

***Risk Adjustment for Integrated Care:
Breaking New Ground for Dual Eligibles in Massachusetts***

Wednesday, February 29, 2012

SPEAKER BIOGRAPHIES

Arlene Ash

***Professor and Chief of the Division of Biostatistics and Health Services Research
Department of Quantitative Health Sciences
University of Massachusetts Medical School, Worcester, MA***

Dr. Ash holds a PhD in mathematics and statistics and has written and taught extensively about how to make health data useful for managing health care and improving health. She has contributed several chapters to each edition of Lisa Iezzoni's "Risk Adjustment for Measuring Health Care Outcomes" including the 4th edition, currently in press; she has over 150 peer reviewed publications. Between 1984 and 2009 she worked at Boston University's Schools of Medicine and Public Health and directed BUSM's Health Care Research Unit. She is also a Fellow of AcademyHealth and the American Statistical Association.

Dr. Ash has received numerous awards, including the 1988 Administrator's Award from CMS for developing the models that the US Medicare program now uses to risk adjust CMS payment, quality and research initiatives. In 1996 she and Dr. Randall Ellis helped found DxCG, Inc. (now the science division of Verisk Health, Inc.) to disseminate risk adjustment tools for managing health care. In 2008 AcademyHealth's Health Services Research Impact Award honored Dr. Ash's work in "Improving the Financing and Delivery of Health Care with Risk-Based Predictive Modeling." In 2010, she received the American Statistical Association's Section on Health Policy Statistics Long-Term Excellence Award.

Recently, Dr. Ash has been developing and piloting the use of predictive models to identify appropriate payments for, and judge the quality of, a PCMH delivering a comprehensive package of primary care services to a defined patient panel. Last year, she served on a 6-person committee convened by the Committee of Presidents of Statistical Societies to critique the statistical methods used in CMS's (Hospital Compare) system for public quality reporting.

Sara S. Bachman, PhD

Boston University School of Social Work and Boston University School of Public Health

Sara “Sally” Bachman, PhD is Associate Professor in the Research Department at the Boston University School of Social Work and Research Associate Professor of Health Policy and Management at the Boston University School of Public Health. She has twenty years' experience with health policy research and program evaluation, especially in the area of state health policy for youth and adults with disabilities or complex health and social conditions. Dr. Bachman has led or participated in several studies of access to health care services for adults and children with disabilities across the spectrum of disability and lifespan. A particular focus of her work has been how integrated care systems can improve quality and efficiency of health and support services for people with disabilities, including those who are eligible for both Medicaid and Medicare. Dr. Bachman received her PhD from Brandeis University's Florence Heller School where she was a Pew Health Policy Fellow. Dr. Bachman teaches Research Methods to Master's and Doctoral students at the Boston University School of Social Work where she also directs the school's doctoral program.

Ellen Breslin Davidson

BD Group

Ellen Breslin Davidson is a health care consultant with BD Group, which provides a range of consulting services to state Medicaid programs, foundations, and health care organizations. Ellen's recent clients include the Massachusetts Medicaid Policy Institute at the Blue Cross Blue Shield of Massachusetts Foundation, the Division of Health Care Finance and Policy, the National Center on Family Homelessness, and Autism Speaks.

Ellen was the first director of the Managed Care Reimbursement and Analysis Unit for Massachusetts Medicaid. In that position, she developed and negotiated the key financial provisions for all managed-care programs, including capitation rates and risk adjustment. Prior to that, she was a principal analyst for the U.S. Congressional Budget Office, where she worked on national health care reform and contributed to budget and policy discussions at the national level by writing analytic reports and testimony for the Congress. Ellen holds a master's degree in public policy from Duke University.

Tony Dreyfus
BD Group

Tony Dreyfus is a consultant with BD Group, which provides a range of services to state Medicaid programs, foundations, and health care organizations.

Tony's career includes working as an analyst and writer in health care economics, finance and statistics. He began in the field at Medicaid Working Group (MWG), a project at the Boston University School of Public Health to help states create model managed care and financing for people with disability; and as a consultant to Community Medical Alliance, Boston, a health plan for people with AIDS or serious physical disability. Working under Richard Kronick, Dreyfus worked to develop large multiple regression models that use diagnoses to predict health care expenditures and adjust payments for Medicaid and Medicare beneficiaries. The Chronic Illness and Disability Payment System has been adopted by more than a dozen state Medicaid programs.

Sandra Hunt
PricewaterhouseCoopers LLP

Sandi Hunt is a Principal in the San Francisco office of PwC's Health Industries Practice and a health policy specialist. Sandi has extensive experience with public programs as well as with the health care industry and holds a master's degree in Public Administration with an emphasis in Public Policy Analysis. She has worked with states and the federal government for more than 25 years to develop options of expanding health insurance coverage. She is an expert in health insurance reform, and is assisting several states on their implementation efforts of the new health care requirements of the new legislation. In addition to state and federal programs, Sandi is working with health care plans to respond to the new laws, as well as employers. She has developed complex models for measuring variation in health care risk among population groups for physical and mental health programs, and for Long Term Care. She has also had responsibility for developing regulations and regularly assists states in developing laws and regulations affecting health insurance markets. She helped the State of California develop one of the first health insurance exchanges in the country in the 1990's, and has studied the effect of Value Based Purchasing on health care costs and trends.

Lisa I. Iezzoni, MD

Harvard Medical School and Massachusetts General Hospital in Boston

Lisa Iezzoni, MD, MSc is Professor of Medicine at Harvard Medical School and Director of the Mongan Institute for Health Policy at the Massachusetts General Hospital in Boston. She has published and spoken widely on risk adjustment and also studies health care quality, delivery system, and policy issues relating to persons with disabilities. Her book *When Walking Fails* was published in 2003, *More Than Ramps: A Guide to Improving Health Care Quality and Access for People with Disabilities*, co-authored with Bonnie L. O’Day, appeared in 2006, and *Multiple Sclerosis*, written for young people, came out in 2010. Dr. Iezzoni is a member of the Institute of Medicine in the National Academy of Sciences.

Eric Meinkow

PricewaterhouseCoopers LLP

Eric Meinkow is a Director in the Chicago office of PwC. He has more than 13 years experience with employer, payer, and public sector consulting, including both Medicaid and Medicare. He specializes in determining capitation rates for physical, long-term care, and behavioral health programs to be paid to Medicaid Managed Care Organizations. He has performed work on behalf of several states Medicaid programs to both implement and enhance their current health-based risk adjustment methodology. He has also developed interactive financial projection models used to facilitate policy making decisions by assessing the impact of numerous plan design changes and enrollment assumptions for several state Medicaid programs. Eric is the Engagement Director for the State of Wisconsin providing direct oversight of all rate development projects including their three managed care long-term care programs.

Alan R. Morse, JD, PhD
The Jewish Guild for the Blind
New York, NY

Alan Morse is President and Chief Executive Officer of The Jewish Guild for the Blind and its subsidiaries where he has worked since 1968. His interests include the influence of vision loss on health care utilization and cost, optimizing the delivery of vision and healthcare services, and the functional implications of vision loss, particularly when accompanied by cognitive impairment. Dr. Morse is an Adjunct Professor of Ophthalmology at Columbia University, a trustee of the Healthcare Association of New York State, a member of the advisory board of the Eye Research Institute of the University of Wisconsin – Madison, and a current or past director of various other healthcare organizations and associations. He is author of numerous peer reviewed publications and is a regular participant on government panels, workgroups, and committees; currently, he is a member of the Managed Long Term Care Implementation and Waiver Redesign Work Group of the New York State Medicaid Redesign Team. He is a peer reviewer for a number of publications including *Archives of Ophthalmology*, where he also serves on the editorial board. Dr. Morse received his BA from Franklin College, MS from Indiana University, JD from Pace University and PhD from Fordham University.

Kate Nordahl
Massachusetts Medicaid Policy Institute
Blue Cross Blue Shield of Massachusetts Foundation

Kate Nordahl oversees the Massachusetts Medicaid Policy Institute (MMPI), a program of the Blue Cross Blue Shield of Massachusetts Foundation. MMPI is an independent and nonpartisan source of information and analysis about the Massachusetts Medicaid program, also known as “MassHealth.” MMPI’s mission is to promote the development of effective Medicaid policy solutions through research and policy analysis.

Prior to joining MMPI, Nordahl served as Assistant Commissioner for the Massachusetts Division of Health Care Finance and Policy where she led the agency’s work monitoring the impact of the state’s health reform law and analyzing health care cost trends in the Commonwealth. Nordahl also spent over 12 years in leadership positions with the Massachusetts Medicaid program in roles ranging from directing the MassHealth managed care program to designing the Senior Care Options program for seniors dually eligible for Medicare and Medicaid. She holds a master’s degree in health policy and management from the Harvard School of Public Health and a bachelor’s degree from Brown University.

Patrick J. Roohan

Office of Health Insurance Programs, New York State Department of Health

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, the development of data systems for research and cost evaluation, and evaluation of quality through performance measurement. Mr. Roohan has been the lead in developing risk adjusted premium models for the Medicaid managed care and the managed long term care programs. 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.