

Thank you for requesting Noridian's DME Outreach and Education team participation at your event. We will evaluate the information you provide to determine our possible participation. CMS must approve Face-to-Face event requests.

Contact Information	
Name of Group/Entity	
Contact Name	
Telephone Number	Email Address

Meeting Information		
Request representative from: <input type="checkbox"/> Jurisdiction A <input type="checkbox"/> Jurisdiction D <input type="checkbox"/> Both		
Education Type <input type="checkbox"/> Webinar <input type="checkbox"/> Face-to-Face <input type="checkbox"/> Teleconference		
Name of Event	Location	
Date (mm/dd/yyyy)	Time	Length of Meeting
Duration of Noridian Participation		
Requested Training Topics		
Anticipated Audience Size	Date Response is Needed	
Is this an annual or re-occurring event? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Collaboration Expenses
When travel is required, travel expenses which may include per-diem, hotel, airfare and/or mileage may be the responsibility of the Provider Societies/Associations as defined by CMS. Noridian uses https://www.gsa.gov/portal/content/104877 for expense estimates.
Costs group/entity agree to pay <input type="checkbox"/> Hotel <input type="checkbox"/> Airfare <input type="checkbox"/> Rental Car <input type="checkbox"/> Mileage <input type="checkbox"/> Per Diem

Comments / Additional Information

External Entities - Where to submit this information

Please e-mail the completed DMEPOS Education Speaker Request Form to dmewebinars@noridian.com with the subject line of "Collaboration Request". Your request will be acknowledged within 10 business days.

Disclaimer

The requestor agrees to provide the means to project the presentation that Noridian will send to them prior to the event.