



**PRINCETON CONFERENCE 19:  
STATES' ROLE IN HEALTH CARE:  
OPTIONS FOR IMPROVING ACCESS, QUALITY AND LOWERING THE COST OF CARE**

**SPEAKER BIOGRAPHIES**

**Stuart Altman, PhD**

**Sol C. Chaikin Professor of National Health Policy**

**The Heller School for Social Policy and Management, Brandeis University**

Stuart H. Altman is the Sol C. Chaikin Professor of National Health Policy at Brandeis University. He has an M.A. and Ph.D. degree in Economics from UCLA and taught at Brown University and the Graduate School of Public Policy at University of California at Berkeley. Dr. Altman is an economist whose research interests are primarily in the area of federal and state health policy. In 2006, Health Affairs listed him among the authors of the 25 Most-Read Health Affairs Papers and 25 Most-Read Health Affairs Papers Overall online. Modern Healthcare, Celebrating 30 years, listed Stuart Altman among the 30 people who have had the most influence on healthcare over the past 30 years; and, for the past six years, they named him among the 100 Most Powerful People in Healthcare. In June 2004, he was awarded the AcademyHealth Distinguished Investigator Award.

From 2000-2002 he was Co-Chair for the Legislative Health Care Task Force for the Commonwealth of Massachusetts. In 1997, he was appointed by President Clinton to the National Bipartisan Commission on the Future of Medicare. Dr. Altman was Dean of The Florence Heller Graduate School from 2005 until 2008; from 1977 until July 1993; and, interim President of Brandeis University from 1990-1991. He served as the Chairman of the congressionally legislated Prospective Payment Assessment Commission for twelve years. ProPac was responsible for advising the U.S. Congress and the Administration on the functioning of the Medicare Diagnostic Related Group (DRG) Hospital Payment System and other system reforms.

Dr. Altman is a member of The Institute of Medicine of the National Academy of Sciences; a member of the Board of Tufts-New England Medical Center in Boston, Massachusetts; and, Co Chairman of the Advisory Board to the Schneider Institute for Health Policy at The Heller School for Social Policy & Management, Brandeis University. In addition, Dr. Altman has served on the Board of The Robert Wood Johnson Clinical Scholars Program and on the Governing Council of The Institute of Medicine. He is Chair of The Council on Health Care Economics and Policy, a private non-partisan group whose mission is to analyze important economic aspects of the U.S.

health care system and evaluate proposed changes in the system. He is also Chair of The Health Industry Forum which brings together diverse group leaders from across the health care field to develop solutions for critical problems facing the healthcare system.

Between 1971 and 1976, Dr. Altman was Deputy Assistant Secretary for Planning and Evaluation/Health at HEW. While serving in that position, he was one of the principal contributors to the development and advancement of the Administration's National Health Insurance proposal. From 1973 to 1974 he also served as the Deputy Director for Health of the President's Cost-of-Living Council where he was responsible for developing the Council's program on health care cost containment.

Stuart Altman's most recent book, co-authored with David Shactman, "*Power, Politics, and Universal Health Care: The Inside Story of a Century Battle*" is available at:

<http://powerpoliticsanduniversalhealthcare.com/>

**Alan Weil, JD**

**Executive Director**

**National Academy for State Health Policy**

Alan Weil has been executive director of the National Academy for State Health Policy (NASHP) since September 1, 2004. NASHP is a non-partisan, non-profit organization with a mission of helping states achieve excellence in health policy and practice. NASHP's 55-person staff, located in offices in Portland, Maine and Washington, D.C., conducts policy analysis, convenes meetings, and provides technical assistance to state officials in the executive and legislative branches.

Before coming to NASHP, Alan Weil was the director of the Assessing the New Federalism (ANF) project at the Urban Institute. One of the largest privately funded social policy research projects ever undertaken in the United States, ANF monitors, describes and assesses the effects of changes in federal and state health, welfare, and social services programs. Mr. Weil was formerly the executive director of the Colorado Department of Health Care Policy and Financing. This cabinet position is responsible for Colorado's Medicaid and Medically Indigent programs, health data collection and analysis functions, health policy development, and health care reform.

Mr. Weil is the editor, with colleagues, of two books: *Welfare Reform: The Next Act* and *Federalism and Health Policy*. He has authored chapters in a number of books and published articles in a broad range of peer-reviewed journals. He is a frequent speaker on health reform, Medicaid, and federalism. He has testified before Congress more than half a dozen times.

Mr. Weil was an appointed member of President Clinton's Advisory Commission on Consumer Protection and Quality in the Health Care Industry, which drafted the patient's bill of rights. He is a member of the Institute of Medicine's Board on Health Care Services, the Kaiser Commission on Medicaid and the Uninsured, and the Commonwealth Fund Commission on a

High Performing Health System. He is a member of the editorial boards of Health Affairs and State Health Watch.

Mr. Weil received his bachelor's degree in economics and political science from the University of California at Berkeley. He holds a master of public policy degree from the John F. Kennedy School of Government at Harvard, and a J.D. from Harvard Law School."

### **Mary Ella Payne**

#### **Vice President, System Legislative Leadership**

#### **Ascension Health**

Mary Ella Payne serves as Vice President, System Legislative Leadership, for Ascension Health. Prior to working for Ascension Health, Ms. Payne was senior legislative aide to Senator Jay Rockefeller (D-WV) for 10 years. She advised Senator Rockefeller on a wide variety of healthcare issues, including comprehensive healthcare reform, Medicare and Medicaid policies, and creation of the State Children's Health Insurance Program. Ms. Payne staffed him both as Chairman and Ranking Member of the Senate Finance Committee's subcommittee on health that has jurisdiction over the Medicare and Medicaid programs.

During her tenure in the Senator's office, Ms. Payne worked on the following successful legislative initiatives: improved flexibility for rural health clinics; improved coverage of primary and preventive care services provided by nurse midwives under the Medicaid program; expanded Medicaid coverage of home and community care services for the frail elderly; expanded Medicare coverage for oral anti-cancer drugs and the "off-label" use of prescription drugs proven to be medically effective; new Medicare coverage for seniors participating in clinical research trials; expanded Medicare managed care options with the inclusion of a new managed care plan organized and run by hospitals (PSOs); new designation of, and special reimbursement policies for, Critical Access Hospitals under the Medicare program, and the State Children's Health Insurance Program (SCHIP). Ms. Payne also was a member of President Clinton's White House Task Force on Health Care Reform, focusing on purchasing alliances, coverage expansions and insurance reforms.

Prior to working on Capitol Hill, Ms. Payne was selected a Presidential Management Intern and worked as a policy analyst for the Medicare program at the Health Care Financing Administration (now known as the Centers for Medicare and Medicaid Services [CMS]). During a 3-month internship at the Joint Commission on Accreditation of Healthcare Organizations, she authored five booklets on ways to monitor and evaluate the quality and appropriateness of healthcare in a variety of hospital settings.

Early in her career, Ms. Payne was a staff nurse in a neonatal intensive care unit and a member of the neonatal transport team at Kosair-Children's Hospital in Louisville, Kentucky. She graduated from the University of North Carolina at Chapel Hill with a Masters of Science in Public Health, and graduated with honors from the University of Louisville with a Bachelor of Science in Nursing.

### **Andrew Allison, PhD**

## **Director, Division of Medical Services**

### **State of Arkansas**

Andy Allison joined the Arkansas Department of Human Services as the Arkansas Medicaid Director in December, 2011. Prior to his post in Arkansas, he served as the Director of the Division of Health Care Finance within the Kansas Department of Health and Environment and as the Executive Director of the Kansas Health Policy Authority with responsibility for Kansas' Medicaid program, CHIP, the Kansas state employee health plan, and the state's growing health care and health insurance databases. He is a founding Board member of the National Association of Medicaid Directors, and currently serves as its President. He spent six years at the Kansas Health Institute as a researcher, focusing on health care and health insurance policy in Kansas. He worked as a Medicaid budget analyst at the Office of Management and Budget in Washington, D.C., from 1992-95, providing staff analysis of health reform legislation and reviewing statewide Medicaid waiver applications. He has a bachelor's degree in history from Ouachita Baptist University, a master's degree in Public Policy from Duke University, and a doctorate in economics from Vanderbilt University.

## **Stephen Fitton**

### **Medicaid Director**

#### **State of Michigan**

Steve Fitton has been the Director of Michigan's Medicaid program for 3 years. In this capacity, he oversees a health care program that serves 1.9 million of Michigan's low income citizens. Medicaid arranges and pays for a broad range of health care services including physician, hospital, and long term care. The annual Medicaid budget is currently about \$12 billion. For the 5 years, prior to becoming the Medicaid Director, Steve directed the Bureau of Medicaid Policy and Actuarial Services focusing on a range of policy and financing issues for the Medicaid program. Steve has worked in the area of health policy and budget in Michigan state government for nearly forty years. He began in Medicaid Policy in the early 1970's but the majority of his prior experience was in the Children with Special Health Care Needs program. That experience was invaluable in a number of ways. It required an understanding of the health service delivery system and its financing, the public health perspective especially as it relates to prevention, and sensitivity to the challenges faced by families of children with special health needs.

## **Kathleen D. Gifford, JD**

### **Principal**

#### **Health Management Associates**

Kathy Gifford is a leading expert on state Medicaid programs, advising clients on the challenges, opportunities and complexities that arise in a program designed and administered differently in every state. Since 2002, she has coauthored the nationally recognized 50-state annual Medicaid budget survey report for the Kaiser Commission on Medicaid and the Uninsured. In addition to tracking and analyzing budget and policy trends in state Medicaid programs, Kathy and her coauthors identify emerging issues for policy makers across the country.

Kathy also works with other public and private sector clients, including states, health plans, provider organizations and associations, and patient advocacy organizations, on program and policy analyses, market research and state procurement requests. She is also a frequent speaker on Medicaid-related topics for both public and private audiences including appearances on panels for the National Conference of State Legislatures, the Council of State Governments, and the National Health Policy Forum.

Before joining HMA in 2002, Kathy directed the Indiana Medicaid program (1997-2001). In that role, she helped develop and implement Indiana's Children's Health Insurance Program which received national recognition for its success in outreach and enrollment. Prior to running the Medicaid program, Kathy worked for the Indiana State Budget Agency for six years. During her tenure, she served in leadership roles, including Deputy Budget Director, and focused on a wide range of state budget policy issues including Medicaid financing, welfare reform, and school formula equalization.

Before discovering her passion for public policy, Kathy practiced corporate, securities, and general business law. She holds a bachelor's degree in political science (with honors) from DePauw University and a law degree (with honors) from the Georgetown University Law Center. She is based in HMA's Indianapolis office and is an avid Colts and Pacers fan.

**Chad Westover**  
**Vice President, State Sponsored Business**  
**Wellpoint, Inc.**

Chad Westover is Vice President, Business Development for WellPoint, Inc.'s State Sponsored Business (SSB). He oversees all aspects of business development in SSB, working to strategically position SSB for profitable growth nationally. Mr. Westover also oversees product development & administration, and telemedicine operations.

Chad joined WellPoint in 2003. His previous positions with WellPoint SSB were Director of California Field Operations, where he oversaw SSB's field operations and Community Resource Centers statewide; and Director, Account Executive where he maintained relationships with California regulatory agencies.

Prior to his tenure at WellPoint, Chad was the first director of the Utah Children's Health Insurance Program (CHIP). Before that, he was a health policy consultant for Governor Leavitt's Health Policy Commission. Earlier, he held a senior staff position with the U.S. Senate Labor and Human Resources Committee and as a senior legislative assistant in the House of Representatives in Washington, D.C.

Chad received a Master's degree in public administration, a Bachelors' degrees in political science, and an Associates' degree in Spanish from Brigham Young University.

**Robert Mechanic**  
**Executive Director**

### **The Health Industry Forum**

Robert E. Mechanic is Senior Fellow at the Heller School of Social Policy and Management at Brandeis University and Executive Director of the Health Industry Forum, a national program established to develop practical strategies for improving the quality and effectiveness of the U.S. healthcare system. Prior to Brandeis, Mr. Mechanic ran a strategic healthcare consultancy, serving health systems, managed healthcare plans, and policy research organizations. Mr. Mechanic formerly was a Senior Healthcare Analyst with Forrester Research, a technology and business strategy research firm, where he analyzed the use of information technology and the Internet to improve healthcare business processes and clinical quality. From 1998 to 2000, he was Senior Vice President with the Massachusetts Hospital Association (MHA) where he was responsible for healthcare finance, policy and research. From 1988 to 1998, Mr. Mechanic was a consultant and Vice President with the Lewin Group, a Washington D.C.-based healthcare consulting firm where his practice focused on hospital finance, state health policy, and healthcare reform. Mr. Mechanic's work has been published in such professional journals as JAMA, Health Affairs, Business and Health, and Benefits Quarterly. Mr. Mechanic earned an MBA in finance from The Wharton School at the University of Pennsylvania and a BS in economics with distinction from the University of Wisconsin.

### **Deborah Devaux**

#### **Senior Vice President of Strategic Services**

#### **Blue Cross Blue Shield of Massachusetts**

Deborah Devaux has worked in health care strategy and consulting, provider network management and development of payment systems since 1982. She is currently responsible for BCBSMA strategic services including internal business consulting, strategic and business planning, and competitive assessment and intelligence. Deb joined BCBSMA in 2000.

Her previous experience is for organizations including: Tufts New England Medical Center; Harvard Pilgrim Healthcare and its predecessors; Ernst and Young in the health care consulting practice; and BDC Advisors, a health care strategy consulting firm.

Deb has a master's degree from University of Michigan School of Public Health and is an adjunct faculty member at the Harvard School of Public Health and Tufts Medical School.

### **Thomas O'Brien, JD**

#### **Assistant Attorney General, Health Care Division**

#### **Massachusetts Attorney General's Office**

Thomas More O'Brien is an Assistant Attorney General and Chief of the Health Care Division in the Office of the Attorney General of Massachusetts. Attorney General Martha Coakley created the Health Care Division upon taking office in 2007 to place a heightened focus on promoting the interests of consumers as Massachusetts undertook its landmark health reform effort. Tom has successfully led the Health Care Division through significant policy work and litigation against numerous health plans, health care providers, and pharmaceutical companies. During the past two years, he led the Health Care Division's groundbreaking examination of health care cost trends and cost drivers. He is a member of the Executive Committee of the

Commonwealth's Health Care Quality and Cost Council. Tom received his JD from Suffolk University Law School, an MPA from the University of Massachusetts at Amherst, and a BS (mathematics) and a BA (English literature) from the College of Santa Fe.

### **Ellen Zane**

#### **CEO Emeritus & Vice Chairman of the Board of Trustees**

#### **Tufts Medical Center**

Ellen Zane is a nationally renowned health care leader who recently retired as President & Chief Executive Officer of Tufts Medical Center and the Floating Hospital for Children. She was the first woman to run the hospital in its 215-year history. Ellen holds two faculty appointments at Tufts University School of Medicine including: Assistant Professor in the Department of Medicine, Division of Clinical Care Research and Assistant Professor of Public Health & Community Medicine. Additionally, Ellen holds a faculty appointment as Adjunct Assistant Professor in the Health Policy and Management at the Harvard School of Public Health. For the period of 2011 to 2013, Ellen is a Distinguished Guest Lecturer in Healthcare Administration at the Sawyer Business School at Suffolk University.

Ellen is currently a Director of Parexel International (NASDAQ-PRXL); a Director of Lincare Holdings, Inc. (NASDAQ-LNCR); a Director of Century Capital Management; a Director of Fiduciary Trust Company; an Advisory Board Member of Vatera Healthcare Partners, LLC; and a Healthcare Advisory Board Member of Pinstripe, Inc. She is a Trustee of George Washington University, is a member of the Health Policy and Management Executive Council at the Harvard School of Public Health and former Chair of the Board of the Massachusetts Hospital Association.

From 1994 to 2004, Ellen held the position of Network President for Partners HealthCare System, Inc. In this capacity, she was responsible for the development of a provider network featuring the Massachusetts General Hospital and Brigham & Women's Hospital. Prior to that, Ellen was the Chief Executive Officer at Quincy Hospital in Quincy, Massachusetts. Ellen was an employee of HCA and then Quorum Health Resources in this capacity.

Ellen received her Bachelor of Arts degree from the George Washington University in Washington, D.C. in 1973 and her Master of Arts degree in 1975 from the Catholic University of America in Washington. She holds the following honorary degrees: Doctorate of Commercial Science from Bentley University, Doctorate of Business Administration from Stonehill College; and Doctorate of Humane Letters from Curry College.

### **Murray N. Ross, PhD**

#### **Vice President, Kaiser Foundation Health Plan, Inc.**

#### **Kaiser Permanente Institute for Health Policy**

Murray Ross is Vice President, Kaiser Foundation Health Plan, Inc. and leads the Kaiser Permanente Institute for Health Policy in Oakland, California. Kaiser Permanente is the nation's largest private integrated health care delivery system, serving nine million people in nine states and the District of Columbia. The Institute seeks to leverage evidence and experience from

Kaiser Permanente's operations to shape public policy and private practice. The Institute supports research, expert roundtables, and conferences all intended to increase understanding of policy issues and help identify solutions.

Dr. Ross brings the valuable ability to absorb and synthesize complex health care issues, and to explain the practical implications of market developments and public policies to government leaders and health care industry decision makers. He speaks frequently to domestic and international audiences on a wide range of health care topics and serves on a number of advisory boards. His current work focuses on how American health care can make better use of new medical technology and how public policy can encourage greater integration of care delivery to improve quality.

Before joining Kaiser Permanente in 2002, Dr. Ross was a policy advisor to the United States Congress. He served five years as the executive director of the Medicare Payment Advisory Commission, an influential nonpartisan agency that makes recommendations on Medicare policy to the Congress. Previously, he spent nine years at the Congressional Budget Office, ultimately leading the group charged with assessing the budgetary impact of legislative proposals affecting Medicare and Medicaid.

Dr. Ross earned his doctorate in economics from the University of Maryland, College Park, and completed his undergraduate work in economics at Arizona State University. He enjoys distance running, writing, and traveling.

### **Melanie Bella**

#### **Director, Medicare-Medicaid Coordination Office Centers for Medicare and Medicaid Services**

Melanie Bella is the Director of the Medicare-Medicaid Coordination Office at the Centers for Medicare and Medicaid Services (CMS). This office, officially the Federal Coordinated Health Care Office, was established by the Affordable Care Act (Section 2602). As Director, Ms. Bella leads the work of this office charged with more effectively integrating benefits for individuals eligible for both Medicare and Medicaid and improving coordination between the federal government and states for such beneficiaries.

Prior to joining CMS, Ms. Bella was the senior vice president for policy and operations at the Center for Health Care Strategies (CHCS). She led the organization's efforts to integrate care for complex populations, including people with multiple chronic conditions, disabilities, serious mental illness, and dual eligibles. In addition, she directed a unique leadership training institute to help Medicaid directors enhance the skills they need to transform their state programs into national models for high-quality, cost effective care.

Prior to CHCS, Ms. Bella served as Medicaid director for the state of Indiana from 2001 through 2005. During her tenure, one of Ms. Bella's most notable accomplishments was spearheading the creation of the Indiana Chronic Disease Management Program. She earned a master's in



business administration from Harvard University and a bachelor's degree from DePauw University.

### **Cathy Schoen**

#### **Senior Vice President for Policy, Research, and Evaluation**

##### **The Commonwealth Fund**

Cathy Schoen is senior vice president at The Commonwealth Fund. She is a member of the Fund's executive management team and research director of the Fund's Commission on a High Performance Health System. Her work includes strategic oversight and management of surveys, research and policy initiatives to track health system performance. From 1998 through 2005, she directed the Fund's Task Force on the Future of Health Insurance. Prior to joining the Fund in 1995, Ms. Schoen taught health economics at the University of Massachusetts' School of Public Health and directed special projects at the UMASS Labor Relations and Research Center. During the 1980s, she directed the Service Employees International Union's research and policy department. In the late 1970s, she was on the staff of President Carter's national health insurance task force, where she oversaw analysis and policy development. Prior to federal service, she was a research fellow at the Brookings Institution in Washington, D.C. She has authored numerous publications on health policy issues, insurance, and national/international health system performance and co-authored the book *Health and the War on Poverty*. She holds an undergraduate degree in economics from Smith College and a graduate degree in economics from Boston College.

### **Bruce Vladeck , PhD**

#### **Senior Advisor**

##### **Nexera, Inc.**

Bruce Vladeck is Senior Advisor to Nexera Inc., a wholly-owned consulting subsidiary of the Greater New York Hospital Association, which he joined in June, 2009. His long and varied career has included senior leadership roles in the public, non-profit, academic, and business communities. He is a widely-recognized expert in health care policy and finance, Medicare, Medicaid, long-term care, and health care for the homeless, and a much sought-after speaker and writer in all of those areas.

In the health care community, Vladeck is perhaps most widely known for his tenure as Administrator of the Health Care Financing Administration from 1993 through 1997, a period that encompassed Health Reform, the Contract with America Congress and budget stalemates, and the Balanced Budget Act. Vladeck's time at HCFA was marked by significant innovation in statewide Medicaid programs through demonstration waivers; the development of Medicare prospective payment systems for hospital outpatient services, skilled nursing facilities, and home care agencies; implementation of the first quantitative quality measures for managed care plans; major initiatives to combat fraud and abuse; and significant improvements in beneficiary services. His work at HCFA was recognized in 1995 by a National Public Service Award. He remained closely involved in Medicare policy in 1998-99 as a Presidential Appointee to the National Bipartisan Commission on the Future of Medicare.

After leaving HCFA, Vladeck spent six years at Mount Sinai Medical Center, as Professor of Health Policy and Geriatrics and Senior Vice President for Policy of the Medical Center. In that latter role, he successfully undertook a wide variety of administrative assignments, from managing the medical school's affiliation with New York's public hospital system to acting as interim chair of the Department of Geriatrics.

Vladeck joined Ernst & Young's Health Sciences Advisory Services in 2004. He left that position for sixteen months in 2006-2007 to serve, at the request of Governor Jon Corzine, as Interim President of the University of Medicine and Dentistry of New Jersey after it had entered into a Deferred Prosecution Agreement with the US Attorney. While at UMDNJ, Vladeck restored fiscal stability to the system, rebuilt its governance, compliance, and internal control processes, and laid the groundwork for restoration of full academic accreditation.

A graduate of Harvard College and the University of Michigan, Vladeck has held full-time faculty positions at Columbia University and Mount Sinai, and has served as adjunct faculty at Rutgers, Princeton, NYU, and the Aquinas Institute of Theology. He is a member of the Institute of Medicine and the New York Academy of Medicine, and serves on the boards of the Medicare Rights Center and Ascension Health, and on the New York City Board of Health.

### **Robert Murray**

#### **President, Global Health Payment LLC**

#### **Former Executive Director, Maryland's Hospital All Payer Rate Setting System**

Mr. Murray is President of Global Health Payment LLC, a management consulting firm specializing in the design and implementation of pay-for-performance, episode-based, bundled and global payments for healthcare providers. In addition to his consulting responsibilities, Mr. Murray is a writer and health service researcher. Previously, Mr. Murray served as Executive Director of the Health Services Cost Review Commission (HSCRC), Maryland's all-payer hospital rate-setting agency for 17 years.

Under Mr. Murray's leadership the HSCRC initiated a number of innovative payment programs including: 1) the nation's first severity adjusted DRG-based payment system, 2) a bundled outpatient hospital payment system, 3) two comprehensive pay-for-performance quality initiatives, and 4) global budgets for 10 rural facilities and Admission-Readmission packaged payment for 31 other hospitals.

He is currently assisting representatives of Vermont in the development of an all-payer global budget payment structure for all hospitals and physicians in the state.

He is a frequent lecturer and presenter internationally. He has also worked as a Short Term Consultant for the World Bank on a number of assignments related to health care reform initiatives in the Russian Federation, Brazil and India.

He received his B.A., M.A. in Economics and M.B.A. degrees from Stanford University in Palo Alto, California.

**Joseph Antos, PhD****Wilson H. Taylor Scholar in Health Care and Retirement Policy****American Enterprise Institute**

Joseph Antos is the Wilson H. Taylor Scholar in Health Care and Retirement Policy at the American Enterprise Institute in Washington. He is a Commissioner of the Maryland Health Services Cost Review Commission and he is a health adviser to the Congressional Budget Office (CBO). Previously, Antos held senior positions at the CBO, U.S. Department of Health and Human Services, the Office of Management and Budget, and the President's Council of Economic Advisers. His articles have appeared in Health Affairs, New England Journal of Medicine, National Tax Journal, American Economic Review, and other scholarly publications.

**Anya Rader Wallack, PhD****Chair****Green Mountain Care Board**

Anya Rader Wallack, Chair of the Green Mountain Care Board, has worked in health care policy and reform for the past two decades. In January 2011, Ms. Wallack joined Governor Shumlin as Special Assistant for Health Reform and was the chief architect of Act 48, the Governor's health reform plan. During the 1990's Ms. Wallack served as Governor Howard Dean's Deputy Chief of Staff and focused on health reform. Additionally, Ms. Wallack served on Hillary Clinton's Health Reform Task Force. Upon leaving the Dean administration, Ms. Wallack became the Executive Director of the Vermont Program for Quality in Health Care and a member of the Vermont Board of Medical Practice.

More recently, Ms. Wallack lead the Massachusetts Medicaid Policy Institute and was also interim President of the Blue Cross Blue Shield of Massachusetts Foundation. She chaired the Massachusetts Health Care Quality and Cost Council's committee on cost containment, and served on the Rhode Island Health Reform Task Force. Ms. Wallack has been a consultant on state-based health reform to states, non-profits, foundations and health care providers for much of the past decade.

Ms. Wallack is a native Vermonter and graduate of the University of Vermont.

She holds a Ph.D. in Social Policy from Brandeis University and lives in Montpelier.

**Ann Monroe****President****Community Health Foundation of Western & Central New York**

Ann F. Monroe is president of the Community Health Foundation of Western and Central New York, an independent private foundation serving the Buffalo and Syracuse regions of New York that is focused on improving the health outcomes of frail elders and children in communities of poverty and increasing community health capacity. Ann has more than 30 years of experience leading public and private sector programs in mental health, community health, managed care and philanthropy. She was previously the director of the quality initiative at the California

HealthCare Foundation and a senior vice president of Blue Cross of California. Ann is a member of New York State Governor Andrew Cuomo's Medicaid Redesign Team, chair of the Steering Committee of the Western New York Community Health Planning Institute, vice chair of the Consensus Standards Approval Committee of the National Quality Forum and a member of the board of the New York eHealth Collaborative.

**Uwe Reinhardt, PhD**

**James Madison Professor of Political Economy and Professor of Economics  
Woodrow Wilson School of Public and International Affairs and  
Department of Economics, Princeton University**

Recognized as one of the nation's leading authorities on health care economics, Reinhardt has been a member of the Institute of Medicine of the National Academy of Sciences since 1978. He is a past president of the Association of Health Services Research. From 1986 to 1995 he served as a commissioner on the Physician Payment Review Committee, established in 1986 by Congress to advise it on issues related to the payment of physicians. He is a senior associate of the Judge Institute for Management of Cambridge University, UK, and a trustee of Duke University, and the Duke University Health System. Reinhardt is or was a member of numerous editorial boards, among them the Journal of Health Economics, the Milbank Memorial Quarterly, Health Affairs, the New England Journal of Medicine, and the Journal of the American Medical Association. Ph.D. Yale University.

**Jay Himmelstein, MD, MPH**

**Professor, Family Medicine and Community Health, Quantitative Health Sciences and Internal Medicine**

**Chief Health Policy Strategist**

**Center for Health Policy and Research**

Dr. Himmelstein is a Professor of Family Medicine and Community Health, Quantitative Health Sciences and Internal Medicine at UMass Medical School. He also serves as Chief Health Policy Strategist for UMass Medical School's Center for Health Policy and Research, and Senior Fellow in Health Policy for NORC at the University of Chicago where he provides expertise in health information technology and health insurance exchange policy, public sector health delivery system reform, and state-based health care reform implementation. His professional career in research, policy development and service is dedicated to improving health care and health outcomes for those served by the public sector.

Currently Dr. Himmelstein is the Principal Investigator for the CCIIO-funded New England States Collaborative for Health Insurance Exchange Systems (NESCIES). Also known as the Massachusetts Early Innovator Cooperative Agreement, NESCIES was established to support health care reform through the creation of health insurance exchange (HIX) information technology components for Massachusetts that are consumer-focused, cost-effective, and sustainable and that can be leveraged by New England and other states to operate Health Insurance Exchanges (HIX).

Dr. Himmelstein serves as a Senior Advisor to the Disability Health and Employment Group for the Center for Health Policy and Research and was the founding Director of Work Without Limits, a Massachusetts Disability Employment initiative ([www.workwithoutlimits.org](http://www.workwithoutlimits.org)).

An elected member of the National Academy of Social Insurance, Dr. Himmelstein has served as an expert consultant to the Social Security Administration, and to the Institute of Medicine, most recently as a member of the IOM Committee on Medical Evaluation of Veterans for Disability Compensation. He served as a Health Policy Fellow on the health staff of Senator Edward M. Kennedy from 1991 to 1992. Dr. Himmelstein serves on the editorial board of the Journal of Occupational Rehabilitation and has served an ad hoc reviewer for several peer reviewed journals including Health Affairs, the Journal of the American Public Health Association, the Journal of the American Medical Association, and Health Care Finance and Review. He currently serves on several non-profit boards including the Massachusetts Health Policy Forum and the Health Foundation of Central Massachusetts.

During his career at UMass, Dr. Himmelstein has held numerous positions in research and academic administration including Director of the Occupational and Environmental Health Program (1988-1996), Robert Wood Johnson Foundation National Health Policy Fellow (1991-1992), Director of the Robert Wood Johnson Workers Compensation Health Initiative (1994-2000), Director of the Center for Health Policy and Research (1997-2007), Director of the Center for MassHealth Evaluation and Research (1997-2002), Assistant Chancellor for Health Policy (1992-2007) and Director of the Center for Health Policy and Research's Public Sector Health Information Technology and Exchange Policy Group (2005 -2011).

Dr. Himmelstein is board certified in internal medicine and occupational and environmental health/preventive medicine. He received his bachelor's degree from Johns Hopkins University, his medical degree from the University of Maryland Medical School, and received Masters degrees in Public Health and Physiology from the Harvard School of Public Health.

**Stan Dorn, JD**  
**Senior Fellow**  
**Urban Institute**

Stan Dorn, a senior fellow at the Urban Institute's Health Policy Center, is widely recognized as a leading national expert on Medicaid, CHIP, and the ACA. A former Managing Attorney at the National Health Law Program's Washington office and Health Division Director at the Children's Defense Fund, Dorn's research has helped shape national policy on such diverse issues as streamlined enrollment into insurance affordability programs under the ACA, Express Lane Eligibility in the Children's Health Insurance Program Reauthorization Act of 2009, and countercyclical funding for state Medicaid programs created by 2009 stimulus legislation. Dorn has provided technical assistance to policymakers and stakeholders in more than a dozen states on topics that include the design of comprehensive reforms, strategies for streamlined enrollment and eligibility determination, and the Basic Health Program option in the ACA. A graduate of Harvard College and the Boalt Hall School of Law at the University of California at Berkeley, Stan lives in the Washington area with his wife and two teenaged children.

**Jon Kingsdale, PhD**  
**Managing Director**  
**Wakely Consulting Group**

Jon Kingsdale is Managing Director and co-founder of the Boston office of Wakely Consulting Group.

Prior to his current position, Jon was the founding Executive Director of the Commonwealth Health Insurance Connector Authority, an independent authority established in 2006 under Massachusetts' landmark health reform legislation. As the Executive Director for the first four years of reform, he led key initiatives to make health insurance universally available and to reform health care financing in Massachusetts. The Massachusetts experience was fundamental to national reform and the model for insurance reform and exchanges under the federal Patient Protection and Affordable Care Act of 2010.

Since leaving the Health Connector, Jon has consulted to various government agencies, non-profit and for-profit organizations on implementation of PPACA generally, and American Health Benefit Exchanges in particular. His clients include: USHHS, the California Health Care Foundation (CHCF), Academy Health, and the states of California, Illinois, Missouri, New York, Oregon, Rhode Island and Wisconsin. Through various foundations, Academy Health and the National Academy on State Health Policy, he has also worked with policymakers in Maryland, Minnesota, Ohio, Pennsylvania, Texas and Washington. He also provides strategy consulting to private-sector clients interested in health reform and insurance.

As a senior executive at the Tufts Health Plans for twenty years, Jon was responsible for strategic planning, product development, public affairs and government relations. Prior to Tufts Health Plan, he worked in strategic planning and reimbursement at Blue Cross of Massachusetts, researched hospital finances at the Harvard School of Public Health, consulted on health policy issues in Washington, D.C., and worked as a reporter for Forbes Magazine.

He received a doctorate in economic history from the University of Michigan and his bachelors degree from the University of Pennsylvania. He has taught at the Harvard School of Public Health, the Boston University School of Public Health, Tufts University School of Medicine, and is currently a Lecturer in the Department of Health Care Policy at the Harvard Medical School.

**Jennifer Kent**  
**Principal**  
**Health Management Associates**

Jennifer Kent has been a principal with HMA's Sacramento office since 2011. Jennifer served in California state government for nearly seven years, and comes to HMA from California's Department of Health Care Services where she has most recently served as the Associate Director responsible for implementing state and national health reform initiatives for Medi-Cal. Jennifer has also coordinated stakeholder involvement, and issues of other affected state departments, in the implementation of California's comprehensive 1115 waiver, and provided

policy and strategic advice on fiscal and budgetary matters. Prior to this assignment, Jennifer served as the Deputy Legislative Secretary in the Office of the Governor. In this post, Jennifer was Governor Schwarzenegger's lead policy and strategic advisor on California's Health Exchange legislation, and served as the legislative lead for all matters pertaining to health, human services, managed care, revenue and taxation, health-related boards, and veteran affairs. Jennifer also worked extensively on the state budget issues and negotiations involving the health and human services assignment. Before joining the Office of the Governor, Jennifer served in both the California Health and Human Services Agency and the California Department of Health Services. Jennifer earned her Bachelor of Arts degree at Saint Mary's College of California and her Master's in Public Administration degree at the University of Southern California.

**Karen Feinstein, PhD**  
**President and Chief Executive Officer**  
**Jewish Healthcare Foundation**

Dr. Feinstein is President and Chief Executive Officer of the Jewish Healthcare Foundation (JHF) and its two supporting organizations, the Pittsburgh Regional Health Initiative (PRHI) and Health Careers Futures (HCF). Together they offer a unique alchemy of grant making, research, teaching, coaching, resource development, and project management. Appointed the Foundation's first CEO in 1990, she initially guided the Foundation to a focus on aging, women's health and underserved populations. The JHF won national awards for its work on childhood immunizations, breast cancer, and HIV/AIDs.

She has since made JHF and PRHI a leading voice in patient safety, healthcare quality and related workforce issues. When Dr. Feinstein founded PRHI, it was among the nation's first regional multi-stakeholder quality coalitions devoted simultaneously to advancing efficiency, best practices, and safety by applying industrial engineering principles. Dr. Feinstein also founded Health Careers Futures to assist the region's healthcare industry in attracting, preparing, and retaining employees, and was a leader in the formation of the Network for Regional Healthcare Improvement (NRHI), a national coalition of Regional Health Improvement Collaboratives.

Dr. Feinstein is regarded as a national leader in healthcare quality improvement and frequently presents at national and international conferences. She is the author of numerous regional and national publications on quality and safety. In a previous life, she was the editor of the *Urban & Social Change Review*, and she is the editor of a new book *Moving Beyond Repair: Perfecting Health Care*. Additionally, she has served on the faculties of Boston College, Carnegie Mellon University, and the University of Pittsburgh.

Dr. Feinstein has held executive professional and trustee posts at other nonprofits, including the United Way and the Allegheny Conference, and is a Past President of Grantmakers In Health and Grantmakers of Western Pa, and co-chair of the Pa. Health Funders Collaborative. She serves on many nonprofit, governmental and for-profit boards, including NRHI, the Center for

Innovation Advisory Committee at the National Board of Medical Examiners, and the Board of Overseers at Brandeis University's Heller School.

Dr. Feinstein earned her bachelor's degree at Brown University, her master's at Boston College, and her doctorate at Brandeis University.

**Michael Doonan, PhD**

**Assistant Professor**

**The Heller School for Social Policy and Management, Brandeis University**

Michael Doonan is an assistant professor at the Heller Graduate School at Brandeis University and Director of the Masters in Public Policy (MPP) program. He is also Executive Director of the Massachusetts Health Policy Forum, and Director of the Council for Health Care Economics and Policy. His Ph.D. from Brandeis is both in Political Science and Health Services Research. His research and publications focus on issues related to access to health care, Medicaid, SCHIP, federal/state relations, prescription drugs, public health and the economics of health system change.

Michael worked as program specialist for the Centers for Medicare and Medicaid Services (CMS), in the area of Medicaid managed care and state health care reform. He served as a member of President Clinton's Health Care Taskforce working primarily on the Low-Income and Working Families work group, and as a member of the Taskforce Speakers Bureau. Michael also worked as a fellow for the U.S. Senate Finance Committee as they considered national reform in 1994. He began his career as a legislative aide for Senator John Kerry where he worked on health and environmental issues. He has a master's degree in public administration from The George Washington University, and an undergraduate degree in political science from St. Anselm College.

**Dan Crippen, PhD**

**Executive Director**

**National Governors Association**

Dan Crippen serves as the executive director of the National Governors Association (NGA). As executive director, he works with governors to identify and prioritize pressing issues facing states and oversees NGA's day-to-day operations. Crippen formerly served as director of the Congressional Budget Office, Deputy Assistant to the President for Economic Policy and Assistant to the President for Domestic Policy under the Reagan administration and Chief Counsel and Economic Advisor for Senate Majority Leader Howard Baker.

**Ann Torregrossa, JD**

**Former Director of Pennsylvania Governor's Office of Health Care Reform**

**Executive Director, Pennsylvania Health Funders Collaborative**

Ann Torregrossa has over 42 years experience in health policy and Medicaid law. She is the Executive Director of the Pennsylvania Health Funders Collaborative, an organization made up of over 30 Pennsylvania health foundations. She is the former Director of the Governor's Office of Health Care Reform (GOHCR), where she helped develop Governor Rendell's



comprehensive health care reform initiative, Prescription for Pennsylvania. As Director of GOHCR, she was responsible for coordinating health policy among the state agencies that provide health care coverage or services and for implementing Governor Rendell's health reform plan. As part of Pennsylvania's health care reform efforts she oversaw Pennsylvania's Chronic Care/Patient-Centered Medical Home initiative, which had over 900 primary care providers engaged in improving primary care by participating in regional learning collaboratives. Prior to her current position, Ann was Deputy Director and Director of Policy for GOHCR. Before joining the Rendell Administration Ann was a co-founder and the Director of a public interest law firm that provided free assistance to consumers facing difficulties obtaining needed publicly funded health care. This program would not only try to address the individual consumer's issue, but would advocate to address the underlying policy issues that led to the individual problem.

Ann has been an adjunct professor at the University of Pennsylvania School of Law, where she taught an interdisciplinary graduate course on Publicly Funded Health Law and at Villanova Law School, where she taught Poverty Law. She has recently been appointed as the Phyllis W. Beck Chair in the Beasley School Law at Temple University for the 2013 Spring Term.

Ann has a J.D. from Villanova Law School and is in process of completing her Master of Liberal Arts from the University of Pennsylvania.

### **Sanne Magnan, MD, PhD**

#### **President & CEO**

#### **Institute for Clinical Systems Improvement**

Dr. Sanne Magnan is the President and CEO of the Institute for Clinical Systems Improvement (ICSI) in Bloomington, MN. ICSI is an independent, nonprofit organization that facilitates collaboration on health and health care improvement to reach the Triple Aim of better health, better care and lower costs. ICSI has facilitated work on the RARE campaign (Reducing Avoidable Readmissions Effectively), DIAMOND and High Tech Diagnostic Imaging as well as many protocols and guidelines on evidence based care.

In 2007, Magnan was the President of ICSI when she was appointed by Governor Tim Pawlenty to serve as Commissioner of Health for the Minnesota Department of Health (MDH). MDH is the state's lead public health agency, responsible for protecting, maintaining and improving the health of all Minnesotans. She served in this position from 2007 to 2010 and was responsible for significant implementation of Minnesota's 2008 health reform legislation including the Statewide Health Improvement Program (SHIP), standardized quality reporting, development of provider peer grouping (ranking of providers on risk-adjusted quality and cost information), certification process for health care homes, and baskets of care.

Magnan serves as a staff physician at the Tuberculosis Clinic at St. Paul-Ramsey County Department of Public Health and a clinical assistant professor of medicine at the University of Minnesota. She was also vice president and medical director of consumer health at Blue Cross and Blue Shield of Minnesota where she was responsible for case management, disease

management, and consumer engagement. She is a board-certified general internist and has served on several boards, including Minnesota Community Measurement and US Healthiest. Magnan was named one of the 100 Influential Health Care Leaders by Minnesota Physician in 2004 and 2008.

Magnan holds a medical degree and a Ph.D. in medicinal chemistry from the University of Minnesota. She earned her bachelor's degree in pharmacy from the University of North Carolina. Magnan is married and has two daughters and a son-in-law.