

Endorsement and Maintenance Fall 2023 and Spring 2024 Cost and Efficiency Committee Roster

Name	Roster Category/Perspective	Credentials	Title	Organization	Location	Bio
Alice Bell	Clinician; Other Interested Parties	PT, DPT	Board Certified Specialist in Geriatrics, Senior Specialist Health Policy, and Payment	American Physical Therapy Association	Alexandria, Virginia	Dr. Alice Bell is on staff at the American Physical Therapy Association as a Senior Specialist in Health Policy and Payment. She received a Bachelor of Physical Therapy degree from Northeastern University in Boston, MA, and a Doctor of Physical Therapy degree from the University of Montana. Her professional activities include serving on the Centers for Medicare & Medicaid Services Technical Expert Panels, APTA staff representative to the Relative Value Scale Update Committee, APTA appointee to the NDHI Opioid Crisis Workgroup, National Quality Partnership Opioid Stewardship Action Team, and the National Quality Partnership Opioid Stewardship Steering Committee, member of the National Quality Partnership Leadership Consortium, APTA representative to the National Quality Forum Measure Applications Partnership, and APTA representative to the MACRA Wave 4 Low Back Pain Cost Measure workgroup. Dr. Bell is engaged in value-based and alternative payment model development and clinical innovations integrating digital health in the practice of physical therapy.
Amy Chin	Health Services Researcher; Facility/Institutional	DrPHc, MS	Director & Assistant Vice President	HSS Center for the Advancement of Value in Musculoskeletal Care & Value Management Office at HSS	Brooklyn, New York	Ms. Amy Chin is Assistant Vice President in the Value Management Office at HSS and Director of the HSS Center for the Advancement of Value in Musculoskeletal Care. Her work focuses on issues affecting health care providers that span policy, finance, economics, and quality. In this role, she evaluates pay for performance programs and public measurement systems affecting hospitals. Having started her career in health services research, Ms. Chin brings expertise in developing measures, risk adjustment, and statistical models using administrative data. She holds a Master of Biostatistics degree from the University of Illinois at Chicago – School of Public Health and is pursuing a Doctorate of Public Health degree at Johns Hopkins Bloomberg School of Public Health.



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Benjamin Schleich	Facility/Institutional	PhD, MS, MBA, BS, CPPS, LSSBB, DSHS, ITIL4	Principal- Analytics Translator, Digital Technology Services; Assistant Professor of Medical Sciences	Hackensack Meridian Health; Hackensack Meridian School of Medicine	Hackensack, New Jersey	Dr. Benjamin R. Schleich is a visionary data science leader deeply committed to enhancing patient care through data-driven insights. With a Ph.D. in Systems Science and extensive experience in health care analytics, Dr. Schleich has actively contributed to improving health care operations and clinical reporting. Dr. Schleich works at Hackensack Meridian Health where he has gained valuable experience in compliance, regulatory reporting, research, process improvement, patient safety, and quality management expertise. As a Certified Professional in Patient Safety and a Lean Six Sigma Black Belt, Dr. Schleich's passion lies in continuously evaluating and optimizing health care processes, reporting, and outcomes.
Beth Godsey	Other Interested Parties	MSPA, MBA	Senior Vice President Data Science & Methodology	Vizient, Inc.	Irving, Texas	Ms. Beth Godsey holds over 20 years of experience leveraging data & analytics to support providers in their performance improvement journey, finding that transparent and actionable measurement truly enables changes. Through collaboration with some of the most brilliant methodologist and health care professionals in the country, Ms. Godsey has worked with teams that developed robust and meaningful measurement, including Quality & Accountability Ranking, risk adjustment, and equity and social needs measurement trusted by the leading health systems across the country. Ms. Godsey currently leads a team of analytics professionals that oversees analytical modeling, metric development, and a hospital ranking/scoring methodology for Vizient's members. Additionally, Ms. Godsey supports member scenario and impact analysis regarding changes to the national landscape in CMS Pay for Performance methods and publicly reported measures.



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Bijan Borah	Health Services Researcher; Facility/Institutional	PhD, MSc	Professor of Health Services Research	Mayo Clinic College of Medicine and Science	Rochester, Minnesota	Dr. Bijan Borah is a Professor of Health Services Research at the Mayo Clinic College of Medicine and Science. He also serves as the endowed Scientific Director of the Clinical and Economic Evaluation Program at the Kern Center for the Science of Health Care Delivery and as the Head of the Advanced Analytics Section at the Division of Health Care Delivery Research, Mayo Clinic. His broad area of expertise lies in comparative effectiveness research, with specific proficiencies in applied health economics, statistical and data science methods, and health policy. Dr. Borah has authored over 150 peer-reviewed publications, the majority of which evaluate costs in different health care interventions and their corresponding policy implications.
Christopher M. Dezii	Other Interested Parties; Patient Partner; Clinician	RN, MBA	Chief Executive Officer	Healthcare Quality Advocacy & Strategy Consultants, LLP	Holland, Pennsylvania	Mr. Christopher M. Dezii is the Chief Executive Officer of Healthcare Quality Advocacy & Strategy Consultants, LLP. He has a solid clinical background in quaternary care for individuals requiring all forms of renal replacement therapies as well as Immunology, Infectious Disease and Metabolic disorders. Mr. Dezii spent many years as a health economist/outcomes researcher/care management in the pharmaceutical Industry and has spent a lifetime contributing toward quality improvement and quality measurement/measure development activities with numerous peer reviewed publications in the space. He was most recently appointed to the Medicare Evidence Development & Coverage Advisory Committee for CMMS and has served on various Advisory/Reviewer boards spanning the decades. Lastly, Mr. Dezii has been committed to strengthening the quality component of the value equation:(value = quality/cost) maintaining an equitable, patient-centered focus on the achievement of treatment goals for measures that matter to patients and their families, clinicians, and all stakeholders committed to advancement of the quality of care delivered.



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Daniel Halevy	Purchaser and Plan; Clinician	MD, FASN, CPC	Vice President; Senior Medical Director	Healthfirst	New York, New York	Dr. Daniel Halevy is Vice President and Senior Medical Director at Healthfirst, New York's largest not-for-profit health insurer serving the region's most vulnerable populations. He supports efforts to ensure that Healthfirst members receive high quality, affordable care, through oversight of programs to limit fraud, waste, and abuse. Prior to joining Healthfirst, Dr. Halevy was the medical operations lead for Aetna Medicare's risk adjustment programs, provider coding and documentation training, population health reporting, and behavioral economics-driven multichannel educational campaigns. He led the Medical Policy Department at Horizon Blue Cross Blue Shield of NJ, where he was responsible for the oversight of Horizon's evidence development programs. He also served as an executive director at NYC REACH, a multimillion dollar, federally funded program charged with promoting electronic health record adoption and as a medical director at ActiveHealth Management, a pioneer in computerized clinical decision support acquired by Aetna.
Danny Van Leeuwen	Patient Partner; Clinician	OPA, RN, MPH		Health Hats	Boston, Massachusetts	Mr. Danny Van Leeuwen is committed to health equity and learning and sharing what works for best health. He has lived experience with multiple sclerosis and is committed to serving people who help people by leveraging privilege and experience as a nurse, caregiver, data geek, and leader to open seats at the table of health care governance, design, operations, and research for under-represented and under-served communities. He is podcaster, vlogger, technical expert, and subject matter expert (such as for pain management, clinical decision support, and care planning apps). Mr. Van Leeuwen is a member of the PCORI Board of Governors, an NQF Patient and Caregiver Engagement Advisor, and a member of the Innovation and Value Initiative. He had a long career in quality management in urban and rural health systems, managed care, and behavioral health.



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David Andrews	Patient Partner	PhD	Independent Patient Advisor		Aiken, South Carolina	Mr. David Andrews is a retired college professor (Psychology/Cognitive Neuroscience) with an extensive medical history involving nearly all bodily systems. For more than 15 years, he has been a patient advisor with many organizations from local hospitals to CMS, NQF, etc.
David Schultz	Clinician	MD	Family Medicine Physician	Evansville Primary Car	Evansville, Indiana	Dr. David Schultz is a family physician and owner of Evansville Primary Care. In addition to his medical practice, he presently serves as a Delegate to the Congress of Delegates, AAFP representative for the COVID-19 Vaccine Mandate MACRA/CMS, AAFP representative for the Rheumatology Quality Measure MACRA/CMS, and the Hospital Medicine MIG AAFP Liaison.
Dmitriy Poznyak	Other Interested Parties; Health Services Researcher	PhD	Senior Researcher, Statistics and Methods	Mathematica	Princeton, New Jersey	Dr. Dmitriy Poznyak (Ph.D., Political Science, University of Cincinnati; M.S., Quantitative Analysis, University-College of Brussels—University of Leuven) is a senior researcher at Mathematica, a policy research organization based in Princeton, New Jersey. Dr. Poznyak has over 10 years of experience in quality measurement. His primary areas of research interest and research expertise are reliability analysis, risk adjustment (including variable selection, predictive modeling, cross-validation, and peer-grouping techniques) for the outcome and cost measures, and compositing methodologies. He also has nearly two decades of expertise in designing and evaluating psychometric properties of survey instruments, including patient-reported outcome measures. Being passionate about health care research and health equity, Dr. Poznyak is always seeking new ways to reduce health disparities through quality measurement.



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Emma Hoo	Purchaser and Plan	ВА	Director of Value- Based Purchasing	Purchaser Business Group on Health	Oakland, California	Ms. Emma Hoo focuses on value-purchasing, accountability, quality measurement and data initiatives at the Purchaser Business Group on Health (PBGH). She has managed joint purchasing and performance measurement initiatives for health plan, pharmacy benefit, retiree, and disease management services on behalf of PBGH members. She has also evaluated and implemented data solutions on behalf of large purchasers to analyze total cost of care, model risk assessment/adjustment, and improve health care performance reporting. She has served on the National Quality Forum Measures Application Partnership and Cost and Efficiency Measures Committee. She represents purchasers on the California Department of Health Care Access and Information (HCAI) Health Care Payments Data (HPD) Program Advisory Committee.
Hal McCard	Rural Health Expert; Clinician	JD	Counsel	Spencer Fane, LLP	Nashville, Tennessee	Mr. Hal McCard is currently Counsel at the law firm of Spencer Fane, LLP and a former long-time General Counsel and inhouse counsel in the health care sector. His legal operational expertise includes clinically integrated networks and accountable care organizations, as well as structuring and executing enterprise- wide legal strategies in complex hospital/physician integration projects. He has extensive experience in Medicare Shared Savings arrangements as well as regulatory work and counseling in value-based arrangements. Over his 35-year career he has provided advice and counsel to hundreds of hospitals, physician groups and health care systems pursuing clinical excellence, improved outcomes, and regulatory compliance.



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Harold D. Miller	Health Services Researcher; Other Interested Parties	MS	President and CEO	Center for Healthcare Quality and Payment Reform	Pittsburgh, Pennsylvania	Mr. Harold D. Miller is the President and CEO of the Center for Healthcare Quality and Payment Reform (CHQPR). He also serves as Adjunct Professor of Public Policy and Management at Carnegie Mellon University. Mr. Miller is an internationally-recognized expert on health care payment and delivery and is the author of many widely-used reports on health care payment and delivery reform, including reports focused on the design of cost and resource use measures. He has extensive experience in analyzing both the costs of delivering health care services and the amounts payers spend on those services, including services for both primary and specialty care and services in both urban and rural areas. Mr. Miller also has experience in reviewing cost and quality measures for use in public reporting and value-based payment models, including serving on the Board of Directors of the National Quality Forum for over 6 years and on the federal Physician-Focused Payment Model Technical Advisory Committee for 5 years.
Henish Bhansali	Facility/Institutional; Clinician	MD, FACP, Dipl. ABOM	SVP and Medical Director	Duly Health and Care	Chicago, Illinois	Dr. Henish Bhansali serves as Senior Vice President and Medical Director for Medicare Advantage at Duly Health can Care, as well as a primary care provider at a high-risk clinic. He is the product owner of Duly Health and Care's value-based care model for Medicare patients across the full continuum of care.
Jack Needleman	Health Services Researcher	PhD, FAAN	Professor	University of California, Los Angeles, Fielding School of Public Health	Los Angeles, California	Dr. Jack Needleman is a Professor and former Chair of the Department of Health Policy and Management, UCLA School of Public Health, where he teaches research methods and policy analysis. He is an elected member of the National Academy of Medicine and Honorary Fellow of the American Academy of Nursing. His research has examined the quality of care in American hospitals, the impact of hospital and physician payment reform on the operations, performance and market behavior of health care providers, and factors associated with the success of institutional quality improvement programs. He previously served on the National Quality Forum Scientific Methods, Cost and Efficiency, and Admission and Readmission committees.



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Joan Gleason Scott	Other Interested Parties; Clinician	PhD, RN, CPHQ, CPPS	Director, Quality and Patient Safety	New Jersey Hospital Association	Princeton, New Jersey	Dr. Gleason Scott received her Bachelor of Nursing degree from Fairleigh Dickenson University, her master's degree from NYU, and her PhD from the University of Pennsylvania. Her professional career in the field of clinical effectiveness has included the development of infrastructures to analyze patient experience, cost, and clinical outcomes to evaluate care in the current pay for performance (value based) requirements across ambulatory and inpatient settings. Dr. Gleason Scott's work has also focused on population health and the social determinants of health. She has led several multi- hospital and ambulatory setting grants that demonstrated significant improvements in patient outcomes to eliminate disparity across several patient populations, including those with heart failure, diabetes, and children ages 0 to 3.
John Martin	Other Interested Parties; Health Services Researcher	PhD, MPH	Vice President, Data Science	Premier, Inc.	Charlotte, North Carolina	Dr. John Martin is responsible for providing data science leadership, strategy, program development, and business support across all Premier service lines. He leads a team that is focused on using machine learning/Al along with complex statistical methods to holistically evaluate care provision and outcomes. He has had more than 20 years' experience in leading teams in complex projects and conducting research focusing on measure development, cost and quality improvement, clinical trials, and health economics and outcomes research. He has served on committees and panels for NQF, AHRQ, CMS, PCORI, and ISPOR. He has a bachelor's degree from Sterling College, an Masters of Public Health degree from the University of Kansas, and a PhD from Rutgers, the State University of New Jersey.
Kim Tyree	Rural Health Expert; Facility/Institutional; Health Equity Expert; Other Interested Parties	МВА	Chief Operating Officer	Evergreen Family Medicine	Roseburg, Oregon	Ms. Kim Tyree serves as the Chief Operating Officer and Security Officer at Evergreen Family Medicine, a rural health center that has five locations in Oregon, offering primary care, mental health, urgent care, and occupational medicine services.
Kimberly Geoffrey	Patient Partner					



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Lauren Campbell	Other Interested Parties; Health Equity Expert; Health Services Researcher	MA, PhD	Senior Research Scientist	NORC at the University of Chicago	Greater Boston Area, Massachusetts	Dr. Lauren Campbell is a Senior Research Scientist in the Health Care Evaluation Research Department at NORC at the University of Chicago. Dr. Campbell's work centers on creating claims-based spending, utilization, and quality measures in evaluations of Center for Medicare and Medicaid Innovation Models. Dr. Campbell leads the delivery of analytic results, including development of technical reports, manuscripts, and research briefs, and presents findings to federal clients, stakeholders, and clinician panels. Prior to joining NORC, she led quality measure testing, validation, and public reporting tasks to support the Skilled Nursing Facility Quality Reporting Program. She also co-led and managed quantitative tasks for clinical review, reclassification, and recalibration of CMS-Hierarchical Condition Category (HCC) risk adjustment models used in Medicare Advantage.
Louise Y. Probst	Purchaser and Plan; Other Interested Plans	MBA, BSN	Executive Director	St. Louis Area Business Health Coalition	St. Louis, Missouri	Ms. Louise Probst is Executive Director of the St. Louis Area Business Health Coalition (BHC) and the Midwest Health Initiative (MHI). BHC represents the region's employers in their pursuit of better health and health care value. MHI, a separate nonprofit organization, brings together those who provide, pay for and use health care to address some of the region's most pressing health care challenges. A belief in the power of information and collaboration to transform health care is the common thread that binds the organizations.
Lynn Ferguson	Patient Partner	BS	Member	Patient and Family Advisory Council, Vanderbilt University	Nashville, Tennessee	Ms. Lynn Ferguson is a Nashville native with a husband, two adult sons and a daughter-in-law, and five college-age grandchildren. She is a long-time member and past chair of Vanderbilt University Medical Center's Patient and Family Advisory Council. In this capacity, she has served on several Vanderbilt committees – Patient Experience, Patient Education, PFAC Steering committee, and 4 M's, which made Vanderbilt qualify to be designated an age-friendly facility. She has worked on several quality initiatives with Vanderbilt nursing, particularly regarding falls and was a member of the Nursing Performance Improvement Committee. She has represented Vanderbilt at four International Patient and Family-Centered Care Conferences.



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Mahil Senathirajah	Other Interested Parties	MBA, BASc	Industry Consultant	Merative	Santa Barbara, California	Mr. Mahil Senathirajah is an Industry Consultant with Merative. He has 25 years of experience in health care policy, with a focus on the development of comparative performance information in support of public reporting and payment reform. He has worked extensively across health plan, physician, hospital, and payer sectors and clinical quality, utilization, equity and cost domains. Additionally, Mahil works with federal, state, and private sectors initiatives. His Federal government work includes the Transforming Clinical Practice Initiative, Medicaid Innovation Accelerator Program, and Pioneer ACO Evaluation. Throughout this work, Mr. Senathirajah has both provided expert advice regarding the development, specification, and use of performance measures to achieve policy goals and has generated widely disseminated measure results. He served for a number of years on the NCQA's Technical Measurement Advisory Panel. Mr. Senathirajah received a bachelor's in engineering and a Master of Business Administration degree from York University, Toronto
Margaret Woeppel	Rural Health Expert; Clinician; Facility/Institutional; Other Interested Parties	MSN, RN CPHQ FACHE	VP Quality, Data & Workforce	Nebraska Hospital Association	Lincoln, Nebraska	Ms. Margaret Woeppel has experience delivering quality strategy through team-based performance, and collaboration with health care providers, stakeholders, and partners. She is an experienced leader in team development and productivity specializing in patient safety, regulatory requirements, and compliance with contract initiative using myriad tools and methodologies.
Marisa Elliott	Facility/Institutional; Health Equity Expert	CPC, CDEO, CHONC, RH- CBS	Regional Director, Population Health	Ascension Medical Group	Detroit, Michigan	Ms. Marisa Elliott has worked in health care for over 20 years. She has primarily been responsible for revenue cycle and clinical documentation improvement. Most recently, she has returned to her clinical roots and led her care management team regionally and at a market level.



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Mary Schramke	Patient Partner	PhD, MBA	Patient and Family Advisor		Waikoloa, Hawaii	Dr. Mary Schramke is a retired biotech executive with a passion for improving health care for all involved, especially those less able to speak for themselves. Her insights build from her 7 plus years' experience with Patient and Family Advisor efforts amongst many quality improvement and measurement teams, including the American College of Physicians Immunization Improvement Program, Cal Hospital Compare Technical Advisory Council, Sutter Health Quality Improvement Steering Committee, Sutter Health Assessment Operations Leadership Team, and Sutter Health Patient Reported Outcomes/Outcomes Information Program.
Megan Guinn	Facility/Institutional; Clinician; Other Interested Parties	MBA, BSN, RN	Director of Clinical Improvement	BJC Healthcare ACO and BJC Medical Group	St. Louis, Missouri	Ms. Megan Guinn is the Director of Clinical Improvement for BJC Healthcare ACO and BJC Medical Group. Ms. Guinn has 18 years of clinical nursing experience in a variety of health care settings including inpatient, outpatient, health plan, clinical operations, and value-based care. She is an experienced health care administrator with a demonstrated history of executing value-based care performance strategies, including Medicare Shared Savings Program ACO clinical operations, quality measurement and improvement initiatives, and achievement of strategic directives.
Michelle Hammer	Purchaser and Plan	BS	Reporting and Analytics Director	Elevance Health	Clearwater, Florida	Ms. Michelle Hammer's career over the last 30 years in health care has spanned finance and data analytics for both payors and hospital systems. Over the last 9 years, her focus has been on developing and improving data and reporting to evaluate providers on both cost and quality with the goal of ensuring members receive the highest quality care while being mindful of health care costs. In her role at Elevance Health, she works with large health systems to inform provider performance and drive opportunities to deliver high-value care.



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Pamela Roberts	Clinician; Facility/Institutional; Health Services Researcher		Executive Director in the Office of the CMO, Executive Director and Professor	Cedars-Sinai Medical Center & Physical Medicine and Rehabilitation, Cedars- Sinai Medical Center	Los Angeles, California	Dr. Pamela Roberts is an occupational therapist and administrator with over 30 years of experience in patient care, quality, safety, research and addressing cost and efficiency throughout the health system. Her expertise is widely regarded by my peers as evidenced by my appointment as an executive director and professor in multiple areas within the Cedars-Sinai Health System including physical medicine and rehabilitation, patient safety, quality, education, research, and informatics in which she is responsible for the strategic initiatives and daily operations. She has also provided numerous presentations and has authored numerous publications, including a variety of health services research topics.
Paul Kallaur	Other Interested Parties	MA, BA	President and Chief Executive Officer	Center for the Study of Services	Washington, D.C.	Mr. Paul Kallaur has overseen the work of the Center for the Study of Services (CSS) and Consumers' Checkbook since 2021. This includes direct to consumer reporting and outreach through CSS/Checkbook's Plan Comparison Tools that support Federal Agencies, State Based Marketplaces under the ACA, Private Exchanges, and others. Kallaur also oversees CSS's work in measuring health care patient and member experience for the Centers for Medicare & Medicaid Services, states, public reporting collaboratives, provider organizations, and research organizations.
Pranavi Sreeramoju	Facility/Institutional; Clinician; Health Equity Expert; Health Services Researcher	MD, MPH, MBA, FIDSA, FSHEA	Vice President; Chief Quality Officer	Thomas Jefferson University Hospital, Inc., Jefferson Health	Philadelphia, Pennsylvania	Dr. Pranavi Sreeramoju currently serves as Vice President and Chief Quality Officer at Thomas Jefferson University Hospital Inc., Jefferson Health, in Philadelphia. She received her medical degree from Jawaharlal Institute in India, Infectious Diseases subspecialty training from University of Chicago and University of Illinois, Chicago, a Master of Public Health degree from Tulane University, New Orleans, and a Master of Business Administration from Naveen Jindal School of Management in Dallas, Texas. She has over 15 years of experience in various leadership roles in health care epidemiology, clinical finance, and health care quality. She has been named as one of the top 50 leaders in Patient Safety in 2015 by Becker's Healthcare. She recently published a book, <i>The Patient and Healthcare System: Perspectives on High-Quality Care</i> .



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Rosa Plasencia	Health Equity Expert; Other Interested Parties; Rural Health Expert	JD	Director	National Core Indicators, Aging and Disabilities (NCI-AD); ADvancing State	Madison, Wisconsin	Ms. Rosa Plasencia is currently the Director of NCI-AD at ADvancing States. Ms. Plasencia also participates in work related to long-term services and supports policy, quality, equity initiatives, and No Wrong Door/ADRC. She holds a Juris Doctorate and Graduate Certificate in Consumer Health Advocacy from the University of Wisconsin, and a bachelor's degree from the University of California, Santa Cruz. Prior to this role she worked in state government, as a Title III-B legal services provider, and with health care focused nonprofits.
Sandeep Das	Health Equity Expert; Clinician; Facility/Institutional; Health Services Researcher	MD, MPH	Professor of Internal Medicine, Cardiology Division	University of Texas Southwestern Medical Center	Dallas, Texas	Dr. Sandeep R. Das is a Professor of Medicine at UT Southwestern Medical Center in Dallas and Cardiology Service Chief at Parkland Health. Dr. Das currently balances his time between patient care, research, and teaching. His primary research interest is improving cardiovascular outcomes, quality of care, and implementation among the urban poor. Dr. Das is an Associate Editor for Circulation, a leading cardiology journal, and represents the American College of Cardiology on the American Diabetes Association Standards of Care. He currently serves as President of the Board for the Dallas Division of the American Heart Association Distinguished Contribution Award.
Seth Morrison	Patient Partner	MA	Patient Reviewer	Patient Centered Outcomes Research Institute	El Cerrito, California	Mr. Seth Morrison is a gay man who suffers from multiple chronic conditions. He has served as a patient reviewer for the Patient Centered Outcomes Research Institute (PCORI) since 2014 and as a team member of the Cancer Health Equity Patient Reported Outcome Measures Working Group since 2022. Mr. Morrison retired from a career in cable television consumer marketing and product development. He has managed teams as large as 100 people and budgets of up to \$35 million. As a marketer, he has been a customer for market research and active in developing and implementing quality measures for the industry.



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Shawn Ruder	Patient Partner				New York, New York	Mr. Shawn Ruder works for a construction company in Brooklyn, New York. His experience with the US health care system while experiencing homelessness emphasizes the importance of understanding how diagnostic delays and structural barriers to care for unhoused populations impact quality of care. His focus areas are delays in treatment, wait time in the waiting room, as well as how to improve provider interaction with patients who are unhoused and/or those with substance use disorder.
Sopida Andronaco	Clinician; Facility/Institutional	MSN, RN, PHN, CPHQ	Director of Performance Improvement and Clinical Outcomes	Hoag Orthopedic Institute	Irvine, California	Ms. Sopida Andronaco is a hospital executive with more than 20 years of experience in quality management. She currently serves as Director of Performance Improvement at Clinical Outcomes at premier orthopedic specialty hospital enterprise Hoag Orthopedic Institute (HOI) where her goal is to improve and sustain superior clinical outcomes, while minimizing costs. In her role, Ms. Andronaco oversees performance improvement initiatives, patient satisfaction, patient outcomes, infection prevention and quality reporting for Centers for Medicare & Medicaid Services. She also facilitates HOI's multidisciplinary Performance Improvement Committee to spearhead an innovative model for value-driven health care.
Sunny Jhamnani	Clinician; Facility/Institutional	MD	Cardiologist	TriCity Cardiology	Phoenix, Arizona	Dr. Sunny Jhamnani is a Partner at TriCity Cardiology, the largest cardiology group in Arizona. He holds/has held various leadership positions within CommonSpirit Health, National Quality Forum, National Board of Medical Examiners, American College of Cardiology, Arizona Care Network. He has extensive expertise and experience in quality measures, especially pertaining to cost, efficiency, resource use under the CMS and other portfolios.



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Tad Mabry	Clinician; Facility/Institutional	MD	Associate Professor of Orthopedic Surgery	Mayo Clinic	Rochester, Minnesota	Dr. Tad Mabry is a leader in quality and safety at Mayo Clinic and currently serves as the chair of the Rochester Quality Subcommittee. This group supports improvement efforts focused on patient safety, staff safety, quality data and analytics, and clinical practice quality. As the quality chair, Dr. Mabry serves on multiple quality and practice committees and partners with Mayo Clinic leadership to identify opportunities for improvement and to design and implement the strategies necessary for success. Dr. Mabry is an Associate Professor of Orthopedic Surgery specializing in primary and revision total joint replacement of the hip and knee.
Tera Heidtbrink	Rural Health Expert; Facility/Institutional	MSN, RN,	Value Based Care Operations Manager	Bryan Health Connect	Lincoln, Nebraska	Mr. Tera Heidtbrink received her Associate of Science in Nursing degree in 2011 followed by a Bachelor of Science in Nursing degree as well as a Master of Nursing Leadership degree. During her nursing career, she has worked in long-term care, clinic, rural hospital settings, and currently an accountable care organization. Within that nursing career, she gained experience in coding and billing, insurance and hospital utilization review, social services and discharge planning, infection prevention, regulations and compliance, organizational quality and process improvement, and formal leadership. Over the years, Ms. Heidtbrink has held membership in multiple organizations, has held certifications including trained activities director, social service designee, and has had extensive training in quality improvement and metrics through the Institute for Healthcare Improvement.



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William Golden	Purchaser and Plan; Clinician; Rural Health Expert; Health Equity Expert	MD, MACP	Professor of Medicine and Public Health and Medical Director	University of AR for Medical Sciences , Arkansas Medicaid	Little Rock, Arkansas	Dr. William E. Golden is Professor of Medicine and Public Health at the University of Arkansas for Medical Sciences. He is currently the Medical Director, Arkansas Office of Health Information Technology and Medical Director of Arkansas Medicaid. He was the lead clinician for the Arkansas Medicaid Payment Improvement Initiative, which received a payment reform implementation grant from CMMI. In this role, he shaped the design and implementation of over a dozen clinical episodes of care and a statewide Patient Centered Medical Home program. Dr. Golden served on the Board of Directors of the National Quality Forum from 2001-2004 and was President of the American Health Quality Association from 1997-2000. He was a methodologist member of the AMA Physician Consortium for Performance Measurement for over a decade. A past member of the HCP-LAN Guiding Committee, he co-chaired the workgroup that released a white paper for alternative payment mechanisms for primary care that foretold the CMS model of Primary Care First.