Mitchell Barnett

Pharm.D., MS, Touro University – College of Pharmacy

Mitchell Barnett, Pharm.D., MS, completed a Bachelor of Science degree in pharmacy at the University of Iowa in 1989. He later studied measurement and statistics at the University of Iowa (Master's of Science in 1999) before receiving his Doctor of Pharmacy in 2004. He subsequently completed a fellowship in Clinical Outcomes Research at the University of Iowa and Touro University (CA) before joining the pharmacy practice department at Touro University. He currently teaches the pharmacy calculations series of lectures in addition to lecturing on research methods and statistics to residents and fellows. He also serves as the Director of Research for the Pharmacy Practice Department and maintains a clinical practice at an outpatient clinic. He was recently promoted to the rank of Associate Professor and named Director of the Fellowship Program at Touro University.

Dr. Barnett's research focuses on the utilization of large administrative databases (e.g., VA, Medicaid, CMS, private sector) to study clinical outcomes and the impact of pharmacist-provided care through Medication Therapy Management (MTM) services and other interventions. A portion of his work has also been devoted to using pharmacy claims data to improve comorbidity adjustment. He has authored over 35 articles and is a frequent speaker at regional and national meetings on issues related to managed care and pharmacy.

Jonathan D. Blum

Deputy Administrator and Director, Center for Medicare, CMS

Jonathan Blum, Deputy Administrator and Director of the Center for Medicare at the Centers for Medicare and Medicaid Services, is responsible for overseeing the regulation and payment of Medicare fee-for-service providers, privately-administered Medicare health plans, and the Medicare prescription drug program. The benefits pay for healthcare for approximately 45 million elderly and disabled Americans, with an annual budget in the hundreds of billions of dollars.

Over the course of his career, Jonathan has become expert in the gamut of CMS programs. He served as an advisor to Senate Finance Committee members and its current chairman, Sen. Max Baucus, where he worked on prescription drug and Medicare Advantage policies during the development of the Medicare Modernization Act. He focused on Medicare as a program analyst at the White House Office of Management and Budget. Prior to joining CMS, Jonathan was a Vice President at Avalere Health, overseeing its Medicaid and Long-Term Care Practice.

Most recently, Jonathan served as a health policy advisor to the Obama-Biden Transition Team. He holds a Master's degree from the Kennedy School of Government and a BA from the University of Pennsylvania.

Steve Calfo

Actuary, FSA, Medicare Plan Payment Group, CMS

Steve Calfo is an Actuary in the Division for Risk Adjustment and Payment Policy. He has over twenty years of experience with Medicare policies. He provides technical analysis and support related to the development, implementation, and evaluation of risk adjustment models used in payment for Medicare Advantage and the Medicare Prescription Drug Programs. Mr. Calfo has provided actuarial support relating to payment policy within

the Division for Risk Adjustment and Payment Policy for four years. Prior to his present work, he worked in the Office of the Actuary working on development of the Medicare Part D program. During his tenure he worked on many internal budgetary reports and published many seminal research papers. His work on the Last Year of Life evaluated the differences in cost changes per capita that illuminated the need to incorporate the factors surrounding the last year of life to improve the precision of the cost estimates. In May of 2000, Mr. Calfo became a Fellow of the Society of Actuaries and received his Bachelor of Science from Carnegie Mellon University in May of 1990.

Lesley H. Curtis

Ph.D., Duke Clinical Research Institute

Lesley H. Curtis, Ph.D., is Associate Professor in Medicine at the Duke University School of Medicine and works primarily in the Duke Clinical Research Institute. A health services researcher by training, Dr. Curtis oversees a portfolio of projects that use observational data to address questions related to clinical and comparative effectiveness, pharmacoepidemiology, healthcare delivery, and epidemiological trends. Clinical areas of interest include heart failure, atrial fibrillation, eye diseases of the elderly, and cancer. Dr. Curtis has considerable experience analyzing Medicare claims data, large clinical registries, and prescription drug data, and has led the linkage of large clinical registries with longitudinal Medicare claims data. In addition, Dr. Curtis has been responsible for the linkage of those data with longitudinal cohorts in the Cardiovascular Health Study, the Framingham Heart Study, the Jackson Heart Study, and the Multi-Ethnic Study of Atherosclerosis (MESA). Dr. Curtis serves as the Principal Investigator of the Duke DEcIDE (Developing Evidence to Inform Decisions about Effectiveness) Center and as co-Lead of the Data Core for the FDA's Mini-Sentinel Initiative.

Rebecca DeCastro

RPh., MHCA, Medicare Plan Payment Group, CMS

Rebecca DeCastro is a pharmacist with the Division of Risk Adjustment and Payment Policy within the Medicare Plan Payment Group at Centers for Medicare & Medicaid Services. She also holds a Master's of Science in Health Care Administration from the University of Maryland. She has worked in the Compliance, Risk Management, and Surveillance with the FDA and Formulary and Benefit Operations and Payment and Reconciliation with CMS. She had been an integral part of the implementation of the Coverage Gap Discount Program by leading the development of the applicable drug validation process and involvement with the process.

Matthew E. Dehner

Pharm.D., BCPS Vice President, Frontline Pharmacy Consulting, Inc.

Dr. Matthew Dehner is co-founder and Vice President of Frontline Pharmacy Consulting, Inc., specializing in clinical pharmacy services, MTM, and chronic disease state management as well as providing administrative support to managed care companies in areas of formulary and benefit design. Dr. Dehner also serves as a Clinical Pharmacist at Kern Medical Center, a county-owned academic healthcare facility, in Bakersfield, CA, affiliated with the UCLA School of Medicine. In that role, he serves as an internal medicine pharmacist rounding with physician teams in the morning and participating in ambulatory care clinics in the afternoon. Dr. Dehner is the primary

preceptor for Internal Medicine and Advanced Internal Medicine rotations as well as Ambulatory Care andManaged Care rotations for 5 pharmacy residents and 30 pharmacy interns. Dr. Dehner has been instrumental in the expansion of the role of clinical pharmacists in direct patient care activities with prescriptive authority in the areas of diabetes, hypertension, anticoagulation, and infectious disease and was part of the team that was recently awarded the Quality Leadership Award by the California Association of Public Hospitals and the Safety Net Institute for the Impact of Clinical Pharmacists Involvement in Direct Patient Care as Mid-Level Practitioners. Dr. Dehner and his colleague pioneered KMC's pharmacist led diabetes clinic, which has tripled in size upon contracting with a locally owned Medi-Cal managed care company, where clinical pharmacists serve as the sole diabetes specialists for over 125,000 Medi-Cal members in addition to the county's indigent population. Dr. Dehner joined Kern Medical Center in 2005 where he completed his general practice residency.

As co-founder and Vice President of FrontLine Pharmacy Consulting Inc., Dr. Dehner has been at the forefront of the creation and implementation of several innovative and successful programs that center around improving and expanding access to care by utilizing clinical pharmacists in direct patient care roles within the Medicare population. These services include the development of a medication review program whose pilot project saved over $600,000 in medication costs in just 305 members over a 12-month period of time, the inclusion of clinical pharmacists in a medical home with prescriptive authority, the inclusion of clinical pharmacists in transitions of care, and the development of pharmacist managed diabetes clinic.

Zubin J. Eapen

MD, Duke Clinical Research Institute

Zubin J. Eapen, MD, is the Chief Fellow of the Duke Cardiovascular Disease Fellowship and Duke Clinical Research Institute Fellowship. Dr. Eapen was a Morehead Scholar at UNC-Chapel Hill where he majored in Political Science. Before entering Duke University School of Medicine, he worked with the Corporate Strategy Group of the World Bank on healthcare policy. Dr. Eapen completed his residency in Internal Medicine at Duke University Medical Center and is now in the final year of a Cardiology Fellowship at Duke. He has published on healthcare policy issues including the financial incentives of bundled payments for heart failure disease management programs and the impact of composite scores on evaluating quality of care. He is currently investigating the use of Part D data with inpatient registries for studies of comparative effectiveness in patients with heart failure.

Sharon Frazee

Ph.D., MPH, Vice President, Research & Analysis for Express Scripts, Inc.

Dr. Sharon Frazee joined Express Scripts in 2010. She is responsible for the development and execution of Express Scripts research strategy to evaluate the impact of programs and services on health outcomes, utilization and cost. Dr. Frazee has earned a doctorate from North Carolina State University and a MPH from the University of North Carolina – Chapel Hill Gillings School of Global Public Health. Her areas of expertise include medical sociology, statistics, research methods, predictive modeling, and program evaluation. Prior to joining Express Scripts, Dr. Frazee led clinical outcomes research efforts for companies including CHD Meridian Healthcare, Take Care Health Systems, LabCorp, and Landacorp (now a SHPS company). Dr. Frazee was an instructor at North

Carolina State University and provided evaluation research for various state and local government agencies before joining the private sector. Dr. Frazee has an extensive background in healthcare and outcomes research and has authored numerous research articles, book chapters and white papers in healthcare as well as in various arenas of human behavior.

Ryan Gates

Pharm.D., President, Frontline Pharmacy Consulting, Inc.

Dr. Ryan Gates is co-founder and President of Frontline Pharmacy Consulting, Inc., specializing in clinical pharmacy services, MTM, and chronic disease state management as well as providing administrative support to managed care companies in areas of formulary and benefit design. Dr. Gates also serves as Senior Clinical Pharmacist and Residency Program Director at Kern Medical Center, a county-owned academic healthcare facility, in Bakersfield, CA, affiliated with the UCLA School of Medicine. In that role, he manages the healthcare facility's clinical pharmacy department, which includes 6 clinical pharmacists, 5 pharmacy residents and 30 pharmacy interns and serves as the primary preceptor for Ambulatory Care and Administration. Frontline and Kern Medical Center clinical pharmacists participate in direct patient care with prescriptive authority in the areas of diabetes, hypertension, anticoagulation, oncology and infectious disease and were recently awarded a Quality Leadership Award by the California Association of Public Hospitals and the Safety Net Institute for the Impact of Clinical Pharmacists Involvement in Direct Patient Care as Mid-Level Practitioners. Dr. Gates joined Kern Medical Center in 2005 after 2 years in San Diego, where he completed his primary care residency at the Veterans Affairs Hospital studying under Dr. Steven Edelman, founder of TCOYD, and also working for Kaiser Permanente.

Dr. Gates' passion has always been to improve and expand access to care for patients, with a particular interest in the area of diabetes. He served on the Diabetes Coalition of California's Guidelines Committee as a member and chair. He pioneered KMC's pharmacist-led diabetes clinic, which has tripled in size upon contracting with a locally owned Medi-Cal managed care company, where clinical pharmacists serve as the sole diabetes specialists for over 125,000 Medi-Cal members in addition to the county's indigent population. As co-founder and President of FrontLine Pharmacy Consulting Inc., Dr. Gates has been instrumental in the creation and implementation of several innovative and successful programs that center around improving and expanding access to care by utilizing clinical pharmacists in direct patient care roles within the Medicare population. These services include the development of a medication review program whose pilot project saved over $600,000 in medication costs in just 305 members over a 12-month period of time, the inclusion of clinical pharmacists in a medical home with prescriptive authority, the inclusion of clinical pharmacists in transitions of care, and the development of pharmacist managed diabetes clinic.

Dr. Gates received his Doctor of Pharmacy degree from University of the Pacific School of Pharmacy in 2004 and received several awards including the California Pharmacists Association's New Practitioner of the Year Award in 2007 and University of the Pacific's Preceptor of the Year Award in 2010. Dr. Gates enjoys guest lecturing and has provided continuing education lectures in various venues including City of Hope's Rational Therapeutics Seminar in General Medicine, California Diabetes Program's Annual Summit, and American Society of Health-Systems Pharmacists Residency Preceptors Conference.

Confidence Gbarayor

Ph.D., MPH, Medicare Drug Benefit and C&D Data Group, CMS

Confidence Gbarayor, Ph.D., received her doctorate degree in Pharmaceutical Health Services Research from the University of Maryland, School of Pharmacy, in 2011. Dr. Gbarayor joined the Centers for Medicare & Medicaid Services (CMS) in 2010 as a health insurance specialist. She is responsible for the data analysis related to the Coverage Gap Discount Program within the Division of Pharmaceutical Manufacturer Management. Dr. Gbarayor has previously worked with the U.S. Food and Drug Administration as an epidemiologist and was a commissioned officer in the U.S. Public Health Service.

James Goodwin

MD, Professor of Medicine, University of Texas Medical Branch, Galveston

James Goodwin, MD, is the George and Cynthia Mitchell Distinguished Chair in Geriatric Medicine at the University of Texas Medical Branch in Galveston. He has a substantial body of research that includes epidemiologic studies of Medicare, SEER, and other large population-based data sets to study delivery of healthcare and outcomes in older patients with cancer. Dr. Goodwin has been the primary mentor for nine faculty members who have received K awards from the NIA or the NCI since 2000, including mentees who have conducted Medicare and SEER analyses. He has been continuously NIH-funded to study patterns and outcomes of medical care of the elderly for more than 25 years. Starting in the 1980's, he and his colleagues have used large administrative databases such as the SEER Tumor Registry, Medicare, and Medicare data linked to SEER in order to describe patterns in the diagnosis and treatment of cancer, and disparities in care associated with older age, minority ethnicity, rural residence and availability of appropriate providers. More recently he has used Medicare data to describe the trajectory of care of patients with chronic conditions to dissect the roles of specific physicians in treatment received. Much of Dr. Goodwin's work has been in designing and testing algorithms to identify specific processes and outcomes of care in Medicare data, such as receipt of specific tests or treatments, toxicities of treatment, and types of providers participating in patient care. His 300+ publications have been cited more than 14,000 times, with 75 publications cited 50+ times.

Jack Hoadley

Ph.D., Georgetown University, Health Policy Institute

Dr. Jack Hoadley is a health policy analyst and researcher with over 25 years of experience in this field. He joined Georgetown University's Health Policy Institute as a Research Professor in January 2002, where he is conducting research projects on health financing topics, including Medicare and Medicaid, with a particular focus on prescription drug issues. Recent projects have included studies of the use of formularies by Medicare drug plans, the impact of the Medicare drug benefit's coverage gap, options for simplifying and standardizing Medicare's drug benefit and its managed-care program, and studies of recent or proposed changes to Medicaid programs in Connecticut and Florida. Dr. Hoadley is currently working on an analysis of Part D claims data to assess what factors influence decisions to use generic drugs. He is trained as a Ph.D. in political science and has worked in both academic and government settings. Prior to arriving at Georgetown, he held positions at the Department of Health and Human Services in the Office of the Assistant Secretary for Planning and Evaluation (ASPE), the

Physician Payment Review Commission (PPRC) and its successor, the Medicare Payment Advisory Commission (MedPAC), and the National Health Policy Forum.

Holly M. Holmes

MD, University of Texas, MD Anderson Cancer Center

Holly M. Holmes, MD, is a geriatrician, prior pharmacist, and Assistant Professor in the Department of General Internal Medicine at the University of Texas MD Anderson Cancer Center. She is the recipient of a K23 Mentored Patient-Oriented Career Development Award from the National Institute on Aging to study medication adherence patterns and the role of the patient, provider, and continuity of care in medication adherence. Her research has focused on medication-related problems and suboptimal prescribing in the elderly, including studies of chronic medication use in patients with advanced dementia, suboptimal anticoagulant use in hospice patients, and the use of statins at the end of life. She has used Medicare Part D linked data to characterize predictors of medication adherence for older persons with hypertension.

Benjamin Howell

Ph.D., Senior Analyst, Center for Medicare & Medicaid Innovation, CMS

Benjamin L. Howell, Ph.D., is a Senior Analyst in the Center for Medicare and Medicaid Innovation at CMS. He is responsible for CMS' ongoing evaluations of the Part D program as well as several studies assessing the impact of community-based wellness and prevention on Medicare cost and utilization outcomes.

Brian Isetts

Ph.D., B.C.P.S., Professor, University of Minnesota College of Pharmacy, and Center for Medicare & Medicaid Innovation, CMS

Brian J. Isetts is a Professor at the University of Minnesota College of Pharmacy. His field of expertise is in the scholarship of caring, specifically studying the outcomes of comprehensive medication management provided within team-based health homes and accountable care organizations. Dr. Isetts is a researcher, educator and practitioner who has been a Board Certified Pharmacotherapy Specialist since 1995. Dr. Isetts worked with the American Medical Association's CPT Editorial Panel to establish reporting and billing codes for Medication Therapy Management services, measured the quality and clinical credibility of therapeutic decisions made by pharmacists providing medication management services, studied the return on investment from medication management, and evaluated outcomes of the Minnesota Medicaid - Medication Therapy Management Care Law. He received his Bachelor of Science in Pharmacy from the University of Wisconsin and his doctorate from the University of Minnesota College of Pharmacy. Dr. Isetts is currently on assignment as a health policy fellow at the Centers for Medicare and Medicaid Services, serving five months with the Medicare Drug Benefit and C&D Data Group and then the CMS Innovation Center in the Partnership for Patients Campaign.

Erwin Jeong

Pharm.D., Kaiser Permanente, California

Erwin Jeong received his Doctor of Pharmacy degree from the University of Pacific School of Pharmacy in 1987. He completed a Pharmacy Practice Residency in Ambulatory Care from the University of Southern California School of Pharmacy in 1988. Dr. Jeong was employed by the University of Southern California as an Assistant Professor in Clinical Pharmacy and worked as an ambulatory care pharmacist at the USC/Norris Cancer Center for 10 years. He is a member of the American and California Society of Health-System Pharmacists. He has received Fellow status from the California Society of Health-System Pharmacists. Dr. Jeong is currently employed by Kaiser Permanente Southern California and has worked in the past as an ambulatory care pharmacist and drug education coordinator. His current position is the Pharmacy Clinical Operations Manager for the Medicare Medication Therapy Management Program for Southern California.

Stephen J. Kogut

Ph.D., University of Rhode Island College of Pharmacy/Healthcentric Advisors

Stephen Kogut, Ph.D., is Associate Professor of Pharmacy Practice at the University of Rhode Island College of Pharmacy specializing in the area of pharmacoepidemiology and pharmacoeconomics. He works with various national and local stakeholders to improve medication use among populations. These activities include collaboratives with the Rhode Island Medicaid Pharmacy Program and with Healthcentric Advisors, the Medicare-contracted Quality Improvement Organization for Rhode Island. Prior to joining the faculty at the College of Pharmacy, Dr. Kogut gained experience in managed care pharmacy with the Harvard Pilgrim Health Plan of New England. He served as project manager for the Study of Clinically Relevant Indicators for Pharmacologic Therapy, an initiative funded by the Centers for Medicare & Medicaid Services to develop and test performance indicators for improving medication management.

Dr. Kogut earned his Bachelor of Science degree in Pharmacy from the University of Rhode Island in 1991, and a Master's of Business Administration from Bryant University in 1998. In 2001, he earned his doctoral degree in Pharmacoepidemiology and Pharmacoeconomics from URI. Dr. Kogut is a member of the Rhode Island Medicaid Drug Utilization Review Board, is a past member of the Rhode Island Board of Pharmacy, and has served as an expert panelist for Medicare in its efforts to define quality under Part D, and for the National Quality Forum's National Voluntary Consensus Standards for Therapeutic Drug Management Quality. His current research interests include the application of pharmacoeconomic research in managed care environments and the use of health information technologies to support medication management.

Thomas Kornfield

Health Insurance Specialist, Medicare Plan Payment Group, CMS

Thomas Kornfield is a Health Insurance Specialist in the Division for Risk Adjustment and Payment Policy. He has over ten years of experience in Medicare payment policy. He is one of the lead analysts responsible for development and analysis of the Part C and D risk adjustment model. He also has modeled the Medicare Advantage payment impacts due to the Affordable Care Act. He has worked at Coventry Healthcare, where he

was a Manager and then Director in the Corporate Compliance Department. Mr. Kornfield also was a detailee for the Senate Finance Committee, where he drafted legislative changes with respect to MA payment, access standards, and special needs plans. While at Abt Associates, he conducted pharmacoeconomic research. He has also worked at Mathematica Policy Research and the Medicare Payment Advisory Commission. He has a Master's in Public Policy from the University of Michigan.

Jesse Levy

Senior Analyst, Center for Medicare & Medicaid Innovation, CMS

Jesse Levy, Ph.D., is a Senior Economist at CMS. He has been involved in Medicare payment systems since 1987. He was a prominent member of the CMS team that performed the statistical analyses underlying the Part D payment system.

Michael Looney

Senior Director, Medicare/Medicaid Product Management, Express Scripts, Inc.

In his product role, Mr. Looney works with Express Scripts Managed Care clients focused on government programs. Prior to Express Scripts, Mr. Looney led several operation and new health plan implementation units for the managed Medicaid company, Centene. Mr. Looney was with Ernst & Young and Accenture's healthcare consulting practice for 12 years, where his clients included major managed care organizations, Medicare Advantage health plans, and pharmacy benefit managers. Prior to joining Ernst & Young, Mr. Looney managed Medicare Part B claims processing for Missouri while with General American Life Insurance, Co. in St. Louis. Today, he is a valued member of the Express Scripts product team.

Mr. Looney has an undergraduate degree in Communications from Bradley University in Peoria, Illinois, and a Master's of Business Administration from St. Louis University in St. Louis, Missouri.

Sean McElligott

Ph.D. (Candidate), School of Medicine, University of Pennsylvania

Mr. McElligott is a doctoral candidate in the Healthcare Management and Economics Department, Wharton School, and a Sr. Economic Analyst and Bio-statistician in the Division of General Internal Medicine and the Leonard Davis Institute for Health Economics at the University of Pennsylvania. His research program includes economic, comparative- and cost-effectiveness analyses alongside randomized clinical trials for a variety of medical interventions including genetic testing, asthma medication adherence, and caregiver CPR training programs. Mr. McElligot also studies issues related to the impact of financial incentives on medical resource use and patient adherence to recommended regimes.

Brand Newland

Pharm.D., MBA, Vice President, Outcomes Pharmaceutical Healthcare

Brand A. Newland, Pharm.D., MBA, is a Vice President with Outcomes Pharmaceutical Healthcare. In that position, Dr. Newland oversees growth of Outcomes' national MTM network as well as quality improvement activities for existing network providers. With Outcomes, he has been involved with the successful implementation of MTM programs for Medicare PDPs, Medicare MA-PDs, self-insured employer groups, and pharmaceutical manufacturers. Dr. Newland developed and launched the Targeted Intervention Program, the data-driven, local pharmacist delivered, "push" component of Outcomes' MTM offering. In 2006, he led Outcomes' effort to become fully compliant with the American Pharmacists Association/National Association of Chain Drug Stores Foundation Core Elements of an MTM Service guidance document through the incorporation of an MTM Profile tool within the Outcomes web-based system. In addition, Dr. Newland played a primary role in the recent completion of "Outcomes 8.0," the development and launch of a next-generation MTM documentation platform and pharmacist training program.

Dr. Newland has presented at a number of regional and national meetings about Medication Therapy Management and related topics. Newland is involved in the National Council for Prescription Drug Programs' MTM Communication task-group, serving as chair of the Payer Use Case sub-task group. He is a member of various local and national professional organizations. Newland received a Doctor of Pharmacy degree from the University of Iowa and a Master's in Business Administration from the University of Chicago Booth School of Business.

Vikki Oates

Vikki Oates, M.A.S., Medicare Drug Benefit and C&D Data Group, CMS

Vikki Oates is Director of the Division of Clinical and Operational Performance in the Medicare Drug Benefit and C & D Data Group at the Centers for Medicare and Medicaid Services (CMS). Ms. Oates' has been with CMS for seven years and her division conducts first line monitoring and oversight of plans offering the Prescription Drug Benefit. Her division is responsible for the Part D Plan Ratings (that includes data on quality and performance measures) that are displayed on the Medicare Plan Finder (MPF) and the CMS website, Medication Therapy Management programs within Part D, Patient Safety initiatives, Part D Reporting Requirements, Plan Finder QA, the Complaints Tracking Module, and various ad hoc Part D program analyses for internal and external stakeholders.

Her career has included positions in industry, state agencies, and academia. Her position prior to joining CMS was as Director of Medical Economics for a large national PBM. Her work focused on outcomes reporting related to disease management programs. Other work included business operations at the University of Maryland School of Medicine and research in case-mix adjustment and severity of illness at The Johns Hopkins School of Hygiene and Public Health.

Ms. Oates has been involved in the healthcare arena for her entire career and specializes in data analysis and outcomes measurement and reporting. She received her Bachelor's degree from the University of Richmond and her Master's degree from The Johns Hopkins University School of Continuing Studies.

John O'Brien

Pharm.D., M.P.H., Director of Field Operations, Center for Medicare and Medicaid Innovation, CMS

John Michael O'Brien is Director of Field Operations at the CMS Innovation Center, and is responsible for engaging partners to achieve the bold aims of the Partnership for Patients and the Million Hearts initiatives. He has a Doctor of Pharmacy degree from Nova Southeastern University, a Master's of Public Health degree from the Johns Hopkins Bloomberg School of Public Health, and studied pharmacy and public policy at the University of Florida. He was most recently a professor of clinical and administrative sciences at the College of Notre Dame School of Pharmacy and a health policy fellow in the US Senate. Dr. O'Brien has held a variety of leadership positions in pharmacy and the pharmaceutical industry and completed the ASHP Executive Residency, the American Medical Student Association Health Policy Fellowship, and the ASCP Cano Legislative Internship. He has written a number of publications related to health policy and safe medication use, and his work has been featured in BusinessWeek, Kaiser Health News, and Good Morning America Health.

Lynn Pezzullo

RPh., CPEHR, Senior Program Administrator, Healthcentric Advisors

Lynn M. Pezzullo, RPh., CPEHR, is Senior Program Administrator for Healthcentric Advisors, the Medicare-contracted Quality Improvement Organization for Rhode Island. Ms. Pezzullo's background in the pharmacy industry has provided her with the management and clinical experience needed to manage projects related to pharmacy, as well as other healthcare settings. In her current role at Healthcentric Advisors, Ms. Pezzullo has had the opportunity to expand her experience into the long-term care and physician office settings. The various positions she has held throughout her career have enabled her to develop skills in the areas of project management, people management, training and development, change management, quality improvement and measure development.

Ms. Pezzullo received her Bachelor of Science degree in Pharmacy from the University of Rhode Island. Ms. Pezzullo is an active member of professional organizations including the American Pharmacists Association (APhA), American Society of Health-System Pharmacists (ASHP), Rhode Island Pharmacists Association (RIPA), and Rhode Island Society of Health-System Pharmacists (RISHP). She is a member of the Pharmacy Quality Alliance (PQA) Quality Measure Expert Panel, and previously was a member of the Pharmacy Technician Certification Board (PTCB) Stakeholder Policy Council. Prior to joining Healthcentric Advisors, Ms. Pezzullo was employed at CVS/pharmacy for 14 years. During that time, she held various positions including Manager of Organizational Development & Training – Pharmacy, Pharmacy Manager, and Staff Pharmacist.

Monica M. Reed

Pharm.D., LCDR, USPHS, Medicare Drug Benefit and C&D Data Group, CMS

Lieutenant Commander (LCDR) Monica Reed is a pharmacist in the Medicare Drug Benefit and C&D Data Group at the Centers for Medicare & Medicaid Services (CMS) in the Division of Formulary and Benefit Operations. She completed her Bachelor of Science degree in Interdisciplinary Biology and Psychology at Loyola University in Maryland. She then went on to complete a Doctor of Pharmacy degree at the University of the Sciences in Philadelphia. Prior to embarking on her federal career at CMS, she completed a Managed Care Residency with a Pharmacy Benefit Manager (PBM) that maintained a portfolio of Medicaid and Medicare lines of business. LCDR Reed joined CMS in 2009 and subsequently joined the United States Public Health Service in 2010.

Susan Steele

Pharm.D., GEMCare Health Plan

Dr. Susan Steele is the Director of Pharmacy Services for GemCare Health Plan, a Managed Care Organization offering Commercial HMO, Medicare Advantage and Part D products in Central California. She received her Doctor of Pharmacy from the University of Illinois at Chicago College of Pharmacy in 2010 and went on to a General Practice Clinical Residency at Kern Medical Center, a county-owned academic healthcare facility, in Bakersfield, CA, affiliated with the UCLA School of Medicine. Dr. Steele is also the co-founder and Managing Partner of JS Tech Designs, an IT consulting and Development Solutions company specializing in Software Development, Business Management Consulting and Project Management and a founding member and Managing Director of Sprocket Websites, a web-based solutions company. Dr. Steele's particular interest is in the area of Geriatric Pharmacy and the development of solutions centered on improving rational medication usage and achieving optimal clinical outcomes in this population of patients.

Tami Swenson

MA, Research Fellow, University of Minnesota

Tami Swenson is a research Fellow in the Division of Health Policy and Management in the School of Public Health at the University of Minnesota. She has extensive experience with administrative and Census data projects as an investigator and statistical programmer. Ms. Swenson is currently working on funded projects examining regional variation in the Part D program for selected clinical cohorts, alternative measures of Medicare physician resource usage, and the Medicare physician quality reporting system. Her experience with Medicare claims data and the Medicare Current Beneficiary Survey (MCBS) began with her work as a technical adviser on the CMS contract for the Research Data Assistance Center helpdesk, where she helped researchers understand the utility and limitations of MCBS data for their projects and specialized in assisting Medicare Part D researchers. Prior to working at the University of Minnesota, she worked for the State Demographer of Texas on research projects using state administrative data on the TANF, food stamp, and Medicaid caseloads. Ms. Swenson has a Master's degree in political science from Texas A&M University and is completing her dissertation in health services research at the University of Minnesota. Her dissertation research focuses on the Medicare Part D Low Income Subsidy population and beneficiary underutilization of prescription drugs due to cost. She has published peer-reviewed research in Demography, Southern Rural Sociology, Ethnic and Racial Studies, The Sociological Quarterly, and Journal of

Politics. Her current research interests include: health demography, Medicare and Medicaid policy, healthcare quality and cost measurement, prescription drug benefit design and adherence, and evaluation of safety net programs.

Cynthia G. Tudor

Ph.D., Director, Medicare Drug Benefit and C&D Data Group, CMS

Cynthia Tudor is the Director of the Medicare Drug Benefit and C&D Data Group at the Centers for Medicare & Medicaid Services (CMS) in Baltimore, Maryland. The Medicare Drug Benefit and C&D Data Group (MDBG) is responsible for most activities related to the implementation and operation of the drug benefit (Part D) for CMS, including the new Coverage Gap Discount Program. Dr. Tudor's Part D operational responsibilities include applications, formulary development, contracting, day-to-day operations, and benefits policy. She is also responsible for developing and analyzing Medicare Advantage (Part C) and Part D data and development of performance and quality metrics.

Prior to serving in MDBG, Dr. Tudor led the implementation and operations of Risk Adjustment (RA) payments to Medicare Advantage organizations. Beginning at the Office of Research and Demonstrations at CMS, she led a team of researchers who were responsible for the development of multiple approaches for risk adjustment. Dr. Tudor then led the development of data collection from plans and the validated risk adjusted payments. She also determined the impacts of risk adjustment on health plans and led the development of the risk adjuster for the Medicare drug benefit.

Before joining CMS, Dr. Tudor served as a consultant to MedStat in such areas as Medicaid pharmaceutical costs, use of home health services by Medicare beneficiaries, and quality of care assessment in Medicaid nursing facilities and in CHAMPUS outpatient mental health services. She also served as the leader at the Association of American Medical Colleges in their surveys of prospective, matriculating, and graduating medical students.

Dr. Tudor received her doctorate from the Johns Hopkins University and received post-doctoral training at the University of Maryland Medical School, Department of Epidemiology and Preventive Medicine. She is a Georgia native.

Feng Zeng

Ph.D., MedImpact Healthcare Systems, Inc.

Dr. Zeng is a Health Economist in MedImpact's Health Outcomes Research Department. He is responsible for conducting analysis on benefit design, health outcomes, and quality of care, clinical intervention programs, cost-effectiveness analysis, and predictive modeling. He has broad experiences working with a variety of internal and external clients such as P&T committee, pharmaceutical companies and health plans.

Dr. Zeng has strong expertise in health outcomes research. He has worked on different therapeutic areas such as diabetes, hypertension, dyslipidemia, antipsychotics, osteoporosis and rheumatoid arthritis. He has published in top journals such as Medical Care, Value in Health, American Journal of Managed Care and Clinical Therapeutics

as leading authors. Dr. Zeng has been a speaker in top academic conferences such as Academy Health Annual Research Meeting, International Society of Pharmacoeconomics and Outcomes Research (ISPOR) conferences and Academy of Managed Care Pharmacy (AMCP). He is also a reviewer for various academic research conferences.

Before joining MedImpact, Dr. Zeng was a Senior Consultant at Thomson Medstat. In that role, he provided consulting services for Medi-Cal. Dr. Zeng received his Bachelor degree from Peking University in Beijing China, Master's degree from the University of Southern California, and Doctorate degree from the Pardee RAND Graduate School of Policy Analysis.