Partnering Sustainability

ALIGNING FORCES FOR QUALITY NATIONAL MEETING MAY 8-10, 2013 | CHICAGO, IL



Aligning Forces | Improving Health & Health Care for Quality | in Communities Across America

Meeting Guide







Dear Friends of Aligning Forces for Quality:

Welcome to Chicago!

As we launch into the last phase of Aligning Forces for Quality, the 16 communities that have been for so many years engaged in this extraordinary experiment are turning their thoughts toward the future.

How can we each ensure the good work we are doing will continue?

Partnership is at the root of Aligning Forces for Quality—the very definition of "aligning our forces." So it was not surprising that "Partnering for Sustainability" was identified by the planning committee as worthy of our focus this week.

A civilization flourishes when people plant trees under which they will never sit.

— GREEK PROVERB

The committee—which included Randy Cebul from Cleveland, Susie Dade from Puget Sound, and Melinda Karp from Greater Boston—has put together a rich meeting we hope will spark your thinking and energize your team. We have brought in experts from all over the country to discuss with you the importance of adaptability, the way to engage your leaders, and the value of partnering with your state. You will glimpse the future of key issues that will impact your sustainability, like the path to health insurance exchanges and the value of valuing your data. And you will hear from those who have traveled the path toward sustainability with some success and from those who are brave enough to share with you what they wish they had done differently.

This week we gather to think about the future. About what we need to ensure its success; about how we energize those around us to believe in and see our vision of what lies ahead; and about who we need partnering with us to best arrive there.

I know you join me in thanking the Robert Wood Johnson Foundation for their vision in creating this program and for their commitment to supporting the Alliances in their efforts to sustain. They are exemplary partners in our work, and for their passion, vision, and commitment we are deeply grateful.

Cordially,

Robert Graham, MD, Director

Agenda



Aligning Forces | Improving Health & Health Care for Quality in Communities Across America

The daily AF4Q Tribune



Make the most out of the AF4Q National Meeting with the AF4Q Tribune. The Tribune features meeting highlights, articles, photos, and more!

Pick up your copy today!

6:30 am Lobby Level	Fun run/walk Come enjoy a walk/run through Chicago with your fellow attendees—we will leave from the lobby level at 6:30 am.		
7:30 am-9:00 am Astoria and Williford A/B	Breakfast and registration We know how much networking time matters at these meetings—please join your colleagues for a hot breakfast and energizing conversation.		
	Never know who to network with at these things? Look for tables marked for specific groups to meet and connect with others who may be facing similar challenges. First meeting? Our staff are seated at "First-Time Attendee" tables to welcome you!		
7:30 am-9:00 am PDR2	Breakfast networking meeting for purchasers		
7:30 am-9:00 am PDR1	Breakfast networking meeting for providers		
7:30 am-9:00 am PDR3	Breakfast networking for plans		
9:00 am-10:30 am Waldorf	OPENING PLENARY: Partnering To Create a Movement Welcome and opening remarks: Anne Weiss, Robert Wood Johnson Foundation (RWJF) Quality/Equality Health Care Team Director and Senior Program Officer, and Bob Graham, Aligning Forces for Quality National Program Office (NPO) Director Jim Ziolkowski: Founder, president, and CEO of buildOn and author of Walk in Their Shoes: A Memoir About Changing the World. buildOn is a non-profit organization that builds schools in developing countries while also running afterschool service programs in America's toughest inner-cities. With Berwickian goals, a deep belief in the power and value of his mission, and the skills to sell and spread his work, Ziolkowski created not just an organization, but a movement.		
10:30 am-10:45 am	BREAK		



10:45 am-12:15 pm

Waldorf

BREAKOUT: The State of Partnering with the States

We know strong partnerships are a key component of sustainability. We know health care solutions need to be grown locally and regionally. Who better to partner with than your state? How do you collaborate with your state so both partners win?

This session will explore the innovative partnerships various multi-stakeholder or community organizations have developed with their states to advance common agendas.

Moderator: John Colmers, Vice President, Health Care Transformation and Strategic Planning, Johns Hopkins Medicine

THE OREGON EXPERIENCE

- Mylia Christensen, Executive Director, Oregon Health Care Quality Corporation
- Jeanene Smith, Chief Medical Officer, Oregon Health Authority, and Administrator, Office for Oregon Health Policy and Research

THE NORTH CAROLINA EXPERIENCE

- Jennifer Cockerham, Senior Vice President of Clinical Programs, Community Care of North Carolina
- Christine Collins, Deputy Director, North Carolina Office of Rural Health and Community Care, NC Department of Health and Human Services
- Steve Crane, Assistant Division Director, Division of Family Medicine, Mountain Area Health Education Center (MAHEC); Medical Director of Primary Care for Mission Health System; and Professor of Medicine at **UNC-Chapel Hill**



WHERE DO I FIND...

Speaker bios? Under the "Session" tab

Restaurant list for dinner tonight? Under the "Area Information" tab

Contact information for all attendees? Under the "Attendee Listing" tab



10:45 am-12:15 pm

Williford C

BREAKOUT: Stakeholder Relationships:

Teachable Moments in Retention of Stakeholders

"The successful man will profit from his mistakes and try again in a different way."

— DALE CARNEGIE

Attend this session and profit from the lessons learned from others in retaining and engaging key stakeholders in your Alliance. This panel of experts will share with you their thoughts and experiences on what NOT to do when trying to retain key stakeholders. Learn from their experiences so you can try again in a different way to retain those stakeholders needed to ensure your success as you move forward in your markets.

Moderator: Elizabeth Mitchell, President and CEO, Network for Regional Healthcare Improvement (NRHI)

- Rhonda Moore Johnson, Medical Director of Health Equity and Quality Services, Highmark Inc., and member of the AF4Q National **Advisory Committee**
- Karen Jones, Medical Director of Quality and Innovation, Wellspan Medical Group
- Karen Linscott, Chief Operating Officer, National Business Coalition on Health
- Johnny Simpson, Chief Executive Officer, Simpson Consulting and Management

10:45 am-12:15 pm

Marquette

BREAKOUT: What it Takes: Characteristics of Sustainable Efforts

This session will explore the features of projects that have been able to transform stakeholder interest into support, and support into sustainability.

Moderator: Sarah Gardner, Director, Health Engagement and Business Development, P² Collaborative of Western New York

- Joan Cleary, Interim Executive Director, Minnesota Community Health Worker Alliance
- Polly Seitz, National Program Director of Robert Wood Johnson Foundation Local Funding Partnerships
- Micky Tripathi, President and CEO of the Massachusetts eHealth Collaborative

12:15 pm-12:30 pm

BREAK



THURSDAY, MAY 9 (continued)

12:30 pm-2:00 pm

Williford A/B/C

LUNCHEON: Leading with Story: Working with Media Partners To Amplify Your Voice

This engaging panel will focus on the power of partnering with the media to tell your story, ways to engage reporters in your bigger story long before they actually write a news article, and innovative approaches to connecting with the media.

Moderator: Jeff Brenner, Founder and Executive Director, Camden Coalition of Healthcare Providers

- Guy Boulton, Reporter, Business of Healthcare and Health Policy, Milwaukee Journal Sentinel
- Kay Colby, Producer (health), ideastream
- Merrill Goozner, Editor, Modern Healthcare

2:00 pm-2:15 pm

BREAK

2:15 pm-3:45 pm

Waldorf

BREAKOUT: The Road to Financial Stability: Partnering with Grantmakers

Gaining the inside scoop on what foundations value can be invaluable in crafting your pitch and selling your work in the right way to the right people at the right time. Understanding what foundations consider when awarding grants can go a long way in helping an Alliance craft the right proposal or pitch. In this session, attendees will hear from decision makers from foundations who already have chosen to fund work in the health care world, including a few who fund current AF4Q communities.

- Kelly Dunkin, Vice President of Philanthropy, The Colorado Health Foundation
- Ann Monroe, President, Health Foundation for Western and Central
- Denise San Antonio Zeman, President and CEO, St. Luke's Foundation of Cleveland, Ohio



PLEASE REMEMBER TO COMPLETE YOUR EVALUATIONS!



2:15 pm-3:45 pm

Williford C

BREAKOUT: Sustainability Through Adaptability: Building Strong Foundations for the Future By Cementing Partnerships Now

"Give me six hours to chop down a tree and I will spend the first four sharpening the axe."

— ABRAHAM LINCOLN

The health care landscape is changing rapidly, and multi-stakeholder collaboratives will need to adapt to changing marketplace dynamics just as quickly. Laying a solid organizational groundwork to respond to new opportunities and challenges will require strong partnerships with key stakeholders built up over time. Speakers will share why they pursued strategic partnerships with individuals and organizations in the past, including with AF4Q Alliances, and how it helped them and their partners be nimble in the face of a multitude of ever-changing opportunities.

Moderator: Peter York, Senior Partner and Chief Research and Learning Officer, TCC Group

- Sandra Chavez, Quality Bureau Chief, New Mexico Human Services Department, Medical Assistance Division (the agency that administers the state's Medicaid programs)
- Barry Malinowski, Medical Director for Anthem Blue Cross and Blue Shield of Ohio
- Cheryl Sbarra, Senior Staff Attorney, Massachusetts Association of Health Boards

2:15 pm-3:45 pm

Marquette

BREAKOUT: Getting to "Yes": Interest-Based Negotiations

This unique 90-minute exercise will be led by Lynn Fick-Cooper, co-deputy director of the Center for Creative Leadership. Based on the best-selling book Getting to Yes by Fisher and Ury, attendees will have the opportunity to learn and practice an issues-based, revolutionary, principled approach to negotiating. Please come to this session with an issue you need to negotiate with another person or group of people. The issue should be based on a situation in which there are one or more known areas of disagreement. During the session, you will have the opportunity to practice applying the principles of issue-based negotiation to your specific issue.

3:45 pm-4:00 pm

BREAK

4:00 pm-5:00 pm

Williford A/B

BREAKOUT: Alliance Team Time

Alliance teams will have this opportunity to reconnect, assess the day's events, and plan for tomorrow.



THURSDAY, MAY 9 (continued)

4:00 pm-5:00 pm Marquette	BREAKOUT: TA Provider Meeting Technical assistance providers will meet with NPO and Foundation staff to brainstorm thoughts on the essential questions the AF4Q program will be able to answer when the program ends.
5:15 pm-6:15 pm Normandie Lounge, 2nd floor	NETWORKING RECEPTION Open to all attendees—come have a drink and some delicious appetizers before venturing out for dinner.
6:15 pm	Dinner on Your Own Restaurant suggestions are in your program book under the "Area Information" tab. Take this opportunity to connect with new colleagues or reconnect with old friends.

7:00 am-8:30 am

Astoria and Williford C

Breakfast

A hot breakfast is available for all meeting attendees.

There are two options for enjoying it:

OPTIONAL BREAKFAST BRIEFING: Partnering with the National Quality Forum: Strategies and Tools to Advance the National Quality Strategy and Meet the Needs of Your Local Community

As the federal government works to move the health care quality agenda forward, the National Quality Strategy (NQS) provides a framework for the cross-cutting areas that states, regions, and local communities can align around to focus measurement, reporting, and improvement activities. Numerous incentive programs have been supported or put into place to encourage improvements in quality across the board. The National Quality Forum (NQF) has been helping the federal government think through the best measures across these incentive programs that apply to the national priorities and support improvement across settings and levels of care.

This breakfast session will focus on sharing successes and challenges NQF identified through discussions with various communities around the country and through a survey of its membership of 450 organizations around activities they were undertaking to advance the priorities and goals of the NQS. We will discuss strategies and tools to overcome these barriers and provide insight into how NQF's tools, such as the Quality Positioning System (QPS), Community Tool to Align Measurement, and Field Guide to NQF Resources (to be released in Summer 2013), can help you navigate this arena.

Williford A/B

NETWORKING

We know how much networking time matters at these meetings, so please join your colleagues for a hot breakfast and energizing conversation.



8:30 am-10:00 am

Waldorf

BREAKOUT: Health Insurance Exchanges: What To Expect when You're Expecting

We don't have a crystal ball, but we do have this insightful and well-connected panel that will help you understand what is coming down the road from the exchanges—and what is likely running through the minds of your various stakeholder groups. Hear predictions about what lies ahead and how these changes may affect you and your partners. Build your plans from a position of knowledge about what the future holds.

Moderator: **Reed Tuckson**, Managing Director, Tuckson Health Connections, and member of the AF4Q National Advisory Committee

- Adela Flores-Brennan, Assistance Network Manager, Colorado Health Benefit Exchange
- **David McGuire**, Vice President for Payer Strategy and Contracting, Partners HealthCare System, Inc.
- Richard Onizuka, CEO, Washington State Health Benefit Exchange
- Steve Wetzell, Principal Consultant, Wetzell Health Care Strategies

8:30 am-10:00 am

Marquette

BREAKOUT: Partnering for Organizational Development: The "Secret Sauce" of Alliance Building

How do you secure engagement in a competitive market? This special 90-minute workshop, led by expert **Denise Cavanaugh** of Cavanaugh, Hagan, Pierson & Mintz, Inc., a management and organization development consulting firm, will offer hands-on support for your work in relationship management and leadership.

8:30 am-10:00 am

Williford C

BREAKOUT: The Road To Financial Stability: Finding Value in Data

Data make up a fundamental component in improving health care. However, data analytics can be a very resource-intensive effort, making it difficult to generate a positive return on investment. In this panel, speakers will share how they have used data to generate value for their organization and what types of data products and services stakeholders are likely to see value in and buy.

Moderator: Jay Want, Principal, Want Healthcare LLC

- Annette DuBard, Senior Vice President for Informatics and Evaluation, Community Care of North Carolina
- Anupam Goel, Vice President, Clinical Information, Advocate Health Care
- Phil Kalin, President and CEO, Center for Improving Value in Health Care
- **Bonnie Paris**, Program Development Manager, Quality Quest for Health of Illinois



10:00 am-10:15 am	BREAK
10:15 am-12:15 pm Waldorf	CLOSING PLENARY: Built to Last Remarks: Anne Weiss, RWJF, and Katherine Browne, Chief Operating Officer, AF4Q National Program Office
	Jerry Porras: Lane Professor of Organizational Behavior and Change Emeritus at Stanford University's Graduate School of Business. Porras co-authored international business bestseller Built to Last: Successful Habits of Visionary Companies with Jim Collins. The book is based on the results of an exhaustive six-year research project aimed at discovering the approaches and behaviors of the most visionary companies of the past two centuries. Translated into 25 languages, it has sold more than one million copies worldwide. Mr. Porras believes that enabling individuals to build successful, healthy organizations is a powerful catalyst for creating successful, healthy societies.
12:30 pm-1:30 pm Williford A/B/C	Lunch is available for all
12:30 pm-1:30 pm Marquette	Private debriefing lunch (no agenda) for Project Directors
12:30 pm-1:30 pm PDR2	Private debriefing lunch (no agenda) for consumer representatives

AF4Q MAY 2013 NATIONAL MEETING PLANNING COMMITTEE:

Alicia Aebersold, Katherine Browne, Randy Cebul, Susie Dade, Andrea Ducas, Hilary Heishman, Melinda Karp, Alexis Levy, Patrick McCabe, Michael Painter, Lissette Vaquerano Sharac, Marcia Wilson, and Lindsay Wolfe





Maps & Dining



The world is social, are you?

#af4q

@aligningforces

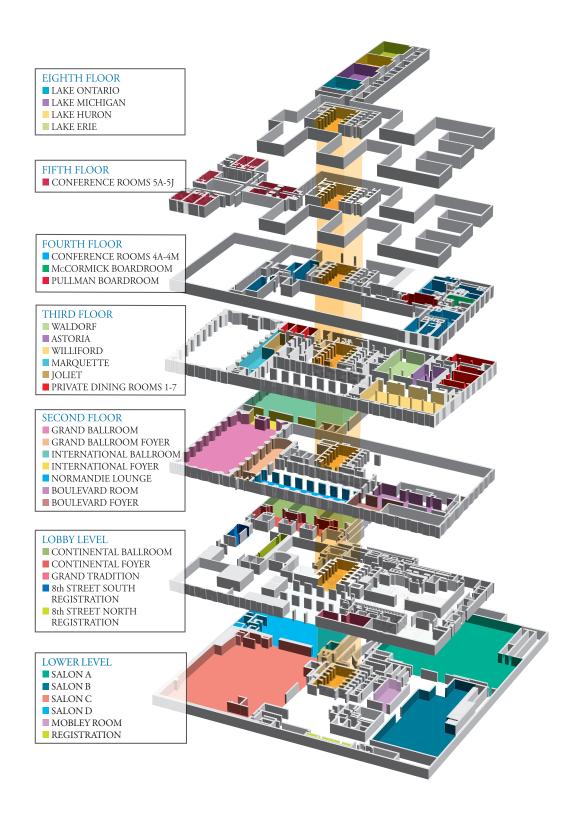


want to know more about twitter?

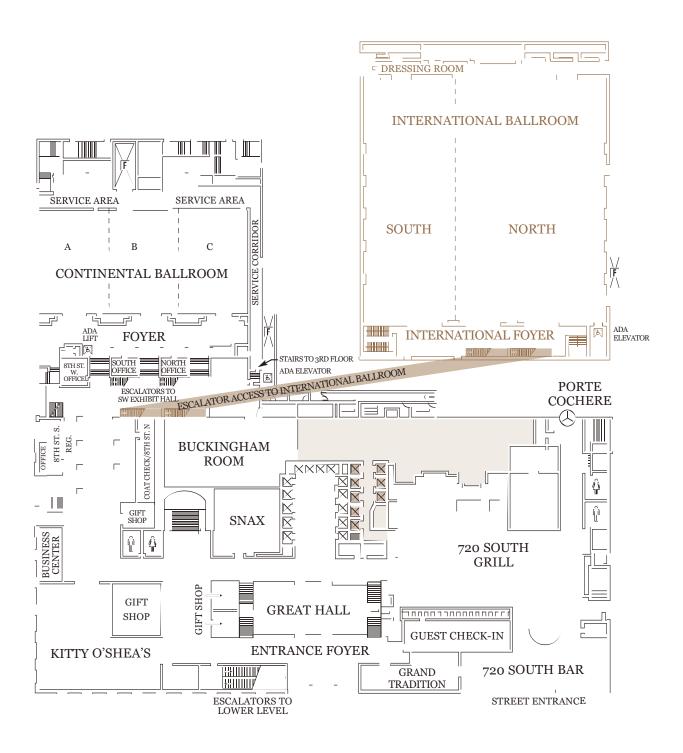
stop by the registration desk for a twitter 101 sheet and get started today

webteam@forces4quality.org

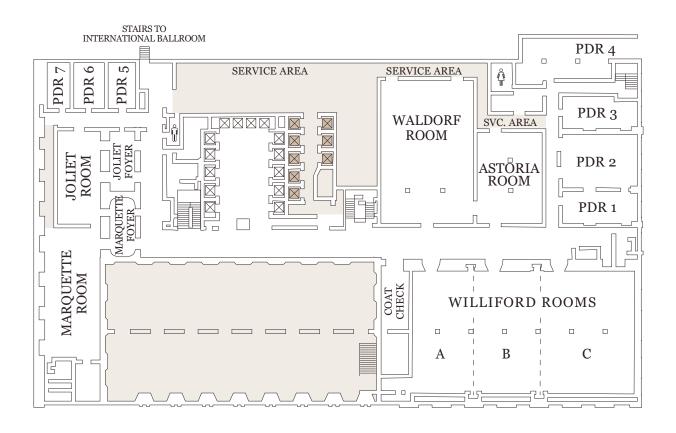
HILTON CHICAGO MAP - ALL FLOORS















HILTON CHICAGO

720 South Michigan Avenue Chicago, Illinois, 60605

Phone: 312.922.4400

LOCAL DINING GUIDE

HILTON CHICAGO RESTAURANTS		Price per Entrée	
720 South (New American)	Lobby Level	\$ = under \$10	
SNAX (Grab & Go Snacks and Coffee)	Lobby Level	\$\$= \$11 to \$30	
Kitty O'Sheas (Irish Pub)	Lobby Level	\$\$= \$31 to \$60 \$\$\$\$= \$61 and above	
NEARBY RESTAURANTS			
Atwood Café (American)	1 W. Washington	312-368-1900	\$\$\$
Eleven City Diner (American/Deli)	1112 S. Wabash	312-212-1112	\$\$
Hackney's (American)	733 South Dearborn	312-461-1116	\$\$
Jimmy Green's (American Bar/ Grill)	825 S. State	312-386-9000	\$\$
Park Grill (American)	11 N. Michigan Ave	312-521-7275	\$\$
Scout (American Bar/Grill)	1301 S. Wabash	312-705-0595	\$\$
Tavern at the Park (American)	130 E. Randolph	312-552-0070	\$\$
*The Gage (American/Gastro Pub)	24 S. Michigan Ave	312-372-4243	\$\$\$
*Artist's Café (Breakfast, Greek)	1150 S. Wabash	312-583-9940	\$\$
Yolk (Breakfast/Lunch)	1100 S. Michigan	312-789-9655	\$\$
*Brasserie by LM (French Bistro)	800 S Michigan Ave	312-431-1788	\$\$
Everest (French)	440 S. LaSalle St. 40th Fl	312-663-9800	\$\$\$\$
*Henri (French-American)	18 S. Michigan Avenue	312-578-0763	\$\$\$\$
Chicago Curry House (Indian & Nepalese)	899 S. Plymouth	312- 362-9999	\$\$
Pazzo's (Italian)	23 E. Jackson	312-386-9400	\$\$
Tesori (Italian)	65 E. Adams	312-786-9911	\$\$\$
Trattoria #10 (Northern Italian)	10 N. Dearborn	312-984-1718	\$\$\$
*Oysy (Japanese/Sushi)	888 S. Michigan Ave	312-922-1127	\$\$
South Coast (Sushi)	1700 S. Michigan	312-662-1700	\$\$\$
*Tamarind (Pan Asian/Sushi)	614 S. Wabash	312-379-0970	\$\$
Zapatista (Mexican)	1307 S. Wabash	312-435-1307	\$\$
Lou Malnati's (Pizza-Chicago Style)	805 S. State	312-786-1000	\$\$
Flo & Santos (Pizza & Polish Pub)	1310 S. Wabash	312-566-9817	\$\$
Russian Tea Time (Russian/Vegetarian)	77 E. Adams	312-360-0000	\$\$\$
Catch 35 (Seafood)	35 W. Wacker	312-346-3500	\$\$\$
Mercat a la Planxa (Spanish)	638 S. Michigan Ave	312-447-0955	\$\$\$
*Rosebud Prime (Steak)	1 S. Dearborn St.	312-384-1900	\$\$\$
Amarit (Thai)	600 S. Dearborn	312-939-1179	\$\$

^{*} Concierge Favorites







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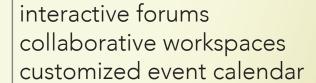


connect. share. sustain.



forces4quality.org

connecting 16 communities reforming health care locally to transform it nationally.



webteam@forces4quality.org

Anne Weiss, MPP | Speaker



Anne F. Weiss, a senior program officer at the Robert Wood Johnson Foundation, directs the Foundation's Quality/Equality Health Care team

Ms. Weiss joined the Foundation in 1999 after a distinguished career in health care policy at both the federal and state levels. She served as senior assistant commissioner of the New Jersey Department of Health and Senior Services, where she directed the state's oversight of the quality of care delivered by health care providers and health plans, and was also responsible for the state's hospital indigent care programs. During her tenure, the Department of Health and Senior Services worked with physicians and hospitals throughout the state to issue New Jersey's first report card on health care quality. She also served as executive director of New Jersey's blue-ribbon health reform panel, the Essential Health Services

Commission, where she directed implementation of a subsidized health benefits program for the working uninsured.

Previously, Ms. Weiss spent 10 years in Washington, DC, as professional staff to the United States Senate Committee on Finance and as a senior examiner with the Office of Management and Budget. She also has served as a program analyst in the Office of the Assistant Secretary for Planning and Evaluation, was a member of the steering committee of the National Academy for State Health Policy, and served on the board of the National Association of Health Data Organizations.

Born in Detroit, Ms. Weiss received her MPP from the Kennedy School of Government, Harvard University, and a BA in history and political science from Wellesley College.

ANNE'S THOUGHTS ON SUSTAINABILITY

I'm the mother of two sons—one 22 and freshly graduated from college, the other 18 and planning for a gap year abroad after high school graduation in June. So it's crunch time. They are nervously counting their pennies, but as parents, we're asking ourselves, "Have we given our boys the skills, knowledge, and confidence they'll need to survive out there in the world?" So it goes for life as a funder, too, especially in the later years of something as ambitious and sustained as Aligning Forces. Yes, I understand that money matters, but at the Foundation, we are just as concerned that Aligning Forces communities be left with the skills, capacity, and leadership they will need to continue driving toward health care transformation and healthier communities. We want to sustain impact just as much, if not more, as we want to sustain activities and organizations. I am impressed at how readily Aligning Forces Allliances have taken up the challenge of sustainability—with determination, creativity, and passion. It's a tough challenge—but for Aligning Forces, what else is new?

Robert Graham, MD | Speaker



Robert Graham, MD, is the national program director of Aligning Forces for Quality (AF4Q), the cornerstone of the Robert Wood Johnson Foundation's multi-year,

\$300 million commitment to improve the quality and equality of health care nationwide. Dr. Graham also holds an appointment as a research professor of Health Policy at George Washington University School of Public Health and Health Services (GWU). GWU serves as the national program office of the Aligning Forces for Quality program. After receiving his medical degree from the University of Kansas, Dr. Graham began a distinguished career in health policy administration. He served as administrator of the Health Resources and Services Administration in the U.S. Public Health

BOB'S THOUGHTS ON SUSTAINABILITY

Sustainability is the net result of a valued mission, carried out by an effective organization.

Service, held senior positions with the Agency for Healthcare Research and Quality, and was CEO of the American Academy of Family Physicians. He is currently chair of the board of the Alliance for Health Reform and a member of the Institute of Medicine.

Public Contact Information 202-994-8616 rgraham@gwu.edu

Jim Ziolkowski | Opening Keynoter



Jim Ziolkowski is the founder, president, and CEO of buildOn, a nonprofit organization that builds schools in developing countries while also running afterschool service programs in

America's toughest inner cities. At home or abroad, Mr. Ziolkowski's goal is to break the cycle of poverty, illiteracy, and low expectations through service and education. Inspired by his own travels to some of the most impoverished countries in the world and his experiences living in Harlem, Mr. Ziolkowski derailed his fast-track career in corporate finance at GE to dedicate his life to buildOn.

buildOn empowers inner-city teens to transform their neighborhoods through intensive community service

and to change the world by building schools in some of the economically poorest countries in the world. Currently, buildOn is working in urban high schools throughout the United States, from the South Bronx to Detroit to Oakland, and cities in between. Students in buildOn's programs work with elders, homeless people, younger children, veterans, and individuals with disabilities, among others. They have contributed nearly 1 million hours of service and have helped build nearly 500 schools around the world.

Internationally, buildOn is breaking ground on a new school every five days and will construct its 500th school in October 2012. Currently the organization is constructing schools in Haiti, Nicaragua, Nepal, Senegal, Malawi, and Mali. There are 73,000 children, parents, and grandparents attending these schools every day.

OPENING PLENARY: PARTNERING TO CREATE A MOVEMENT (continued)

The seeds for buildOn were planted when Mr. Ziolkowski was hitchhiking and backpacking around the world after graduating from college in 1989. During a 27-day hike into the Himalayas, he came upon a village in Nepal that was in the midst of a two-day celebration for the opening of a school. For the past several months, he had witnessed the immense suffering caused by extreme poverty. But in this village he saw something different. He saw the hope and courage of a community, and it all revolved around education.

When he got back to the United States and began his job in corporate finance at GE, Mr. Ziolkowski could not shake those memories of poverty abroad, and he was more acutely aware of the poverty faced by many urban youth here in the United States. So he quit GE to start buildOn.

In 1992 Mr. Ziolkowski traveled to Misomali, a village in Malawi, to build the organization's first school in Africa. The school would provide access to education for 150 students. At the time, the HIV/AIDS infection rates were between 30 and 50 percent nationally. Malaria was taking even more lives, and it almost took his. After he collapsed, his brother carried him into a hospital; when he regained consciousness, the doctor explained to him that if he had waited another two hours to come in, they wouldn't have been able to save him.

As Mr. Ziolkowski walked back to the village and reflected on his experience, he realized that when the people of Malawi contracted Malaria, they don't have a near death experience—they die. Why? Extreme poverty. The people of Misomali could not afford the cost of hospital care or urgent medical treatment. He felt strongly that education was the first step out of extreme poverty and that finishing the school in Misomali was just the beginning.

When he returned to the United States, he knew he had to build programs that would engage urban youth in a much more profound way. But he didn't feel qualified to develop programming for inner-city kids because he came from a small town in Michigan, so he moved into a half-boarded-up brownstone in Harlem. Mr. Ziolkowski spent three years living in what The New York Times called the worst drug trafficking neighborhood in the city. There he learned that urban youth don't want to escape their inner-city environments—they want to transform them.

More than two decades later, buildOn's afterschool program has transformed the lives of tens of thousands of youth by empowering them through service and education. In 2012, Mr. Ziolkowski returned to Misomali. Since the completion of their first school, the village has constructed four more on their own. Now instead of 150 kids, there are more than 1,000 kids attending school: 533 of them are girls, and four of the five chiefs from that region are women. The prominence of girls and women in this community is a direct result of their investment in education.

Today, Mr. Ziolkowski is still the guiding force of buildOn. Deeply influenced by his own religious faith, shaped by his personal meetings with Mother Teresa and the Dalai Lama, and hailed by President Barack Obama, he likes to say, "We're not a charity—we're a movement." He has been most profoundly influenced by the youth he has worked with from America's biggest cities to the poorest villages on the planet. It is their courage, hope, and thirst for change that inspire him every day.

Mr. Ziolkowski graduated cum laude from Michigan State University with a bachelor's degree in finance, and he has been featured on many news outlets, including NBC's TODAY Show, CNN, CBS Evening News, and the Big Ten Sports Network.

Mylia Christensen | Speaker



Mylia Christensen is the executive director of the Oregon Health Care Quality Corporation, which is an independent, nonprofit organization dedicated to improving the quality and

affordability of health care in Oregon by leading community collaborations and producing unbiased information. Ms. Christensen has worked in almost all facets of health care, from clinical settings to hospital and health care system management, strategic planning, and administration. She joined Quality Corp from the Oregon Health and Science University (OHSU) Center for Evidence-based Policy, where she was the project director for the Medicaid Evidence-based Decisions Project. Before joining the Center, she was a vice president at AON Employee Benefit Consulting. She also served for six years as the administrator of the state of Oregon's Public Employees' Benefit Board, responsible for Oregon's largest employee benefit program. In the early 1990s Ms. Christensen was a vice president of operations and regional director for the Oregon Health Plan enrollment broker project with Benova, Inc. Her extensive experience also includes director of program development and physician services for Legacy Portland Hospital System and the administrator of women's health services at Good Samaritan Hospital. She began her health care career in emergency services and critical care nursing.

About Oregon Health Care Quality Corporation Founded in 2000, the Oregon Health Care Quality Corporation (Quality Corp) is an independent, nonprofit organization dedicated to improving the quality and affordability of health care in Oregon by leading community collaborations and producing unbiased information. We work with the members of our community—including consumers, providers, employers, policy makers, and health insurers—to improve the health of all Oregonians.

Quality Corp's work is nationally recognized. In 2008, Quality Corp received the Chartered Value Exchange designation from the U.S. Department of Health and Human Services in recognition of leadership to improve care in Oregon. In 2007, Quality Corp became one of 16 organizations nationwide selected to participate in Aligning Forces for Quality, a program of the Robert Wood Johnson Foundation. Quality Corp is also a member of the Network for Regional Healthcare Improvement, a national coalition of regional health improvement collaboratives that are working to improve the quality and value of health care delivery in the United States.

Public Contact Information 503-241-3571 mylia.christensen@q-corp.org

Jennifer Cockerham | Speaker



Jennifer Cockerham, RN, BSN, CDE, has been a consultant to the Community Care of North Carolina (CCNC) program since 2001. She has more than 20 years' experience as a nurse in a variety

of settings that include acute care, home care, managed care, and multiple community-based agencies. Her primary focus of practice has been patient and professional education, with an emphasis on improved care and self-management of people with chronic illnesses.



THE STATE OF PARTNERING WITH THE STATES (continued)

Currently, she serves as the senior vice president for clinical programs for CCNC. She provides guidance and oversight to CCNC Network Leadership in the development, implementation, and evaluation of population management. Her responsibilities include coordination of the Chronic Care Clinical Team with local network strategies and interventions that will achieve the triple aims of access, quality, and cost, in effort to provide better-coordinated care for individuals with multiple chronic conditions.

About Community Care of North Carolina

Community Care of North Carolina is a public-private partnership currently sponsored by the North Carolina Department of Health and Human Services and the North Carolina Division of Medical Assistance (which manages the state's Medicaid program).

A winner of Harvard University's John F. Kennedy School of Government Innovations in American Government Award, Community Care was launched in 1998. Its goal is to improve the delivery of health care services to many of the state's most vulnerable individuals, making successful physician-driven care possible and cost-effective for nearly one million Medicaid recipients and low-income uninsured residents across North Carolina.

Community Care comprises 14 regional networks of physicians, nurses, pharmacists, hospitals, health departments, social service agencies, and other community organizations. These professionals provide cooperative care through the "medical home" model that matches each patient with one primary care physician.

North Carolina Community Care Networks, Inc., (NCCCN) is the statewide umbrella organization that represents and supports the 14 networks in designing and implementing care improvement initiatives for Medicaid and other underserved populations.

JENNIFER'S THOUGHTS ON SUSTAINABILITY

CCNC has maintained an enhanced permember/per-month (PMPM) fee structure since its beginning. CCNC has a contract with NC Medicaid (Division of Medical Assistance DMA) and receives a PMPM based on enrollment. DMA also pays an enhanced PMPM to each practice that has contracted with our local networks. In turn, the practice agrees to participate in network quality improvement efforts. CCNC sends a PMPM payment to each local network, based on its enrollment. Each network is a locally owned and operated nonprofit organization. They hire and manage their own care managers, pharmacists, psychiatrist, other clinical experts, and support staff. Each network has strong relationships with other local safety-net providers in the community, including hospitals, health departments, and social services. These relationships frequently present partnering opportunities to maximize resources through contracting, sharing of staff, etc., that enable the network to supplement their general operating budget at times.

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Christine Collins, MSW | Speaker



Christine Collins has a Master of Social Work from Southern Illinois University and a Bachelor of Science in social work from St. Louis University. She currently serves as the deputy director for

the North Carolina Office of Rural Health and Community Care (ORHCC). Ms. Collins oversees ORHCC's program development for rural health care, safety-net and primary care, critical access hospital infrastructure, integration of behavioral and physical health, migrant health, prescription assistance, and community care network growth for both Medicaid and uninsured populations.

CHRIS' THOUGHTS ON SUSTAINABILITY

Sustainability—while it includes funding focuses more on staying power. This means that one must provide a product or service that is of high quality and remains of value. At its core, sustainability is about developing and nurturing relationships that are rooted in trust and are mutually rewarding. I would highly recommend involving key stakeholders and leaders early in the process. Actively engage them to ensure they have a meaningful role in shaping what is being developed. This method ensures that the outcome meets their need and enhances their sense of ownership. Focus on doing the right thing. Public employees are often highly motivated to make a meaningful impact. Be flexible and embrace change so new ideas or directions can be accommodated. To the extent possible, avoid silos so you do not miss opportunities to leverage additional resources and support, as there is strength in numbers. As documenting the return on investment increasingly becomes a government mandate, be sure to engage stakeholders in defining the outcomes and, specifically, how they are to be measured.

Within the North Carolina Department of Health and Human Services (NC DHHS), Ms. Collins is responsible for many initiatives, including the AHRQ Near Miss Events in Primary Care project and the Centers for Medicare and Medicaid Services' CHIPRA Quality Improvement and Multi-Payer Primary Care Provider (MAPCP) Medical Home demonstration grants. Ms. Collins previously served a two-year joint appointment within NC DHHS as an assistant director for the Division of Medical Assistance, overseeing the Medicaid managed care program. Before working for the NC DHHS, she was the founding executive director of Access II of Western North Carolina, Inc., now Community Care of Western North Carolina.

About The North Carolina Office of Rural Health and Community Care

The North Carolina Office of Rural Health and Community Care assists underserved communities and populations to develop innovative strategies for improving access, quality, and cost effectiveness of health care. The state of North Carolina received Harvard University's distinguished Innovations in American Government Award in 2007 for the Community Care of North Carolina (CCNC) program.

Guiding Principles

- State and local partnerships
- Ownership vested in community partnerships
- In-depth technical assistance provided on an ongoing basis
- Accountability is clear and measured
- Activities centered around improving the ability of communities to meet the health needs of their underserved residents

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John M. Colmers, MPH | *Moderator*



John M. Colmers is vice president, health care transformation and strategic planning for Johns Hopkins Medicine. In this senior management position, Mr. Colmers works with leaders from

the Johns Hopkins Health System, the Johns Hopkins School of Medicine, and related organizations to develop and implement a strategic plan consistent with the organization's tripartite mission of research, education, and patient care and responsive to the new challenges of health reform and a more value-demanding health marketplace.

From January 2007 to January 2011 he served as the secretary of the Maryland Department of Health and Mental Hygiene. This cabinet-level agency has a budget of \$9 billion and is responsible for protecting, promoting, and improving the health and well-being of Marylanders through a broad range of programs, including Medicaid, public health, behavioral health, state health facilities, and regulatory oversight.

From November 2000 through January 2007, Mr. Colmers was a senior program officer for the Milbank Memorial Fund. The New York-based Milbank Memorial Fund is an endowed national foundation that provides nonpartisan analysis, study, research, and communication on significant issues in health policy.

Prior to joining the Fund, he spent 19 years in Maryland state government, where he held various positions, including executive director of the Maryland Health Care Commission (MHCC) and the Health Services Cost Review Commission (HSCRC), the agency overseeing Maryland's all-payer hospital rate-setting system.

Mr. Colmers has a BA from the Johns Hopkins University and an MPH from UNC-Chapel Hill. He was a director of CareFirst Blue Cross Blue Shield and the chairman of one of its affiliates, CareFirst of Maryland, Inc. He is currently a member of the Board of Academy Health. He is also serving on the Commonwealth Fund's Commission on a High Performance Health System. Governor O'Malley appointed him chair of the HSCRC in July 2011. He is a past chair of the steering committee of the Reforming States Group, a bipartisan group of executive and legislative leaders.

About Johns Hopkins Medicine

The Department of Health Care Transformation and Strategic Planning is charged with developing the strategic plan and planning process for Johns Hopkins Medicine (JHM) and for tracking progress toward successful implementation. This office works with all parts of JHM to guide its transformation while simultaneously remaining committed to its tripartite mission: preeminence in biomedical discovery, learning, and clinical care.

Johns Hopkins Medicine is the \$6.5 billion enterprise that unites the physicians and scientists of the Johns Hopkins University School of Medicine with the health professionals and facilities that make up the broad, integrated Johns Hopkins Health System.

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Steve Crane, MD | Speaker



Before entering medicine, Dr. Crane was trained as a health economist at Stanford University and worked at the Institute of Medicine and the Congressional Budget Office in Washington, DC,

as a health policy analyst. He completed his medical education at Case Western Reserve University in Cleveland, OH, and family medicine residency at the University of Missouri, Columbia. He has practiced family medicine in Western North Carolina since 1986, first at the Hot Springs Health Program in Madison County, and subsequently at Blue Ridge Community Health Center in Hendersonville. He was the founding program director of the Mountain Area Health Education Center (MAHEC) rural tract family medicine residency in Hendersonville and presently serves as the assistant division director at MAHEC and as the medical director of primary care for Mission Health System in Asheville. He is a professor of medicine in the Department of Family Medicine at UNC-Chapel Hill and writes and lectures extensively on practice redesign and new models of care.

Mountain Area Health Education Center (MAHEC), established in Asheville in 1974, is a member of the North Carolina AHEC system. The largest AHEC in North Carolina, MAHEC has a state and national reputation for innovation and excellence. MAHEC's mission is to provide education, training, and services to improve health outcomes in Western North Carolina. Core programs are offered through six divisions: Dentistry, Family Medicine, Obstetrics and Gynecology, Healthcare Innovation, and Regional Services. Dentistry houses a residency program and clinical services; Family Medicine and OB/GYN include residency programs and clinical practices; Healthcare Innovation includes the Center for Healthy Aging, quality improvement, and research; and Regional Services provides continuing education

for health professionals in the region. MAHEC develops programs and initiatives in response to emerging

About Mountain Area Health Education Center

health care issues and a rapidly changing health care environment and collaborates with hospitals, health departments, and institutions of higher education throughout our region, as well as the University of North Carolina at Chapel Hill.

STEVE'S THOUGHTS ON SUSTAINABILITY

Maintaining strong professional and collegial relationships

• The key to any ongoing collaborative relationship across organizations are the relationships between individuals in those organizations. These relationships require trust, desire to find win-win solutions to mutual problems, and regular contact.

Structures to allow, support, and encourage collaboration

 In a world that often seems more siloed, proprietary, and competitive, more complex collaborations often require a formal structure for that collaboration and a decision-making or governance structure that allows projects to move forward only when there is consensus to do so from the participating organizations.

Aligned interests

• Organizations each need to find some benefit in the collaboration; regular comparison of interests and goals are needed to make sure projects do not drift off into the weeds.

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Jeanene Smith, MD, MPH | Speaker



Jeanene Smith, MD, MPH, is the new chief medical officer (CMO) for the Oregon Health Authority (OHA) and also continues to serve as the administrator of the Office for Oregon Health Policy and

Research (OHPR). As CMO, she provides leadership and advice in developing medical policy, including medical management, clinical quality standards, and evidence-based guidelines. She provides clinical advice and guidance for a range of OHA programs, including the patient-centered primary care home program, the development of alternative payment methodologies, and health information technology. Dr. Smith has been with OHPR since 2000, providing technical and policy support to the Oregon Health Plan, as well as legislative and executive branch decision making on statewide health policy. OHPR supports the work of Oregon's Health Policy Board, which is focused on implementing a state health reform plan; the Health Evidence Review Commission, which oversees Oregon's Prioritized List of Health Services; the Medicaid Advisory Council; the Pain Management Commission; the Patient Centered Primary Care Home Program; the Primary Care Office; and the Office of Health Information Technology. Dr. Smith sits on the Oregon Public Employees Benefit

Board, and the Oregon Quality Corporation Board, representing the Oregon Health Authority. She graduated from Oregon Health Sciences University (OHSU) School of Medicine and completed a residency in family medicine at Jefferson University Hospital in Philadelphia. She graduated with a master's in public health from Portland State University in 2001. She has practiced family medicine in both private practice and community clinics for more than 15 years and continues to see patients on a limited basis at an Oregon federally qualified health center.

About Oregon Health Authority

The Oregon Health Authority is at the forefront of lowering and containing costs, improving quality, and increasing access to health care in order to improve the lifelong health of Oregonians. The organizational chart shows the top-level organization of the Oregon Health Authority. OHA is overseen by the nine-member citizen Oregon Health Policy Board working toward comprehensive health reform in our state.

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JEANENE'S THOUGHTS ON SUSTAINABILITY

QualityCorp has been a pacesetter in Oregon by creating multi-payer cooperation across the health care community in a state where stakeholder collaboration is integral to success. Their work on data collection across payers and publicly reporting quality measures set the stage for continued discussions in our state for using data to drive change and improvement in Oregon's health care delivery system. Sustainability relies on the community seeing the leadership and cooperation that such an alliance can bring to the table around a common vision. Stability going forward relies on maintaining that vision and a reputation of non-biased expertise, as Oregon's QualityCorp has, to be the trusted resource across the health care community in Oregon as we transform our delivery system. Demonstrating the common benefit and economies of scale and anticipating the needs of the community creates that return on investment that is critical for ongoing investment. Maintaining valued relationships as a key business partner with each of the public and private stakeholders and the community they serve is integral to the ongoing success as states' alliances look to the future.



STAKEHOLDER RELATIONSHIPS: TEACHABLE MOMENTS IN RETENTION OF STAKEHOLDERS

Karen Jones, MD | Speaker



Karen Jones, MD, is the medical director of quality and innovation for the WellSpan Medical Group, a group of approximately 150 primary care physicians and 500 total providers located in York

and Adams counties, PA.

She serves as physician champion to the RWJF-funded Aligning Forces for Quality (AF4Q) project in South Central PA, which brings providers, consumers, and payers together to improve quality of care, publicly report data, and change how we pay for care in our communities.

Dr. Jones served on two advisory committees to Governor Rendell's Chronic Care Commission, cochaired the steering committee for the South Central PA Chronic Care Collaborative, and is on the physician advisory council to the PA Healthcare Quality Alliance.

She received her medical degree from the University of Florida and internal medicine residency training at the University of Virginia. Dr. Jones served more than 11 years as an attending physician and preceptor in the internal medicine residency program at York Hospital and continues a limited outpatient practice.

KAREN'S THOUGHTS ON SUSTAINABILITY

After the purpose and goals of the Alliance have been communicated and stakeholders see value in them, then relationships become the glue that keep people engaged and working together for the greater good—and allow for forgiveness when mishaps occur (which they inevitably do).

About WellSpan Medical Group

The WellSpan Medical Group includes more than 500 providers in some 70 locations across South Central Pennsylvania. Working together and connected through a sophisticated electronic health record, these experts offer care and treatment for conditions that range from simple to complex—from the common cold to orthopedic injuries, neurologic problems, and cardiovascular disease.

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Karen Linscott, PT, MA | Speaker



Karen Linscott, PT, MA, is the chief operating officer at the National Business Coalition on Health (NBCH). Before joining NBCH, she was the vice president for value-driven health care at

Avalere Health, and before that, the COO for The

Leapfrog Group. She also was a visiting scholar at the National Institutes of Health Department of Clinical Bioethics. Ms. Linscott is a physical therapist with a BS in physical therapy from Temple University and earned a graduate diploma in manipulative physiotherapy from Curtain University, West Australia. She also earned an MA in philosophy from Georgetown University.



STAKEHOLDER RELATIONSHIPS: TEACHABLE MOMENTS IN RETENTION OF STAKEHOLDERS (continued)

About National Business Coalition on Health

The National Business Coalition on Health (NBCH) is a national, nonprofit, membership organization of purchaser-led health care coalitions. NBCH and its members are dedicated to value-based purchasing of health care services through the collective action of public and private purchasers. NBCH seeks to accelerate the nation's progress toward safe, efficient, high-quality health care and the improved health status of the American population.

Since 1992, NBCH's member coalitions and multistakeholder affiliates have been actively engaged in developing programs that foster the four pillars of value-based purchasing:

- Standardizing performance measurement
- Reporting performance measurement results publicly
- Reforming the health care delivery payment system
- Engaging consumers in informed decision making

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Elizabeth Mitchell | *Moderator*



Elizabeth Mitchell serves as CEO and president of the Network for Regional Health Improvement (NRHI), a national network of multi-stakeholder regional health improvement collaboratives with

more than 30 members across the United States. Before this, Ms. Mitchell was the CEO of the Maine Health Management Coalition, an employer-led, multistakeholder coalition working to improve the value of health care services. She also served as the CEO of the Maine Health Management Coalition Foundation, which is dedicated to performance measurement and public reporting and engaging the public in using cost and quality information. While at the Coalition, she led many in payment reform and health system redesign efforts with its many partners. Ms. Mitchell serves on the Board of the National Quality Forum and the National Business Coalition on Health, as chair of its Government Affairs Committee, as chair of the Board of the Network for Regional Health Improvement, and on the Coordinating Committee of NQF's Measure Applications Partnership. She also serves as chair of Maine's Chartered Value Exchange, a convener of

Maine's Aligning Forces for Quality project, and on the Advisory Council of the Maine Quality Forum. Before being appointed CEO, she worked for MaineHealth, Maine's largest integrated health system, where she led several transparency and quality improvement efforts. She served two terms in the Maine state legislature, where she chaired the Health and Human Services Committee, and has held posts at the National Academy for State Health Policy and London's Nuffield Trust. Ms. Mitchell was selected for an Atlantic Fellowship in Public Policy by the Commonwealth Fund and the British Council. While in the United Kingdom, she completed the International Health Leadership Program at Cambridge University's Judge School of Management, while pursuing graduate studies at the London School of Economics. She lives in Portland. ME, with her husband and four children.

About NRHI

The Network for Regional Healthcare Improvement is the national membership association for Regional Health Improvement Collaboratives. NRHI works to support the efforts of regional health improvement collaboratives by:



STAKEHOLDER RELATIONSHIPS: TEACHABLE MOMENTS IN RETENTION OF STAKEHOLDERS (continued)

- 1. Increasing the awareness of policy makers and health care professionals about the key role that regional health improvement collaboratives play;
- 2. Providing technical assistance to regional health improvement collaboratives in addressing specific challenges they face;
- 3. Facilitating the ability of regional health improvement collaboratives to share the practical knowledge they develop to help all collaboratives improve;

- 4. Assisting additional communities to establish regional health improvement collaboratives;
- 5. Encouraging the development and implementation of health care payment systems, benefit designs, and regulatory structures at the federal, state, and local levels that support improved population health and higher-value health care delivery systems; and
- 6. Advocating for national policies and programs that support the work of regional health improvement collaboratives.

Rhonda Moore Johnson, MD, MPH | Speaker



Rhonda Moore Johnson is the medical director of health equity and quality services at Highmark Inc., headquartered in Pittsburgh, PA. As medical director, Dr. Johnson leads Highmark's efforts

to reduce racial and ethnic health care disparities among Highmark members through clinical interventions and improvements in health literacy and health-plan cultural competency.

Dr. Johnson has worked in the managed care industry for more than 15 years, before which she practiced pediatrics and adolescent medicine in a variety of public and private settings. She previously served as a senior medical consultant for two national quality improvement initiatives by the Center for Health Care Strategies, including Improving Health Care Quality for Racially and Ethnically Diverse Populations (2006) and Improving Managed Care for Children with Special Needs (2004). Dr. Johnson currently serves on numerous national and state advisory committees. She is the immediate past president of the Gateway Medical Society, a component society of the National Medical Association, in Pittsburgh.

RHONDA'S THOUGHTS ON SUSTAINABILITY

- Ensure program changes are institutionalized
- Align goals with organizational goals so they become an integral part of the day-to-day business
- Secure resources from multiple sources
- Find a regulatory requirement the program can meet
- Do not align your program with one singular champion; engage "the choir"
- Demonstrate some measurable improvement, such as improved customer satisfaction, improved utilization, improved clinical outcomes, or a positive return on investment.

She is certified in health care quality management by the American Board of Quality Assurance & Utilization Review Physicians, Inc. In addition, Dr. Johnson is a Fellow of the American Academy of Pediatrics. Dr. Johnson earned her AB degree from Harvard University,



STAKEHOLDER RELATIONSHIPS: TEACHABLE MOMENTS IN RETENTION OF STAKEHOLDERS (continued)

her MD at the Pennsylvania State University School of Medicine, and her MPH from Ohio State University.

About Highmark

Highmark Inc. is a national diversified health and wellness company based in Pittsburgh that serves 34.4 million people across the United States through its businesses in health insurance, dental insurance, vision care, information technology, and integrated health care delivery. The company, which has more than 20,000 employees, is among the largest health insurers in the United States and the fourth-largest Blue Cross and Blue Shield-affiliated company. Highmark operates health insurance plans in Pennsylvania, Delaware, and West Virginia that serve 4.9 million members.

The company also offers health and wellness products to clients with employees throughout the country and is a recognized leader in reinsurance. In addition, Highmark operates more than 600 optical retail stores (Visionworks) and four U.S.-based eyewear manufacturing facilities. Highmark is an independent licensee of the Blue Cross and Blue Shield Association, an association of independent Blue Cross and Blue Shield companies.

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Johnny Simpson, MPM | Speaker



Johnny Simpson holds a master's in project management from George Washington University. Mr. Simpson serves on the **Executive Board of Directors** of the Kansas City Quality

Improvement Consortium (KCQIC), a Robert Wood Johnson Aligning Forces for Quality (AF4Q) Alliance. He serves as KCQIC's Community Advisory Board representative. He also is a board member of the Northland Diversity Council, a local organization promoting diversity within the community.

Mr. Simpson is the principal owner and consultant of Simpson Consulting and Management, LLC (SCM), a company that provides administrative, operational, and organizational development services to for-profit and

nonprofit businesses. Mr. Simpson, along with SCM co-owner Dorothy Jackson-Simpson, MD, also provides services to physician practices to improve practice management and operations and to improve quality of service and optimize profitability.

Mr. Simpson also has ownership interests in MobiMed Technologies, a telemedicine company that provides monitoring technologies for home health care and remote telemedicine services. MobiMed offers technology solutions that support electronic health records, meaningful use, transition of care, and other practice quality improvement initiatives.

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STAKEHOLDER RELATIONSHIPS: TEACHABLE MOMENTS IN RETENTION OF STAKEHOLDERS (continued)

JOHNNY'S THOUGHTS ON SUSTAINABILITY

Occasionally, discussions around return on investment in Alliances' long-term planning note consumer engagement activities as "intangible" benefits. It is important to keep in mind that whether Alliances are discussing "patient" engagement with providers or "member" engagement with health plans, they are talking about life-impacting decisions for consumers.

New regulations, guidelines, and health stakeholders all support the idea that consumers should be at the table, but engaging and sustaining consumers as partners in individual health and health care policies continues to be a challenge and an opportunity. Successful relationships between consumers and Alliances will require:

- Recognizing that changing from the traditional roles of health providers and patients to consumer empowerment is a paradigm shift that will take time, training, and support for both providers and consumers.
- · A commitment to the resources, tools, and support to empower consumers to be truly engaged in decision making. Consumers must be armed with information on health topics to be real participants, rather than passive listeners to experts.
- · Having a clear understanding of what consumer empowerment looks like in each Alliance. Consumers want to be involved in relevant work and conversations.
- · Valuing consumer input. Consumers bring a unique perspective on issues around health cost and quality.

If you listen to consumers, they will tell you how to engage them and keep them at the table. The return on investment will be tangible for all stakeholders.

Joan Cleary | Speaker



Joan Cleary provides consulting and transitional leadership services to nonprofits, foundations, health care, and government. She is currently serving as interim executive

director of the Minnesota Community Health Worker Alliance. Before starting her consulting practice in 2010, Ms. Cleary led grantmaking, policy support, and leadership development initiatives for the Blue Cross and Blue Shield of Minnesota Foundation, including its community health worker field-building efforts and upstream focus on social determinants of health. In a health and human services career spanning 30 years, Ms. Cleary has worked in community, nonprofit, clinical, think tank, government, and philanthropy settings. She is a graduate of Oberlin College and the Kellogg School of Management at Northwestern University.

About Minnesota Community Health Worker Alliance

As a convenor, catalyst, partner, and expert, the Minnesota Community Health Worker Alliance fosters healthier communities, reduces health disparities, and promotes access to quality, cost-effective health care by advancing respectful, community-based public health and health care delivery models founded on peer-to-peer support and designed to achieve health equity for underserved populations.

JOAN'S THOUGHTS ON SUSTAINABILITY

Successful transitions are critical to sustainability. It's said that a transition begins with an ending and ends with a beginning. Imagining and planning for a new future calls for adaptive leadership and summons questions related to purpose, identity, value, focus, and strategy. Vision and performance matter. Understanding your landscape and distinctive competencies is critical. Sustainability may entail pruning and trimming for new or stronger growth; it might involve transplanting; it could be the pollination of new ideas and innovation or depend on the development of synergistic relationships. It may require a new structure or specialized resources to better support next-stage growth in a changing environment. Leading change for better health is challenging, long-term work. Celebrate your successes, share your lessons, and chart your pathway to sustainability with intentionality, engagement, and resourcefulness.

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Sarah Gardner | *Moderator*



Sarah Gardner is the director of health engagement and business development for the P² Collaborative of Western New York. She leads the coordination of health engagement programming

for the eight counties of Western New York, with special

focus on high-risk and high-need populations. She also is responsible for creating strategies and developing revenue-generating products, programs, and services to sustain the work of the P² Collaborative.

Before P², Ms. Gardner served as the vice president of benefits and employee relations for Prodigy Health



Group for six years and also as a senior consultant at Aetna. She was featured in USA Today and CFO Magazine for her dedication to fostering health care consumerism in her employee groups. Before relocating back to Western New York, Ms. Gardner coordinated the opening of the Employee Health Clinic at Sarasota Memorial Hospital, saving the hospital's employee health plan more than \$400,000 in its first year.

About P² Collaborative

The P² Collaborative is a Robert Wood Johnson Foundation Aligning Forces for Quality Community. We create the healthiest community through care transformation initiatives, community health improvement, and health engagement programing. We focus our work in four areas, taking a comprehensive approach to improving health.

Together with our multi-stakeholder partnerships, we:

- Work with communities to determine how to make their neighborhoods healthy places to live
- Help improve services to underserved and at-risk patient populations.
- Help physicians, practices, and hospitals improve the quality of care they deliver.
- Help coordinate programming to inspire Western New Yorkers to live healthier.

Here is a snapshot of some of our 2012 accomplishments:

- Care Transformation: We were the leader in New York State in the number of primary care practices assisted in reaching Meaningful Use attestation, improving patient care, and helping providers eligible for incentive dollars. We work with safety-net providers to improve care and reduce unnecessary ED and inpatient utilization for diabetic and mental health patients.
- Community Health Improvement: We facilitated five Community Health Improvement initiatives, empowering communities to do what it takes to get healthy. Bus shelters were fixed, a community resource guide was created and distributed, evening basketball programs were launched, and youth development initiatives were implemented as a result of our facilitation.
- Health Engagement: Along with our partners, we delivered more than 175 health-related workshops and trainings, engaging community members on every aspect of health, and touching the lives of expectant mothers, elementary school children, youth, adults, and seniors.

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SARAH'S THOUGHTS ON SUSTAINABILITY

Sustaining our work as an AF4Q Alliance into the future is essential to the quality and efficiency of health care in Western New York. However, what will that take? It is critical that we be able to articulate the value of our work and also seek and monitor feedback from the community as to how they perceive our value. Communicating our successes and improved outcomes in easy-to-understand and engaging formats, on a regular basis, is a critical component of sustainability.

The time and energy we have invested in solidifying our strategic plan has been an invaluable exercise. This ensures we are able to communicate to all stakeholders who we are and what we do. It also gives us a framework to vet all potential projects to ensure we are investing our efforts in meaningful initiatives that will ultimately improve health and health care for all Western New Yorkers.



Polly Seitz, MPA | Speaker



Pauline M. Seitz is the director of the Robert Wood Johnson Foundation Local Funding Partnerships (LFP), a competitive national matching grants program that funds new, collaborative,

creative solutions to improve health for vulnerable people.

Previously she worked at the Robert Wood Johnson Foundation, first as a program officer and then as a senior program officer. During her tenure there she was responsible for a portfolio of grants that included the first cycle of LFP awards in 1988. When Ms. Seitz left the Foundation in 1994 to become national program director of LFP, she also assumed the directorship of New Jersey Health Initiatives, another RWJF program office. She directed both programs for six years while they were co-located at the Health Research & Educational Trust of New Jersey.

Ms. Seitz serves on the Board of Directors of the Sisters of Charity of Cleveland Foundation, is a past president of the Council of New Jersey Grantmakers, and is a former board member of the Forum of Regional Associations of Grantmakers. Earlier in her career she was director of the Nurse-Midwifery Faculty Practice at Case Western Reserve University School of Nursing. She received a bachelor's in nursing from Georgetown University, a master's in nurse-midwifery from Columbia University, and a Master of Public Administration from the Kennedy School of Government at Harvard University.

About LFP

Robert Wood Johnson Foundation Local Funding Partnerships (LFP) is a diverse collection of innovative programs that work to make better health possible for people in difficult life circumstances. (See www. localfundingpartnerships.org.) At the heart of our story is leveraging the power of partnership: a national foundation combining resources with local grantmakers to fund creative, pragmatic, communitydriven projects.

As part of the Robert Wood Johnson Foundation Vulnerable Populations portfolio, we recognize that factors outside of our medical system—such as poverty, violence, inadequate housing, or education contribute significantly to poor health. We also recognize that the best ideas for solving pressing community problems come from members of the communities themselves.

POLLY'S THOUGHTS ON SUSTAINABILITY

Sustaining collaborative work is an ancient quandary that continues into the most contemporary times. The questions for establishing an evidence base were raised before Cicero and continue in a good episode of NCIS. Quis, guid, cur, guomodo, ubi, guando, quibi auxiliis—or as any good reporter or funder asks, "Who, what, why, how, where, when, and with what?" The order in which these questions are asked may vary, but I have never seen a program advance without being able to answer them in the past, present, and future tense.

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Micky Tripathi, MPP, PhD | Speaker



Micky Tripathi is the president and chief executive officer of the Massachusetts eHealth Collaborative (MAeHC), a nonprofit collaboration of 34 leading Massachusetts

organizations. He also is chairman of the Board of Directors of the eHealth Initiative, a national organization promoting health information technology; the chair of the Information Exchange Working Group of the national Health Information Technology Policy Committee, which is providing recommendations to the federal government on health information exchange requirements related to the HITECH Act; and a member of the Board of Directors of the New England Health Exchange Network (NEHEN), a regional health information exchange based in Waltham, MA.

Before joining MAeHC, Dr. Tripathi was a manager in the Boston office of the Boston Consulting Group (BCG), a leading strategy and management consulting firm. While at BCG, he served as the founding president and CEO of the Indiana Health Information Exchange, an Indianapolis-based nonprofit company partnered with the Regenstrief Institute to create a statewide health information infrastructure in the state of Indiana. As a manager in BCG's health care practice, Dr. Tripathi also served a variety of US and international clients in the nonprofit sector as well as in the bioinformatics, biotechnology, and pharmaceutical industries.

He holds a PhD in political science from the Massachusetts Institute of Technology, a Master of Public Policy from Harvard University, and an AB in political science from Vassar College. Before receiving his PhD, he was a senior operations research analyst in the Office of the Secretary of Defense in Washington, DC, for which he received the Secretary of Defense Distinguished Civilian Service Award.

About MAeHC

Originally founded in 2004 as a nonprofit collaborative, MAeHC is now a professional services company delivering strategic advice, hands-on implementation, and best practices for EHR and community-wide HIE projects. Our mission is to improve health care delivery through meaningful adoption of health information technology. Our experience and technical expertise ensures success for clients as diverse as large health care networks, HIE organizations, government agencies, foundations, hospitals, physician practices, and technology and consulting companies, both large and small.

MAeHC is a pioneer and leader in implementing EHRs and HIEs, with experience gained through our groundbreaking pilot projects started in 2004. Since then, MAeHC has gained unparalleled practical, onthe-ground experience with a wide range of vendor systems in all types of clinical and community settings across the country. MAeHC provides a broad range of consulting services to government and private organizations throughout the United States. Our areas of expertise include strategic planning, EHR deployment, HIE, quality data extraction, warehousing, analytics, and reporting.

MAeHC partners with clients to help them address their most difficult challenges. The strategic planning and facilitation expertise of our Advisory Services team, hands-on deployment capabilities of our Implementation Services team, data collection and reporting experience of our Quality Data team, and practical outcome orientation of our Accountable Care and Medical Home team make up our spectrum of services. MAeHC can assist with one aspect of a health IT project, or we can manage a project from conception to completion.

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David E. Williams, MBA | Reactor



David E. Williams is president of the Health Business Group, where he has extensive experience in strategy and business model development throughout health care and life sciences. He

previously worked for 10 years in the health care practice of the Boston Consulting Group (BCG) and as an independent consultant. He began his career at the LEK Partnership, where he was a strategy consultant and mergers and acquisitions advisor in a variety of industries. Mr. Williams is a board member of iCardiac Technologies, a venture-backed ECG-based biomarker company serving the pharmaceutical development and personalized medicine sectors. He writes the Health Business Blog, a highly rated daily blog that focuses on the business and policy aspects of health care. He also is chairman of the board of the Hearts & Noses Hospital Clown Troupe, which provides professionally trained volunteer clowns to hospitalized children. Mr. Williams holds a BA in economics from Wesleyan University, where he was elected to Phi Beta Kappa,

and an MBA from Harvard Business School, with First Year Honors. He has acted as an instructor in MIT's graduate-level Dynamics of Biomedical Technologies course in the Biomedical Enterprise Program and served on the Office of the National Coordinator for Health Information Technology's Objective Review panel for Regional Health Information Technology Extension Centers and Beacon Communities.

About Health Business Group

Health Business Group is a leading strategy consulting boutique advising companies, nonprofits, and investors in health care services, health information technology, and pharmaceutical services. Our client service professionals average more than 15 years of health care consulting, industry, and start-up experience.

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DAVID'S THOUGHTS ON SUSTAINABILITY

Creating a sustainable business model for a multi-stakeholder Alliance is challenging but attainable. Successful Alliances understand the key to sustainability is providing benefits that exceed the amount of funding they receive from their stakeholders. To sustain itself, an Alliance must understand its marketplace, determine what it does uniquely well, develop a clear vision and mission, articulate a strong value proposition that translates into a focused set of activities, and create a high-performance organization.

In the medium term, Alliances are likely to find opportunities to sustain themselves by reinforcing health care reform, fostering implementation and use of health IT, improving quality at the provider level, and helping stakeholders "bend the cost curve." A variety of funding models are appropriate for Alliances, including membership dues, program funding, fee-for-service revenues, royalty funding, grants, and donations.

Alliances will improve their chances of achieving sustainability by taking a businesslike approach. This includes being explicit about value creation, addressing fairness issues, being forthright in asking for money, and identifying tradeoffs and alternative courses of action. Although it would be great to hold everything constant once the sustainable model is in place, the rapid evolution of health care means ongoing adjustments are inevitable.



Guy Boulton | Speaker



Guy Boulton has covered the business of health care and health policy for the Milwaukee Journal Sentinel since 2005. He has worked at The Tampa Tribune, The Cincinnati Enquirer,

The Wichita Eagle, and The Salt Lake Tribune. He had a Kaiser Media Fellowship from September 2009 through January 2010 to report on comparative effectiveness research.

About The Milwaukee Journal Sentinal

The Milwaukee Journal Sentinel has a daily circulation of 207,000 and a Sunday circulation of 337,000. Since 2005, the paper has won three Pulitzer Prizes, two John B. Oakes Prizes for environmental reporting, two Gerald Loeb Awards for business reporting, and several George Polk Awards and National Headliner Awards.

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Jeff Brenner, MD | *Moderator*



Jeffrey Brenner is the founder and executive director of the Camden Coalition of Healthcare Providers. He is a family physician and has practiced in Camden for 11 years as a frontline primary

care provider for patients of all ages. Having owned a private practice in Camden, he has experience in implementing electronic health records and running a paperless office and open-access scheduling, as well as first-hand knowledge of the various challenges facing primary care in the current health system.

He currently serves full time as the Coalition's executive director, where he spends much of his time meeting with stakeholders and policymakers, advocating for the models of care the Coalition has developed and demonstrated through data-centric results. Dr. Brenner is a faculty member of the Robert Wood Johnson Medical School in Camden and is also a former resident of Camden, having lived in the city for more than eight years.

Dr. Brenner is a graduate of Vassar College and the Robert Wood Johnson Medical School.

About Camden Coalition of Healthcare Providers

Over the past nine years, the Camden Coalition of Healthcare Providers (or "the Coalition") has become community organizer of the Camden health provider arena. Frequently in large, urban environments across the country, health care delivery is fragmented, episodic, uncoordinated, and extremely inefficient. Often, several hospitals and health systems exist in the same city but do not communicate, and the flow of information across systems does not exist. After working for several years to gain access to hospital claims data, all three Camden health systems (Cooper University Hospital, Our Lady of Lourdes Medical Center, and Virtua Health) and the Coalition—together with Camconnect—compiled a comprehensive database to analyze and quantify the use of the hospitals by Camden residents. Using discrete patientlevel claims data, it was found that in one year, nearly half of the city's residents visited a city Emergency Department (ED) or hospital, a single patient visited



LEADING WITH STORY: WORKING WITH MEDIA PARTNERS TO AMPLIFY YOUR VOICE (continued)

every city ED/hospital a total of 113 times, and the most common diagnoses for visits were head colds, viral infections, ear infections, and sore throats. In Camden, 80 percent of the costs were spent on 13 percent of the patients, and 90 percent of the costs were spent on 20 percent of the patients. The total cost for hospital and ED care in Camden over five years was \$650 million—mostly public funds.

The Coalition spent its first five years almost solely on building relationships across the Camden health care provider community—from community-based private practices to frontline hospital staff to social workers across the city. Using those relationships and guided by the Camden Health Database to inform and evaluate, we currently operate several health project initiatives

to demonstrate a collaborative approach to improving care delivery and patient outcomes. It is intended that the program models created can be replicated and implemented in other cities across New Jersey and the country to result in improved patient care and reduced costs. The Coalition has expanded its partner base and has also built relationships with executive leadership of the hospitals, social service/public health agencies, state government agencies, leaders at the statewide Medicaid health plans, and policy makers to advocate and build legislation to sustain this modern-day approach of health care delivery.

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Kay Colby | *Speaker*



Kay Colby is a producer in the Health Unit of WVIZ/PBS and 90.3 WCPN ideastream, Cleveland's combined PBS/NPR station. To date, she has served as lead producer for 13 television

programs about various chronic diseases and conditions broadcast as part of ideastream's awardwinning multimedia health series "Be Well." Before joining ideastream, Ms. Colby spent 10 years as president of Public Health Television (PHTV), Inc. PHTV is an Emmy Award-winning production company that specializes in designing and testing video-based interventions to address health care disparities affecting low-income African Americans and Hispanics. Ms. Colby wrote and served as principal investigator for five grants funded by the National Cancer Institute and performed in collaboration with the Case Comprehensive Cancer Center at Case Western Reserve University. PHTV's work with the medically underserved led to the creation of a media advocacy

project known as the Urban Cancer Project that was presented at the 2003 legislative conference of the Congressional Black Caucus as a national model to address health disparities.

After graduating Phi Beta Kappa from the University of California at Los Angeles, Ms. Colby spent 10 years as a general assignment reporter for various NBC affiliates across the country. She specialized in the production of medical news and information while working for Medstar Television, the nation's leading producer of medical/scientific forensic crime shows during the 1990s. Ms. Colby has an extensive list of network credits that includes several episodes of "Forensic Files," an HBO special on heart attacks hosted by Walter Cronkite, and a daily health magazine show for the Discovery Channel.

Ms. Colby has received numerous honors and awards, including a 1999 National Headliner (Second Place) for "Wisdom from Within"; the 2002 Cancer Care Hall of



LEADING WITH STORY: WORKING WITH MEDIA PARTNERS TO AMPLIFY YOUR VOICE (continued)

Fame Community Outreach Award from the American Cancer Society; a 2009 Regional Emmy for "The Urban Cancer Project: A Family's Story"; a 2009 Regional Emmy for "Diabetes: the Constant Shadow"; a 2009 Regional Emmy for "Tracking the Tumor"; a 2010 First Place National Headliner Award for public service; a 2010 First Place for public service from the Press Club of Cleveland; a 2010 Regional Emmy for "Fighting Fat"; a 2011 MarCom Platinum for "Body in Pain"; and a 2011 First Place from the Press Club of Cleveland for "Surviving Stroke."

About ideastream

ideastream® is public broadcasting and a whole lot more.

ideastream is a nonprofit organization that applies the power of media to education, culture, and citizenship. It includes WVIZ/PBS, 90.3 WCPN, WCLV 104.9, educational and public service cable channels, broadband interactive video distance learning, the Internet, and other interactive media.

Based on careful and ongoing ascertainment of community needs, ideastream acquires, creates, and delivers content that connects those who seek knowledge with those who have it.

ideastream leverages technical, creative, and financial resources through partnerships with other organizations that share interests in education and public service. Support comes primarily from contributions made by individuals, foundations, and corporations. Funding from state and federal agencies also plays a critical role.

ideastream has attracted national attention as a new model for public service media. The services of ideastream multiple media are used by more than 2.8 million people a month in the Northeast Ohio region.

Merrill Goozner, MS | Speaker



Merrill Goozner provides overall editorial direction and oversees editorial content for the Modern Healthcare magazine, newsletters, and websites. His background includes 30 years as an editor,

writer, and journalism educator. He is the author of The \$800 Million Pill: The Truth Behind the Cost of New Drugs. Mr. Goozner is a former foreign, national, and chief economics correspondent for the Chicago Tribune and professor of journalism at New York University. He has been a contributor to numerous publications, including The New York Times, The American Prospect, the Journal of the National Cancer Institute, and The Fiscal Times. Mr. Goozner received an MS in journalism from Columbia University and a BA in history from the University of Cincinnati (2008 Distinguished Alumni Award). He joined Modern Healthcare in 2012.

About Modern Healthcare

Modern Healthcare is the industry's leading source of health care business and policy news, research, and information. We report on important health care events and trends, as they happen, through our weekly print magazine, websites, e-newsletters, mobile products, and events. Our readers use that information to make informed business decisions and lead their organizations to success. It's for this reason that Modern Healthcare magazine is ranked No. 1 in readership among health care executives and deemed a "must-read" by the who's who in health care.

LEADING WITH STORY: WORKING WITH MEDIA PARTNERS TO AMPLIFY YOUR VOICE (continued)

The weekly print magazine, websites, e-newsletters, mobile products, and events provide a powerful and all-encompassing industry presence. We ask the tough questions and provide more than just a news report. We deliver in-depth analysis and a look into what's happening next so readers can understand the impact these issues will have on them, their organizations, and the entire industry.

Modern Healthcare leads the market in editorial excellence and is honored to receive awards from ASBPE, ASHPE American Business Media, Trade Association and Business Publications International, and the Association of Health Care Journalists, affirming Modern Healthcare's status as the best source for health care business and policy news, research, and information.

Sandra Chavez | Speaker



Sandra Chavez has more than 20 years of experience in health care and managing public health care systems. She has held several key management positions that included operational and

financial responsibility for NM Medicaid programs, hospitals, and physician practices. She currently works as the Quality Bureau chief for the New Mexico Human Services Department, Medical Assistance Division, the agency that administers the state's Medicaid programs. Ms. Chavez is primarily responsible for directing the Department's Quality Program and coordinating existing quality improvement and future health reform initiatives with contracted Medicaid managed care organizations. She has been heavily involved in designing innovative programs focused on improving the health of the population and optimizing quality of care at the patient level, including the development of a patient-centered medical home (PCMH) model, health home (HH) model, and pay-for-performance (P4P) for New Mexico's Medicaid members.

SANDRA'S THOUGHTS ON SUSTAINABILITY

Sustainability is about maintaining and continuing program services after the funding period is over. There are several key strategies to consider when building the capacity and, ultimately, the sustainability of an organization, including recruitment, marketing or promotion, increasing funding or resources, and forming partnerships with community members and organizations.

Since New Mexico is one of the poorest states in the nation, the success of any program has been the dedicated volunteers as well as a broad base of extraordinary community support composed of partnerships with local businesses, nonprofits, and community organizations. These partnerships have been a key factor in the health care community where the "Same Ten People" are involved in different projects and events. As with any relationship, each program partnership is unique, and its quality and duration are informed by the individuals involved and the services provided.

In terms of sustainability, the services provided must have long-term value for the community and must become a permanent part of community resources. The goal is to be integrated into the community, accepted by the community, and used by the community. In a state with limited financial resources, this means not duplicating existing services and providing expertise that doesn't exist elsewhere in the community.

The faster-than-average growth in our elderly population, combined with growing resource demands on the state anticipated under provisions of the Affordable Care Act, present opportunities to enhance existing relationships and become part of a larger network of services and resources. Program development must address a current need, a specialty, or a "niche" to create an opportunity for participation. In the current economic environment that also means a need to be innovative and flexible. Our work with the Albuquerque Coalition for Healthcare Quality has provided the forum to explore a vehicle for "resource sharing" and project alignment for contracted health plans as the NM Human Services Department works to transform the current Medicaid program to the Medicaid Centennial Care Program beginning January 1, 2014.

Ms. Chavez directs all aspects of performance measurement for New Mexico Medicaid programs. She has designed, implemented, and measured quality improvement projects, performance measures, and performance reporting to assess health care against recognized standards and NCQA Quality Compass benchmarks.

In addition to her role as Quality Bureau chief, Ms. Chavez has also held the position of program integrity director. Under her leadership the bureau has multimillion-dollar recoveries year after year by using data analytics, data mining, medical claim audits, and process improvement activities.

About New Mexico Medicaid

New Mexico is one of the poorest states in the nation and has a faster-than-average growth in its elderly population. These two facts combined have placed growing demands on the state Medicaid program, even before the inclusion of the "newly eligible" under the Affordable Care Act. Of the approximately 2 million citizens of the state, more than a quarter, or 560,000 people, currently receive their health care through the Medicaid program, and approximately 175,000 additional people will be added to the program beginning January 2014 under the Affordable Care Act.

In June 2011, New Mexico embarked on an ambitious plan to modernize its Medicaid program to accomplish the following goals:

• To ensure that Medicaid enrollees in the program receive the right amount of care at the right time and in the most cost-effective or "right" settings;

- To ensure that the care being purchased by the program is measured in terms of its quality and not its quantity;
- To bend the cost curve over time; and
- To streamline and modernize the program in preparation for the potential increase in membership of up to 175,000 individuals beginning January 2014.

Managed care has been the primary service delivery system for Medicaid in New Mexico for more than a decade. The state began its Salud program in 1997, managed care for behavioral health in 2005 and managed care for long-term services in 2008. New Mexico now challenges its managed care plans to manage care and deliver outcomes that can be measured in terms of a healthier population. To effectively drive the kind of system change New Mexico seeks, health plans are being asked to think and behave differently and support the movement toward care integration and payment reform. To implement this approach, the state filed a single Section 1115 waiver and then, through procurement, contracted with four managed care organization partners to administer the new Medicaid Program, Centennial Care, beginning January 1, 2014.

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Barry Malinowski, MD | Speaker



Barry Malinowski has been medical director for Anthem Blue Cross and Blue Shield since 2001. In addition to this full-time position, he practices clinical medicine and serves in a teaching

capacity at the Pediatric Primary Care Center at Cincinnati Children's Hospital. Before becoming medical director for Anthem, Dr. Malinowski was a pediatrician with Group Health Associates, a multispecialty physician practice, where he practiced for more than 20 years. He held several management positions with GHA, including vice president/medical director. Dr. Malinowski is a board-certified pediatrician.

Dr. Malinowski's commitment to improving the health of our community reaches beyond his roles as physician and medical director. He is actively involved with the Cincinnati Academy of Medicine as well as several community organizations in Cincinnati. He also is very involved with Ohio Reads. Dr. Malinowski has been active with the patient-centered medical home transformation in the Cincinnati-Dayton market.

Dr. Malinowski earned his bachelor's degree from Harvard University and attended medical school at the University of Vermont.

About Anthem Blue Cross and Blue Shield

Anthem Blue Cross and Blue Shield is a subsidiary of WellPoint, one of the largest publicly traded commercial health benefits companies in the country, providing health care benefits to more than 30 million people. Anthem serves 3.3 million members in Ohio, where the company was founded nearly 75 years ago, in 1939. Anthem provides consumers with choice and flexibility in meeting their health benefits needs, with a robust portfolio of products offered through large and small employers and to individuals and senior citizens. Anthem also offers dental, vision, prescription, life and disability, and behavioral health options. Anthem's

mission is to improve the lives of the people we serve and the health of our communities.

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BARRY'S THOUGHTS ON SUSTAINABILITY

The collaboration that exists in the Cincinnati market with community reporting and the Comprehensive Primary Care Initiative is unique. There are a number of factors that contribute to these competitors working together. Certainly, the health care leaders in the area have the vision that these initiatives will benefit everyone, including the community at large. I believe the local health care players rallied around the idea of Cincinnati being a leader nationally for health care transformation. Having some early success was helpful. There are champions from the different health care components (providers, hospitals, insurers, and even employers) that have maintained the interest, commitment, energy level, and attitude of working together. Finally, having a neutral, highly respected facilitator is huge. The Cincinnati Health Collaborative neutralizes the many egos, promotes compromise, organizes meetings, and keeps the different entities on task.

Our challenge moving forward will be sustainability. Personally, I see two keys to maintaining our momentum with health care transformation: (1) keeping the respected champions engaged and (2) most importantly, maintaining a strong, committed, neutral facilitator (i.e., the Cincinnati Health Collaborative). I suspect sustaining will be more challenging than creating.



Cheryl Sbarra, JD | Speaker



Cheryl Sbarra is the senior staff attorney for the Massachusetts Association of Health Boards (MAHB). MAHB is a nonprofit membership association representing the 351 local boards

of health in Massachusetts. Ms. Sbarra provides legal consultation, policy guidance, and technical assistance to boards of health and municipal governments throughout the state.

Ms. Sbarra serves on the Leadership Team for the Massachusetts Public Health Association's Act FRESH Campaign and is working on zoning reform that would explicitly incorporate public health into planning. She also serves on the Leadership Team for the Department of Public Health's Community Transformation Grants. She works closely with the Massachusetts Department of Public Health on state and local public health initiatives designed to decrease and prevent chronic disease, including tobacco control, healthy eating, and physical activity.

She teaches legal authority and liability protection for local boards of health at MAHB's annual Certificate Program and legal mandates and ethics for Boston University School of Public Health's Institute of Public Health. She also is a Certified Site Visitor for the Council on Education for Public Health's Accreditation of Schools of Public Health and Public Health Programs.

About The Massachusetts Association of Health Boards

The Massachusetts Association of Health Boards (MAHB) is a not-for-profit membership association that provides legal education and technical assistance to the 351 local boards of health in Massachusetts. Local boards of health are responsible under state statutes, state and local regulations, and local laws for disease prevention and control, health and environmental protection, policy development and enforcement, and promoting healthy cities and towns in Massachusetts.

CHERYL'S THOUGHTS ON SUSTAINABILITY

Deliberate relationship building before the need arises happens sometimes when you least expect it. I know this sounds illogical, but let me try and explain through my experience. I work for a small, nonprofit public health membership organization, providing legal education and technical assistance to local boards of health. It doesn't sound too sexy, does it?

Funding source for my position originally came solely from Massachusetts Department of Public Health's funds dedicated to tobacco control. When I started, tobacco control policy work was controversial. However, I soon realized that if I could help a board of health solve a particularly difficult problem with a local nuisance issue, or a housing inspection issue, I could establish credibility with the board and its staff. This credibility translated into a willingness to listen to me about primary prevention strategies, such as policy promotion designed to change social norms surrounding a public health issue.

Initially, it was tobacco control. It has expanded to other chronic disease policy strategies and increasingly sophisticated tobacco control strategies designed to combat big tobacco's never-ending attempt to increase the number of people who smoke, especially young people. Today, MAHB is a vital, necessary segment of the public health community.



MAHB is dedicated to promoting public and environmental health through education and support of local boards of health. Its mission is to assist and support boards of health in meeting their statutory responsibilities through programs of education, resource development, and promotion of local public health as a core function of government.

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Peter York, PhD | Moderator



Peter York is senior partner and chief research and learning officer at TCC Group. A leader in the field of evaluation, Dr. York's current work focuses on helping private foundations, corporations,

and nonprofits develop and use "evaluative learning" approaches, designs, and methods. He is the architect of the Core Capacity Assessment Tool (CCAT), a rigorous, research-based capacity-building survey. Dr. York is a popular presenter at numerous conferences and workshops and is the author of A Funder's Guide to Evaluation: Leveraging Evaluation to Improve Nonprofit Effectiveness. Dr. York currently serves on President Obama's national Reimagining Service Task Force and is active on the boards at the Alliance for Nonprofit Management and the Alliance for Effective Social Investing.

About TCC Group

At TCC Group, we are passionate about helping the social sector achieve greater impact. Since 1980, we have developed strategies and programs that enhance the efficiency and effectiveness of foundations, nonprofits, corporate community involvement programs, and government agencies. From offices in New York City, Philadelphia, and San Francisco, we work with clients to solve diverse problems. Our consulting staff are excellent strategists, program developers, capacity builders, and evaluators. We have wide-ranging expertise and on-the-ground experience in fields such as education, arts and culture, community and economic development, environmental conservation, and health care. Our unique strength lies in the ability to leverage knowledge from our complementary practices, which build on and inform one another. This holistic view informs every project, as we help clients devise strategies, implement plans, evaluate progress, and make ongoing improvements.

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Kelly Dunkin, MPA | Speaker



Kelly Dunkin is the vice president of philanthropy for the Colorado Health Foundation. In this role, she leads the staff of the Foundation's three philanthropy teams—Healthy Living, Health

Coverage, and Health Care—in their work investing in nonprofits throughout the state.

Before being named vice president of philanthropy in 2009, Ms. Dunkin led the Foundation's Health Coverage team for more than two years. As senior program officer, she developed funding strategies and secured approval for more than \$15.8 million in grants and policy initiatives to simplify the enrollment process for public health insurance programs and increase coverage for an estimated 60,000 Coloradans.

Ms. Dunkin has a diverse background in the philanthropy, nonprofit, and education fields. Before joining the Foundation as grant program director in 2004, she was executive director of the Chowdry Family Foundation, a Lakewood, CO-based family

foundation. She also has worked as an elementary school teacher in the Cherry Creek School District. She spent two years in the Peace Corps, during which time she trained teachers in Belize. She earned a Bachelor of Arts from Miami University in Ohio and a Masters in Public Administration from the University of Colorado Denver.

About The Colorado Health Foundation

The Colorado Health Foundation invests in grants and initiatives to health-related nonprofits that encourage healthy living and increase the number of Coloradans with health insurance. They also work to ensure that Coloradans have access to quality, coordinated care as well as operating medical education programs to increase the health care workforce. Their mission is to improve the health and health care of Coloradans by increasing access to quality health care and encouraging healthy lifestyle choices.

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Ann Monroe | Speaker



Ann F. Monroe is president of the Health Foundation for 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.

Ms. Monroe 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. She is a member of New York State Governor Andrew Cuomo's Medicaid Redesign Team and chairs the Steering Committee of the Western New York Community Health Planning Institute. In addition, she is currently chair of the Consensus Standards Approval Committee of the National Quality Forum, is a member of the



THE ROAD TO FINANCIAL STABILITY: PARTNERING WITH GRANTMAKERS (continued)

ANN'S THOUGHTS ON SUSTAINABILITY

Sustainability is an extremely important concept to think about for organizations wanting to develop relationships with funders. No funder wants to invest money in an organization that has not thought about nor put some strategies in place to continue the program beyond the funder's award. Sustainability takes more than just money. Organizations should think about this idea strategically and early.

Board of the national Coalition to Transform Advanced Care (C-TAC), and is a member of the board of the New York eHealth Collaborative.

About The Health Foundation for Western and Central New York

The Health Foundation for Western and Central New York is an independent private foundation whose mission is to improve the health and health care of the people of Western and Central New York.

Based in Buffalo with a second office in Syracuse, it invests in and partners with organizations and

communities in innovative ways to improve health and health care for vulnerable and underserved populations, including frail elders and children ages birth to five living in poverty.

To learn more about the Foundation, its work, and the many other ways it is involved in the communities it serves, visit the Health Foundation's website at www.hfwcny.org.

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Denise San Antonio Zeman | Speaker



Denise San Antonio Zeman has been president and CEO of Saint Luke's Foundation of Cleveland, OH, since January 2000. With assets of more than \$175 million, Saint Luke's Foundation has a

strategic focus on healthy people, strong communities, and resilient families.

Ms. San Antonio Zeman leads a dedicated team of professionals that supports collaborative approaches to increase health equity and build community capacity to address the complex, changing needs of Greater Cleveland's vulnerable populations. Through experience, research, and practice, Ms. San Antonio Zeman is a strong voice for nonprofit and philanthropic collaboration. She is deeply committed to mentoring the next generation of nonprofit and philanthropic leaders and has a passion for fostering a culture of learning. Embracing a disciplined approach to outcomes measurement, she considers the Foundation a "work in progress." She encourages community organizations to take a rigorous approach to framing their work around what has been demonstrated to move the needle in their work.

Her professional career has spanned health care, human services, and community relations. From 1992 through 2000, Ms. San Antonio Zeman was a senior executive for the Meridia Health System (now part of the Cleveland Clinic Health System), where she was responsible for overseeing the turnaround of one of its regional hospitals.

THE ROAD TO FINANCIAL STABILITY: PARTNERING WITH GRANTMAKERS (continued)

About Saint Luke's Foundation

Now in its 16th year of grantmaking, Saint Luke's Foundation is a private, health-focused foundation that supports the efforts of nonprofit organizations and community leaders to offer sustainable solutions to key issues that affect the health and well-being of individuals, families, and urban communities in Greater Cleveland. The primary Foundation focuses include healthy people, strong communities, and resilient families. Since 1997, when it was established with the charitable assets of the former Saint Luke's Medical Center, the Foundation has awarded more than \$91 million in grants. Information on the work of Saint Luke's Foundation is available on the Foundation's website: www.saintlukesfoundation.org.

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DENISE'S THOUGHTS ON SUSTAINABILITY

A recent national survey of nonprofit organizations reflects that nonprofits are increasingly challenged to make systemic changes in their business models because of the following harsh realities: continued limitations in philanthropic resources, increased demand for services, and severe reductions in government funding with no relief in sight. In response, nonprofits, funders, and private-sector partners must find new and different ways to work together to achieve sustainable results. With generous start-up funding from the Robert Wood Johnson Foundation, the AF4Q partners have a solid foundation upon which to build, but it is never too soon to start building a broader funding base. Regional and local funders like to be a part of your organization's evolution, so be sure to engage them early and often. Lead with your strength: Use results to tell your story. Engage a wide range of potential funding partners from different sectors (for example, providers, public and private payers, large employers, and academics) in the process of planning for the future, and demonstrate your willingness to adapt your business model in response to a changed funding environment. Be proactive about sharing your overall financial circumstances, and don't be shy about making your case. Above all else, be relentless about achieving results, and never compromise on quality.

Lynn Fick-Cooper, MBA | Speaker



Industry Experience

Lynn Fick-Cooper brings more than 20 years of experience in leadership positions from a variety of organizations, including directing government and community affairs

for the Greensboro Area Chamber of Commerce; serving as chief marketing officer for Huthwaite, a sales research and training firm outside Washington, DC; and serving as director of public relations for IHFRA (International Home Furnishings Representatives Association). Her previous experience at the Center for Creative Leaership (CCL) includes serving as chief development officer and group director of institutional advancement with responsibility for fundraising and alumni relations; and manager of marketing, with responsibility for the marketing strategy, marketing communication, and public relations functions. She has spent the past six years in a faculty role at CCL designing and delivering leadership development programs across a variety of sectors, with a specific focus on developing nonprofit, community, and executive nurse leaders in health and health care.

Ms. Fick-Cooper currently is the program designer and lead faculty for the Robert Wood Johnson Foundation's (RWJF) Executive Nurse Fellows program at the Center for Creative Leadership (CCL). She is program director and lead faculty for RWJF's Community Coalition Leadership Program and deputy director and lead faculty for RWJF's Ladder to Leadership program at CCL. She also manages CCL's relationships with other foundations, such as the Kate B. Reynolds Trust.

Ms. Fick-Cooper received her BA in communications and MBA from the Bryan School of Business at the University of North Carolina at Greensboro.

Ms. Fick-Cooper presented "Boundary Spanning Leadership: Catalyzing Collaboration Among Grantees" at two national philanthropic conferences: the Grant Makers for Effective Organizations

Conference in Seattle in March 2012 and the Council on Foundations annual conference in Los Angeles in April 2012. She recently co-authored a chapter on "Action Learning with Community-Based Nonprofits" in Best Practices in Experience-Based Leadership Development, a publication in press at Pfeiffer.

Committed throughout her career to community service, her experience includes volunteer work with Reading Connections, an organization dedicated to adult literacy, and Junior Achievement, an organization focused on teaching children the principles of business and economics. As well as volunteering in K-12 classrooms, she recently completed her tenure as chair of the Board of Directors for Junior Achievement of Central North Carolina.

About the Center for Creative Leadership

The Center for Creative Leadership is a top-ranked, global provider of executive education that develops better leaders through its exclusive focus on leadership education and research. Founded in 1970 as a nonprofit, CCL helps clients around the world cultivate creative leadership—the capacity to achieve more than imagined by thinking and acting beyond boundaries. CCL's mission is to advance the understanding, practice, and development of leadership for the benefit of society worldwide. For the past 43 years, CCL has done just that, serving more than 20,000 individuals and 2,000 organizations annually, including more than 80 of the Fortune 100 companies across the public, private, nonprofit, and education sectors. In addition, its knowledge was disseminated to nearly two million people through CCL publications. CCL has consistently been ranked in the Top 10 Executive Education Providers Worldwide from Financial Times with the likes of Duke and Harvard.

For more information, visit www.ccl.org.

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Adela Flores-Brennan | Speaker

Adela Flores-Brennan joined the Colorado Health Benefit Exchange in November 2012 as the assistance network manager. She brings more than 12 years of public policy experience and comes to the Exchange most recently from the Colorado Center on Law and Policy, where she spent 5 ½ years on a range of health policy, federal policy, and legal issues, including health reform implementation, Medicaid and CHIP eligibility and enrollment, and public benefits advocacy. Ms. Flores-Brennan is a graduate of the University of Colorado School of Law. She also received bachelor's and master's degrees in international relations from the University of Denver.

About Colorado Health Benefit Exchange

Colorado Health Benefit Exchange is a new health insurance marketplace and support network that will take the name Connect for Health Colorado this spring in preparation for opening in October. Individuals, families, and small employers across Colorado will shop for health insurance through a new and easy-touse website. We will provide high-quality customer assistance by phone and in person, as well as access

ADELA'S THOUGHTS ON SUSTAINABILITY

Achieving sustainability will mean continually demonstrating value to the community and key stakeholders. This will require an ability to remain responsive to stakeholder needs and evaluations of effectiveness. It will mean strategically driving innovation and adaptations while remaining true to and consistent with the mission and core values of the organization.

to new financial assistance to reduce costs. The marketplace is being built by a public, nonprofit entity established by Senate Bill 11-200, passed by the General Assembly in May 2011. Learn more at www.getcoveredco.org.

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David McGuire, MSW | Speaker



David McGuire is vice president for payer strategy and contracting for Partners HealthCare System, Inc. In this capacity, he is responsible for developing strategy for both public and

private payers and for negotiating and implementing contracts and advocacy efforts to achieve that strategy. Partners is a large, academic, integrated delivery system founded by Massachusetts General Hospital and Brigham and Women's Hospital, two major teaching hospitals of Harvard Medical School. With its

affiliated community network, Partners is a system of more than 6,000 physicians, seven acute care hospitals, the Spaulding post-acute care system, and the psychiatric facility McLean Hospital.

Mr. McGuire has been with Partners for 15 years and previously held the positions of executive director of system contracting and director of contracting for Spaulding Rehabilitation Hospital. He originally trained as a social worker and worked as an administrator for various inpatient and community-based psychiatric programs.

HEALTH INSURANCE EXCHANGES: WHAT TO EXPECT WHEN YOU'RE EXPECTING (continued)

Mr. McGuire received his BA from Georgetown University and his master's in social work from Rutgers University. He is married and has one daughter.

About Partners HealthCare

Partners HealthCare is a not-for-profit, integrated health care system in Boston, MA. Founded by Brigham and Women's Hospital and Massachusetts General Hospital—two of the nation's leading academic medical centers—Partners HealthCare includes community and specialty hospitals, a managed care organization, a physician network, community health centers, home care, and other health-related services.

Partners is committed to the community and dedicated to enhancing patient care, teaching, and research in service to our patients and their families.

Partners is the largest private employer in Massachusetts, with approximately 60,000 employees, including physicians, nurses, scientists, and caregivers. Partners institutions maintain a total research budget of more

than \$1.4 billion, and Massachusetts General Hospital (MGH) and Brigham and Women's Hospital (BWH) are the largest private hospital recipients of National Institutes of Health funding in the nation.

Partners offers one of the most robust and competitive medical educational programs in the country, with more than 200 residency and fellowship programs, where physicians-in-training routinely rotate among academic medical centers and community and specialty hospitals.

Partners maintains a strong commitment to the community. Through outreach programs and philanthropic initiatives, Partners and its hospitals are committed to improving the delivery of care locally and globally.

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Richard Onizuka, PhD | Speaker



In 2012, Richard Onizuka was appointed as the first CEO for the Washington Health Benefit Exchange (HBE). Washington's HBE was authorized by state legislation in 2011 and 2012, and

it was the second state to receive federal Level 2 funding to meet federal certification as it prepares for operation in January 2014. Dr. Onizuka brings extensive public- and private-sector executive-level policy and health care experience to this position. He was assistant director for health policy for the Washington State Health Care Authority (HCA) for more than nine years, where he was responsible for programs and

initiatives related to Governor Gregoire's five-point plan to improve quality and cost efficiency in Washington's health care system, and he also served as the State Health Information Technology (HIT) Coordinator. Before his service to the state of Washington, he spent more than eight years as a manager and clinic administrator with Kaiser Permanente in Colorado. He has a PhD in clinical psychology from the University of Kentucky and is a licensed psychologist.

About Washington Health Benefit Exchange

The Washington Health Benefit Exchange is a publicprivate partnership established in accordance with the



Patient Protection and Affordable Care Act of 2010 (ACA) with the goal to redefine people's experience with health care through the creation of a new health insurance marketplace for individuals, families, and small businesses. This online marketplace, Washington Healthplanfinder, will help Washingtonians purchase private health insurance coverage by allowing them to make apples-to-apples comparison of health plans, receive personal assistance enrolling in the right health plan to meet their needs, and gain access to tax credits, reduced cost sharing, and public programs such as Medicaid. The Exchange will begin enrolling consumers on October 1, 2013, for health insurance coverage beginning on January 1, 2014.

The Exchange is separate from the state and governed by an independent 11-member board appointed by Gov. Gregoire in December 2011. The Exchange works in close coordination with our state agency partners, including the Health Care Authority (Medicaid), Office of the Insurance Commissioner, and the Department of Social and Health Services. For more information, please visit http://wahbexchange.org/.

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Reed Tuckson | *Moderator*



Dr. Tuckson is managing director of Tuckson Health Connections. A graduate of Howard University, Georgetown University School of Medicine, and the Hospital of the University of Pennsylvania's

General Internal Medicine Residency and Fellowship Programs, Dr. Tuckson was most recently executive vice president and chief of medical affairs at UnitedHealth Group, a Fortune 25 diversified health and well-being company. As the senior clinician of UnitedHealth Group, Dr. Tuckson was responsible for working with the company's diverse and comprehensive business units to improve the quality and efficiency of the health services provided to the 75 million UnitedHealth Group members.

Formerly, Dr. Tuckson served as senior vice president, professional standards, for the American Medical Association (AMA). He is former president of the Charles R. Drew University of Medicine and Science in Los Angeles, has served as senior vice president for programs of the March of Dimes Birth Defects

Foundation, and is a former commissioner of public health for the District of Columbia.

Dr. Tuckson is an active member of the prestigious Institute of Medicine of the National Academy of Sciences, and he is past chair of the Secretary of Health and Human Services' Advisory Committee on Genetics, Health, and Society.

Dr. Tuckson currently serves on the Board of Directors for several national organizations, including the Alliance for Health Reform: the American Telemedicine Association; the National Patient Advocate Foundation; the Arnold P. Gold Foundation; Project Sunshine; Cell Therapeutics, Inc.; and Howard University. Additionally, he serves on several boards within his local community of Minneapolis, including Big Brothers Big Sisters of the Greater Twin Cities and Minnesota Public Radio.

Dr. Tuckson also has held other federal appointments, including those on cabinet-level advisory committees on health reform, infant mortality, children's health, violence, and radiation testing.



Dr. Tuckson authored The Doctor in the Mirror, a book and media presentation focused on patient empowerment to overcome everyday health issues for Americans 55 and older, released in November 2011.

In 2012, Dr. Tuckson was recognized by Black Enterprise magazine as one of the 100 Most Powerful Executives in Corporate America. Additionally, he was honored to be ranked ninth on the list of the 50 Most Powerful Physician Executives in Healthcare, and he also was recognized as one of the Top 25 Minority Executives in Healthcare, as noted by Modern Healthcare/Modern Physician magazines. He also was designated as Ebony magazine's 2008 Power 150: The Most Influential Blacks in America list.

REED'S THOUGHTS ON SUSTAINABILITY

Clearly, the major forces affecting sustainability are related to the underlying forces affecting the delivery of medical care. As such, the challenges associated with creating affordable networks of quality providers, the ability to implement medical management tools, the ability to reimburse services based on value, the ability to meaningfully diminish the onslaught of preventable illness in a particular geography, and the ability to efficiently assist patients as they migrate in and out of different benefit plans (Medicaid to subsidized-commercial and back again) will all be essential.

Steve Wetzell | Speaker



Steve Wetzell has more than 30 years' experience working with national and regional purchaser and consumer organizations to improve access, quality, and efficiency

in the US health care system.

Mr. Wetzell has been an independent consultant focusing on health care purchasing and market reform issues since 2000. Current and former clients include HR Policy Association, The Leapfrog Group, Consumer Purchaser Disclosure Project, and a number of large employers and private equity firms, including General Motors, Union Pacific Railroad, Ford Motor Company, General Electric, UPS, IBM, and The Blackstone Group. Mr. Wetzell has also consulted with a number of regional health care coalitions. In his work with HR Policy Association, Mr. Wetzell led the creation of one of the nation's first private health care exchanges for retirees, which was launched in 2006 and currently

serves 70 Fortune 500 employers covering 125,000 retirees and dependents.

Before his current consulting role, Mr. Wetzell served as a founding employer and executive director of the Buyers Health Care Action Group (BHCAG). He also has 15 years of experience in human resource management for Fortune 500 employers in the areas of compensation, benefits, and labor relations. He is a founding member of the Leapfrog Group, The Consumer-Purchaser Disclosure Project, and the Institute for Clinical Systems Improvement and served as a member of numerous boards and commissions focused on health care reform issues.

About Wetzell Health Care Strategies

Mr. Wetzell is an independent consultant assisting coalitions, consumer groups, and employers with health care purchasing and market reform efforts. He has been in this role since 2000.



STEVE'S THOUGHTS ON SUSTAINABILITY

Continue to aggressively promote initiatives to improve the transparency, quality, and cost effectiveness of health care

- Push for public reporting of health care costs for doctors, hospitals, ACOs, health plans, and treatments
- Promote adoption of uniform measures of cost, quality, and patient experience
- Promote local quality improvement initiatives aimed at reducing waste and adoption of clinical best practices
- Advocate for provider payment reform
- Benchmark performance in your community against other markets

Monitor the evolution and performance of new public exchanges and promote their continuous improvement

- Seek input from key stakeholders on how the exchange is performing and opportunities for improvement
- · Convene key stakeholders to discuss exchange performance and develop specific actions to improve exchange performance

Assist small employers in assessing the merits of moving employees to the public exchanges

- Host information meetings and develop other collateral to help small employers understand how public exchanges work and the potential advantages and disadvantages of moving their employees into those exchanges
- Develop decision support tools and offer resources to small employers to help them decide if public exchanges are the right solution for their workforce

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PARTNERING FOR ORGANIZATIONAL DEVELOPMENT: THE "SECRET SAUCE" OF ALLIANCE BUILDING

Denise Cavanaugh | Speaker



Denise Cavanaugh has been intrigued by the ways organizations prosper, decline, and renew ever since her early assignments as a Peace Corps volunteer in Peru, parent coordinator with Head

Start in Chicago, and program officer with VISTA in West Virginia. All three organizations provided a firsthand, frontline view of the challenges of organization development. Ms. Cavanaugh stepped into the corporate world in 1974 by starting a management consulting firm in Washington, DC, that provided organization development services to nonprofit groups, health care organizations, entrepreneurs, and Fortune 500 companies.

In 1985, Ann Hagan and Jane Pierson joined Ms. Cavanaugh to create Cavanaugh, Hagan & Pierson. This long-running partnership—now enriched with a new partner, Joshua Mintz—has developed into a smart, trusted ally for organization leaders across many sectors of the economy. In particular, she brings a keen sense of strategy to each assignment and is eager to work with an organization's stakeholders to take a tough-minded look at future scenarios that could bring the organization's mission, goals, and values to life. Ms. Cavanaugh is always ready to work with clients to craft an organizational structure and set of processes that will make it possible to advance their goals in simple and elegant ways.

Ms. Cavanaugh is a graduate of St. Mary's College in Notre Dame, IN, where she earned a BA in economics and sociology, and she has a folder full of certificates from an eclectic mix of professional development seminars.

About CHP&M

Cavanaugh, Hagan, Pierson & Mintz, Inc., is a management and organization development consulting firm with 20 years' experience in building and strengthening organizations. We work in partnership with the organization's leaders to develop customized solutions to the opportunities and challenges facing their organizations.

Located in Washington, DC, CHP&M serves both a local and national clientele, including nonprofit organizations, entrepreneur-led companies, major corporations, foundations, and government agencies.

We seek to create a balance in our work that enables us to:

- Envision the desired future while remaining grounded in the realities of the present.
- Develop creative and innovative solutions while ensuring that these solutions are both practical and implementable.
- Serve as a supportive partner and counsel to leaders while challenging the leader's thinking and assumptions.
- Bring our expertise to the project while building the capacity of the client to continue the work on his or her own.

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DENISE'S THOUGHTS ON SUSTAINABILITY

Sustainability calls to mind two words: resilience and foresight. Resilience calls for leaders and staff to handle present circumstances with adaptability, a positive attitude, and commitment to strategic goals. Foresight enables leaders and staff members to adapt current goals, roles, and organizational norms in the face of change—macro pressures on US health care delivery or micro shifts in a work group or organization.



Annette DuBard, MD, MPH | Speaker



Annette DuBard is the senior vice president for informatics and evaluation for Community Care of North Carolina. She graduated from the Johns Hopkins University School of Medicine

and completed family medicine training at the University of North Carolina Chapel Hill (UNC). After several years in full-time clinical practice in the community health center setting, she returned to UNC to complete a second residency in preventive medicine and a master's of public health in health policy and administration. Since 2009, she has directed the development of the Community Care Informatics Center, which provides data analytical services and web-based information systems to facilitate care coordination and quality improvement activities in practices and communities, to support targeted care management for patients with complex health care needs, and to monitor quality, utilization, and cost outcomes. This data infrastructure is used by more than 1,600 participating primary care practices and other community agencies in the management of the statewide Medicaid and CHIP population, as well as uninsured and commercially insured populations through local initiatives. Dr. DuBard remains actively involved in program evaluation and health services research as a Fellow of the UNC Cecil G. Sheps Center, with a focus on underserved populations and complex chronic conditions.

About Community Care of North Carolina Community Care of North Carolina (CCNC) is a community-based, public-private partnership that takes a population management approach to improving health care and containing costs for North Carolina's most vulnerable populations. Through its 1,600 participating primary care practices, 14 providerled regional networks, and community partners, CCNC serves more than 1.25 million Medicaid and Health Choice beneficiaries throughout North Carolina and more than 50,000 uninsured and privately insured

ANNETTE'S THOUGHTS ON SUSTAINABILITY

- 1. Hone in on the win-win opportunities. Particularly when it comes to data sharing, start with projects that are in everyone's best interest—reducing avoidable ED visits and readmissions for uninsured or publicly funded patient populations, for example.
- 2. Do what's doable. Many good ideas are just "too hard right now" due to data availability, technical capabilities, resource limitations, or political or other influences. Focus on what can be done, and start building your success stories.
- 3. Provide actionable information. The impact of performance measurement and reporting at the aggregate level is limited but can be very powerful when coupled with patient-level information in the context of a care delivery infrastructure. So not just, "You performed worse than your peers on A1C testing last year," but "Here are your patients who are overdue for A1C testing, and here are some ways to address the issue." The other aspect of "actionable" is that information must make it into the right hands at the right time. There is no value in data or technology in and of itself; there must be a human being on the receiving end of the information, empowered to do something about it.



THE ROAD TO FINANCIAL STABILITY: FINDING VALUE IN DATA (continued)

individuals in local initiatives. CCNC ensures access to a primary care medical home and support of the primary care infrastructure through a "medical neighborhood" approach to care coordination and quality improvement. For more information, please visit www.communitycarenc.org.

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Anupam Goel, MD | Speaker



Anupam Goel is a board-certified general internist. Since 2007, he has served as an associate medical director at the University of California, San Diego Medical Center (UC San Diego). He was

the co-principal investigator for the San Diego Beacon Collaborative, a multimillion-dollar federal cooperative agreement to connect electronic medical records across the metropolitan area. Within UC San Diego, he led efforts to improve the provider electronic medical record experience in the ambulatory setting and helped the institution and its providers qualify for Meaningful Use dollars. He also served as the physician lead for their patient portal. In March, Dr. Goel joined Advocate Health Care as its chief medical information officer.

About Advocate Health Care

Advocate Health Care is a nonprofit organization that includes 11 hospitals in and around Chicago. It is affiliated with multiple provider-hospital organizations, including Advocate Physician Partners, one of the largest accountable care organizations in the country.

ANUPAM'S THOUGHTS ON SUSTAINABILITY

Be careful to commit to functionality that may be expensive to implement or maintain. Identify services that are simple and then build more complicated services after establishing a regular income stream from interested parties. Although many customers may want a fully integrated patient summary with hyperlinked images and documents from different medical centers, that desire cannot be fulfilled with a limited budget using today's electronic medical records.

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Phil Kalin, MHA | Speaker



Phil Kalin is the president/CEO of the Center for Improving Value in Health Care (CIVHC). CIVHC is a nonprofit organization created to advance statewide initiatives to improve Colorado's health care

quality and contain costs. Its board and partners represent leaders from a broad public/private coalition of consumers, business leaders, providers, payers, policy leaders, and government agencies.

PHIL'S THOUGHTS ON SUSTAINABILITY

Sustaining the efforts of any of our regional health improvement organizations should be directly dependent on a number of things, including: describing the specific value a stakeholder can derive from our work, how it intersects with their investment strategies, why funding us is the best use of their capital, and demonstrating that we can perform on our promises. "Paying for Value" is something we all talk about in our payment reform work. It seems fair to apply the same standard toward sustainability. Describing a project's value proposition to an investor should be very similar whether the funder is a foundation, government, commercial entity, or even a private equity company. CIVHC has approached the sustainability model for the Colorado APCD exactly as one would do for any start-up company. The ultimate return on investment will be whether the APCD helps Colorado achieve better care, better health, and lower costs. However, the APCD's ongoing sustainability is totally dependent on whether the information and insights it provides is something the marketplace of stakeholders is willing to pay for. It's important to try and demonstrate that each and every day.

Mr. Kalin has more than 30 years of senior leadership experience in nonprofit and for-profit health care, senior living, and education organizations. He was a senior executive at Henry Ford Healthcare System in Detroit and Mt. Sinai Medical Center in Cleveland and was president/CEO of Rose Medical Center in Denver. He later co-founded and was CEO of CustomMed Solutions, a health care technology company. Following its sale in 2001, Mr. Kalin became engaged in K-12 education. He merged and expanded two private schools that received national recognition for their achievements. He was also active in developing several senior living communities.

Mr. Kalin earned a bachelor's degree from the University of lowa and a master's in health care administration from the University of Michigan. In addition to his business activities, he is very active in the Denver community and an avid bicyclist.

About CIVHC

The Center for Improving Value in Health Care (CIVHC) is a Colorado nonprofit, nonpartisan organization supporting the advancement of initiatives focused on the Triple Aim of better health, better care, and lower costs. Our mission is to advance strategic initiatives that will ultimately create an efficient, high-quality, and transparent health care system.

CIVHC serves as a backbone organization and provides synergy, leadership, tools, data, and support to stakeholders across the health care spectrum to drive value in health care system. Our focus areas include:

- Data and Transparency: Providing transparent and comparative data on the cost and quality of health care services to consumers, providers, health plans, employers, and policy makers.
 - All Payer Claims Database Administrator (cohealthdata.org)
 - Development of Statewide Metrics and Dashboards
 - Health Data Affiliate Convener



THE ROAD TO FINANCIAL STABILITY: FINDING VALUE IN DATA (continued)

- Payment Reform: Changing the incentives of the current fee-for-service payment system to achieve high-quality, consumer-centered, and costeffective care.
 - Promote Development of Bundled and Global Payments
- Delivery System Redesign: Improving the way health care is delivered and ensuring high-quality, coordinated care when and where it's needed.
- Support Appropriate Use of Palliative Care
- Development of Statewide Healthy Transitions Colorado Campaign

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Bonnie Paris, MS | Speaker



Bonnie Paris is the program development manager responsible for planning, implementing, and leading Quest's quality improvement program, grant procurement, product development, and

strategic projects. Paris has experience in health care process improvement from her past position as a Six Sigma Process Engineer at OSF Saint Francis Medical Center. She holds a Bachelor of Science and Master of Science in Industrial Engineering from Bradley University. She is currently working on her PhD in industrial and systems engineering at the University of Wisconsin,

where she most recently worked as a research assistant for the University's Center for Quality and Productivity Improvement. She has also taught business administration courses at Midstate College and a course in industrial and manufacturing engineering at Bradley University.

About Quality Quest for Health of Illinois

Quality Quest for Health of Illinois is a regional health improvement collaborative. Across the United States, nonprofit organizations are bringing together patients, providers, insurers, employers, and policy makers to solve health care problems in their region. These organizations are called Regional Health Improvement

BONNIE'S THOUGHTS ON SUSTAINABILITY

Sustainability is a measure of effectiveness of an intentional systems change. If the economic, societal, and environmental impacts of the change are balanced, there will be a permanent shift in the system's performance. Otherwise, any hard-fought gains will be a "flash in the pan" or "statistical outlier," and system performance will revert to the pre-intervention state. How can we ensure that our improvement efforts result in a lasting change? Systems science offers sound guidance on effective approaches to develop, test, and spread intentional systems change. However, in practice, several key steps to successful intentional systems change are inadequately addressed or not addressed at the right time. Two African proverbs offer insight on sustainability: 1) "It takes a village to raise a child." Think of the intentional systems change as the child and a neutrally convened group of stakeholders as the village. 2) "If you want to go fast, go alone. If you want to go far, go with others." To be successful, we need to begin the journey together and continue the journey together. Of course, it also is important to have a destination in mind.



THE ROAD TO FINANCIAL STABILITY: FINDING VALUE IN DATA (continued)

Collaboratives. Quality Quest for Health of Illinois belongs to the Network for Regional Healthcare Improvement, a national leadership organization for more than 40 Regional Health Improvement Collaboratives. Collaboratives help stakeholders identify opportunities to improve the health and health care of their community while reducing costs. Collaboratives publically report provider performance on quality measures. Quality reports allow patients to

make informed health care decisions and also allow providers to see how they compare to the standards and their peers. Measuring performance has been consistently shown to be a significant driver of change.

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Jay Want, MD | *Moderator*



Jay Want is the owner and principal of Want Healthcare LLC. He consults for a wide variety of clients, including the Colorado Foundation for Medical Care, the Center for Medicare and

Medicaid Services, and the Robert Wood Johnson Foundation. He is also the chief medical officer for the nonprofit Center for Improving Value in Health Care (CIVHC), a public-private partnership purposed to catalyze health care reform in Colorado. He serves on the board of the nonprofit Rocky Mountain Health Plan. In January 2012, he was appointed an innovation

JAY'S THOUGHTS ON SUSTAINABILITY

A business case for a multi-stakeholder coalition isn't easy, as often its work benefits many in the community but with unclear specific value to any one participant. I would advise building products that can benefit individual stakeholders and simultaneously leverage the cooperation inherent in the organization. For example, a care transitions product that could help hospitals reduce readmissions would leverage the strengths of multiple community members and provide easily measurable value to an individual purchaser.

advisor for the Center for Medicare and Medicaid Innovation with the initial cohort of the program.

Dr. Want recently served as founding chairman of the board of CIVHC. For eight years he was president and chief executive officer of Physician Health Partners, LLC, a management services organization recently named as a Pioneer ACO. He has served on task forces for the Colorado Division of Insurance, the Colorado Trust, the Colorado Hospital Association, and the Governor's Blue Ribbon Commission on Health Care Reform, and as a Fellow of the Colorado Health Foundation. He also served as chairman of the Northwest Denver Care Transitions Steering Committee, a program that lowered readmissions by 10 percent while improving care for Medicare beneficiaries over a two-year period.

About Want Healthcare LLC

Want Healthcare LLC exists to assist clients in the messy process of advancing health care transformation. Our expertise includes payment reform, delivery system reform, and change management. Follow us on the web at wanthealthcarellc.com, and on Twitter @jaywant1.

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Anne Weiss, MPP | Speaker



Anne F. Weiss, a senior program officer at the Robert Wood Johnson Foundation, directs the Foundation's Quality/Equality Health Care team

Ms. Weiss joined the Foundation in 1999 after a distinguished career in health care policy at both the federal and state level. She served as senior assistant commissioner of the New Jersey Department of Health and Senior Services, where she directed the state's oversight of the quality of care delivered by health care providers and health plans, and was also responsible for the state's hospital indigent care programs. During her tenure, the Department of Health and Senior Services worked with physicians and hospitals throughout the state to issue New Jersey's first report card on health care quality. She also served as executive director of New Jersey's blue-ribbon health reform panel, the Essential Health Services

Commission, where she directed implementation of a subsidized health benefits program for the working uninsured.

Previously, Ms. Weiss spent 10 years in Washington, DC, as professional staff to the United States Senate Committee on Finance and as a senior examiner with the Office of Management and Budget. She also has served as a program analyst in the Office of the Assistant Secretary for Planning and Evaluation, was a member of the steering committee of the National Academy for State Health Policy, and served on the board of the National Association of Health Data Organizations.

Born in Detroit, Ms. Weiss received her MPP from the Kennedy School of Government, Harvard University, and a BA in history and political science from Wellesley College.

ANNE'S THOUGHTS ON SUSTAINABILITY

I'm the mother of two sons—one 22 and freshly graduated from college, the other 18 and planning for a gap year abroad after high school graduation in June. So it's crunch time. They are nervously counting their pennies, but as parents, we're asking ourselves, "Have we given our boys the skills, knowledge, and confidence they'll need to survive out there in the world?" So it goes for life as a funder, too, especially in the later years of something as ambitious and sustained as Aligning Forces. Yes, I understand that money matters, but at the Foundation, we are just as concerned that Aligning Forces communities be left with the skills, capacity, and leadership they will need to continue driving toward health care transformation and healthier communities. We want to sustain impact just as much, if not more, as we want to sustain activities and organizations. I am impressed at how readily Aligning Forces Allliances have taken up the challenge of sustainability—with determination, creativity, and passion. It's a tough challenge—but for Aligning Forces, what else is new?

Katherine Browne, MBA, MHA | Speaker



Katherine Browne is the deputy director/chief operating officer of the Center for Health Care Quality in the Department of Health Policy at The George Washington University Medical

Center. In that role she is responsible for the day-today management of Aligning Forces for Quality, a national initiative funded by the Robert Wood Johnson Foundation (RWJF) that is designed to use quality improvement, public reporting of hospital and physician quality, and consumer engagement to achieve high-quality, patient-centered care in 16 communities across the country. Previously, she served as managing director of the Hospital Quality Alliance.

Prior roles have also included working on the Disclosure Project at the National Partnership for Women & Families; involvement with two RWJF initiatives, Networking for Rural Health and the National Health Care Purchasing Institute; and serving as director of community relations at the Visiting Nurse Association. Ms. Browne earned dual master's degrees in business and health administration from Washington University in St. Louis and her BS from the University of Wisconsin-Madison.

KATHERINE'S THOUGHTS ON SUSTAINABILITY

I believe the work of Aligning Forces for Quality will continue because it has to—what the Alliances are doing is too important. That is one of the most important components of sustainability—a market for what you do. Whether you are selling lemonade on a hot day or in the dead of winter makes a world of difference in your profit margin—and for health care, the time has come. I see sustainability as the nexis between creativity and discipline. These two things reinforce each other—and along with the desperate need for what AF4Q is offering, it is the perfect storm of success.

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Jerry Porras | *Closing Keynoter*



Jerry Porras is the Lane Professor of Organizational Behavior and Change Emeritus at Stanford University's Graduate School of Business. He has taught courses in leadership, interpersonal

dynamics, and organizational development and change in the MBA and executive programs. Mr. Porras directed the School's Executive Program on Leading

and Managing Change for 16 years. From 1988 to 2001, he served as the University's Faculty Athletic Representative to the Pacific-10 Conference and the National Collegiate Athletic Association and on two occasions was president of the Pacific-10 Conference Council. From 1991 to 1994, he was an associate dean for academic affairs in the Graduate School of Business. Mr. Porras has won numerous awards, including the Brillante Award presented by the National Society of



Hispanic MBAs; the Silver Apple Award presented by the Stanford Business School Alumni Association; the Kantor Medal awarded by the Pacific Graduate School of Psychology; 2002 Community Educator of the Year from the Hispanic Net; the Robert T. Davis Award from the Stanford Business School; the 2007 Lifetime Achievement Award from Hispanic Business magazine; the 2011 Outstanding Alumnus of the year, University of Texas, El Paso; and the 2012 Visionary Leadership Award presented at the Silicon Valley Latino Leadership Summit.

A student of organizational change, Mr. Porras has helped numerous clients around the world improve their organizational performance. As a lecturer on visionary companies, he has delivered presentations to more than 250 senior management audiences worldwide.

Mr. Porras has served on the editorial boards of many academic publications, including the Academy of Management Journal, Academy of Management Review, Journal of Applied Behavioral Science, Business Review, and the Journal of Organizational Change Management.

In addition to more than 40 articles for leading academic journals, Mr. Porras has published three books on individual and organizational success. In 1987, he wrote Stream Analysis: A Powerful New Way to Diagnose and Manage Organizational Change, which has since been converted into an exciting software tool used for diagnosing, planning, and managing change within an organization. Working with Jim Collins, Mr. Porras co-authored the international bestseller Built to Last: Successful Habits of Visionary Companies. The book is based on the results of an exhaustive six-year research project aimed at discovering the approaches and behaviors of the most visionary companies of the past two centuries. Translated into 35 languages, it has sold more than one million copies worldwide. In 2006, with Stewart Emery and Mark Thompson, Mr. Porras co-authored another best seller, Success Built to Last: Creating a Life that Matters. This book focuses on more than 200 leaders who have made a significant impact on the world and identifies the key approaches they used to build such meaningful lives.

Mr. Porras serves on the Board of Directors of Translattice and the Advisory Board of the Positive Coaching Alliance, and he is a member of the Knight Commission and the Stanford Athletics Board. Previously he was a Board of Directors member of the State Farm Automobile Insurance Company, State Farm Life Insurance Company, State Farm General Insurance Company, Quaker Fabric, and ReloAction and an Advisory Board member of the Decurion Corporation. He recently co-founded the Latino Business Action Network, a nonprofit organization.

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a newsletter of the af4q national program office



Robert Wood Johnson Foundation

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Spotlight

Aligning Forces for Quality (AF4Q) is the Robert Wood Johnson Foundation's signature effort to lift the overall quality of health care in targeted communities, as well as reduce racial and ethnic disparities and provide real models for national reform. Can bringing together the people who give care, get care and pay for care improve quality in America? The 16 AF4Q communities are showing that it can. After six years, AF4Q communities have built transformative partnerships, reaching 37 million people-12.5 percent of the total U.S. population.



Spotlight highlights recent trends, breakthroughs, and lessons learned from the 16 AF4Q communities. Improving health care is complicated, but Spotlight sheds some light on the big picture themes and issues. AF4Q is tackling these issues to improve quality and equality of care.

AF4Q Spotlight

the public newsletter from the AF4Q National Program Office

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Save the Date!

AF4Q NATIONAL MEETING NOVEMBER 6-8, 2013 | AUSTIN, TX



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ALIGNING FORCES FOR QUALITY

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