

NASMD

National Association of State Medicaid Directors

an affiliate of the American Public Human Services Association

2008 Fall NASMD Conference Speaker Biographies

Andy Allison

Andy Allison has been the Deputy Director of the Kansas Health Policy Authority since December 2005, and the state's Medicaid Director since November 2006. Prior to joining the KHPA, he spent six years at the Kansas Health Institute as a researcher and Director of Health Care Finance and Organization. His research focused primarily on the effectiveness, availability and cost of health care and health insurance in Kansas. From 1992-1995 he worked as a budget analyst for the Medicaid program at the Office of Management and Budget in Washington, D.C., where he provided staff support to President Clinton's health care reform effort and reviewed comprehensive health care reform waiver applications from states such as Massachusetts, Florida, Ohio, Vermont, and Oklahoma. He has a bachelor's degree in history, a master's degree in Public Policy, and a doctorate in economics.

Mary Applegate, M.D.

Dr. Applegate is the Medical Director for Medicaid in the state of Ohio (Ohio Health Plan). She is double-boarded in Internal Medicine and Pediatrics and has been in private practice for over 15 years. She provides clinical leadership and direction to the development and operation of the health care quality improvement agenda. She has a collaborative role in the ongoing development and monitoring of clinical performance measures among the seven Bureaus responsible for different aspects of care. She, in conjunction with other experts on the team, is participating in CMS' transformation grant and other pay for performance initiatives. Special interests include the improvement of population health, the computerization of standardized clinical information to facilitate chronic disease management and the elimination of health care disparity for mental health, obese and minority subgroups. Dr. Applegate is a fellow of both the American Academy of Pediatrics and the American College of Physicians, and continues to teach students and residents the practice of quality Medicine.

Ashley Barton

Ashley Barton is the Maternal and Child Health Coordinator for Virginia Department of Medical Assistance Services and has worked in her position since May 2005. She works in the Maternal and Child Health Division and is responsible for the operations of several programs impacting pregnant women and children. The three programs that she is primarily responsible for include a high risk maternity and infant program, Medicaid covered services for children in special education and Virginia's family planning waiver.

Ashley has represented Virginia at the Guttmacher Institute meeting for state family planning waivers in Bethesda, MD, as well as National Family Planning Reproductive Health Association conference in Maryland.

Ashley graduated from Virginia Commonwealth University in 1999 with her Masters in Social Work and has her License in Clinical Social Work. Prior to her work for Medicaid, Ashley worked as a social worker in a non-for-profit hospital and also as a home visitor/counselor for a Virginia Military installation.

Denise Bazemore

Currently, Denise is a Technical Director within Rick Friedman's Division of State Systems which oversees system policies and funding of the Medicaid Management Information and Integrated Eligibility Determination systems, MITA and Health IT initiatives within CMS's Center for Medicaid and State Operations. Prior to coming to CMS, her experience included working for Maryland State government in the systems that support the various entitlement programs, and then with the Federal government working for the Administration for Children & Families, within the Department Health and Human Services on Child Welfare systems policy and Department of Treasury on electronic funds transfer initiatives. She is the Project Officer for MITA.

Bernard M. Branson, M.D.

Bernard Branson is currently Associate Director for Laboratory Diagnostics in the Division of HIV/AIDS Prevention at the CDC, where he also conducts research into HIV prevention strategies. Dr. Branson has been the chief architect for CDC's activities surrounding new technologies for HIV testing, including rapid HIV tests and tests for HIV incidence. Most recently, Dr. Branson was the lead author for CDC's Revised Recommendations for HIV Testing of Adults, Adolescents, and Pregnant Women in Health Care Settings. Dr. Branson has conducted numerous domestic and international studies on the performance of HIV rapid tests, and he oversees the development of new recommendations for the use and confirmation of rapid HIV tests. Dr. Branson has published numerous research papers and review articles on HIV diagnostics, HIV prevention, and cost-effectiveness.

Before coming to CDC in 1990, Dr. Branson was in private practice in Baltimore, Maryland, with extensive experience caring for both adults and children with HIV infection. In 1983, Dr. Branson founded the AIDS community based organization HERO, the Health Education Resource Organization, and initiated the State AIDS Hotline for Maryland and Maryland's program for anonymous HIV counseling and testing.

Sarah S. Brown

Sarah Brown is the CEO of The National Campaign to Prevent Teen and Unplanned Pregnancy, a private, non-profit initiative organized in 1996 that focuses on preventing both teen pregnancy and unplanned pregnancy among young adults. Before co-founding the National Campaign, she was a senior director at the Institute of Medicine, where she led studies on a wide variety of issues in maternal and child health, and in reproductive health as well.

She has served on numerous advisory committees and boards nationwide, speaks frequently on issues of teen sex and unplanned pregnancy, and regularly appears in the television, radio, and print media.

Brown has received numerous awards, including the Institute of Medicine's Cecil Award for Excellence in Research and the Martha May Elliot Award of the American Public Health Association.

She lives in Washington with her husband, Winthrop. They have three grown daughters.

Stephen Crystal, Ph.D.

Dr. Crystal directs the Center for Health Services Research on Pharmacotherapy, Chronic Disease Management, and Outcomes at Rutgers University. The Center's programs include the new mental health CERTs center (the Center for Education and Research on Mental Health Therapeutics) funded by the Agency for Healthcare Research and Quality in partnership with the FDA, as well as other studies funded by NIH and other sources. Dr. Crystal also serves as Associate Director for Health Services Research at Rutgers' Institute for Health, Health Care Policy, and Aging Research, where he chairs the Division on Aging and the HIV/AIDS Research Group. Previously he served as Chief of the Division of Health Care Sciences at the School of Medicine, University of California, San Diego, and in a series of senior positions in New York City government concerned with the direction, financing and evaluation of health and mental health programs. He is a nationally prominent health services researcher whose work, as reflected in more than 200 publications, has addressed numerous aspects of pharmacotherapy use and outcomes in "real-world" settings, using a range of large healthcare and survey datasets. His work also includes books on old-age policy and on home health care, and research articles, reviews and technical reports addressing a wide range of other issues in health services research, old-age policy, long-term care for the elderly, pharmaceutical use, mental health services, and other topics related to healthcare, aging and HIV. He has been an active investigator on a number of large multi-site studies such as the HIV Cost and Services Utilization Study and the VA Cohort Study or VACS. His awards include the Abt Associates Prize for Public Policy Research and the John Kendrick Award for research on the economic status of the elderly.

A. Conan Davis, DMD MPH

Conan Davis currently serves the Centers for Medicare and Medicaid Services (CMS) as the Chief Dental Officer. He functions as the focal point on oral health matters in the Agency and works collaboratively with both the Center for Medicaid and State Operations and the Center for Medicare Management on oral health issues. Dr. Davis currently represents CMS on the ADA Dental Code Revision Committee and the ADA Dental Content Committee, the NIH Interagency Working Group on TMJ disorders, the HHS Oral Health Coordinating Committee and the dental advisory panel to NCQA on the HEDIS dental measure. He serves as a liaison to the dental professional community for CMS, participating in national dental meetings and has represented CMS at several national forums on oral health.

Previously, he served as the American Dental Association's Congressional Fellow in 2001-2002. He worked with the Senate Health, Education, Labor and Pensions Committee through the office of Senator Tim Hutchinson (R-AR). He prepared background materials for Senator Hutchinson and for Senator Jeff Sessions (R-AL), who served as Ranking Member, for the Children's Oral Health Improvement Act Hearing. This Hearing was the first to specifically address oral health issues and was held before the Senate Subcommittee on Public Health in June of 2002. Prior to this Dr. Davis served as the State Dental Director for the Alabama Department of Public Health for 12 years. He additionally served the Alabama Medicaid Agency as their State Dental Consultant, and was appointed to the Alabama Governor's Commission on Welfare Reform and the Governor's Domestic Violence Advisory Committee. He has also previously worked in private dental practice and served in community and public health dental clinical facilities.

William H. Dietz, M.D., Ph.D.

Dr. Dietz is the Director of the Division of Nutrition, Physical Activity, and Obesity in the Center for Chronic Disease Prevention and Health Promotion at the CDC. Prior to his appointment to the CDC, he was a Professor of Pediatrics at the Tuft's University School of Medicine, and Director of Clinical Nutrition at the Floating Hospital of New England Medical Center Hospitals. He received his BA from Wesleyan University in 1966 and his MD from the University of Pennsylvania in 1970. After the completion of his residency at Upstate Medical Center, he received a Ph.D. in Nutritional Biochemistry from Massachusetts Institute of Technology. He has been a councilor and past president of the American Society for Clinical Nutrition, and past president of the North American Association for the Study of Obesity. From 2001-2003 he served as a member of the Advisory Board to the Institute of Nutrition, Metabolism, and Diabetes of the Canadian Institutes for Health Research. In 1995 he received the John Stalker award from the American School Food Service Association for his efforts to improve the school lunch. Dr. Dietz served on the 1995 Dietary Guidelines Advisory Committee. In 1997, Dr. Dietz received the Brock Medal of Excellence in Pediatrics from the New York Academy of Medicine. In 1998, Dr. Dietz was elected to the Institute of Medicine of the National Academy of Sciences. In 2000, he received the William G. Anderson Award from the American Alliance for Health, Physical Education, Recreation and Dance, and was recognized for excellence in his work and advocacy by the Association of State and Territorial Public Health Nutrition Directors. In 2002, he was made an honorary member of the American Dietetic Association, and received the Holroyd-Sherry award for his outstanding contributions to the field of children, adolescents and the media. In 2005 he received the George Bray Founders Award from the North American Association for the Study of Obesity. In 2006, he received the Nutrition Award from the American Academy of Pediatrics for outstanding research related to nutrition of infants and children. In 2008 he received the Oded Bar-Or award from the Obesity Society for excellence in pediatric obesity research. He is the author of over 200 publications in the scientific literature, and the editor of five books, including Clinical Obesity in Adults and Children, and A Guide to Your Child's Nutrition.

William A.B. Ditto, MSW, LSW

Mr. Ditto is the Director of the Division of Disability Services, New Jersey Department of Human Services, a post he has held since the agency was created in 1997. The Division, which serves as a central point of entry for persons with disabilities, also administers the New Jersey Medicaid personal assistant services program, three home and community-based Medicaid waiver programs serving people with disabilities and four major grant funded projects. He has served as the Project Director for the NJ Medicaid Infrastructure Grant, first awarded by CMS in 2000. Mr. Ditto serves on the Executive Committee of the Center for Workers with Disabilities at APHSA.

He is also the Project Director for the NJ Cash & Counseling Demonstration (The Personal Preference Program) and the CMS Real Choice Systems Change Grant. In addition, the Division of Disability Services is New Jersey's lead agency for brain injury services. Mr. Ditto is currently the President Elect of the National Association of Head Injury Administrators (NASHIA).

Mr. Ditto's chief areas of interest and experience are long term care, community-based services for people with disabilities, consumer directed services and innovative projects in human services. He has made presentations at conferences and meetings through the country on these topics. He has also testified before legislative committees on the topics of consumer-directed services, brain injury services, respite and employment incentives for people with disabilities.

Mr. Ditto has over 30 years of experience in designing and administering disability and aging services and joined the staff of the Department of Human Services in 1985.

Mr. Ditto completed his undergraduate work at Monmouth College (NJ) and holds an M.S.W. degree from Rutgers University, where he served as an adjunct faculty member for 20 years.

Ms. Karen Donato, Coordinator, Obesity Education Initiative

Karen A. Donato, S.M., joined the National Heart, Lung, and Blood Institute (NHLBI) in 1986. She has been Coordinator of the Obesity Education Initiative (OEI) in the Institute's Division for the Application of Research Discoveries since the Initiative's inception in 1991.

Ms. Donato coordinates the creation and development of obesity and overweight-related educational activities directed to children, youth, and families. The activities are designed to encourage heart-healthy habits that not only have a positive impact on the public health burden of overweight and obesity in communities, but also help to prevent cardiovascular disease later in life. To help ensure an integrated approach to the issues related to weight control, OEI activities also are coordinated with and enhance the activities of the Institute's National High Blood Pressure Education Program (NHBPEP) and National Cholesterol Education Program (NCEP).

Ms. Donato served as the Executive Director of the Expert Panel that developed the "Clinical Guidelines on the Identification, Evaluation, and Treatment of Overweight and Obesity in Adults", the first evidence-based Federal guidelines on overweight and obesity. She has developed numerous spin-off products based on the clinical guidelines for health care providers, patients, and the public.

Ms. Donato received a B.S. degree summa cum laude in foods and nutrition from Marywood College in Scranton, PA in 1975. She received a master of science degree in nutrition from Harvard University's School of Public Health (HSPH) in Boston, MA in 1977. She is an alum of Harvard's Health Lawyers Program. While at HSPH, Ms. Donato served as a research assistant in the Nutrition Department and in the Department of Legal Medicine. She is a member of the American Dietetic Association and the North American Association for the Study of Obesity.

Michael Farber, M.D

Michael Farber, M.D., has been Chief, Medical Policy, for Medi-Cal Managed Care since March, 2006. Dr. Farber came to the Department of Health Services (now the Department of Health Care Services) in 1993 with fee-for-service Medi-Cal, where he played a key role in developing medical policy for HIV/AIDS, telemedicine, and treatment of cancer. Before coming to the Department, Dr. Farber practiced internal medicine and infectious diseases in Carmichael, California. Dr. Farber served as Chair, Pharmacy and Therapeutics Committee and Medical Director, Infection Control, for two Sacramento area hospitals.

Dr. Farber received his Doctor of Medicine degree from the University of Cincinnati. He is a member of the Medicaid Medical Directors network.

Ira Feldman

Mr. Feldman currently serves as Deputy Director, Medicaid Policy and Programs, New York State Department of Health AIDS Institute. Mr. Feldman has a 30 year tenure with the New York State Department of Health. Prior to joining the AIDS Institute in 1986 as its first Director of Health Programs, he held several administrative positions in the Department's Office of Health System's Management, Bureau of Hospital Services. In 2008 he was appointed to his current position of AIDS Institute Deputy Director for Medicaid Policy and Programs. In 2004 he was appointed to the position of AIDS Institute Director of the Division of HIV Health Care. He previously held positions as the Deputy Director of the Division of HIV Health Care, and the Director of the Bureau of HIV Program Review and Health Systems Development.

Mr. Feldman has overseen the development and implementation of health systems, innovative Medicaid reimbursement mechanisms and quality assessment for the continuum of health related HIV services including Designated AIDS Centers HIV Primary Care and HIV Chronic Care models. Most recently, Mr. Feldman has provided overall direction for the implementation of Medicaid managed care for persons with HIV disease and has headed the development of the HIV Special Needs Plans.

Mr. Feldman holds a Master's degree in Health Care Administration from Long Island University and a Bachelor's degree in Music from SUNY New Paltz.

Patrick W. Finnerty

Pat Finnerty is Virginia's Medicaid Director and has served in this position since his appointment by Governor Mark R. Warner in 2002. He was reappointed in 2006 by Governor Timothy M. Kaine. Pat directs all aspects of Virginia's Medicaid and state children's health insurance programs that finance health coverage for low-income persons. Combined, the Virginia Medicaid and SCHIP programs serve approximately 720,000 persons and have a total budget of \$6.0 billion.

Pat has worked in state government for 30 years. Prior to his current appointment, Pat worked for the Virginia General Assembly's Joint Commission on Health Care. As the Commission's Executive Director, he had overall responsibility for the Commission's health care policy analyses and studies. Before the Joint Commission on Health Care, he was director of the Virginia state employee health benefits program for four years. In this position, he managed two statewide health benefits programs for more than 150,000 persons. His earlier experience includes work with the Department of Planning and Budget and the Department of State Police.

He received a Bachelor's Degree in Psychology and a Masters Degree in Public Administration from Virginia Commonwealth University. He is a member of the Phi Kappa Phi National Honor Society.

David Frank

David Frank was appointed in June 2007 to be the first permanent director of the Medicaid Integrity Group (MIG) of the Centers for Medicare & Medicaid Services (CMS), Baltimore. The MIG is a newly formed component of CMS, charged with carrying out the Medicaid Integrity Program, which was created by the Deficit Reduction Act of 2005 and which is the first CMS program designed to help the States combat Medicaid provider fraud. Before joining CMS, Mr. Frank worked as a federal and state prosecutor for over 22 years. Between 1985 and 1991, he was a Deputy District Attorney in the Orange County California District Attorney's Office. From 1991 to 2007, he served as a prosecutor with the United States Department of Justice (DOJ). He initially worked for DOJ's Criminal Division, Fraud Section in Washington, D.C., investigating a variety of federal white-collar crimes. During 2000-2007, he served as an Assistant United States Attorney for the Southern District of Florida, specializing in the prosecution of Medicare and Medicaid fraud matters. During 2003-2007, Mr. Frank was the Deputy Chief of the office's Economic and Environmental Crimes Section in Miami and its Criminal Health Care Fraud Coordinator.

Mr. Frank received his undergraduate degree at Stanford University and his law degree from the University of California, Hastings College of the Law.

Rick Friedman

Rick is the Director of the Division of State Systems within the Centers for Medicare and Medicaid Services (CMS) of the U.S. Dept. of Health & Human Services.

His office is responsible for developing and overseeing CMS' funding policies for automated claims processing and information retrieval systems (MMIS) and integrated eligibility determination systems, the latter together with HHS' Administration for Children and Families as well as the USDA's Food Stamp program. In addition, his division has directed CMS' involvement with the Administrative Simplification provisions of HIPAA relative to Medicaid systems, and is currently leading a major initiative to redefine the national Medicaid IT Architecture (MITA). MITA is a patient-centric, business-driven approach to service oriented architecture (SOA) designed specifically for Medicaid. It will include clinical, as well as administrative, data, transcend organizational barriers, utilize national industry standards and COTS to the greatest degree possible. See <http://www.cms.hhs.gov/MedicaidInfoTechArch/> for more information on MITA.

Prior to joining the federal government, he worked for Citicorp's merchant banking group and for Booz, Allen & Hamilton in their health care financing practice. He earned a BA degree in Economics from Colgate, and an MBA from Dartmouth following an all-expense-paid, though hardly voluntary, tour of SE Asia in the late 1960s..

Foster Gesten, M.D.

Dr. Gesten is the Medical Director for the Office of Managed Care in the New York State Department of Health. He provides clinical direction and leadership for a team of professionals engaged in quality oversight, performance measurement and clinical improvement within health plans in New York. Major initiatives include the development of statewide public reporting systems for commercial, Medicaid, and Child Health managed care programs on quality, access, and satisfaction. His interests include population health, health service research, and quality improvement projects directed at prevention services and chronic care. Dr. Gesten is also a Co-Investigator for a CDC grant addressing asthma from a public health perspective and developed a state-initiated program directed at improving the delivery of prevention services to adolescents. Dr. Gesten serves on the Managed Care Technical Advisory Group (TAG) for the Center for Medicare/Medicaid Services (CMS) and is a member of the National CAHPS Benchmarking Database (NCDB) Advisory Group. Dr. Gesten was trained in general internal medicine at Brown University.

Jim Gillcrist

I received my dental degree (DDS) from the University of Tennessee, College of Dentistry, in 1981 and a Master of Public Health (MPH) from the University of North Carolina at Chapel Hill in 1986. I became a Diplomate of the American Board of Dental Public Health in 1990. I was inducted as a Fellow in the American College of Dentists in October 2000. I became the first TennCare Dental Director in September, 2002. Prior to this, I served as Director of Oral Health Services for the Tennessee Department of Health from 1995 to 2002. I served as Director of Dental Services for the Metropolitan/ Davidson County Health Department from 1989 to 1995. I have been a member and officer of several professional organizations and boards. I am also a member of the Tennessee Dental Association and past president of the Nashville Dental Society. I have authored a number of articles some of which have been published in peer reviewed journals.

Valerie Harr

Valerie Harr has held the position of Deputy Director of the New Jersey Division of Medical Assistance and Health Services since April 2007. The Division of Medical Assistance and Health Services administers the \$10 billion Medicaid and State Children's Health Insurance Program (SCHIP) to over 1 million New Jersey residents.

Ms. Harr joined the Division in 2002 as the budget director. Prior to joining the Division, Ms. Harr worked in the State's Office of Management and Budget.

Ms. Harr began her career in Medicaid policy at the Center for Health Care Strategies.

Ms. Harr has a Master's degree in Sociology from West Virginia University and a Bachelor's degree in Sociology and Anthropology from Millersville University of Pennsylvania.

Heather Hauck, MSW, LICSW

Heather Hauck is the Director of the Maryland Department of Health and Mental Hygiene AIDS Administration. The Maryland AIDS Administration leads statewide public health efforts to reduce HIV transmission in Maryland and to help Marylanders with HIV/AIDS live longer and healthier lives. The Maryland AIDS Administration accomplishes its mission by working with public and private partners to develop and implement comprehensive, compassionate, and high quality services for both prevention and care.

Ms. Hauck is currently the Chair-Elect of the National Alliance of State and Territorial AIDS Directors (NASTAD) and has been a member of the organization since 2003. She serves on NASTAD's Executive Committee, Membership Committee, and the NASTAD Global Program Ethiopia team.

Prior to joining the Maryland AIDS Administration, Ms. Hauck was an independent consultant providing technical assistance to hospitals, national associations, and state public health agencies on HIV program development issues. She served as the Section Chief of the New Hampshire DHHS Division of Public Health STD/HIV Section in Concord, NH from 2003 to 2006. Prior to her work in New Hampshire, Ms. Hauck was a co-director and a social worker in the Washington Hospital Center Social Work Department in Washington, D.C. Ms. Hauck began her work in HIV in 1992 with the Coalition of Labor Union Women providing training and education materials on HIV and women. She has a Master of Social Work degree from the National Catholic School of Social Service, Catholic University of America in Washington, D.C.

Rick Howard

Rick Howard is the executive leader for the Office of Information Services (OIS), the IT division of the Oregon Department of Human Services (DHS). The OIS mission is to deliver information technology solutions that support health and human services in the state of Oregon.

DHS is Oregon's largest state agency. OIS delivers and supports technology for nearly 10,000 employees in more than 150 DHS branch locations as well as at human service partner locations throughout the state. The current technology environment is very complex and consists of more than 250 applications programmed in 22 different languages on five platforms using nine database management systems. OIS is made up of 400 employees and has a biennial budget of \$163 million.

Howard has worked for DHS since 1997. He was appointed deputy CIO in 2005 and CIO in August 2007. He has also worked for DHS as a data analyst and a section manager in the Division of Medical Assistance Programs, and as a senior data analyst for OIS.

He has a background in technology, transportation and manufacturing with companies such as Federal Express and United Parcel Service. He also co-founded and was president of Oregon Orthotic System Inc., which was twice recognized by Oregon Business Magazine as one of the "100 Best Companies to Work for in Oregon." He has a bachelor's degree in business information systems from Linfield College in McMinnville, OR, and is project management certified.

Jessica Pollak Kahn

Jessica Pollak Kahn serves as the CMS Project Officer in the Family and Children's Health Programs Group, Division of Quality, Evaluation and Health Outcomes, managing three large grant programs: Medicaid Transformation Grants, Emergency Room Diversion Grants and High-Risk Insurance Pool Grants. The primary focus areas for her grant portfolio are quality improvement, health information technology, and improving access to primary care services for the un- and under-insured. She has worked at both the state and federal levels, in healthcare service delivery, program management and evaluation. Her work has focused primarily on reproductive health, HIV/STD and disability and long-term care-with an emphasis on quality/performance improvement and monitoring/evaluation. She has 15+ years of experience in state and federal government, having worked domestically and internationally as both a civil servant and contractor.

She has a Masters in Public Health from Tulane School of Public Health and served in the US Peace Corps in West Africa.

David K. Kelley M.D., M.P.A.

Dr. Kelley is the Chief Medical Officer for Pennsylvania Department of Public Welfare's Office of Medical Assistance Programs. He oversees the clinical and quality aspects of the Medical Assistance Program that provides health benefits to over 1.9 million recipients. The Office includes oversight of seven managed care organizations and Access Plus, a FFS managed care program. In the past four years the Office has implemented a new Expanded Primary Care Case Management program, implemented a pharmacy preferred drug list and prior authorization operations unit, initiated three pay for performance programs, and implemented a childhood weight management and nutritional counseling program.

Richard Kellogg, M.D.

Mr. Kellogg became the Director of the Washington State Mental Health Division on January 13, 2006. As Mental Health Division Director, Mr. Kellogg heads a unit that includes the state's two mental hospitals, Child Study and Treatment Center that specializes in children's mental health care and the state's community mental health program. Mr. Kellogg has broad experience in the areas of mental health, developmental disabilities, substance abuse services, long term care and medical services. Most recently, he served as Interim Director of the Office of Medicaid Business and Policy of the State of New Hampshire as well as supervising behavioral health, developmental disabilities and long term care services for the elderly and the chronically ill. Prior to 2004, Mr. Kellogg was a special assistant to the State of Tennessee's Commissioner of Finance and Administration, a position in which he was a policy advisor and planner for mental health, mental retardation and related health and human services. In 2002 and 2003, he was Deputy Commissioner of Finance and Administration for Mental Retardation Services. From 1986 to 2002, Mr. Kellogg worked in Virginia in a succession of state health planning and leadership positions, culminating as Commissioner in the Department of Mental Health, Mental Retardation and Substance Abuse Services from 1997 through 2002. Earlier in the 1980s, he held positions in Massachusetts and Vermont ranging from local mental health councils and mental health service delivery organizations to special needs transportation and home and community based services for the elderly and medically fragile.

Mary B Kennedy

Mary Kennedy currently serves as Director for Medicare, Association for Community Affiliated Plans (ACAP). Ms. Kennedy works with the community based, not-for-profit health plans in ACAP who are operating or establishing Special Needs Plans.

Before joining ACAP Mary Kennedy served as Senior Vice President for Evercare (part of the Ovations segment of the United Health Group).

Prior to joining Evercare in November 2004, Ms. Kennedy held a variety of positions related to health care reform, Medicaid and state health care programs for close to 30 years within both the Minnesota Department of Human Services and the Minnesota Department of Health.

From 1997 until late 2004, she served as Minnesota's Medicaid Director, responsible for federal Medicaid and S-CHIP relations and securing federal funding for the state's public health care programs. Part of her role as Medicaid Director included management of DHS health initiatives with tribes and urban American Indian communities.

She also served as Assistant Commissioner for Health Care at the Department of Human Services, directing eligibility policy for Minnesota Care, Medical Assistance and General Assistance Medical Care; and activities related to purchasing health care, measuring the performance of contracted health plans, and detecting fraud and abuse among providers and recipients.

From 1992 - July 1994 she served as Senior Health Advisor and later, Director, Health Care Delivery Policy at the Minnesota Department of Health where she was responsible for the management of the policy activities related to the Minnesota Care health reform initiatives.

Ms. Kennedy served as Vice Chair of the National Association of State Medicaid Directors. While a Medicaid Director, Mary chaired the Medicaid Quality Technical Advisory Group, served as a member of the National Committee on Quality Assurance's (NCQA) Committee on Performance Measurement and represented Medicaid issues as a member of the 2003/2004 Board of Directors of the National Quality Forum.

Marc L. Leib, M.D., J.D.

Dr. Marc Leib is the Chief Medical Officer for the Arizona Health Care Cost Containment System (AHCCCS), Arizona's Medicaid Program. His duties include developing medical policies, overseeing quality assurance and improvement activities, investigating provider complaints, evaluating regulatory requirements, and assuring that contracted managed care plans provide appropriate medical services to the approximately one million AHCCCS members. After practicing medicine for approximately twenty years in Arizona, he attended law school and practiced health care law in Washington, D.C., concentrating on Medicare regulatory affairs, and the Health Insurance Portability and Accountability Act (HIPAA). Dr. Leib later returned to Arizona to accept the position as AHCCCS Chief Medical Officer.

Patricia MacTaggart, MBA, MMA

Patricia MacTaggart, MBA, MMA, has been involved in Medicaid and other publicly funded health care issues over her entire career, and has held executive positions in a national research and consulting firm, global for-profit company, state-wide not-for-profit company, federal government, state government and county government. Ms. MacTaggart is currently Lead Research Scientist/ Lecturer at The George Washington University where she is supporting the National Association of State Medicaid Directors effort related to the Multi-State Medicaid Transformation Grant Collaborative, working with states on HIT and e-HIE activities via MITA (Medicaid Information Technology Architecture framework and initiative), legal and regulatory issues related to public health care programs administration and service delivery policy and operations, including engagement in e-HIE and HIT.

Prior to becoming a member of the GWU faculty teaching state health policy, policy related to HIT and quality, she was a Principal at Health Management Associates (HMA) and an executive at EDS for State and Local Government Health Care. As a public servant for almost 30 years, Patricia spent six years at HCFA/Centers for Medicare & Medicaid (CMS). While at HCFA/CMS, she was HCFA/CMS' "liaison" to the private purchaser initiatives related to health care purchasing, quality of care and HIT, such as Bridges to Excellence and Leapfrog, National Quality Forum and Federal Quality Council.

Ms. MacTaggart also served as Minnesota's Medicaid Director, and held state Medicaid management positions for more than 10 years as well as various county-level eligibility positions in the Medicaid arena over an additional 11 plus years. Ms MacTaggart, who is also an adjunct associate professor at the University of North Carolina, Chapel Hill, in Health Policy and Health Information, is a current member of several national committees devoted to healthcare, coverage, access, quality and health information technology related to public health care programs and the uninsured.

Amy B. Mansue

Amy B. Mansue currently serves as President and Chief Executive Officer, Children's Specialized Hospital. Appointed to lead the nation's largest pediatric rehabilitation hospital in September 2003, Ms. Mansue is a highly regarded social services and healthcare executive, a skillful leader and a long-time advocate for quality healthcare.

As President and Chief Executive Officer of Children's Specialized Hospital, she provides leadership to a extremely skilled team of clinicians providing specialized care for children. An affiliate member of the Robert Wood Johnson Health System, Children's Specialized operates 11 sites throughout New Jersey and served 16,000 patients in 2007. The hospital provides a full range of pediatric rehabilitative services including inpatient rehabilitation in New Brunswick, and long term care in their Mountainside and Toms Rivers facilities. They also offer a wide range of services including early intervention, outpatient therapy and physician services, medical day care, a school for children with severe disabilities and have centers of excellence in Brain Injury, Spinal Cord Dysfunction, Educational and Rehabilitation Technology, Respiratory Care and Ambulatory Services. Under Ms. Mansue's leadership, Children's Specialized has been named by *NJ Biz* as one of the Top 25 Places to Work in New Jersey for 2006, 2007 and 2008, and in 2008, was selected as the Number One "Best Place to Work".

In her public sector career Ms. Mansue oversaw programs for children, people with developmental disabilities, mental health and Medicaid as a Deputy Commissioner in the New Jersey Department of Human Services. She served as Deputy Chief of Staff to Governor James McGreevey and a policy advisor to Governor Jim Florio.

In 1998, *Modern Healthcare* named Ms. Mansue as one of its up and coming healthcare executives and *NJ Biz* named her as one of the top 40 executives under the age 40. Among Ms. Mansue's many achievements, she has been honored by numerous non-profit organizations for her work on health care reform and for helping to improve the lives of people with disabilities.

In 2007, *Garden State Woman Magazine* named Ms. Mansue the Garden State Women Leader in Non-Profits, the New Jersey Federation of Women's Clubs of GFWC honored her with the New Jersey Woman of Achievement Award and she received a Leadership Award for Improving the Quality of Life for the people of New Jersey from the Brain Injury Association of New Jersey. Ms. Mansue presently serves on the Boards of New Jersey Hospital Association, the New Jersey Chamber of Commerce, and the National Association of Children's Hospitals Public Policy Council.

Ms. Mansue received her bachelor's degree in social welfare and master's degree in social work, planning and management from the University of Alabama. She lives in Hightstown.

Mary G. McIntyre, M.D., M.P.H.

Mary G. McIntyre, M.D., M.P.H. is Medical Director of the Office of Clinical Standards and Quality for the Alabama Medicaid Agency. Dr. McIntyre received her medical degree from Meharry Medical College in Nashville, TN and served as resident physician in Internal Medicine at the George Hubbard Hospital in Nashville, TN. She obtained a master's of public health in Health Care Organization and Policy from the University of Alabama at Birmingham in 1995. She is board certified in Public Health and General Preventive Medicine through the American Board of Preventive Medicine. She received an award from the Alabama Dental Association's House of Delegates in 2004 for "outstanding leadership in championing the cause for improved oral health for Alabama's children."

She has served as chair of the Robert Wood Johnson Foundation's National Advisory Committee, State Action for Oral Health Access. She currently serves on a number of state and national committees including but not limited to the Multi-State Collaboration for Medicaid Transformation's Evaluation Workgroup, the NCQA's Child Health Advisory Committee, the Interim Executive Committee of the Alabama Diabetes Network, the Governor's Black Belt Action Commission Health Committee and as co-chair of Alabama Medicaid's Clinical Workgroup for the Medicaid transformation grant, *Together for Quality*.

Robb Miller is the Director of the Division of Field Operations in the Medicaid Integrity Group for the Centers for Medicare & Medicaid Services. MIG is responsible for the administration of the Medicaid Integrity Program which was created by the Deficit Reduction Act of 2005. The Division of Field Operations has the primary responsibility for MIG's interactions with States.

Robb previously served as the Senior Advisor on Fraud & Abuse to the CMS Region V Administrator. During his tenure at CMS, he has worked on a wide variety of program integrity issues in both Medicaid and Medicare and coordinated the Region's interactions with State program integrity directors.

Prior to joining the federal government, Robb served in county and state government for 30 years. He was a police officer and administrator for 19 years and served for 11 years as Inspector General for the Illinois Department of Public Aid. In that role, he directed the activities of more than 300 staff and contractors responsible for the integrity of the Medicaid and other welfare programs in Illinois. He also worked for two years as a consultant after retiring from state service.

He is a 1973 graduate of Monmouth College with a Bachelor of Arts in English. In 1981, he earned his Master of Arts degree in Law Enforcement Administration at Western Illinois University. He is a graduate of the 151st session of the FBI National Academy and holds the certification of Certified Inspector General.

Robb and his wife Sylvia have two grown children and five grandchildren.

Victor J. Miller

Mr. Miller spent the 1970s in the federal Office of Management and Budget as a fiscal economist and the Senate Budget Committee as senior staff to Chairman Ed Muskie. In the 1980s, he built and directed Federal Funds Information to States (FFIS) in coordination with the National Governors Association and the National Conference of State Legislatures.

In the late 1980s and early 1990s, he focused on Medicaid finance, with papers for such diverse groups as the American Enterprise Institute, the Pepper Commission, the Robert Wood Johnson Foundation and the Steelman Commission. In the 1990s, he worked internationally for the U.S. Treasury Department, first as a resident advisor helping Estonia and Latvia build their budget and intergovernmental finance systems, and then as director of Treasury budget technical assistance programs ranging from South Africa and Haiti to Bosnia and Russia.

Mr. Miller has returned to work primarily with state governments through FFIS in the current decade, especially in the area of health and transportation finance, but retains a consulting practice with a variety of mostly public clients.

Paul J. Miner

Paul Miner is the Deputy Director of the Medicaid Integrity Group (MIG). Prior to that, he served as the Senior Advisor to the MIG Director. Paul is a career CMS employee with over 30 years of service and has worked in the Medicare and Medicaid programs in a variety of policy and operational positions. Prior to the passage of the Deficit Reduction Act, which created the Medicaid Integrity Program in early 2006, he headed up the small CMS central office-based Medicaid Fraud and Abuse team, known as the Medicaid Alliance for Program Safeguards, from its inception 12 years ago. Along with a number of State partners, he was instrumental in establishing the Medicaid Fraud and Abuse Technical Advisory Group (TAG).

More recently, Paul was a founding member of the small working group that created the Medicaid Integrity Group, which was charged with implementing the Medicaid Integrity Program.

Prior to joining the Federal government, he worked in the field of hospital administration. He worked at both a large municipal hospital and a mid-size voluntary hospital in New York City. He received a BA in English and an MBA, with a concentration in Health Care Administration.

Lynn V. Mitchell, MD, MPH

Dr. Mitchell currently serves as State Medicaid Director, Oklahoma Health Care Authority. Dr. Mitchell earned a master's in public health with an emphasis in epidemiology and biostatistics at the University of Oklahoma Health Sciences Center where she also completed her medical degree. Following medical school, she completed a dual residency in Family Medicine and Occupational/Preventive Medicine and is boarded by both specialties. Prior to becoming the OHCA Medical Director, she was a faculty member at the University of Oklahoma College of Medicine. In 2000, Dr. Mitchell became State Medicaid Director and has responsibility for SoonerCare Operations of the Oklahoma Health Care Authority. In this capacity, she oversees the day to day operations for member/provider services across all programs and benefit structures. Dr. Mitchell has been involved on a national level with Medicaid policies. She currently serves on the Executive Committee of the National Association of State Medicaid Directors (NASMD) and chairs the Pharmacy Technical Advisory Group (TAG) on behalf of NASMD and the Centers for Medicare and Medicaid Services (CMS).

Robert H. Moon, M.D.

Dr. Robert H. Moon is currently the Medical Director in the office for Health Policy of the Alabama Medicaid Agency in Montgomery, Alabama. He is a board certified family physician. In 1999 he published a paper in *Family Practice Management* titled "Finding Diamonds in the Trenches with Nominal Group Process". He has been chief of staff of a local hospital, and was instrumental in the implementation of computer systems for a hospital and a private office. After many years in private practice, Dr. Moon began working with the Alabama Medicaid Agency in 2007. Primary projects at this time involve

- translating evidence based medicine into policy,
- updating of the Alabama Medicaid medical home program,
- improving maternity care to help decrease infant mortality,
- and integrating incentives for higher quality care into payment systems.

Mary Mussman

Mary Mussman, M.D., M.P.H., serves as Physician Advisor to the Maryland Medicaid Program. In that capacity she participates in projects involving Medicaid financing, policy, operations, patient safety and medical error reduction initiatives.

Mary Mussman served as Director of Medical Affairs or as Executive Director for the Center for Health Program Development and Management at the University of Maryland, Baltimore County, for eight years until May 2003.

Dr. Mussman spent one year as Medical Director for State Programs with Birch and Davis Health Management Corporation consulting with the Rhode Island Department of Social Welfare to design and implement the Rite Care Program.

Prior to her Rhode Island experience, Dr. Mussman spent nine years with the Maryland Department of Health and Mental Hygiene, serving as Deputy Secretary of Public Health for the final year. Her previous positions were primarily focused on the Medicaid Program, including coordination of development of the Maryland Access to Care Program. In addition, she served as interim health officer for Somerset County, ran well child clinics in Queen Anne's County, and volunteered in a Baltimore City school health clinic.

Dr. Mussman is board certified in pediatrics and holds a master's degree in public health administration from the University of Texas at Houston.

Peter R. Orszag

The Director of CBO oversees the agency's work in providing objective, nonpartisan, and timely analyses of economic and budgetary issues—supervising the numerous analytical papers and cost estimates that the agency produces and, to present the results, frequently testifying before the Congress. In managing the agency, the Director is responsible for a staff of 235 people and an annual budget of roughly \$40 million.

Peter R. Orszag began his term as the seventh Director of CBO on January 18, 2007. Under his leadership, the agency has significantly expanded its focus on areas such as health care and climate change. Before joining CBO, Dr. Orszag was the Joseph A. Pechman Senior Fellow and Deputy Director of Economic Studies at the Brookings Institution. While at Brookings, he also served as Director of The Hamilton Project; Director of the Retirement Security Project; and Codirector of the Tax Policy Center, a joint venture with the Urban Institute.

In previous government service, Dr. Orszag served as Special Assistant to the President for Economic Policy and Senior Economic Adviser at the National Economic Council during 1997 and 1998. Earlier, he served as a staff economist and then Senior Adviser and Senior Economist at the President's Council of Economic Advisers.

Dr. Orszag graduated *summa cum laude* in economics from Princeton University and obtained an M.Sc. and a Ph.D. in economics from the London School of Economics, which he attended as a Marshall scholar. He has coauthored or coedited a number of books, including *Protecting the Homeland 2006/7* (2006), *Aging Gracefully: Ideas to Improve Retirement Security in America* (2006), *Saving Social Security: A Balanced Approach* (2004), and *American Economic Policy in the 1990s* (2002). Dr. Orszag is a member of the Institute of Medicine (IOM) of the National Academies of Sciences.

Dr. Orszag is an avid runner and the proud father of two children, Leila and Joshua.

Joe Parks, M.D.

Dr. Parks serves as the Director for the Division of Comprehensive Psychiatric Services for the State of Missouri Department of Mental Health in Jefferson City. As Director he has executive responsibility for CPS which is Missouri's public state mental health authority with a budget of over \$369 million annually, over 4500 employees, 25 contracted community mental health centers, over 500 contractors total. CPS treats 74,000 patients/year. Dr. Parks also serves as Chief Clinical Officer for the Department of Mental Health and is responsible for clinical standards and quality of care for persons with mental illness, mental retardation and developmental disabilities, and alcohol and drug dependence Served by the Department of Mental Health in its state operated inpatient and community contracted programs. Duties include oversight of research activities, departmental liaison to the state Medicaid agency, development of new clinical programs and development of legislative initiatives related to clinical operations. He serves as President of the Medical Director's Council of the National Association of State Mental Health Program Directors. In this position he provide leadership of national the organization of state mental health medical directors, responsibilities include two annual meetings, monthly conference calls, and production of several technical advisory and policy issue papers annually. He also serves as a Clinical Assistant Professor of Psychiatry at the Missouri Institute of Mental Health and University of Missouri in Columbia. He practices psychiatry on an outpatient basis at Family Health Center, a federally funded community health center established to expand services to uninsured and underinsured patients in the Columbia area.

Dr. Parks has authored or coauthored a number of original articles, monographs, technical papers, and reviews on implementation of Evidence Based Medicine and Pharmacy Utilization Management and behavioral treatment programs. His work has appeared in several journals (Journal of Organizational Behavior, Journal of Psychiatric Practices, Psychiatry Quarterly, Manual of Clinical Emergency Psychiatry, Behavioral Interviews, Hospital and Community Psychiatry, and Advanced Studies in Nursing. He was awarded the 2006 American Psychiatric Association Bronze Achievement Award for a program controlling pharmacy costs by improving prescribing practices.

Karen S. Rheuban, M.D.

Dr. Karen Schulder Rheuban serves as Professor of Pediatrics, Senior Associate Dean for External Affairs and Continuing Medical Education and Medical Director of the Office of Telemedicine at the University of Virginia. As a pediatric cardiologist, Dr. Rheuban provides care to patients with congenital and acquired heart disease. Dr. Rheuban is a fellow of the American College of Cardiology and the American Academy of Pediatrics. She is listed in the "Best Doctors in America" database, and was profiled in the National Library of Medicine's exhibit "Changing the Face of Medicine: Celebrating America's Women Physicians."

The Office of Telemedicine of the University of Virginia serves as the hub of a sixty site telemedicine network, funded in part by federal grants from the USDA, the Department of Commerce, and HRSA. The UVA Office of Telemedicine has supported more than 13,000 patient encounters and thousands of hours of health professional and patient education.

Dr. Rheuban is the President-elect of the American Telemedicine Association, a board member of the Center for Telehealth and E-Health Law, and she is the President of the Virginia Telehealth Network. She has previously presented Congressional testimony regarding telehealth to the Subcommittee on Health of the Committee on Energy and Commerce, to the Committee on Agriculture, the Subcommittee on Crops and Rural Development and to the Subcommittee on Africa and Global Health of the Committee on Foreign Affairs of the U.S. House of Representatives.

Anthony D. Rodgers

Tony Rodgers has over 30 years of healthcare executive management experience in public hospital systems, health plans and Medicaid Programs. He was appointed to the position of Director of the Arizona Medicaid Program, known as the Arizona Health Care Cost Containment System (AHCCCS) in 2003.

As Director, Mr. Rodgers reports to the Governor and is responsible for health coverage for over one million Arizonans. The agency administers multiple sources of governmental and private funds and is responsible for regulatory oversight and compliance of Medicaid managed care health plans and health care providers to assure quality of care, fiscal accountability, and cost containment. Mr. Rodgers is Chair of the Multi-State Collaboration on Medicaid Health System Transformation and was recently appointed as a member of the National Quality Forum. He has been recognized by the Arizona Business Journal for leadership in health insurance coverage, and by the Urban League for community service.

Mr. Rodgers has a Master of Science degree in public health and BA degree in Economics and Political Science from UCLA. He holds visiting professor appointments at Arizona State University, the W.P Carey School of Business and at UCLA School of Public Health and is an expert on non-profit organization governance.

Patrick J. Roohan

Patrick J. Roohan is the Director of the Division of Quality and Evaluation, Office of Health Insurance Programs, New York State Department of Health (DOH). As director, he is responsible for the evaluation of Medicaid and managed care program initiatives, and the development of data systems for research, and quality of care studies. Mr. Roohan has developed the Medicaid Encounter Data System, used extensively in evaluation of quality and access to care. In addition he has been the analytic lead on the Quality Assurance Reporting Requirements, New York State's performance measurement system for managed care. Mr. Roohan has implemented a pay for performance program for Medicaid managed care called the Quality Incentive, which awards plans who perform well in the areas of quality, access and satisfaction. He has published extensively in the areas of health services research, quality of care and evaluation. Mr. Roohan received his Masters of Science in Operations Research and Statistics from Rensselaer Polytechnic Institute.

Roger Snow, M.D., M.P.H.

Dr. Snow is the Deputy Medical Director of the Office of Clinical Affairs of the Office of Medicaid in the Executive Office of Health and Human Services, Commonwealth of Massachusetts. He supervises a staff of Associate Medical Directors and chairs the Committee on Provider Review. He coordinates activities in Prior Authorization, Quality Assessment and clinical topics. He is Board Certified in internal medicine and anatomic and clinical pathology, and holds a degree in Public Health from Harvard.

Richard Sorian

As NCQA's Vice President for Public Policy and External Relations, Richard Sorian is responsible for the development of NCQA's public policy strategy, its work with the Federal government and the States, as well as its media, marketing and communications operations. Mr. Sorian also works closely with NCQA's stakeholder partners including employers, consumer advocacy organizations, labor unions and others.

Prior to joining NCQA in 2003, Mr. Sorian was a Senior Researcher at the Center for Studying Health System Change, where he conducted research into local and regional health care markets in such areas as access, coverage, costs and quality improvement.

From 1998 to 2001, Mr. Sorian was on the faculty of Georgetown University's Institute for Health Care Research and Policy, where his research portfolio focused on consumer information and rights in health care, HIV/AIDS policy development and the information practices and needs of Federal and State policymakers.

From 1993 to 1998, Mr. Sorian was a senior official in the Clinton Administration. He served as Deputy Director of the President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry, which developed the Patients' Bill of Rights and the blueprint for the creation of the National Quality Forum. Earlier he served as a Senior Advisor in the White House Office of National AIDS Policy, serving as legislative and media liaison. He was responsible for organizing the 1995 White House Conference on HIV/AIDS.

From 1980 to 1993, Mr. Sorian was an award-winning journalist and editor of *Medicine & Health*, a news publication focused on U.S. health policy development. He is the author of numerous articles and three books including "The Bitter Pill: Tough Choices in America's Health Policy" (McGraw-Hill, 1989); "A New Deal for Health Care," (Faulkner & Gray, 1993); and "The Healthcare 500," (Faulkner & Gray, 1994).

Mr. Sorian holds a joint degree in Journalism and Political Science from The George Washington University. In 1989, he was awarded the Harvard Journalism Fellowship for Advance Studies in Public Health.

Carol H. Steckel, MPH

Carol Steckel has held the position of Commissioner of the Alabama Medicaid Agency since her appointment by Governor Bob Riley, December 2003.

Prior to her appointment as Commissioner, she served as *Director* of the Survey Companies, LLC, Birmingham, Alabama, and as *Chief Executive Officer* of Survey Associates, LLC. In this capacity she worked with senior housing market investors regarding regulatory and quality issues within the long term care market.

Additionally, Mrs. Steckel has served in various capacities with various entities such as *Senior Vice President* of Northport Health Services, Inc., Tuscaloosa, Alabama; *Program Chief of Staff*, March of Dimes Birth Defects Foundation, White Plains, New York; *Commissioner*, Alabama Medicaid Agency November 1988 through July 1992; *Deputy Director*, Office of Prepaid Health Care, Health Care Financing Administration (now the Centers for Medicare and Medicaid Services (CMS)), Washington, D.C.; *Assistant* to the Special Assistant to President of Health Policy, the White House, Washington, D.C.

Commissioner Steckel serves as the Chair of the Executive Committee of the National Association of State Medicaid Directors and in that capacity serves on the Board of the American Public Human Services Association (APHSA).

Commissioner Steckel has a Master's Degree in Public Health from UAB and a Bachelor of Science Degree in Sociology from Birmingham-Southern College. She is married to the Reverend Arthur D. Steckel, II, who serves as the Chaplain at Cooper-Green Mercy Hospital. They have three cats.

Jeffery Thompson, MD, MPH.

Dr. Thompson is the Chief Medical Officer and Director of the Division of Medical Management for the Washington State Medicaid program. Formally he was the Medical Director for the Washington State Health Care Authority, Corporate Medical Director for the Weyerhaeuser Company, and an associate editor at Milliman and Robertson. Dr. Thompson is boarded in internal and occupation medicine. He holds an Assistant Clinical Professor position at the University of Washington. Dr. Thompson's primary interests involve the application of business and public health strategies that demonstrate improved access, quality, and affordability in health care.

Sandeep Wadhwa, MD, MBA

Sandeep Wadhwa, MD, MBA, was appointed State Medicaid Director and Chief Medical Officer of the Colorado Department of Health Care Policy and Financing in March, 2008.

Dr. Wadhwa is also an Associate Clinical Professor of Medicine at the University of Colorado Denver where he continues to see patients and precept in the Seniors Clinic at the University of Colorado Hospital.

Prior to joining the Department, Dr. Wadhwa was the vice president of care management services at McKesson Health Solutions, a business unit of McKesson Corporation, a *Fortune 20* company.

He has delivered testimony on multiple occasions to the U.S. Congress and worked for the White House in the Office of Policy Development and for the U.S. Congress Office of Technology Assessment.

He holds a Bachelor of Arts from Wesleyan University in Connecticut, a Doctorate of Medicine from Cornell University in New York and a Master of Business Administration from the Wharton School in Pennsylvania. He is board certified in both internal medicine and geriatrics.

Valerie Wilbur

Ms. Wilbur is co-founder and Vice President of the National Health Policy Group (NHPG), a Washington, DC-based consulting group with a special focus on improving policy and practice for health plans and providers that serve high-risk Medicare and Medicaid beneficiaries. NHPG provides strategic planning and government relations services to health plans and providers, trade associations, health care coalitions, state agencies and other stakeholders in the areas of specialty care for high-risk beneficiaries. Ms. Wilbur leads NHPG's government relations practice and co-chairs of the SNP Alliance, an initiative of the NHPG.

The SNP Alliance is a strategic coalition of SNP leaders, including all SNP types, plans from specialty care demonstration predecessors, and affiliations among key dual integration states. The Alliance's mission is to improve the long-term business viability of Special Needs Plans. Policy priorities include improving risk-adjusted financing for high-risk beneficiaries, integration of Medicare and Medicaid, and improved performance measurement for chronically ill beneficiaries.

As a seasoned, health policy consultant, and former Vice President for Policy of a Washington law firm, Ms. Wilbur has provided policy consultation and support to multiple national innovations, including to the National Chronic Care Consortium, dually eligible demonstrations, the Social HMO Consortium, national health care and insurance trade associations and health care plan and provider systems. Her experience as a former Congressional staff member, relationships with key Administrative and Congressional staff and knowledge of plan and provider operations have enabled her to help elevate the national importance of chronic care reform and achieve important changes in Medicare and Medicaid rules, regulations, and payment methods.

John M. Young

John M. Young joined CMS in May of 2000 and is currently the Acting Director, Division of Quality, Evaluation & Health Outcomes (DEQHO) in the Family & Children's Health Programs Group (FCHPG), Centers for Medicaid and State Operations (CMSO), Center for Medicare & Medicaid Services (CMS), U.S. Department of Health and Human Services.

John is responsible leading national quality improvement efforts for one of the world's largest purchasers of health care, the Medicaid Program. Medicaid serves more than 42.5 million beneficiaries with 2005 expenditures over \$300 billion. He is responsible for providing leadership in helping State Medicaid and SCHIP programs move towards a national Medicaid Quality Framework and assessing States comprehensive quality improvement activities. He also provides technical guidance to analysts and states for CMS' Medicaid High Risk Pools, for which the federal government has appropriated \$15 million for seed grants to assist States to create and initially fund qualified high risk pools and \$75 million for grants to help fund operational losses and bonus grants for supplemental consumer benefits to the existing qualified State high risk pools. As well, he leads several Medicaid Racial and Ethnic Health Disparities initiatives. The division is also responsible for analyzing and supporting State demonstration evaluations and providing technical assistance to States on external quality review reporting, health information technology, transformation grants, EPSDT, vaccinations programs and other emerging issues in health care reform.

John has also worked on federal initiatives to include the implementation of HIPAA, health-based risk adjusted payment methodologies in state Medicaid programs and the development of a Nursing Home CHAPS (NHCAHPS) survey tool, which was designed to assess the quality of care provided in nursing homes, and physician-focused quality measurement initiatives.

He holds a Bachelors of Science (B.S.) in Health Services Management/Economics from the University of Maryland and Master degrees in Biostatistics and Epidemiology from Georgetown University School of Medicine and Leadership from Georgetown University's McDonough School of Business