decision-making body responsible for driving the successful implementation of the program. Steering Committee provides stakeholder communications, strategic oversight on technology decisions and implementations, governance, mitigates issues/risks, and provides guidance for the CMS Interoperability Mandate 0057 program. The committee ensures that the program aligns with the strategic goals, fulfills regulatory requirements, implements interoperability technology, and satisfies business objectives (improving Prior Authorization measures, enhancing data exchange between patients, payers and provider, and promoting patient-centered care.

**Operating Guidelines:** [Sections below describe operating guidelines that will provide structure around committee meetings including membership, chairs, meeting frequency and other relevant information.]

**EXECUTIVE SPONSOR(s):** Mark Friedberg (COO)

**CHAIR(s):** Deborah Vona (Business) & Prem Somasundaram (IT)

**MEMBERSHIP:** [Can be in the document or attached as an appendix, provide a brief description of the basis or qualification for membership if applicable]

Voting Members			
Name	Title	Department	Responsibilities
Mark Friedberg	Sr Vice President	Performance Measurement and Improvement	Executive Sponsor
Deborah Vona	Vice President	HMM	Business Owner
Prem Somasundaram	Chief Digital & Technology Officer	Engineering and Tech Delivery	IT Owner

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Non-Voting Members			
Name	Title	Department	Responsibilities
Sri Narasimhan	Senior Director	Engineering and Tech Delivery	Senior Director
Sureshkumar Chinnappan	Director	ET- Integration and Interoperability	Director
Susanta Choudhury	Director	DA&I - Data Analytics	Data Integration; Solution Architecture
Douglas Wilson	Engineering Director	ET - Health and Medical Management	HMM-ET Value Stream Lead
Seth Plitt	Senior Manager	ET- Integration and Interoperability	Project Management
Muhammad Khan	Program Manager	ET- Integration and Interoperability	Program Manager
Gopi Shankavaram	Lead Product Owner	ET- Integration and Interoperability	Product Owner
Elena Henkin	Associate Director	ET- Integration and Interoperability	Product Management
Matthew Kenney	Senior Manager	ET- Integration and Interoperability	Product Management
Mirza Abbas	Associate Director	ET- Integration and Interoperability	Solution Architecture
Quirino Brizi	Solution Architecture	ET- Integration and Interoperability	Solution Architecture
Ann Chang	Vice President	Digital, Data and Core Transformation and Delivery	Chief Information Security Officer
Diane Longley	IT Procurement Category Manager	IT & Ops Vendor Management	VMO
Wendy Ross-Atwood	Engineering Senior Director	Engineering and Business Technical Delivery	Value Stream Lead
Rakesh Samuel	Project Manager	Engineering and Business Technical Delivery	Value Stream Lead
Vamsi Sanagapally	Associate Director	ET- Integration and Interoperability	Technical Delivery

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Name	Title	Department	Responsibilities
Kabraun Harris	Associate Director	Core Applications Support: Clinical Operations	Core Application Transformation & Vendor Integration
Julie Carey	Director, Compliance	Quality & Compliance	HMM-Clinical
Amy Sadeck	Director,	Clinical Operations	HMM Business Operations
Taryn DeBoer	Associate Director, Project Management	Clinical Operations	HMM Business Operations
Cresha Hunter	Project Manager	Clinical Operations	HMM Business Operations
Michelle Powderly	Director	Clinical Operations	HMM Business Operations; Utilization Management & Case Management
Rachel Ledger	Director, Cost & Trend Mitigation	Quality & Compliance	Clinical Programs and Strategy
Teresa Moore	Sr. Manager	Government Program Operations	Medicare Advantage Claims and Appeals & Grievances
Thomas McDonald	Director	Government, Pharmacy & Underwriting	Product Management (Medicare)
Janet Donovan	Director	Government, Pharmacy & Underwriting	Product Management (Medicare)
Christina Sullivan	Medicare Compliance Director	Medicare Strategy	Medicare Risk Adjustment and Analytics
Timothy Anderman	Senior Director	Medicare Strategy	Medicare Risk Adjustment and Analytics
Katherine Barrett	Senior Director	Pharmacy	Pharmacy Services
Johana Mendez-Desjardins	Associate Director	Member, Account and Provider Service	Provider Service
Josiane Oliveira	Associate Director	Member, Account and Provider Service	Provider Service
Scott Howard	Senior Director	Provider Operations/EDI	Provider Operations
Melanie Bentley	Vice President	Government Program Operations	Government Program Operations
Olivier Merigon	Associate Director	Digital Engineering	Solution Architecture

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Non-Voting Members			
Name	Title	Department	Responsibilities
Robert DiRamio	Senior Enterprise Architect	Enterprise Architect	Enterprise Architect
Namrata Mathur	Director	Office of Transformation	Transformation
Melissa Bradley Horine	Vice President -	Legal	Deputy General Counsel
Jennifer Abdel-Samed	Chief Compliance Officer	Legal	Compliance
Lisa George	Vice President of Audit	Audit and Risk Management	Risk & Audit
Jennifer Read	Senior Director, Governance, Risk & Compliance	Audit and Risk Management	Risk & Audit

Membership will be reviewed and updated no less than annually by the Committee Chairs.

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**MEETINGS:** [Meeting cadence, meeting times and locations, description of meeting activities, agenda creation and who is responsible for recording meeting activities.]

**Meeting Cadence:** Once a Month, 4<sup>th</sup> Thursday of each month

**Meeting Times & Location:** 4pm ET, Virtual Microsoft Teams Meeting

**Description of Meeting Activities:** Executive Summary, Key Accomplishments, Review Timelines and Key Milestones, Challenges/Risks/Issues, Leadership Asks/Awareness Items, Next Steps Upcoming 30–60–90 days Key Activities

**Agenda Creation:** Sureshkumar Chinnappan (ET–Director), Muhammad Khan (Program Manager), Gopi Shankavaram (Product Owner)

**Responsible for Recording Meeting Activities:** Muhammad Khan (Program Manager)

The frequency of the meetings will be reviewed on a yearly basis. Committee members are expected to attend all meetings but may be represented by an appropriate replacement in their absence.

**Responsibilities:** [The sections below describe what the committee will do, how work will be measured, how work will be reported to others outside the committee and the scope of allowed committee actions and decisions.]

**OBJECTIVES:** [Outline committee scope of responsibilities based on what the committee work will and will not address, including guidelines for decision–making

### **The Steering Committee scope includes:**

- Develop and approve the program's roadmap and action plans.
- Review and approve policies and procedures to ensure adherence to CMS interoperability and prior authorization mandates.
- Oversee the implementation of interoperability technologies including BCBS Association integration and processes.
- Allocate budget, personnel, and technology resources to support program initiatives.
- Provide progress reports and updates to senior leadership.
- Mitigate potential risks and challenges to the program's success.
- Facilitate regular communication and updates to stakeholders, including senior leadership, program teams, and external partners.

### **The Steering Committee scope does not include:**

- Tactical or Day–to–Day project management, technical details or operational management.
- Decisions regarding individual personnel matters, such as hiring or performance evaluations.
- Direct management of vendor relationships or contracts.

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**DECISION-MAKING:** [Outline decision-making guidelines including how decisions are made, scope of decision-making authority (i.e. financial or other guardrails for decisions that the committee can make) and escalation procedure when decisions fall outside of authority for committee.]

- Steering Committee decision-making processes are transparent, with documentation on how the committee made the decision and process (ie. Interoperability platform vendor selection).
- Decisions will be made based on data, evidence, and objective analysis. The committee will use reliable data sources and analytics to inform its decisions (ie. Solution architecture).
- The committee will ensure that decisions support the broader mission of the organization (ie. Aligning with BCBS Association mandates and the organizational Prior Authorization strategy).
- The committee will consider potential risks and develop mitigation strategies when making decisions (ie. Single-vendor, multi-vendor, or internal hybrid models).
- Decisions that fall outside the committee's authority, such as those that exceed financial thresholds, involve significant changes to the program's scope, or have potential legal or compliance implications, will be escalated to senior leadership.

**EXPECTED OUTCOMES:** [Outline deliverables from committee work including metrics for measuring progress.]

Steering Committee will provide oversight and deliver the key outcomes of the CMS Interoperability 0057 Mandate:

- Streamlined Prior Authorization Processes: Simplify and automate prior authorization processes, reducing decision timeframes, and reducing administrative burdens on providers.
- Improved Data Interoperability: Seamless electronic exchange of health care data among patients, providers, and payers. This will enhance care coordination and ensure that all parties have timely access to accurate health information.
- Enhanced Patient Experience: By promoting patient-centered care and providing patients with access to their health information, the program will empower patients to make informed decisions about their treatment. This will lead to higher patient satisfaction and engagement.
- Regulatory Compliance: The program will ensure that the organization meets all CMS interoperability and prior authorization mandates, which will prevent potential penalties and maintain its positive STAR ratings. For Example: Delivering annual reports to CMS (Use Metrics) & Published PA Metrics on BCBSMA Medicare website.

**REPORTING STRUCTURE OF COMMITTEE:** [Outline reporting obligations of the committee including who will receive reports and the cadence for reporting.]

Steering Committee reports to various stakeholders, including senior leadership and executive teams (Monthly - executive summary, strategic insights), Value-Streams and Internal teams (Bi-Weekly - detailed project status, impacts to existing processes, and timeline reports), CMS (Yearly - mandated compliance reporting), BCBSA (Monthly - technology integration), external Providers and Partners (As-Needed - Program progress)

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### CONFIDENTIALITY

In conducting its business, members of the Committee will take special care, consistent with the Company's Code of Ethics and Conduct (the Blueprint) to protect the confidentiality of sensitive information it receives.

### CONFLICTS OF INTEREST

Committee members will promptly disclose any conflict of interest they may have with respect to any matter to be discussed by the Committee.

**POLICIES:** [To the extent the committee is governed by or responsible for oversight of any policies list those policies.]

Company's Code of Ethics and Conduct (the Blueprint) to protect the confidentiality of sensitive

**ANNUAL REVIEW:** The Committee Charter will be reviewed and updated annually, and when significant changes occur such as leadership changes, changes in focus to respond to revised corporate priorities, changes in reporting, changes in decision making authority and/or structure, and/or responding to external changes such as regulatory updates.

**Document Information:** [Version control and record of annual review and updates.]

### REVISION HISTORY:

Version	Date	Revision Summary
1.0	2/25/25	Initial Draft

### DOCUMENT OWNER:

Name	Organization
Sureshkumar Chinnappan	ET

### REVIEWERS:

Name	Division	Versions