

HealthAffairs

BIOGRAPHIES OF PRESENTERS

Maria Alva, PhD, is a health economist at RTI International working on program evaluations and cost benefit analyses. She holds a doctorate from the University of Oxford, where she worked on the UK Prospective Diabetes Study, one of the largest existing trials on diabetes management. Her work has been published in *Health Economics and Diabetes Medicine*.

J. Scott Ashwood, PhD, is an associate policy researcher at the RAND Corporation. He has fifteen years of experience with empirical studies of health care policy. His recent research focuses on evaluating statewide interventions to improve behavioral health, the association between availability of primary care physicians and preventive care, and changes in health care utilization and spending in response to direct-to-consumer telemedicine.

Michael L. Barnett, MD, MS, is an assistant professor of health policy and management at the Harvard T.H. Chan School of Public Health and a primary care physician at Brigham and Women's Hospital in Boston. He received his M.D. at Harvard Medical School and trained as a primary care physician at Brigham and Women's Hospital. His research has focused on improving and understanding the quality of care delivery, with a particular focus on specialty use and the overuse of medical care. His research has been published in the *New England Journal of Medicine*, *JAMA*, and *JAMA Internal Medicine* and has been covered widely by national media including the *New York Times*, *Washington Post*, *NPR* and *Reuters*. In his spare time, he is a classically trained oboist and serves as chair of the board for the Longwood Symphony Orchestra, an orchestra of medical professionals that raises money for Boston-area non-profits.

David Bates, MD, MSc, is chief of the Division of General Internal Medicine at Brigham and Women's Hospital, medical director of Clinical and Quality Analysis at Partners HealthCare, and an internationally renowned expert in patient safety, using information technology to improve care, quality-of-care, cost-effectiveness, and outcomes assessment in medical practice. Bates is a Professor of Medicine at Harvard Medical School, and a professor of Health Policy and Management at the Harvard School of Public Health, where he co-directs the Program in Clinical Effectiveness. He also directs the Center for Patient Safety Research and Practice at Brigham and Women's Hospital. He served as external program lead for research in the World Health Organization's Global Alliance for Patient Safety and is the immediate past president of the International Society for Quality in Healthcare (ISQua) and the editor of the *Journal of Patient Safety*.

Michael Chernew, PhD, is the Leonard D. Schaeffer Professor of Health Care Policy and the director of the Healthcare Markets and Regulation (HMR) Lab in the Department of Health Care Policy at Harvard Medical School. His research activities focus on several areas, most notably the causes and consequences of growth in health care expenditures, payment reform, and Value Based Insurance Design (VBID). A member of the Congressional Budget Office's Panel of Health Advisors and of the Institute of Medicine Committee on National Statistics, Chernew is the former vice chair of the Medicare Payment Advisory Commission (MedPAC). He also serves as a research associate of the National Bureau of Economic Research. He currently serves as co-editor of the *American Journal of Managed Care* and editor for the *Journal of Health Economics*.

Erin Murphy Colligan, PhD, is a social science research analyst at the Centers for Medicare and Medicaid Services, Center for Medicare and Medicaid Innovation. Her research interests include chronic disease management, preventive health, frequent emergency department use, and disability. At CMMI, she oversees evaluations of the Comprehensive ESRD Care Initiative, community-based wellness and prevention programs, and two portfolios of Health Care Innovation Awards.

Dori Cross is a doctoral candidate in the Department of Health Management and Policy at the University of Michigan School of Public Health. Her work focuses on understanding and promoting organizational changes that improve care coordination and care transitions for complex patient populations. This work spans a focus on implementation and use of health information technology, team-based approaches to care and organizational capacity for innovation. The work she is presenting today is part of a larger project supported by The Commonwealth Fund entitled "Understanding What Works: Improving Primary Care Performance Caring for High-Need Patients."

Heather Dahlen is a postdoctoral research fellow with the Medica Research Institute. Her research focuses on the impact of public policy on health, health insurance coverage, and health care access, particularly among vulnerable populations. Dahlen's research is informed by previous work and extensive training at the State Health Access Data Assistance Center (SHADAC), where she analyzed state and federal survey data to measure the effects of policy changes.

Melvin J. Ingber, PhD, is a principal scientist at RTI. He joined RTI in 2006 after being at HCFA/CMS for 16 years. Ingber was the director of the Division of Payment Research at CMS for his last 5 years. Recent work includes the evaluations of CMS initiatives to reduce hospitalizations among nursing facility residents, development of quality measures related to readmissions associated with stays in IRFs, LTCHs and SNFs and developing payment systems for PAC settings and episodes of PAC services. He has also continued long-standing work on risk adjustment systems for capitated plans such as Medicare Advantage, Part D drug plans and ACA plans.

K. John McConnell, PhD, is a health economist and director of the Center for Health Systems Effectiveness at Oregon Health & Science University (OHSU). His research has primarily focused on three areas: management practices and the quality of care; behavioral health services; and state health policy. McConnell has been a frequent advisor to state policymakers and employer groups on health care payment policy and implementation. His ongoing work on Medicaid policy includes assessments of Medicaid delivery system approaches, research on the ways in which mental health and addiction services have been integrated into primary care settings, and the potential for payment reforms to reduce health disparities.

Mark B. McClellan, MD, is director of the Duke-Robert J. Margolis, MD, Center for Health Policy, and the Robert J. Margolis Professor of Business, Medicine, and Health Policy at Duke University. Prior to this he was senior fellow and director of the Health Care Innovation and Value Initiative at the Brookings Institution. McClellan is a former administrator of the Centers for Medicare & Medicaid Services (CMS) and former commissioner of the U.S. Food and Drug Administration (FDA), where he developed and implemented major reforms in health policy. These include the Medicare prescription drug benefit, the FDA's Critical Path Initiative, and public-private initiatives to develop better information on the quality and cost of care.

Mary E. Reed, DrPH, is a research scientist at the Kaiser Permanente Northern California Division of Research. As a health services researcher, she studies patient knowledge and decision making with respect to health insurance, and the impacts of health information technology on clinical care delivery. She received her DrPH at the School of Public Health at the University of California, Berkeley, and

completed a post-doctoral fellowship at the Institute of Health Policy Studies at the University of California, San Francisco.

Sarah Ruiz, PhD, is a senior scientist and program officer at the Administration for Community Living, National Institute on Disability, Independent Living, and Rehabilitation Research. She has more than 15 years of experience conducting aging and disability research at the federal, state, and local levels. Her research includes evidence-based programs and practices for older adults and people with disabilities, health care innovation that spans clinic and community settings, Medicare and Medicaid claims analysis, and translation of research to policy.

Anna D. Sinaiko, PhD, MPP, is a research scientist in the Department of Health Policy and Management at the Harvard School of Public Health. Her research focuses on decision-making in health care settings, and how information and financial incentives alter consumer and provider behavior. Specific empirical projects include an examination of the impact of tiered physician networks, of consumer response to price transparency, and of consumer choice of health insurance plans in Medicare and in the ACA Health Insurance Marketplaces.

Kevin Smith, MA, is senior research public health analyst at the Center for Advanced Methods Development, at RTI. A behavioral scientist with a strong background in survey and sampling methods, psychometric assessment, meta-analysis, and structural equation modeling, he has been involved for over 20 years in a variety of studies of chronic diseases and population health. He served as the Principal Investigator on National Institutes of Health (NIH)-funded studies of heart disease risk, mammography use, pediatric brain injury, and the measurement of socioeconomic status. His most recent CMS-related work has focused on the evaluation of patient-centered medical homes and payment reforms for dually eligible beneficiaries as well as three meta-analyses of the effects of medical innovations on health care utilization and expenditure patterns. He serves on the International Advisory Board of the journal *Quality of Life Research* and as a reviewer for *Medical Care*, *Health Services Research*, and *Circulation*.

Alan Weil, JD, became the editor-in-chief of *Health Affairs* on June 1, 2014. For the previous decade he was the executive director of the National Academy for State Health Policy (NASHP), an independent, non-partisan, non-profit research and policy organization. Previously, he directed the Urban Institute's Assessing the New Federalism project, one of the largest privately funded social policy research projects ever undertaken in the US; held a cabinet position as executive director of the Colorado Department of Health Care Policy and Financing; and was assistant general counsel in the Massachusetts Department of Medical Security. He is an elected member of the National Academy of Medicine and spent six years on the NAM (and its predecessor, the Institute of Medicine) Board on Health Care Services. He is also a member of the Kaiser Commission on Medicaid and the Uninsured, the board of trustees of the Consumer Health Foundation in Washington, DC, and of the board of directors of the Essential Hospitals Institute.

Christopher Whaley, PhD, is an associate policy researcher at the RAND Corporation and an Assistant Adjunct Professor at the University of California, Berkeley. His research focuses on the price and information factors that influence patient's choice of providers and the associated quality effects of provider choice. He has also examined how providers respond to changes in consumer decision making and variations in provider quality. His research has been published in a variety of clinical, health policy, and economics journals.