



NATIONAL QUALITY FORUM

Driving measurable health
improvements together

Final Roster

Fall 2020 – Spring 2021 Review Cycle, Cost and Efficiency

Committee Chairs

Kristine Martin Anderson, MBA

Executive Vice President, Booz Allen Hamilton
Rockville, MD

Kristine Martin Anderson is an Executive Vice President at Booz Allen Hamilton, where she leads the civilian services business. In that role, Ms. Anderson and her team aim to address some of the most complex challenges faced by civil government, including healthcare, homeland security, and financial services. Prior to this role, Ms. Anderson was a leader in Booz Allen's federal health business for 12 years. She is recognized as a thought leader for her expertise in quality measurement and using health information technology and analytics to improve the quality, safety, and efficiency of healthcare. Prior to joining Booz Allen, she was the Vice President for Operations and Strategy at CareScience, a software solutions company that she helped to launch in 1992 and take public in 2000. CareScience created the nation's first web-based clinical performance improvement system for hospitals and the nation's first health information exchange. Ms. Anderson holds an MBA from The Wharton School of Business and a BA from the University of Pennsylvania.

Sunny Jhamnani, MD

Provider, Dignity Health & Banner Health
Phoenix, AZ

Dr. Sunny Jhamnani is an Advanced Interventional Cardiologist serving the community of Phoenix, Arizona. He trained in Cardiology and Advanced Interventional Cardiology at Yale after his training in Internal Medicine at Georgetown; prior to which he was a Research Fellow at Harvard. He has also trained in quantitative methods, including econometrics and statistics. His works center on the theme of cost and quality in medicine, particularly in cardiology. He is a Board Member of the National Board of Medical Examiners (NBME), part of NBME's Advisory Committee for Medical School Programs, the chair of American Medical Association's (AMA) Council of Business and Economics, an AMA Delegate, and an American College of Cardiology's (ACC) Board of Trustee Malpractice Workgroup member. He is a reviewer of several prominent journals with a solid publication record, active within his local medical societies and hospital system, and a strong advocate for his patients.

Committee Members

Robert Bailey, MD

Johnson & Johnson Health Care Systems, Inc.
Titusville, NJ

As Senior Director of Population Health Research at Janssen Scientific Affairs, LLC, Dr. Robert Bailey leads a team focused on research supporting movement to achieve the Triple Aim for Healthcare. Projects include understanding ways to improve quality, decrease cost, and improve care experience. Previous roles have been in health economics and outcomes research, leading projects focused on quality, policy, and healthcare reform. Being Board Certified in Internal Medicine and Nephrology, Dr. Bailey provided patient care for 10 years prior to joining Janssen. His experience supports understanding of patient, provider, and payer perspectives in multiple therapeutic areas and in multiple sites of care delivery.

Bijan Borah, MSc, PhD

Mayo Clinic, College of Medicine
Rochester, MN

Dr. Bijan J Borah, , a health economist and health services researcher at Mayo Clinic College of Medicine, focuses on comparative effectiveness research with expertise in observational data methods. His recent research includes measuring medication adherence in patients with multiple chronic conditions, identifying patients for interventions aimed at improving medication adherence. He serves as a member of Institute for Clinical and Economic Review's Midwest Comparative Effectiveness Public Advisory Council, a member of the NQF's Scientific Methods Panel, and a member in the advisory committees on medication adherence measurement panel at International Society for Pharmacoeconomics and Outcomes Research and AcademyHealth Health Economics Interest Group.

John Brooks, PhD

University of South Carolina
South Carolina

Dr. John Brooks is a health economist and Professor at the University of South Carolina and the Director of the Center Effectiveness Research in Orthopedics (CERortho). Dr. Brooks has spent over 30 years performing research assessing performance and treatment effectiveness. At the University of Iowa Dr. Brooks co-founded the Healthcare Effectiveness Research Center (HERCe) here he led numerous studies addressing the theoretical and empirical issues surrounding treatment effectiveness and performance research using observational data. At CERortho, Dr. Brooks led development of the provider performance measures in sports medicine developed by our Qualified Clinical Data Registry (QCDR) for sports medicine (OrthoQCDR).

Cory Byrd

Humana, Inc.
Louisville, KY

Cory Byrd is a healthcare professional that has spent many years improving healthcare service and processes. His experience in consulting and consolidating quality measures supplies him with the clinical knowledge needed to improve the outcome for the patient. Mr. Byrd is dedicated to working within established guidelines to innovate on and improve every aspect of the healthcare experience.

Amy Chin, MS

Greater New York Hospital Association
New York City, NY

Amy Chin is the Senior Director of Health Economics and Outcomes Research at the Greater New York Hospital Association (GNYHA), focusing on issues that span policy, finance, economics, and quality. In this role, she models the impact of federal pay for performance programs and evaluates public measurement systems affecting hospitals. Starting her career in health services research, Amy brings expertise in measure development, risk-adjustment, and statistical models using administrative data. Amy earned her M.S. in Biostatistics at UIC-School of Public Health and undergraduate degree in applied mathematics at Drew University.

Cheryl Damberg, PhD

Principal Senior Researcher, RAND Distinguished Chair in Healthcare Payment Policy
Santa Monica, CA

Dr. Cheryl Damberg is the Distinguished Chair in Health Care Payment Policy and Principal Senior Researcher at the RAND Corporation. Dr. Damberg's body of research explores the impact of various strategies being deployed to drive cost and quality improvements in the U.S. health system. Her work also explores how providers are working to redesign healthcare delivery in response to new payment models and increased accountability for performance. As a national leader in the areas of value-based purchasing and application of performance measures, she has examined the effects of payment reforms on quality and costs, identified strategies to minimize unintended consequences associated with value-based payment schemes, and worked to apply social risk factor adjustments to improve the validity of measures used to compare provider performance and determine incentive payments. Dr. Damberg testified twice before Congress regarding how to include pay for performance into revisions to Medicare physician payments, which informed the development of MACRA. Currently, she serves as the Principal Investigator of the RAND Center of Excellence on Health System Performance, under a five-year \$17.5 million grant from the Agency for Healthcare Research and Quality. The Center is focused on characterizing and studying health systems and identifying the attributes of health systems associated with high performance and mechanisms that systems use to promote the uptake of evidence-based care practices. She also leads a research team that is working with the Center for Medicare and Medicaid Services to generate the annual Medicare Advantage Star Ratings and conduct analyses to strengthen the Medicare STAR rating program. Dr. Damberg's prior professional experience includes serving as the Director of Quality and Research for the Pacific Business Group on Health, as a Senior Consultant to Fortune 100 firms for the MEDSTAT Group, and as a Research Fellow for the U.S. Department of Health and Human Services Office of Disease Prevention and Health Promotion. She holds a PhD in public

policy from the Pardee RAND Graduate School and a Master of Public Health from the University of Michigan.

Lindsay Erickson, MPH

Integrated Healthcare Association (IHA)
Oakland, CA

Lindsay Erickson leads program operations for IHA's Align. Measure. Perform. Programs—implementing standard measures, reporting, and value-based incentives across 11 health plans and nearly 200 provider organizations in California. She oversees three multistakeholder committees that guide development and use of a common measure set that spans quality, patient experience, resource use, and cost. Prior to joining IHA, Lindsay worked at the Georgia Office of Planning and Budget as the policy analyst for Medicaid and CHIP. Lindsay earned her master's degree in Public Health from Emory University in health policy research and her bachelor's degree from the University of California, San Diego.

Risha Gidwani, DrPH

Senior Policy Researcher/Adjunct Associate Professor, RAND Corporation/UCLA School of Public Health
Santa Monica, California

Dr. Risha Gidwani is a senior policy researcher at the RAND Corporation and an adjunct associate professor in the Department of Health Management & Policy at the UCLA Fielding School of Public Health, where she teaches cost-effectiveness analysis methods. Her own research uses both econometric and decision analysis techniques to evaluate and improve the value of US healthcare. Much of her work evaluates health system performance with respect to the cost, value, and quality of care, including patient out-of-pocket costs. Dr. Gidwani previously served on the NQF Steering Committee to evaluate neurology performance measures.

Emma Hoo

Pacific Business Group on Health (PBGH)
San Francisco, CA

Emma Hoo is the Director of Pay for Value at the Pacific Business Group on Health and focuses on measurement and payment reform initiatives, including adoption of common quality outcomes and efficiency measures among Accountable Care Organizations (ACOs). She has managed joint purchasing and performance measurement initiatives for health plan, pharmacy benefit, and disease management services on behalf of PBGH members and in the two to 50 small group segment, implementing risk adjusted premium programs in both segments. She has authored papers on ACOs and high-performance provider network design. Previously, Ms. Hoo managed contracting, data analysis, and IT at a Medical Group. She received her BA from Harvard University.

Sean Hopkins, BS

New Jersey Hospital Association
Princeton, NJ

Sean J. Hopkins is the Senior Vice President of the Center for Health Analytics, Research & Transformation (CHART) at the New Jersey Hospital Association, a hospital and post-acute provider member organization located in Princeton, New Jersey. As the Senior Vice President of CHART, Mr. Hopkins is responsible for overseeing all analytical modeling, both financial and statistical, on behalf of the Association and its members and leads the Association's CHART team in its pursuit of facilitating the Association's mission "to improve the health of the people of New Jersey." Mr. Hopkins has almost 40 years of experience in the healthcare field and has successfully engineered and overseen several demonstration projects approved by the Center for Medicare and Medicaid Services (CMS) and the Center for Medicare and Medicaid Innovation (CMMI). Prior to joining the New Jersey Hospital Association Mr. Hopkins spent 10 years with KA Consulting, Inc., a healthcare consulting company located in Edison, New Jersey. As a Senior Manager of Consulting Services, Mr. Hopkins consulted regionally with hospitals on a wide range of financial and strategic issues. Mr. Hopkins served as an ex-officio board member for the New Jersey Chapter of the Healthcare Financial Management Association (HFMA) and previously served as a member of the National HFMA's Advisory Council. Overall, Mr. Hopkins has almost 40 years of healthcare experience. Mr. Hopkins graduated from St. Joseph's University, Philadelphia, PA in 1981 and earned a Bachelor of Science degree in accounting.

Jonathan Jaffery, MD, MS, MMM

Chief Population Health Officer/President ACO, University of Wisconsin School of Medicine and Public Health
Madison, Wisconsin

Dr. Jonathan Jaffery is a professor of medicine at the University of Wisconsin School of Medicine and Public Health. Dr. Jaffery serves as chief population health officer at UW Health and as president of UW Health ACO, where he is responsible for the overall development, coordination, and implementation of the population health strategy. A board-certified nephrologist, Dr. Jaffery completed a Robert Wood Johnson Foundation Health Policy Fellowship and served as chief medical officer for the Wisconsin Medicaid program. In 2018, he was appointed to the Medicare Payment Advisory Commission.

Dinesh Kalra, MD

Director, Rush University
Chicago, Illinois

Dr. Dinesh Kalra is an attending cardiologist, associate professor, director of advanced cardiac imaging, and director of the Lipid Clinic and the Infiltrative Cardiac Disease Program in the Division of Cardiology at Rush University Medical Center in Chicago, IL. He specializes in cardiac CT and MRI, echocardiography, lipidology, and nuclear cardiology. He is very active in quality improvement and cost containment and studying efficiencies, care models, and outcomes using evidence-based pathways to improve care and reduce disparities.

Donald Klitgaard, MD, FAAFP

MedLink Advantage
Avoca, IA

Don Klitgaard is the founding CEO of MedLink Advantage (MLA), a practice transformation, healthcare consulting, and ACO management firm. Utilizing practical expertise in practice management, cost and quality improvement, and risk adjustment gained through value-based purchasing work, he has served nationally as a consultant and educator. In 2012, Dr. Klitgaard founded Heartland Rural Physician Alliance, an Iowa statewide Independent Physician Association (IPA). He currently manages Heartland Medicare Shared Savings Program (MSSP) and commercial ACOs, serving as Board Chair and ACO Medical Director. He also provides physician faculty support for the Iowa Healthcare Collaborative and Compass Practice Transformation Network in supporting multiple national CMS initiatives.

Suman Majumdar, PhD

Financial Analytics Manager, Washington State Health Care Authority
Olympia, Washington

Dr. Suman Majumdar is the financial analytics manager in the Washington State Healthcare Authority (HCA). He leads research and analyses that inform budget and policy decisions related to Washington State's Medicaid and Children's Health Insurance Program. Prior to joining HCA, he conducted socioeconomic research and program evaluation as part of institutions of higher education in Canada, India, and the United States for more than 12 years. His primary professional interest has always been in applying the principles of economics, econometrics, and statistics in public policy analysis.

Alefiyah Mesiwala, MD, MPH

Senior Medical Director for Value-based Care and Innovation, UPMC Health Plan
Pittsburgh, PA

Dr. Alefiyah Mesiwala is a board-certified preventive medicine physician, former Senior Healthcare Advisor to President Obama, and an expert in healthcare innovation and payment reform. She is currently the Senior Medical Director for Innovation and Value-based Care at the University of Pittsburgh Medical Center (UPMC) Health Insurance Services Division. At UPMC, Dr. Mesiwala is responsible for providing leadership on an innovation-focused portfolio that oversees and supports the contracting and design of value-based reimbursement models across the UPMC Health Plan network. She also leads the clinical practice transformation strategy, working closely to align population health activities with UPMC's clinical integration efforts. Prior to the White House, Dr. Mesiwala was a Senior Advisor and Medical Officer at the Centers for Medicare and Medicaid Innovation (CMMI).

Pamela Roberts, PhD, OTR/L, SCFES, FAOTA, CPHQ, FNAP, FACRM

Executive Director and Professor Physical Medicine and Rehabilitation, Executive Director to the Office of the Chief Medical Officer, and Co-Director Division of Informatics in the Department of Biomedical Sciences, Cedars-Sinai Medical Center
Value Village, Maryland

Dr. Pamela Roberts is an occupational therapist and administrator with over 30 years of experience in patient care, quality, research, and addressing cost and efficiency throughout the healthcare system. Her expertise is widely regarded by her peers as evidenced by her appointment as an executive director and professor in multiple areas within the Cedars-Sinai System, including physical medicine and rehabilitation, patient safety, epidemiology, quality, education, research, neuropsychology, and informatics in which she is responsible for the strategic initiatives and daily operations. She has also provided presentations and authored numerous publications on a variety of health services research topics.

Mahil Senathirajah, MBA

IBM Watson Health
Santa Barbara, CA

Mahil Senathirajah is a Senior Director at IBM Watson Health. Mahil has 25 years of experience in healthcare 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, and cost domains. Additionally, Mahil works with federal, state, and private sectors initiatives. Recent federal government work includes the Transforming Clinical Practice Initiative, Medicaid Innovation Accelerator Program, and Pioneer ACO Evaluation. Throughout this work, Mahil 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 BASc in engineering and an MBA from York University, Toronto.

Matthew Titmuss, DPT

Assistant Vice President, Hospital for Special Surgery
New York, New York

Dr. Matthew Titmuss is the assistant vice president at the Center for the Advancement of Value in Musculoskeletal Care. A physical therapist by training, Dr. Titmuss received a doctorate in physical therapy from The CUNY Graduate Center. He joined the Hospital for Special Surgery in 2009 as a physical therapist and rose to senior director of the Acute Rehabilitation department. His focus on quality outcomes and understanding the clinical operations of the hospital have enabled him to take a leadership role in the management and development of several successful programs for measuring and improving value, including standardizing patient-reported outcomes and managing patients in the bundled payment programs.

Sophia Tripoli, MPH

Director of Health Care Innovation, Families USA
Washington, DC

Sophia Tripoli leads Families USA's work on value initiatives, focused on addressing the biggest drivers of healthcare costs and inadequate quality in the health system and on forwarding consumer-focused policy agendas to improve healthcare delivery and payment systems. She generates policy analysis and works to foster partnerships with national and state health policy experts, state legislators, and consumer health leaders and advocates. Ms. Tripoli also represents Families USA as co-chair of the Public Policy Work Group for the Health Care Transformation Task Force and represents Families USA on the National Advisory Committee for the National Center for Complex Health and Social Needs.

Danny van Leeuwen, RN, MPH

Health Hats
Arlington, VA

Danny van Leeuwen is a patient/caregiver activist. He learns with people, traveling together toward their best health and advising on what works for people on their health journey: informed decision-making, patient-centered research, communication at transitions of care, and technology supporting solutions created by and for people. Mr. Van Leeuwen, known as Health Hats, wears many hats in healthcare. He is a patient with multiple sclerosis, a care partner for several family members' end-of-life journeys, a nurse with 40 years of experience, an informaticist, a quality improvement leader, a mentor to leaders and advocates, and a weekly blogger and podcaster for more than seven years.