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**Medicare Payment System Reforms: What Do We Know?**

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**CRISTINA BOCUTTI** is an associate director of the Program on Medicare Policy at The Kaiser Family Foundation. She conducts a number of projects as part of the Kaiser Project on Medicare’s Future, a major Foundation initiative focused on producing timely analysis of Medicare reform proposals and on informing the debate about the future of the Medicare program. Prior to joining the Kaiser Family Foundation, Ms. Boccuti was the director of policy coordination for the Bureau of Health Professions at HRSA, an HHS agency focused on improving access to care for underserved populations. Prior to that, she was a principal analyst with the Medicare Payment Advisory Commission and held earlier positions at the Urban Institute and the Government Accountability Office. Prior to her career in health policy, Ms. Boccuti was a speech-language pathologist treating Medicare and Medicaid patients at Mt. Sinai Hospital in Chicago. Ms. Boccuti earned her M.P.P. from Georgetown University and her M.A. in speech-language pathology from George Washington University.

**PATRICK CONWAY** is the Center for Medicare and Medicaid Services’ acting principal deputy administrator and deputy administrator for innovation and quality, and also chief medical officer. Dr. Conway is responsible for overseeing the programs that serve the over 130 million Americans that access health care services through Medicare, Medicaid, the Children’s Health Insurance Program, and the Health Insurance Marketplace. He and the CMS team focus on health system transformation by improving quality, affordability, access to care, and health outcomes. Dr. Conway is also director of the Center for Medicare and Medicaid Innovation (CMMI) at CMS. The CMS Innovation Center is responsible for testing numerous new payment and service delivery models across the nation that reward quality and value. Models include accountable care organizations, bundled payments, primary care medical homes, state innovation models, and many more. In 2014, he was elected to the National Academy of Medicine Institute of Medicine (IOM). He is a practicing pediatric hospitalist and was selected as a Master of Hospital Medicine from the Society of Hospital Medicine. He has received the President’s Distinguished Senior Executive Rank and HHS Secretary’s Distinguished Service awards. These are the president’s and secretary’s highest distinction for executive excellence. He is a former White House fellow, Robert Wood Johnson Clinical Scholar, and leader of quality improvement, research, and clinical operations at Cincinnati Children’s Hospital. He completed pediatrics residency at Harvard Medical School’s Children’s Hospital Boston, graduated with high honors from Baylor College of Medicine, and graduated summa cum laude from Texas A&M University.

**JAMES GARNHAM** is director of contract and payment innovation for the University of Rochester Medical Center, playing a key role in the transformation of the contracting strategy of the hospitals, nursing facilities and medical faculty from fee-for-service to value-based. This includes leading the Medicare Bundled Payment (BPCI) initiative; modeling gain-sharing, ACO-like and risk-based contracts; and assisting in many aspects of the design and formation of Accountable Health Partners, a newly formed clinically-integrated IPA. He has also been involved in related grant and demonstration program opportunities, as well as internal projects to build capacity and demonstrate capability to manage the health of populations. Prior to joining URMC, Jim was vice president of contracting & regulatory affairs for the Greater Rochester Independent Practice Association (GRIPA), negotiating payer contracts in support of GRIPA’s Clinical Integration (CI) Program with
health plans (commercial, Medicare & Medicaid) and self-funded employers. Additional duties included serving as GRIPA’s privacy officer, performing actuarial duties in support of risk contracts and representing GRIPA at the local state and national levels on issues relating to health information technology and health care policy. Prior to GRIPA, he was the director of quality assessment for the Rochester Health Commission, a community-wide health care policy and advocacy collaborative. He provided analytical, policy and administrative support for projects focused on issues of quality, efficiency, public accountability of the health care system, and the early development of community-wide clinical data exchange/RHIO. He has a B.S. in economics from Rochester Institute of Technology, an M.S. in public policy analysis from the University of Rochester, and is ABD in a Ph.D. in health services research from the University of Rochester School of Medicine & Dentistry.

K. Eric De Jonge is director of geriatrics and co-founder of the Medical House Call Program at MedStar Washington Hospital Center. He is on teaching faculty at both Georgetown and Johns Hopkins School of Medicine. He grew up in Chicago, Illinois and attended Stanford University and Yale School of Medicine. He did residency in primary care medicine at Johns Hopkins Bayview and fellowships in health policy at Georgetown and geriatric medicine at Johns Hopkins. In 2003, he was named National House Call Physician of the Year by the American Academy of Home Care Medicine (AAHCM). His main interest is in creating skilled and affordable care teams that help frail elders live with dignity at home. In 2007, Dr. De Jonge helped develop and advocate for a Medicare reform act, called Independence at Home (IAH), to advance home-based primary care for elders and to reduce Medicare costs. IAH was part of the 2010 health reform bill and began implementation in the U.S. in 2012. Dr. De Jonge directs a successful IAH site at MedStar Washington Hospital Center. He served as national program chair for the 2014 AAHCM national meeting and is president-elect of the American Academy of Home Care Medicine.

Marilyn Moon is an institute fellow at the American Institutes for Research (AIR) and director of the Center on Aging. In this position, she is writing about Medicare reform, consumer engagement, and issues facing an aging society. From 2003 to 2013, she directed the health program at AIR. A nationally-known economist and expert on Medicare, aging, consumer health issues, and health care financing, Dr. Moon has also served as a senior fellow at the Urban Institute, a senior analyst at the Congressional Budget Office and an associate professor at the University of Wisconsin-Milwaukee. From 2008 through 2012 she chaired the Maryland Health Care Commission, and she was a public trustee for the Social Security and Medicare trust funds from 1995 to 2000. She has written extensively on health policy and other social insurance issues; she wrote a column on health reform for the Washington Post in the 1990s. She has served on a number of boards for non-profit organizations, including the Medicare Rights Center and the National Academy of Social Insurance. She is a member of the Institute of Medicine. Dr. Moon earned a Ph.D. in economics from the University of Wisconsin–Madison. In 2014, she received the Robert M. Ball award for outstanding achievements in social insurance from the National Academy of Social Insurance.