Speaker Biographies

Gary Claxton
Gary Claxton is a Senior Vice President, the Director of the Program on the Health Care Marketplace at the Kaiser Family Foundation. The Health Care Marketplace Project provides information, research, and analysis about trends in the health care market and about policy proposals that relate to health insurance reform and our changing health care system. The Program for the Study of Health Reform and Private Insurance examines changes in the private insurance market under the Affordable Care Act as federal and state policymakers implement provisions of the health reform law. Prior to joining KFF, Mr. Claxton worked as a senior researcher at the Institute for Health Care Research and Policy at Georgetown University, where his research focused on health insurance and health care financing. From March 1997 until January 2001, Mr. Claxton served as the Deputy Assistant Secretary for Health Policy at the U.S. Department of Health and Human Services, where he advised the Secretary on health policy issues including: improving access to health insurance, Medicare reform, administration of Medicaid, financing of prescription drugs, expanding patient rights, and health care privacy. Other previous positions include serving as a consultant for the Lewin Group, a special assistant to the Deputy Assistant Secretary for Health Policy in the Office of the Assistant Secretary for Planning and Evaluation, an insurance analyst for the National Association of Insurance Commissioners, and a health policy analyst for the American Association of Retired Persons.

Brian Webb
Brian Webb is Assistant Director of Life & Health Policy and Legislation for the National Association of Insurance Commissioners (NAIC). The NAIC represents insurance regulators in all 50 states, the District of Columbia, and five U.S. territories. Before joining the NAIC, Mr. Webb worked on Medicare and Medicaid policy for the BlueCross BlueShield Association and, prior to that, was the assistant vice president for legislation for the then-Federation of American Health Systems. Mr. Webb began working in Washington, DC on health care policy in 1988 as a legislative aide for Congressman Bill Thomas. After six years with Congressman Thomas, he worked five years in California Governor Pete Wilson’s Washington, DC, office as health and welfare aide and deputy director. Mr. Webb has a master’s degree in public administration from the George Washington University and a bachelor’s degree from Biola University in California.

Jessica Altman
Jessica Altman currently serves as Insurance Commissioner for the Commonwealth of Pennsylvania. Prior to this, she served as Chief of Staff for the Pennsylvania Insurance Department alongside former Insurance Commissioner Teresa Miller beginning in June 2015. In this position, Altman served as the top aide to former Insurance Commissioner Miller, oversaw policy initiatives for the agency, and coordinated policy with other state government agencies and external groups.

Altman represented the department in a number of statewide initiatives including coordinating aspects of Health Innovation in Pennsylvania, which leverages funds from the Centers for Medicare and Medicaid Services’ State Innovation Model Initiative and sitting as a board member for ABC-MAP, the Commonwealth’s initiative to implement a prescription drug monitoring program. She is also an active member of the NAIC, where she currently serves as Vice Chair of the Health Insurance and Managed Care (B) Committee, and the National Academy for State Health Policy, where she serves as Vice Chair of the Health Care Access & Finance Steering Committee.

Prior to joining the Pennsylvania Insurance Department, Altman worked at the U.S. Department of Health and Human Services’ Center for Consumer Information and Insurance Oversight, where she developed policy and facilitated implementation of the federal Affordable Care Act. In addition, she analyzed policy for the health division of the White House Office of Management and Budget while completing her master’s degree. Altman has a Master in Public Policy from the Harvard University John F. Kennedy School of Government and a Bachelor of Science in Policy Analysis and Management, with a concentration in Health Care Policy, from Cornell University.

Heather Howard
Heather Howard is a faculty affiliate of the Center for Health & Wellbeing and director of State Health and Value Strategies, a Robert Wood Johnson Foundation-funded program that provides technical assistance to support state efforts
to enhance the value of health care by improving population health and reforming the delivery of health care services. She served as New Jersey's Commissioner of Health and Senior Services from 2008-2010, overseeing a cabinet-level agency with a budget of $3.5 billion and staff of 1,700 responsible for public health services, regulation of health care institutions, senior services, and health care policy and research.

Previously, Howard served as Governor Jon Corzine's Chief Policy Counsel, directing his policy agenda. She also has significant federal experience, having worked as Senator Corzine's Chief of Staff, as Associate Director of the White House Domestic Policy Council and Senior Policy Advisor for First Lady Hillary Clinton, as an Honors Attorney in the U.S. Department of Justice's Antitrust Division Health Care Task Force, and for the U.S. House of Representatives. She received her J.D., cum laude, from the New York University School of Law, and her B.A. cum laude, from Duke University.

Howard teaches courses in implementation of the Affordable Care Act, state and local health policy, public health and politics, and the social determinants of health.

**Chris Howard**

Chris is a partner at Pierce Atwood, Northern New England’s largest law firm. Chris concentrates his practice in corporate transactions, including M&A, capital markets and finance, with a concentration in insurance related transactions and regulatory practice. Chris also serves as general counsel and advisor for a number of Maine’s largest businesses. He serves as general counsel, secretary and management support for MGARA, having assisted the MGARA board with all aspects of the company’s reinsurance program since its organization in 2012. Chris also serves as external General Counsel for Maine domestic insurers MEMIC and MMG Group, as well as representing large agencies and businesses throughout New England in establishing captives, reinsurance structures and other risk management programs and financing transactions. He serves on the firm’s Management Committee and as the former head of its Business Practice Group. Chris has a unique combination of technical legal skills and hands-on business and finance experience, which enables him to integrate these disciplines into strategies that match client objectives and provide clients with a competitive advantage. Chris has been recognized in Chambers USA for Corporate/M&A law and included since 2007 in The Best Lawyers in America® for Mergers & Acquisitions Law, and has been named “Lawyer of the Year” in Portland, Maine for Mergers & Acquisitions Law. Chris’s educational background includes Cornell University Law School, J.D., magna cum laude; Editor, Cornell International Law Journal (1982), and Bates College, B.A., magna cum laude (1979).

**Audrey Morse Gasteier**

Audrey Morse Gasteier serves as Chief of Policy and Strategy at the Massachusetts Health Connector. She leads policy development and strategy related to the Health Connector’s role as a state based health insurance marketplace, program and product design, policy research, government affairs, and outreach and communication efforts aimed at engagement with consumers and employers. Prior to joining the Health Connector in 2012, she served as Director of Health Systems Policy at the Massachusetts Division of Health Care Finance and Policy, where she managed implementation of key regulatory elements of state health reform and led health coverage research initiatives and policy analysis. She also served as a Policy Analyst at the Association of Community Human Service Agencies in Los Angeles, California. Audrey holds a MS in Health Policy and Management from the Harvard School of Public Health and a BA from Mount Holyoke College.

**Trish Riley**

Trish Riley is executive director of the National Academy for State Health Policy (NASHP) and president of its corporate board. She helped build NASHP as CEO from 1988 to 2003.

Previously, she was a senior fellow in State Health Policy at George Washington University and at the Muskie School of Public Service, University of Southern Maine. From 2003 to 2011, she served as director of the Maine Governor’s Office of Health Policy and Finance, leading Maine’s effort to develop a comprehensive, coordinated state health system that included increasing access to affordable health insurance. She was the principal architect of Dirigo Health Reform and served as Maine’s liaison to the federal government and Congress, particularly during deliberations around national health reform. She chaired the Governor’s Steering Committee to develop a plan to implement the Affordable Care Act in Maine.

Riley has also held appointed positions under five Maine governors, directing the Office on Aging, Medicaid and state health agencies, and health planning and licensing programs.
Riley has published and presented widely about state health reform. She served as a member of the Kaiser Commission on Medicaid and the Uninsured, the Medicaid and CHIP Payment and Access Commission (MACPAC), the Health Services Committee of the Institute of Medicine, the National Academy for Social Insurance, and the board of directors of Maine’s co-op insurance plan. She was a member of the Institute of Medicine’s Subcommittee on Creating an External Environment for Quality. She also previously served as a member of the board of directors of the National Committee on Quality Assurance. Riley holds a BS and MS from the University of Maine.

**Mila Kofman**

Mila Kofman is the Executive Director of the DC Health Benefit Exchange Authority. Appointed to the position by a unanimous vote of the Board of Directors, Kofman is a nationally recognized expert on private health insurance markets and has worked with states and all stakeholders to implement health insurance reforms. Her approach is informed by her hands-on experience as the former Superintendent of Insurance in Maine implementing health insurance reforms, being a former federal regulator working with states to implement HIPAA reforms of the 1990s, studying state-based reform efforts and markets, and working with employer purchasing coalitions seeking to leverage purchasing power for sustainable financing of medical care.

She has appeared on NPR, CNN, CBS Evening News, ABC News and has been cited in BusinessWeek, Consumer Reports, the NY Times, the Wall Street Journal, the Washington Post, the LA Times, the Chicago Tribune, Forbes, US News & World Report, AM Best, AP, and other press. Her blogs have appeared in Huffington Post, Health Affairs, and The New Republic.

Ms. Kofman holds a J.D. from Georgetown University Law Center and a B.A. in Government and Politics from the University of Maryland (summa cum laude).

**Lina Choudhry Rashid**

Lina Rashid currently serves as the Senior Policy Advisor for the Deputy Director of the Center for Consumer Information and Insurance Oversight (CCIIO) where she assists with expanding Americans’ access to health coverage through the Affordable Care Act (ACA). In that role she leads efforts for the Section 1332 State Innovation Waiver Program as well as other policy and outreach issues. She has supported implementation of the ACA in a variety of roles across the federal government while working with advocates, tribes, stakeholders, and states. She was the Acting Director of the Division for Consumer Advocacy and Assister Support in the Consumer Support Group, a State Officer at CCIIO, and served as an External Outreach Specialist for the HHS Regional Director’s Office in Chicago for Region V. Before joining HHS, she served in Congress as a Legislative Assistant for Rep. Betty McCollum from Minnesota where she played an important role in the passage of the ACA, formation of the Quality Care Coalition, and served as an adviser for global health, labor, housing, and Appropriations, Oversight, and Budget Committee work. Lina also served as a Legislative Assistant for Rep. Joe Sestak from Pennsylvania where she focused on healthcare issues. Lina received a B.S. in Psychology from the University of Pittsburgh and a Master’s Degree in Health Management from Duquesne University.

**Michael Chernew**

Michael Chernew, PhD, is the Leonard D. Schaeffer Professor of Health Care Policy and the director of the Healthcare Markets and Regulation (HMR) Lab in the Department of Health Care Policy at Harvard Medical School. Dr. Chernew’s research examines several areas related to controlling health care spending growth while maintaining or improving quality of care. His work on consumer incentives focuses on Value-Based Insurance Design (VBID), which aligns patient cost sharing with clinical value. His work on payment reform involves the evaluation of population-based and episode-based payment models. Other areas of research examine Medicare Advantage, prescribing patterns and medication adherence, the causes and consequences of rising health care spending, and geographic variation in spending, spending growth and quality.

Dr. Chernew earned his undergraduate degree from the University of Pennsylvania and his PhD in economics from Stanford University, where his training focused on areas of applied microeconomics and econometrics. In 1998, he was awarded the John D. Thompson Prize for Young Investigators by the Association of University Programs in Public Health. In 1999, he received the Alice S. Hersh Young Investigator Award from the Association of Health Services Research. Both of these awards recognize overall contribution to the field of health services research. His 2008 article in
Health Affairs, titled “Impact of Decreasing Copayments on Medication Adherence within Disease Management Program,” was awarded the Research Award from the National Institute for Health Care Management.

Dr. Chernew is a member of the Congressional Budget Office’s Panel of Health Advisors and of the Institute of Medicine’s Committee on National Statistics (CNSTAT). He is also a research associate at the National Bureau of Economic Research. In 2011, he served on the Institute of Medicine’s Committee on Determination of Essential Health Benefits and, in 2010, was elected to the Institute of Medicine of the National Academy of Sciences. Dr. Chernew is the former Vice Chair of the Medicare Payment Advisory Commission (MedPAC), which is an independent agency established to advise the U.S. Congress on issues affecting the Medicare program. In 2000, 2004, and 2010, he served on technical advisory panels for the Center for Medicare and Medicaid Services (CMS) that reviewed the assumptions used by Medicare actuaries to assess the financial status of Medicare trust funds. On these panels, Dr. Chernew focused on the methodology used to project trends in long-term health care spending growth. In April 2015, Massachusetts Governor Charlie Baker appointed Dr. Chernew to the Massachusetts Health Connector Board of Directors. Dr. Chernew is currently a co-editor of the American Journal of Managed Care and editor of the Journal of Health Economics. He is a former senior associate editor of Health Affairs and Medical Care Research and Review.

Peter Hayes
Peter Hayes currently the President & CEO of the Healthcare Purchaser Alliance of Maine and formerly a principal of Healthcare Solutions and Director of Associate Health and Wellness at Hannaford Supermarkets. He has been recognized as a thought leader in innovative, strategic benefit design for the past 25+ years. He has received numerous national awards in recognition of his commitment to working collaboratively with healthcare providers and vendors in delivering health benefits that are focused on value (high quality efficient care). He has been successful in this arena by focusing on innovative solutions for patient advocacy, chronic disease management, and health promotion programs.

Peter has also been involved in health care reform leadership roles on both the national and regional levels with organizations like Center for Health Innovation, Care Focused Purchasing, Leapfrog, co-founder of the Maine Health Management Coalition, and been appointed by two different Maine Governors to serve on Health Care Reform Commissions to recommend public policies to improve the access and affordability of health care for Maine citizens.

Karynlee Harrington
Karynlee Harrington is the Executive Director of the Maine Health Data Organization (MHDO) and the Maine Quality Forum (MQF); both State of Maine agencies responsible for health care data collection and improving health care quality respectively. The agencies are required to collaborate on promoting the transparency of health care costs and quality information in the State of Maine. Under Karynlee’s leadership, in 2014 the MHDO was awarded a $3 Million grant to build the State’s health care cost and quality transparency website, CompareMaine. CompareMaine has been recognized nationally as one of the most comprehensive and consumer friendly health care transparency websites in the country. Prior to her current role, Karynlee served as the Executive Director of the State’s Dirigo Health Agency, where she led the team in developing, implementing and securing financing for the state’s subsidized health insurance program designed for small business, self-employed and individuals. The program covered over 700 small business and self-employed individuals and provided access to lower cost health insurance to over 40,000 Mainers before it ended and transitioned its membership to the federal exchange. Karynlee started her career working in the insurance industry and when she left in 2003 she was the Vice President of Sales & Customer Support for CIGNA HealthCare of Maine and New Hampshire where she worked with many of the largest employers in the state of Maine. Ms. Harrington is currently serving as the Vice Chair of the Board of Directors for the National Association of Health Data Organizations and has over 20 years’ experience working in an executive role in health care. She earned her B.S. from the University of New Hampshire in Health Management and Policy.

MHDO is the state’s data center that is responsible for the collection, storage, management and distribution of healthcare data and information, including claims data, hospital inpatient and outpatient encounter data, hospital quality, financial and organizational data, and data from pharmaceutical manufacturers, wholesale distributors and pharmacy benefit managers. MQF is responsible for improving health care quality in the state.
Nancy-Ann DeParle

Nancy-Ann DeParle is a Partner and Co-Founder of Consonance Capital Partners. Prior to CCP, she was Assistant to the President and Deputy Chief of Staff for Policy in the Obama White House from 2011-2013, and served as Counselor to the President and Director of the White House Office of Health Reform from 2009-2011. Before joining the White House, DeParle was a Senior Advisor and Managing Director at JPMP from 2001 to 2009, where she was a member of the Healthcare Group and served on numerous boards, including CareMore, LHP Hospital Group, and MedQuest. In addition, she was a Commissioner of MedPAC, the advisory board to Congress on Medicare policy matters, for six years. From 1997 to 2000, she served as the Administrator of the Centers for Medicare and Medicaid Services (CMS). DeParle was also a Senior Fellow and Adjunct Professor of Health Systems Management at The Wharton School of the University of Pennsylvania and a trustee or director of several corporate and non-profit boards including Accredo, Cerner, DaVita, Guidant, Medco Health, Triad Hospitals, Boston Scientific and the Robert Wood Johnson Foundation.

DeParle currently serves on the board of directors of Enclara, Psychiatric Medical Care, HCA Healthcare (NYSE: HCA) and CVS Health (NYSE: CVS); she also served on the board of CCP’s portfolio company KEPRO prior to its sale. She received a B.A. from the University of Tennessee and a J.D. from Harvard Law School. She also received a B.A. and M.A. in Politics and Economics from Balliol College of Oxford University, where she was a Rhodes Scholar.

Andy Slavitt

From 2015 to 2017, Andy served as the Acting Administrator for the Centers for Medicare & Medicaid Services (CMS) under President Obama, overseeing Medicaid, Medicare, the Children’s Health Insurance Program, value-based payment reform and the Health Insurance Marketplace. Prior to that, Andy oversaw the successful turnaround of Healthcare.gov and served as a Group Executive Vice President of Optum, which he grew from its inception to $35 billion in revenues. Andy is currently Board Chair of United States of Care, a national non-profit health think-tank and advocacy organization he founded to achieve full, sustainable access to health care for all American families. Andy co-chairs The Future of Healthcare initiative at the Bipartisan Policy Center and chairs the Medicaid Transformation Project which aims to transform care for the most vulnerable. He is also the founder and General Partner of Town Hall Ventures, which invests in health care innovations in vulnerable communities. Andy was named to the Politico 50; was recognized by Modern Healthcare as one of the 10 most influential people in health care; and was named the Most Influential Healthcare Tweeter by Healthcare Dive. Andy is a graduate of the University of Pennsylvania, (BA and BS) and Harvard University, (MBA).