



Improving Attribution Models Advisory Panel

ADVISORY PANEL MEMBERS

Ateev Mehrotra, MD, MPH

Department of Health Care Policy, Harvard Medical School
Boston, Massachusetts

Dr. Mehrotra's research focuses on interventions to decrease costs and improve quality of care. Much of his work has focused on innovations in delivery such as retail clinics and e-visits have on quality, costs, and access to health care. He is also interested in the role of consumerism and whether price transparency and public reporting of quality can impact patient decision making. Related work has focuses on quality measurement including how natural language processing can be used to analyze the data in electronic health records to measure the quality of care. Dr. Mehrotra received his B.S. from the Massachusetts Institute of Technology, his medical degree from the University of California, San Francisco and completed his residency in internal medicine and pediatrics at the Massachusetts General Hospital and Children's Hospital of Boston. His clinical work has been both as a primary care physician and as an adult and pediatric hospitalist. He also has received formal research training with a Masters of Public Health from the University of California, Berkeley and a Masters of Science in Epidemiology from the Harvard School of Public Health. In 2008, he received the Milton W. Hamolsky Award for Outstanding Scientific Presentation by a Junior Faculty Member by the Society of General Internal Medicine. In 2013, he received the Alice S. Hersh New Investigator Award from AcademyHealth for health services researchers early in their careers who show exceptional promise.

Elizabeth Drye, MD, SM

Director of Quality Measurement Programs, Yale-New Haven Hospital, Center for Outcomes Research and Evaluation (CORE)
New Haven, Connecticut
Nominated by: Centers for Medicare & Medicaid Services

Dr. Drye is Director of Quality Measurement Programs at Yale's Center for Outcomes Research and Evaluation (CORE) and a leader in quality measurement. She is currently focused on developing ambulatory care outcome measures. Before becoming a physician, she worked in national health policy positions in Washington, DC, including Chief of Staff at the White House Domestic Policy Council and Legislative Assistant to U.S. Senator Joe Lieberman. Dr. Drye received her MD from Harvard Medical School and SM in health policy and management from the Harvard School of Public Health. She completed her residency in pediatrics at Yale-New Haven Hospital.

Danielle Lloyd, MPH

Vice President of Policy & Advocacy, Deputy Director, Premier, Inc.
Washington, District of Columbia

Danielle Lloyd is the vice president for policy and advocacy as well as deputy director of the Washington, DC office of the Premier healthcare alliance. Premier, Inc. (NASDAQ: PINC) is a leading healthcare improvement company, uniting an alliance of approximately 3,750 U.S. hospitals and 130,000 other providers to transform healthcare.

Danielle leads Premier's policy analysis and development. She is a national expert on federal healthcare quality and payment policies impacting hospitals, outpatient facilities and physicians, such as value-based purchasing and alternative payment models. Lloyd works with lawmakers, the White House, and other major stakeholders involved in healthcare policy and regulation. She also plays a leading role in Premier's large-scale provider collaboratives by helping providers operationalize new federal policies and Premier's non-profit research arm, the Premier Research Institute, that seeks to share knowledge broadly across the country.

Prior to coming to Premier, Lloyd worked on an array of healthcare issues including Medicare and Medicaid payment, quality policies, and health information technology for the American Hospital Association, California Hospital Association, the U.S. House of Representatives Committee on Ways and Means and the Centers for Medicare & Medicaid Services.

Danielle is an active volunteer for Sibley Memorial Hospital's Patient & Family Advisory Council and Quality & Safety team. She is from Los Angeles, has a bachelor's degree from the University of Pennsylvania and has a master's degree in public health from the University of California, Berkeley.

Jennifer Perloff, PhD

Scientist, Deputy Director Institute on Healthcare Systems, Heller School, Brandeis University
Waltham, Massachusetts

Jennifer Perloff, Ph.D. is a Scientist and Deputy Director at the Institute for Healthcare Systems within the Schneider Institutes for Health Policy. Dr. Perloff has over fifteen years of experience in evaluation and health services research. Currently she is involved in a CMMI funded project to develop an episode grouper for Medicare (EGM). In addition to serving as project manager for this effort, Dr. Perloff is directly involved in analysis on attribution and provider profiling along with a range of other applied, claims-based studies. Dr. Perloff also teaches research methods to Ph.D. students and sits on many dissertation committees.

Brandon Pope, PhD

Director of Analytics, Baylor Scott & White Quality Alliance
Dallas, Texas

Brandon Pope is the Director of Analytics for the Baylor Scott & White Quality Alliance, an NCQA-recognized ACO with more than 5,000 physicians and 400,000 members. Brandon's primary responsibilities include delivering descriptive, predictive, and prescriptive analyses and insights in all areas of population health and value-based care. Before joining Baylor Scott & White Health, Brandon worked as a research scientist for the Regenstrief Center for Healthcare Engineering and the School of Industrial Engineering at Purdue University. Brandon received his Ph.D. and M.Eng

degrees in Industrial and Systems Engineering from Texas A&M University and his B.S. in Mathematics from Abilene Christian University.

Jack Resneck, MD

Professor, Department of Dermatology School of Medicine, Professor, Philip R. Lee Institute for Health Policy Studies, University of California, San Francisco

San Francisco, California

Nominated by: American Medical Association

Dr. Jack Resneck is Professor and Vice-Chair of Dermatology at UCSF, and holds a joint appointment at UCSF's Institute for Health Policy Studies. His leadership roles at UCSF have included oversight of the medical center's Medicare physician quality reporting. Dr. Resneck is active in health services research. He currently serves as a Trustee of the American Medical Association, and has advocated for physician engagement in data collection, as well as the development of meaningful, validated quality metrics with accurate attribution and risk-adjustment. Dr. Resneck received his B.A. in public policy from Brown University and completed his medical training at UCSF.

Srinivas Sridhara, PhD, MS

Managing Director, Clinician Analytics, Research & Development, The Advisory Board Company
Washington, District of Columbia

Srinivas Sridhara has fifteen years of experience in measure development, health services research, and health policy analysis. He is the Managing Director for Clinician Analytics at The Advisory Board Company (ABC), where he leads development of provider performance measures and tools to profile and incentivize high value care. Prior to ABC, Dr. Sridhara worked at the Maryland Health Care Commission, where he managed Maryland's All Payer Claims Database and reported on health care costs, quality, utilization, and access; lead price transparency initiatives, program evaluations, and workforce studies; and managed the IRB and data release program. Dr. Sridhara previously worked at Johns Hopkins Bloomberg School of Public Health (JHSPH) and Baltimore Mental Health Systems and completed his graduate work at JHSPH

L. Daniel Muldoon, MA

Healthcare Consultant, Milliman, Inc.

New York, New York

Daniel has extensive background in healthcare payment reform and value-based contracting. He has expertise designing and implementing episode-based payment risk adjustment and pricing methodologies and analyzing administrative health insurance claims data. Prior to joining Milliman, Daniel worked as a technical advisor at the Centers for Medicare and Medicaid Innovation (CMMI), implementing and developing payment methodologies for CMMI's episode-based payment models, including the Bundled Payments for Care Improvement Initiative and Oncology Care Model.