Another Dose of Competition: Accountable Care Organizations and Antitrust

Participant Biographies

Henry Allen
Antitrust Counsel, American Medical Association

Henry S. Allen, Jr. is a senior attorney at the American Medical Association (AMA), where he works on antitrust issues in health care and medical insurance markets. Prior to joining AMA about two years ago, Mr. Allen litigated health care antitrust cases between hospitals and physicians in a range of forums. One of his most high-profile cases was Jefferson Parish Hospital District No 2 v. Hyde, the landmark exclusive dealing and tying suit in the U.S. Supreme Court. Mr. Allen has been an adjunct professor of law at Northwestern University since 2003 and has taught Health Law at the Sloan Institute of Health Services Administration at Cornell University since 1996.

Saralisa C. Brau
Deputy Assistant Director, Health Care Division, Bureau of Competition, Federal Trade Commission

Saralisa C. Brau is a Deputy Assistant Director in the Health Care Division of the Federal Trade Commission’s Bureau of Competition in Washington, D.C. Ms. Brau leads investigations and litigation involving alleged violations of the antitrust laws by physicians and other health care professionals, pharmaceutical companies, hospitals, and providers. Ms. Brau joined the FTC in 2005. Prior to that, she was with the law firm of McDermott Will & Emery in New York, New York, where her practice focused on antitrust counseling, antitrust civil litigation, and trade regulation matters, often for health care industry clients. Ms. Brau regularly represented clients before the FTC and Department of Justice in antitrust conduct, merger, and criminal investigations. She is a graduate of the University of Virginia School of Law, and holds a Bachelor of Arts degree, cum laude, from Duke University.

Christi Braun
Member, Mintz, Levin, Cohn, Ferris, Glovsky and Popeo P.C.

Christi Braun practices in the Mintz Levin's Antitrust & Federal Regulation Section. She focuses on litigation of antitrust and commercial matters and counseling clients on issues involving antitrust compliance, mergers and acquisitions, and joint-ventures. Ms. Braun specializes in working with health care clients, including hospitals, doctors, provider organizations, pharmaceutical vendors, trade associations, and insurers. Her experience includes guiding clients through physician-hospital joint ventures, hospital acquisitions of physician practices, and physician practice mergers as well as helping
physicians and hospitals in developing and implementing clinical integration programs and accountable-care organizations. For the first four years of her career, Ms. Braun served as a staff attorney in the Health Care Services & Products Division of the Federal Trade Commission. Prior to joining Mintz Levin, Ms. Braun was a principal in a firm with a nationally known health care practice. A frequent speaker and writer on antitrust and health care topics, Ms. Braun was listed as a 2009 Outstanding Healthcare Antitrust Lawyer in Nightingale's Healthcare News. Ms. Braun is an active member of the American Bar Association (ABA) and the American Health Lawyers Association (AHLA). She is currently the co-chair of the Health Care and Pharmaceuticals Committee of the ABA Section of Antitrust Law and chairs the Antitrust Committee of the AHLA's Accountable Care Organization Task Force. Ms. Braun also serves as a vice chair for the ABA Health Law Section's Business & Transactions Interest Group and is part of AHLA's Antitrust and Health Information Technology practice groups. From September 2008 to August 2010, Ms. Braun was the ABA Young Lawyers Division Liaison to the Health Law Section and, in that capacity, served on the Health Law Section's governing council. She was a co-chair of the 2010 Antitrust in Healthcare Conference, co-sponsored by the ABA and the AHLA. Ms. Braun received her J.D., *cum laude*, from Boston University, where she was a Paul J. Liacos Distinguished Scholar. She received her M.P. H. from the Boston University School of Public Health, and a B.A., *summa cum laude*, from Creighton University.

**Dr. Lawrence Casalino**

*Livingston Farrand Associate Professor of Public Health and Chief of the Division of Outcomes and Effectiveness Research, Weil Cornell Medical College*

Lawrence Casalino is the Livingston Farrand Associate Professor of Public Health and Chief of the Division of Outcomes and Effectiveness Research in the Department of Public Health at Weill Cornell Medical College. Before joining the college, he worked for 20 years as a full-time family physician in private practice, obtained a Ph.D. in Health Services Research at the University of California, Berkeley, and served on the faculty at the University of Chicago. He is the recipient of an Investigator Award in Health Policy Research from the Robert Wood Johnson Foundation. In addition, he has served on numerous national committees, as Chair of the Academy Health Annual Research Meeting, and as the John Fry Fellow at the Nuffield Trust in London. Previously, Dr. Casalino has worked with the Federal Trade Commission on issues related to clinical integration. He has also published extensively on accountable care organizations and other topics related to physicians, hospitals, and health plans.
Susan DeSanti
Director, Office of Policy Planning, Federal Trade Commission

Susan DeSanti has been Director of the Office of Policy Planning at the Federal Trade Commission since May 2009. She previously held that position from 1995-2001, and was Deputy General Counsel for Policy Studies at the FTC from 2001-2006. In those positions, she has organized hearings and written reports about topics as diverse as health care competition, patent reform to better incorporate a competition perspective, and new competition issues in the twenty-first century. Her current projects include work to implement antitrust guidance for health delivery systems that wish to become Accountable Care Organizations under the Affordable Care Act. She was a primary author of the FTC/DOJ Competitor Collaboration Guidelines. She served as Senior Counsel to the Antitrust Modernization Commission and was a primary author of the AMC’s Report. In addition to her time in government, she was a partner at Sonnenschein, Nath & Rosenthal from 2007-2009, and previously was a partner at Hogan & Hartson. Ms. DeSanti has also held a variety of positions in the American Bar Association Antitrust Section and is a frequent speaker on antitrust issues. She received her J.D. cum laude from Boston University School of Law, where she was a member of the Law Review.

David Dranove
Professor of Management & Strategy, Northwestern University, Kellogg School of Management

David Dranove is the Walter McNerney Professor of Health Industry Management at Northwestern University’s Kellogg School of Management, where he is also Professor of Management and Strategy and Director of the Center for Health Industry Market Economics. Professor Dranove’s research focuses on problems in industrial organization and business strategy with an emphasis on the health care industry. He has published nearly 75 research articles and book chapters and written five books, including The Economic Evolution of American Healthcare and What’s Your Life Worth? His textbook, The Economics of Strategy, is used by leading business schools around the world. His latest book, Code Red, was published by Princeton University Press in 2008. Professor Dranove completed his B.A. in Biology in 1977 and M.B.A. in 1979 at Cornell University, and received his Ph.D. in Economics from Stanford University in 1983.

Dr. Robert Galvin
Chief Executive Officer, Equity Healthcare, Blackstone Group

Dr. Robert Galvin is the Chief Executive Officer of Equity Healthcare (EH) at the Blackstone Group, which oversees the management of health care for firms owned by private equity companies. The Group focuses on the use of purchasing power to create new ways to achieve higher value health care, through improved population health, clinical quality and delivery system reforms. Before joining Blackstone, Dr. Galvin was
Executive Director of Health Services and Chief Medical Officer for General Electric (GE) for fifteen years, where he was in charge of the design, financial and clinical performance of GE’s health programs. Dr. Galvin is a nationally recognized leader in the areas of market-based health policy and financing, quality measurement and payment reform; his work has been published in the New England Journal of Medicine and Health Affairs; and he was a co-founder of the Leapfrog Group, as well as two other innovative non-profits that have helped drive the quality agenda. Dr. Galvin is a member of the Institute of Medicine and sits on the IOM’s Board on Health Care Services. He is also on the Board of Directors of the National Quality Forum and a member of the National Advisory Council for the Agency for Healthcare Research and Quality (AHRQ). Dr. Galvin is Professor Adjunct of Medicine and Health Policy at Yale and a fellow of the American College of Physicians. He received his B.A. and M.D. from the University of Pennsylvania and holds an M.B.A. from Boston University.

Christopher Garmon  
Economist, Bureau of Economics, Federal Trade Commission

Christopher Garmon is an economist with the Federal Trade Commission’s Bureau of Economics. He has worked on numerous hospital and physician merger investigations and produced internal and published econometric analyses of hospital competition and pricing. He is also an instructor at the Johns Hopkins University, teaching the masters-level course “Economics of Industry and Public Policy.” He received his Ph.D. in economics from the University of Florida in 1997.

Elizabeth Gilbertson  
Chief of Strategy, UNITE HERE Health

Elizabeth B. Gilbertson is Chief of Strategy for UNITE HERE Health (formerly the Hotel Employees and Restaurant Employees International Union Welfare Fund), a national Taft-Hartley trust fund that covers 246,000 lives. She was a founder and Chair/Co-Chair (1999-2010) of the Health Services Coalition, a large labor management organization that contracts with hospitals and advocates for public policy to improve health care quality, affordability, and access in Nevada. Prior to assuming her current role, Ms. Gilbertson held a variety of leadership roles for UNITE HERE Health, including Southwestern Regional Director and President. She has experience in representing nurses in collective bargaining for the Connecticut Nurses Association and District 1199, New England, SEIU. Ms. Gilbertson has also has served on National Quality Forum task forces on ambulatory care measures, and is a Board member of the National Committee for Quality Assurance (NCQA). She holds a Bachelor’s Degree in History from Smith College and a Master’s Degree in Health Advocacy from Sarah Lawrence College. In addition, she attended the Yale University School of Public Health and has an Associate Degree in Nursing.
Daniel J. Gilman
Attorney Advisor, Office of Policy Planning, Federal Trade Commission

Daniel Gilman is an Attorney Advisor in the FTC’s Office of Policy Planning, where he works on competition issues in health care and technology markets. He helped draft the FTC Staff Report, Broadband Connectivity Competition Policy, and has published in journals such as the Georgetown Law Journal, Oregon Law Review, American Journal of Law & Medicine, Michigan Telecommunications & Technology Law Review, Food & Drug Law Journal, Behavioral & Brain Sciences, Synthese, Philosophy of Science, and the British Journal for the Philosophy of Science. Mr. Gilman came to the FTC from the University of Maryland, where he was for two years a visiting professor of law, teaching law and economics, health and science law, and torts. Before that, he was in private practice at Hogan & Hartson and an Olin Fellow and adjunct professor of law at Georgetown University, where he taught law and economics. Mr. Gilman earned a B.A. with distinction from Dartmouth College and a Ph.D. from the University of Chicago, and taught bioethics, neuroscience, and the philosophy of science for a decade before attending law school. He holds a J.D. with honors from Georgetown, where he was awarded the John M. Olin Prize in Law and Economics and served as senior articles editor of the Georgetown Law Journal.

Thomas Greaney
Director, Center for Health Law Studies & Chester A. Myers Professor of Law, St. Louis University School of Law

Professor Greaney is Chester A. Myers Professor of Law and Director of the Center for Health Law Studies at Saint Louis University School of Law. He is co-author of the nation’s leading health law casebook, HEALTH LAW: CASES, MATERIALS AND PROBLEMS (6th edition); and a treatise and hornbook on health law, all published by Thomson/West. Professor Greaney was named as Jay Healy Health Law Professor of the Year by the American Society of Law, Medicine and Ethics in 2007. He is author of over 50 articles and book chapters on health care competition and regulation. Before joining the Saint Louis University faculty, he served as Assistant Chief of the Department of Justice, Antitrust Division, where he supervised health care antitrust litigation. A frequent speaker in academia and the media, Professor Greaney has also offered expert testimony at hearings sponsored by the Federal Trade Commission on the issues of applying competition law and policy to health care, and submitted invited testimony to the U.S. Senate on competition policy and health care reform. He has also been a Fulbright Fellow studying European Community competition law in Brussels, Belgium and has been a visiting scholar at Université Paris Dauphine, Paris, France, Seton Hall University, and the University of Minnesota. Professor Greaney received his B.A magna cum laude from Wesleyan University and his J.D. from Harvard Law School.
Melinda Reid Hatton  
Senior VP & General Counsel, American Hospital Association

Melinda “Mindy” Hatton is the General Counsel to the American Hospital Association (AHA), where she provides leadership on all legal matters. In addition to supervising advocacy-related litigation, she directly oversees the AHA’s work on medical privacy, antitrust, fraud and abuse and other related regulatory matters. Prior to joining the AHA, Ms. Hatton was a partner at Hogan & Hartson, where her areas of practice included antitrust, consumer protection, privacy and public policy issues. She also served as the Antitrust Counsel for the Senate Judiciary Committee’s Subcommittee on Antitrust, Monopolies and Business Rights. Ms. Hatton earned a bachelor’s degree with high honors from North Carolina State University in Raleigh, N.C. and her master’s in public administration from the American University in Washington, D.C. In 1988, Ms. Hatton received her law degree from Catholic University of America, also in Washington, where she was the recipient of numerous honors and awards.

Stephan Katinas  
VP for Provider Network Contracting, Blue Cross/Blue Shield of Massachusetts

Stephan Katinas is Vice President of Network Contracting at Blue Cross Blue Shield of Massachusetts where he is responsible for leading BCBSMA’s provider contracting initiatives which include advancement of quality and affordability objectives in all hospital, physician, and ancillary contracts, including BCBSMA’s risk-based “Alternative Quality Contracts (AQC).” Mr. Katinas has led the expansion of BCBSMA’s AQC contracts which now govern over forty percent of the plan’s HMO population. Prior to joining BCBSMA, Stephan held leadership roles in a variety of functional areas including Network and Pharmacy Contracting, Business Development, Provider Service and Operations, at Care Management International, BCBSRI, and Harvard Pilgrim Health Care.

Robert Leibenluft  
Partner, Hogan Lovells

Robert (Bob) Leibenluft’s practice is devoted entirely to health and antitrust matters, including counseling and litigation regarding antitrust issues in the health, medical device, and pharmaceutical industries. Upon completing law school, Mr. Leibenluft worked as an attorney advisor in the Federal Trade Commission (FTC)’s Office of Policy Planning, concentrating on health and antitrust matters. In 1981, he joined Hogan & Hartson and became a partner in the firm in 1989. He practiced health law at Hogan & Hartson until January 1996, when he rejoined the FTC as Assistant Director for Health Care in the FTC’s Bureau of Competition. As head of the Health Care Division, Mr.
Leibenluft supervised a 25-30 person staff engaged in the review of mergers, acquisitions, and joint ventures involving hospitals, physicians, and other healthcare providers, as well as conduct in the healthcare and pharmaceutical industries. He rejoined Hogan & Hartson in September 1998. Mr. Leibenluft writes and lectures extensively on antitrust and health law topics. His articles on healthcare matters have appeared in Health Affairs, The New England Journal of Medicine, Vanderbilt Law Review, The American Journal of Psychiatry, Business and Health, Pharmaceutical Executive, Medical Device & Diagnostic Industry, and other books and journals. He received his B.A. magna cum laude from Yale University in 1973 and his J.D. from the University of California, Berkeley Boalt Hall School of Law in 1980.

Joseph Miller
General Counsel, America’s Health Insurance Plans (AHIP)

Joe Miller is the General Counsel to American Health Insurance Plans (AHIP), a trade association that represents Health Insurers. Prior to joining AHIP he served in the Antitrust Division of the Department of Justice (DOJ) from 1998 until 2010, including six years as the Assistant Chief of the Litigation I Section. There, he oversaw enforcement and competition advocacy in a wide variety of industries, including health care and insurance markets. Before joining the DOJ, Miller worked for Collier, Shannon, Rill & Scott and as a trial attorney for the Federal Trade Commission. He is a graduate of the George Mason University School of Law and holds an undergraduate economics degree from Emory University.

Craig Peters
U.S. Department of Justice Antitrust Division

Craig Peters received a Ph.D. in economics from Northwestern University, and his undergraduate degree from Harvard University. He has been a staff economist at the Antitrust Division of the U.S. Department of Justice since 2002. In that position, he has worked on numerous merger and non-merger investigations in a number of different industries. Recently, he worked on the Department’s investigation of the proposed acquisition of Physicians Health Plan of Mid-Michigan by Blue Cross Blue Shield of Michigan, and the complaint filed against the United Regional Health Care System in Wichita Falls, Texas.

Dr. Lee Sacks
Executive VP & Chief Medical Officer, Advocate Physician Partners & Advocate Health Care

As Executive Vice President, Chief Medical Officer of Advocate Health Care since 1997, Dr. Lee B. Sacks is responsible for Health Outcomes, Information Systems, Research and Medical Education, clinical laboratory services and the eICU® Core Program. He is also
the Chief Executive Officer of Advocate Physician Partners. APP is the umbrella organization over the eight Advocate PHOs and the medical groups that determines Advocate’s managed care strategy, negotiates the managed care contracts and enhances medical management. Dr. Sacks practiced Family Medicine in a three-person practice from 1980-1992, when it became affiliated with Lutheran General Medical Group. He has had management roles since 1990, serving as Medical Director, Vice President of Lutheran General Health Plan (PHO) and Vice President of Primary Care Development for Lutheran General Health System, prior to the merger that created Advocate in 1995. He serves on the Metro Chicago board of the American Heart Association, is a trustee of Institute of Medicine Chicago and is Board Chairman of the Institute for Clinical Quality and Value. Dr. Sacks was the recipient of the 2009 Institute of Medicine Chicago/CQPS Otho S. A. Sprague Memorial Institute Recognition Award in Patient Safety and the 2010 American Academy of Family Physicians Robert Graham physician executive of the year award. Dr. Sacks received a B.S. in Chemical Engineering from the University of Pennsylvania and a medical degree from the University of Illinois, Chicago, in 1977.

Toby Singer
Partner, Jones Day

Toby Singer is one of the nation's leading authorities on mergers and other antitrust matters in the health care industry, and her practice focuses on antitrust counseling and litigation for health care clients. She represents providers and payers on a wide variety of antitrust issues, from mergers and acquisitions and other transactions to less formal alliances among competitors as well as counseling on conduct issues. She has handled numerous federal and state government investigations and has defended clients in both government and private antitrust litigation. Significant representations include CaremarkRx's acquisition of AdvancePCS (FTC File No. 03-0239) and Sutter Health's merger with Summit Medical Center (130 F. Supp. 2d 1109 (N.D. Cal. 2000)), as well as defending class action lawsuits against Ascension Health (Cason-Merenda v. Detroit Medical Center (E.D. Mich.) and Fleischman v. Albany Medical Center (N.D.N.Y.)). Prior to joining Jones Day, Ms. Singer served as a deputy assistant director in the Bureau of Competition of the Federal Trade Commission. Ms. Singer is a past chair of the Antitrust Practice Group of the American Health Lawyers Association, a past vice chair of the Health Care Committee of the American Bar Association Section of Antitrust Law, and is on the advisory board of BNA's Health Law Reporter. She is a frequent speaker on antitrust subjects at American Bar Association and American Health Lawyers Association conferences and has testified at government hearings on competition in health care. She received her B.A. magna cum laude from Wesleyan University in 1974 and her J.D. from Georgetown University in 1977.
Lynn Shapiro Snyder
Senior Member, Epstein Becker Green

Lynn Shapiro Snyder is a Senior Member of Epstein Becker Green in the Health Care and Life Sciences and Litigation practices and is Strategic Counsel with EBG Advisors, Inc. Ms. Snyder has over thirty years of experience at Epstein Becker Green, advising clients about federal, state, and international health law issues, including Medicare, Medicaid, TRICARE, compliance, and managed care issues. Her clients include health care providers, payors, pharmaceutical/device manufacturers, and those companies and financial services firms that support the health care industry. She is a frequent speaker, has published extensively, and has been recognized in The Best Lawyers in America, Modern Healthcare, and other publications. Ms. Snyder serves on the Epstein Becker Green’s Board and Finance Committee, chairs the Third-Party Payment Practice Group and co-chairs the Health Care Fraud Practice Group and the Health And Employment Law (HEAL) Group. Previously, Ms. Snyder has served as Strategic Advisor on Medicare, Medicaid, and Private Payer Matters; lead defense counsel for several health care firms; lead health care deal counsel for private equity firms and strategic partners; and Outside General Counsel for over a decade to the American Managed Care and Review Association (now AHIP), a national trade association for HMOs, PPOs, and UROs. She is Founder and President of the Women Business Leaders of the U.S. Health Care Industry Foundation, of which Epstein Becker Green was a founding sponsor. Ms. Snyder represented several health trade associations during the enactment of the 1977 Medicare Anti-Fraud and Abuse Amendments and the 1978 HMO Amendments. She has served as a member of (1) the State of Florida Agency for Health Care Administration Health Care Fraud and Abuse Working Group (1993-1994) and (2) Study Panel on Reforming the Fee-for-Service Medicare Program, sponsored by the National Academy of Social Insurance (1996-1998). She represented the American Hospital Association in drafting the legislation for the Medicare Prospective Payment (“DRG”) System (1982). Prior to joining the firm in 1979, she earned her B.A. in Economics from Franklin & Marshall College in 1976 and her J.D. from the George Washington University National Law Center in 1979.

Joshua H. Soven
Chief of the Litigation I Section, Antitrust Division, U.S. Department of Justice

Joshua H. Soven is the Chief of the Litigation I Section of the Antitrust Division of the U.S. Department of Justice where he supervises the Antitrust Division’s investigations and enforcement actions that involve health insurance companies, hospitals, and physicians. Prior to assuming his current position, Mr. Soven was an attorney advisor to Federal Trade Commission Chairman, Deborah Platt Majoras. From 1998 to 2004, Mr. Soven was a trial attorney in the Antitrust Division’s Networks and Technology Section. Before entering government service, Mr. Soven practiced antitrust law at
Dickstein Shapiro LLP, in Washington, DC. Mr. Soven began his career as a law clerk for the Honorable Robert G. Doumar, U.S. District Judge for the Eastern District of Virginia. Mr. Soven earned a J.D. from the University of Virginia and a B.A. from the University of Pennsylvania.

Trudi Trysla
Associate General Counsel, Fairview Health Services

Trudi Noel Trysla is a peer-recognized health care expert with over eighteen years experience providing legal counsel to hospitals, physicians, management and policy committees and business areas. Ms. Trysla imparts legal advice on a wide range of regulatory compliance and enforcement issues, including anti-kickback and Stark, antitrust and clinical integration, corporate governance, privacy and security, False Claims Act, and general compliance and risk reduction strategies. She also advises on public policy issues affecting Fairview and its providers. Prior to joining Fairview in 2008, Ms. Trysla served as Legal Counsel for Mayo Foundation in Rochester, Minnesota, where she provided legal advice to various Mayo entities and served on numerous hospital and institutional committees. Her practice at Mayo included a wide array of regulatory compliance issues, clinical and bioethical issues, fraud and abuse, public policy, and state and federal regulatory investigations, as well as general and professional liability litigation. Ms. Trysla is a frequent lecturer on health care topics and earned her J.D. from the University of Minnesota and her B.A. from the University of Nebraska.

Patricia Wagner
Member of the Firm, Epstein Becker Green

Patricia M. Wagner is a Member of Epstein Becker Green in the Health Care and Life Sciences and Litigation practices, in the firm's Washington, DC, office. She has advised clients on a variety of matters related to federal and state antitrust issues, including HIPAA Privacy and HIPAA portability provisions, state licensure and regulatory requirements, and various other federal regulatory matters. She also has experience with representing clients in antitrust matters in front of the Federal Trade Commission and the United States Department of Justice. Ms. Wagner has given numerous lectures and presentations on antitrust and health care issues. Most recently, she was a lecturer in DC Bar Introduction to Health Law Series, Managed Care Contracting, from 2005-2009. Prior to practicing law, Ms. Wagner received her doctorate in microbiology (1990) from the University of Kansas. After she earned her degree, she worked as a research microbiologist at a number of research institutions around the country, including the Centers for Disease Control in Atlanta, Georgia. Ms. Wagner received her J.D., cum laude, with a Certificate from the Health Law Studies Program, from Saint Louis University School of Law in 2000.
Christine L. White  
Senior Staff Attorney, Northeast Regional Office, Federal Trade Commission

Christine White is a senior staff attorney in the Northeast Regional Office of the Federal Trade Commission, located in New York, New York where she focuses on antitrust enforcement, including merger and conduct enforcement in the healthcare industry. Ms. White joined the FTC in August 2010. Previously, Ms. White was a partner in the Health Law and Antitrust groups of Crowell & Moring LLP, Bingham McCutchen LLP, and McDermott Will & Emery LLP. She holds a J.D. and an M.P.H. from Boston University and a B.A. cum laude from Wellesley College. Ms. White has been active for many years in both the Antitrust Section of the American Bar Association, where she currently serves on the Publications Advisory Board, and the American Health Lawyers Association, where she currently is a Vice-Chair of the Antitrust Practice Group. Additionally, Ms. White frequently publishes and speaks on healthcare antitrust topics. She is listed among the nation’s top attorneys in a number of publications, including New York Super Lawyers.

Steven Wojcik  
Vice President, Public Policy, National Business Group on Health

Steve Wojcik, Vice President of Public Policy at the National Business Group on Health for over ten years, is responsible for developing and coordinating the Group's position and strategy on federal legislative and regulatory issues impacting health benefits for large employers, providing information and analysis on best practices and concerns of large employers to Capitol Hill and the Administration, and keeping members informed of policy developments in Washington. He has over 22 years of experience in health policy development, analysis and research, government relations, and public affairs. Mr. Wojcik represents the Business Group on the Medicare Model Guidelines Committee's Beneficiary Advisory Panel, the Ambulatory Care Quality Alliance (AQA), the joint AQA – Hospital Quality Alliance Efficiency of Care Workgroup, and the policy and steering committees of the Employers Coalition on Medicare, the National Coalition on Benefits, and other policy coalitions in Washington, D.C. In addition, he is the Business Group's voting member on the Purchaser Council of the National Quality Forum, a multi-stakeholder consensus body on health care quality measures. Prior to joining the Business Group, Mr. Wojcik was manager of Government Relations for PacifiCare Health Systems and a senior health policy analyst for WellPoint Health Networks Inc., two large national health plans based in California at the time. Previously, he was a consultant to the Center for Health Policy Studies in Maryland and a policy analyst at Project HOPE's, Center for Health Affairs where he conducted research, policy analysis, and program evaluation for various federal agencies, state governments, and private clients. He also served as a consultant to the Polish Ministry of Health between 1988 and 1992, funded in part by USAID, where he advised on health care financing reform and oversaw part of a successful multimillion dollar World Bank
loan application for the health sector. He holds an M.A. in public policy from the University of Chicago and a B.S. in foreign service from Georgetown University.