



Cristie Upshaw Travis (Chair)

Memphis Business Group on Health, Memphis, TN

Cristie Upshaw Travis (Chair), currently serves as CEO of the Memphis Business Group on Health, Vice Chair of the Leapfrog Group and is Immediate Past Chair of the National Business Coalition on Health and serves as a member of the NCQA Purchaser Advisory Council. Since 1997, the Memphis Business Group on Health has served as a regional and national leading in establishing, collecting, and reporting at both the national and regional level. The Memphis Business Group on Health has insisted on the use of both national, standardized measures of safety and quality and the use of national benchmarks for regional accountability. They are also committed to using measures that are meaningful to purchasers and their constituencies, as well as to hospitals.

Lee Fleisher, MD (Vice Chair)

University of Pennsylvania Health System, Philadelphia, PA

Lee Fleisher, MD (Vice Chair), is the Robert D. Dripps Professor and Chair of Anesthesiology and Critical Care and Professor of Medicine at the University Of Pennsylvania School Of Medicine. He received his undergraduate degree from the University of Pennsylvania and his medical degree from the State University of New York at Stony Brook. After completing a surgical internship at the University of Minnesota, he completed an anesthesia residency at Yale University, following which he joined the faculty in 1990.

In 1992, he moved to The Johns Hopkins University, where he was Professor and Vice Chair for Clinical Investigation in the Department of Anesthesiology, and held joint appointments in Health Sciences Informatics, Health Policy, and Management and Medicine. He is the Chair of the American Heart Association/American College of Cardiology Guidelines on Perioperative Cardiovascular Evaluation before Non-Cardiac Surgery and a member of the Steering Committee of the Surgical Care Improvement Project of the Center for Medicare and Medicaid Services. Dr. Fleisher has published more than 200 articles, chapters, books, and abstracts. He has edited several books and monographs, including Evidence Based Practice of Anesthesiology and the 5th edition of Anesthesia and Uncommon Diseases, Perioperative Medicine: Managing to Outcomes, and associate editor of the 6th edition of Anesthesia. He is a member of the Institute of Medicine.

Andrew Baskin, MD

Aetna, Blue Bell, PA

Andrew Baskin, MD, currently serves as Aetna's National Medical Director for Quality and Provider Performance Measurement, reporting directly to the Chief Medical Officer. He is responsible for initiatives to measure and improve quality of care, establish programs which create incentives for more effective and efficient care, measurement implementation and public reporting, health plan accreditation including the collection and reporting for HEDIS and CAHPS, participate in multi-stakeholder efforts to aggregate data to increase the integrity of results, establish performance based networks, and represent Aetna on various committees and workgroups with external organizations. He is a member of the NCQA Committee on Performance Measurement, URAC's Board of Directors, the NQF National Priorities Partnership for Population Health, and the NQF Consensus Standards Advisory Committee (term beginning in July, 2011). Prior to this role, he has served in various medical director roles at Aetna, gaining experience and

expertise in clinical and coverage policy development, benefit and plan design, establishing coding and reimbursement policy, disease management program operations, and provider relations. Prior to joining Aetna over 12 years ago, Dr. Baskin practiced as a primary care internal medicine physician in the Philadelphia suburbs.

Pamela Cipriano, PhD, RN NEA-BC, FAAN

University of Virginia, Charlottesville, VA

Pamela Cipriano, PhD, RN NEA-BC, FAAN, is a nationally known nursing and academic medical center executive and is currently a Senior Director at Galloway Consulting, a health management consulting firm. She holds a faculty appointment as Research Associate Professor at the University of Virginia School of Nursing. She is also Editor-in-Chief of American Nurse Today, the official journal of the American Nurses Association. She was the 2010-2011 Distinguished Nurse Scholar-in-Residence at the Institute of Medicine where she helped investigate the safety of health information technology assisted care and meaningful use of health IT by nurses. Throughout her career, she has been a leader in national nursing organizations addressing issues of policy, administration, quality, technology, and clinical practice. She currently serves on the Joint Commission's National Nursing Advisory Council, the National eHealth Collaborative Board, and the National Quality Forum's Consensus Standards Approval Committee.

William Conway, MD

Henry Ford Health System, Detroit, MI

William Conway, MD, implemented consistent processes that improved outcomes in critical care and post-operative settings and reduced hospital acquired infections in the hospitals of the Henry Ford Health System. He is leading an initiative to eliminate harm in the continuum of services. He received the 2006 Michigan Health and Hospital Association (MHA) Keystone Center Safety and Quality Leadership Award.

He is a former president of the American Medical Group Association and the chair of its Foundation. Dr. Conway is the co-founder of the Group Practice Improvement Network and a board member of the MHA Patient Safety.

Robert Ellis

Consumers' Checkbook, Ashburn, VA

Robert Ellis, is Director of Operations and Online Resources for Consumers' CHECKBOOK/Center for the Study of Services. For nearly 20 years, he has had direct management and development responsibility for all CHECKBOOK online offerings including the Guide to Health Plans for Federal Employees, Consumers CHECKBOOK magazine, CHECKBOOK's Disease & Treatment resources, and others. Ellis has a varied background ranging from 10 years as a professional operatic baritone to three years as President of Myer-Emco, a nationally recognized specialty electronics retailer. Ellis has a BA from James Madison University and an MM from the University of Illinois.

David Kelley, MD, MPA

Pennsylvania Department of Public Welfare, Harrisburg, PA

Dr. Kelley is the Chief Medical Officer for the Pennsylvania Department of Public Welfare's Office of Medical Assistance Programs. He oversees the clinical and quality aspects of the Medical Assistance Programs that provide health benefits to over 2.2 million recipients. The Office includes oversight of ten managed care organizations and the Access fee-for-service program. In the past nine years the Office has participated in a multi-payer medical home collaborative, piloted a care management collaboration between behavioral health physical health providers that reduced hospitalizations, initiated three pay for performance programs, developed a multi-state application for the Medicaid electronic health record incentive program, established nonpayment policies for readmissions and preventable serious adverse events in hospitals, developed telemedicine payment policies, implemented a pharmacy preferred drug

management program and implemented a value-based efficiency adjustment MCO rate setting program.

Prior to joining the Department, Dr. Kelley worked for Aetna Health Inc. as the medical director responsible for utilization and quality management in central and northeastern Pennsylvania. Prior to Aetna, he served as Assistant Professor and Director of Clinical Quality Improvement at Penn State University's College of Medicine. As the Director for Clinical Quality Improvement, he oversaw the quality and utilization management at Penn State's Hershey Medical Center.

Dr. Kelley received his BS degree at Elizabethtown College, attended medical school at the University of Pittsburgh, completed his residency training at Baylor College of Medicine in Houston, obtained his MPA at Penn State University, and is board certified in Internal Medicine and Geriatrics. He has clinically practiced at a FQHC, private practice, an academic practice at Penn State University, and a community-based team approach to diabetes care in a Medicaid hospital clinic.

David Knowlton, MA

The New Jersey Health Care Quality Institute, Pennington, NJ

David Knowlton, MA, has been a leader and advisor in health issues in New Jersey and nationally since 1977. Mr. Knowlton founded and served as Executive Director of the Health Care Payers Coalition of New Jersey; a non-profit corporation representing business and labor organization who provide healthcare. He currently serves as a permanent member of the Coalition's Board and Executive Committee. He has served as a Vice President of the Medical Inter-Insurance Exchange (MIIX), a medical malpractice company owned by the Medical Society of New Jersey. Mr. Knowlton is currently the President and CEO of the New Jersey Health Care Quality Institute. Founded by the Coalition, the Institute is dedicated to eliminating medical errors and improving health care quality.

Mr. Knowlton currently serves as Chairman of the Leapfrog Group, a nationally recognized foundation committed to reduce medical errors and improve the quality of patient care throughout the United States. He has served as a member of the National Quality Forum's (NQF) Steering Committees for Standardizing Cardiac Surgery Performance Measures, Assessing ACE Inhibitors and ARBS as Quality Measures, Hospice and Palliative Care Measures, "Common Format" Development, Hospital Acquired Infections and was just appointed to the Patient Safety Indicators Steering Committee. He co-chaired the NQF Steering Committee on Stroke Measures. Mr. Knowlton served as the Deputy Commissioner of Health for the State of New Jersey from 1987 to 1990. He also served on the Commissioner's Long Term Care Task Force and New Jersey's Health Data Advisory Committee and currently serves on the Commissioner's Quality Improvement Advisory Committee. He has been recommended by the United States Trustee and appointed by the Court as a "Patient Care Ombudsman" to protect patient rights and quality in three health care bankruptcy proceedings.

He was Vice Chairman of the Health Decisions, a foundation dedicated to improving the caliber of and access to quality end-of-life care and has been a principal presenter and author on the subject of "Managed Care and HIV" for the Kaiser Family Foundation AIDS Symposium. Mr. Knowlton has authored several published articles on health care coalitions and related health care management issues. He is a member of the Leadership Team of the Consumer Disclosure Project nationally and is a Senior Scholar at Jefferson Medical College in Philadelphia. He has also taught political science at Rutgers College, The State University of New Jersey and has taught Public Health in Urban Ministry at the New Brunswick Theological Seminary. He chaired the health reform working group for Senator Joseph Vitale which resulted in the first wave of health reform in New Jersey in 2009. Most recently he was appointed to serve as Chairman of the Health Sub-Committee of Governor-Elect Christie's Transition Team.

Mr. Knowlton holds undergraduate and graduate degrees in psychology and education from University of Massachusetts (Amherst) and Trinity College (Hartford, Connecticut) respectively.

Philip E. Mehler, MD

Denver Health Medical Center, Denver, CO

Philip E. Mehler, MD, has been at Denver Health for almost 30 years, having also trained there as a resident. For 10 years of his tenure, he was the Chief of Internal Medicine and led Denver Health's effort to provide evidence-based internal medicine care for our patients. He was thus responsible for defining quality standards for internal medicine practice at Denver health and also for the adherence to these standards across the gamut of preventative and chronic care management. In this regard, he assessed in the actualization of the clinical data warehouse to make it of relevance to the internists during their clinical encounters with patients to the outpatient clinics. As a result, Denver Health is achieving blood pressure control in 70% of its hypertensive patients, as but one example of Denver Health's excellent quality of care. They had similar successes in diabetes, lipid control, immunization compliance, and cancer screening. During his tenure as Chief, the Internal Medicine department was awarded in 1997 one of the first ever, Jim Wright Patient Safety Awards from NAPH, for their efforts integrating severely mentally ill patients into internal medicine clinics.

Ann Monroe, MA

Health Foundation for Western and Central New York, Buffalo, NY

Ann F. Monroe, is the president of the Health Foundation for Western & Central New York. With 30 years of experience in health and human service programs, Ms. Monroe has held leadership positions in the public and private sector, with intensive experience in mental health, community health, managed care, and philanthropy. Previously, she served as the director of the Quality Initiative at the California HealthCare Foundation. Under Ms. Monroe's leadership, the initiative built extensive collaboration among consumers, advocacy organizations, the healthcare industry, purchasers, and policymakers to achieve its goals of improved overall quality outcomes and greater public accountability of healthcare in California.

Arden Morris, MD, MPH, FACS

University of Michigan Health System, Ann Arbor, MI

Arden Morris, MD, MPH, FACS, is an Associate Professor of Surgery, Associate Professor of Health Behavior Health Education, and chief of the Division of Colorectal Surgery. She is core faculty for University of Michigan's Center for Health Outcomes and Policy and for the Robert Wood Johnson Foundation Clinical Scholars Program. Dr. Morris has published extensively on processes and outcomes of cancer care, and reducing disparities in the quality of surgical care. She recently completed a mixed methods study funded by the American Cancer Society to understand variations in care among socially vulnerable populations and has begun a 4-year population based survey in Georgia and Michigan to understand the influence of patient-provider relationships on the quality of colorectal cancer care. Dr. Morris has co-chaired the National Quality Forum's Steering Committee for Surgical Quality Measures. She has served on the Medicare Coverage Advisory Committee and on a variety of national technical advisory panels and committees primarily focused on quality of care.

Lyn Paget, MPH

Health Policy Partners, Brookline, MA

Lyn Paget, MPH, is the Managing Partner of Health Policy Partners, an independent organization dedicated to connecting patient priorities with policy and innovation. For over 25 years, Ms. Paget has worked to enhance the quality of the patient experience in health care. With a focus on information, engagement, and partnership, she has established strategic alliances with government agencies, medical professional societies, consumer advocacy groups, health care quality organizations and policy leaders to create unity around principles for successful innovation and change. She is currently Project Director for

the NCQA/Moore Foundation collaborative project to develop an innovative strategy to rapidly advance patient and family engagement by leveraging health information technology. As the previous Director of Policy and Outreach at the Informed Medical Decisions Foundation, she directed efforts in advocacy, communications and policy development to support sustainable models of patient centered care and shared decision-making. In this role, she built awareness and fostered collaboration among key stakeholder groups, advocated for new models of reimbursement, promoted quality standards for patient experience measures, and disseminated research results and knowledge to enhance the understanding of the patient's role in medical decision-making.

Carolyn Pare

Minnesota Health Action Group, Bloomington, MN

Carolyn Pare, is the President and Chief Executive Officer of the Buyers Health Care Action Group, a coalition of more than 30 public and private employers dedicated to health care market reform. In the twenty years since its formation, this Minnesota based coalition has introduced a number of nationally recognized innovations in health care contracting, delivery, quality and consumerism. Carolyn was previously a director of Human Resources, responsible for Benefits, Risk Management and Human Resource Information Systems at Target Corporation. She currently serves as Chair of the National Business Coalition on Health; sits on the NCQA Standards Committee and the Steering Committee of the Minnesota Alliance for Patient Safety. Carolyn also participates as a member of the National Advisory Council to the California Health Benefits Review Program and serves on the Minnesota Health Care Reform Review Council, a group charged with oversight of the implementation of the health care reforms passed in the 2008 legislative session. Carolyn has served the State of Minnesota as a member of the State Quality Improvement Institute and a member Governor Pawlenty's QCare (Quality Care and Rewarding Excellence) Council, an advisory body setting goals and standards to improve health care performance in the state. Carolyn was an originating board member of the Minnesota Health Care Connection and continues to assist in the development of Minnesota's health information technology policy through her service on the Minnesota HIT Advisory Group. Carolyn is also co-chair of Minnesota's Smart Buy Alliance, an alliance of public and private purchasers committed to the alignment of value purchasing strategies. Carolyn has a BS in Environmental and Public Health from the University of Wisconsin at Eau Claire and over thirty years' experience in occupational health and safety, risk management and health care.

Lee Partridge

National Partnership for Women & Families, Washington, DC

Lee Partridge, serves as a member of the National Partnership staff pursuing opportunities to improve the quality of healthcare available to lower income individuals, and particularly to women and children. She has served on several NCQA advisory panels and currently is a member of its Committee on Clinical Programs. She was also selected by the Agency for Health Care Research and Quality to be a member of the special subcommittee that recommended to the DHHS Secretary the core set of measures appropriate for evaluating care to Medicaid-enrolled adults, and is currently serving on the new subcommittee that will advise on the parallel set of measures for children and adolescents enrolled in Medicaid and CHIP.

Frank Opelka, MD, FACS

Louisiana State University, New Orleans, LA

Frank Opelka, MD, FACS (Chair), is the vice chancellor for clinical affairs at Louisiana State University Health Sciences Center. In this role, he coordinates clinical care, quality improvement, patient safety, and healthcare design through integration into the academic and research mission. Dr. Opelka also serves on various national healthcare quality initiatives on behalf of the American College of Surgeons (ACS). He is a member of the ACS Health Policy and Advocacy program and chairs the ACS-supported Surgical Quality Alliance. Dr. Opelka holds numerous positions on physician performance measurement, cost and efficiency,

and quality initiatives for public reporting in healthcare. He serves as a member of the Quality Alliance Steering Committee. He is co-chair of the NQF Hospital Care Outcomes and Efficiency Steering Committee and is 1 of 28 partners in the National Priorities Partnership.

He has been a member of the General Surgery Coding and Reimbursement Committee for the Center for Medicare & Medicaid Services (CMS) Resource-Based Relative Value Scale (RBRVS) since 1992. He has also served as a consultant to CMS with Health Economics Research (HER–Boston) in the RBRVS Five-Year Review and currently holds an appointment to the CMS Advisory Panel on Ambulatory Payment Classification Groups (advisory to CMS for the prospective hospital outpatient fee schedule). He is a graduate of the ACS-Brandeis University program in health and social policy.

David Rhew, MD

Samsung SDS America, Moonachie, NJ

David Rhew, MD, is the chief medical officer and vice-president of global healthcare at Samsung SDS America. David received his Bachelors of Science degrees, one in computer science and the other in cellular molecular biology, from the University of Michigan. He received his MD degree from Northwestern University and completed internal medicine residency at Cedars-Sinai Medical Center. He completed fellowship in health services research at Cedars-Sinai Medical Center, followed by fellowship in infectious diseases at the University of California, Los Angeles. Dr. Rhew has served as senior vice-president and chief medical officer at Zynx Health Incorporated and as a clinician/researcher in the Division of Infectious Diseases at the VA Greater Los Angeles Healthcare System. He has served as a member of the UCLA-Affiliated Infectious Diseases Fellowship faculty and as Associate Clinical Professor of Medicine at UCLA. David worked as a healthcare consultant for RAND and was the principal investigator for a research project sponsored by the Centers for Disease Control and Prevention and Centers for Medicare & Medicaid Services that evaluated the implementation of standing order protocols for improving vaccination in nursing homes. Dr. Rhew has served on the National Quality Forum's (NQF) Steering Committee for Pulmonary and Critical Care quality indicators and is currently on the NQF Consensus Standards and Approval Committee. He co-holds two U.S. patents for technology that enables the authoring, mapping, and integration of clinical decision support into the electronic health record.

Dana Gelb Safran, ScD

Blue Cross Blue Shield of Massachusetts, Boston, MA

Dana Gelb Safran, ScD, is Senior Vice President for Performance Measurement and Improvement at Blue Cross Blue Shield of Massachusetts (BCBSMA). In this role, she leads the company's initiatives to measure and improve healthcare quality, safety and outcomes. Dr. Safran also retains an active academic practice and is Associate Professor of Medicine at Tufts University School of Medicine. Prior to joining BCBSMA, she was Director of The Health Institute at Tufts Medical Center.

Dr. Safran was among the lead developers of the BCBSMA Alternative Quality Contract (AQC), a provider contract model launched in 2009 with the twin goals of improving quality and outcomes while significantly slowing spending growth. The AQC includes robust performance incentives based on a broad set of validated clinical quality, outcome and patient experience measures. The model's strong incentives to improve quality and outcomes represent an important complement to the AQC global budget; and the AQC is widely viewed as real world Accountable Care Organization model – now with significant market penetration. Dr. Safran oversees the implementation of the performance incentives, related informatics and the company's ongoing engagement with its provider network to monitor and improve performance on all aspects of the contract.