Assessing and Ensuring Health Plan Provider Network Adequacy

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Danielle R. Moon, JD, the director of the Medicare Drug & Health Plan Contract Administration Group in the Center for Drug and Health Plan Choice (CPC) at the Centers for Medicare & Medicaid Services (CMS). Her group is responsible for the development and implementation of policies and procedures for the operations of the Medicare Advantage Program, which includes new product types such as Special Needs Plans and Medicare Savings Accounts, contracting, bid negotiations, plan performance, and related data analyses. Prior to her current position, Mrs. Moon served as the deputy director of the Medicare Enrollment and Appeals Group (also in CPC), which is responsible for Medicare beneficiary enrollment, eligibility, and appeals policy for the traditional Medicare fee-for-service program, the Medicare Advantage program, and the Medicare Prescription Drug program. During her 13-year tenure at CMS, Mrs. Moon has served in a variety of management and technical policy positions throughout the agency and in the Office of the General Counsel in the Department of Health and Human Services.
Mrs. Moon received her juris doctor degree from the University of Maryland School of Law and her master’s degree in public administration from the George Washington University. She is a member of the Maryland Bar.

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David Parrella is a consultant with the health care consulting firm Alicia Smith & Associates (AS&A). Before joining AS&A in March 1987, Mr. Parrella was employed in the Connecticut Medicaid program where he served in many leadership positions. Since 1997 he was the director of the Medical Care Administration. In that capacity, he was the longest serving Medicaid director in the nation.

During his employment service with the Medicaid program, Mr. Parrella was responsible for a number of different programmatic areas including medical policy, Medicaid Management Information System (MMIS), and third party liability. He led the design and development of revenue maximization initiatives of the state's hospital disproportionate share program (DSH) and targeted case management. Mr. Parrella subsequently developed the Connecticut AIDS Drug Assistance and the AIDS Insurance Assistance Programs. In 1995, he led the development and implementation of the Connecticut Access Medicaid Managed Care Program, now known as HUSKY Part A. Mr. Parrella was a key participant in the design of Connecticut’s HUSKY Plan for uninsured children under Title XXI of the Social Security Act. He also managed the roll-out for the Governor’s Charter Oak Health Plan for the uninsured.

Mr. Parrella is a 1972 graduate of Yale University and completed graduate study in anthropology at the University of Oregon and the University of Connecticut. During his doctoral program, Mr. Parrella spent four field seasons in Peru working with a health development project sponsored by the United Nations and the Wenner Grenn Foundation for Scientific Research. He is committed to expanding access for the uninsured and improving the health status of low-income and minority populations, including Native Americans. Prior to coming to the Medicaid program, Mr. Parrella served as the health director for the Mashantucket Pequot Tribal Nation.

Mr. Parrella is the two-time chairman of the National Association of State Medicaid Directors (NASMD). In that capacity he has served on numerous national health policy forums and recently led the successful effort to impose a moratorium on several Medicaid regulatory changes proposed by the administration.
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**Brian Haile, JD,** serves as the deputy director for Benefits Administration within the Department of Finance and Administration. In this capacity, Mr. Haile provides oversight for the public sector health plans, which provide coverage to 270,000 local and state government employees and dependents. He also helps to manage the state’s CHIP program (CoverKids), high-risk pool (AccessTN), pharmacy assistance program (CoverRx), and limited benefit program (CoverTN).

Before joining Benefits Administration, Mr. Haile was a consultant at Alicia Smith & Associates, LLC, in Washington, DC. In this capacity, he worked with local and state health agencies to develop and implement new, publicly funded health insurance initiatives. Earlier in his career, Mr. Haile served as the eligibility chief for the District of Columbia’s Medicaid program. In this role, Mr. Haile streamlined the eligibility process Medicaid, Food Stamps, and other social service programs. He previously served as the deputy to the chief of the Office on Disabilities and Aging within DC Medicaid and as a researcher at the Institute for Health Policy Studies at the University of California, San Francisco, and at the HIV Clinical Research Centre in Cape Town, South Africa.

Mr. Haile received his bachelor of science degree in foreign service and his juris doctor degree from Georgetown University. He also holds a masters degree in public policy from the University of California, Berkeley, and a master's degree in health economics from the University of Cape Town (South Africa).