



Bios

February 24-25, 2015

William J. Baer was sworn in as the Assistant Attorney General for the U.S. Department of Justice, Antitrust Division on January 3, 2013, following confirmation by the U.S. Senate. Prior to his appointment as AAG, he was a partner and head of the Antitrust Practice Group at Arnold & Porter LLP in Washington, DC. At Arnold & Porter, Mr. Baer handled both criminal and civil antitrust investigations, including merger and acquisition reviews by antitrust enforcement agencies. Mr. Baer was also a partner at Arnold & Porter from 1983 until April 1995 and an associate from 1980 until 1983. From April 1995 until October 1999, he was the director of the Bureau of Competition at the Federal Trade Commission. As director, he oversaw significant enforcement successes, including blocking mergers in office supply and drug wholesale markets. His work also included successfully challenging exclusionary practices in toy, information technology, and brand name and generic drug markets. Mr. Baer previously worked at the FTC from 1975 until 1980. He received his JD from Stanford Law School in 1975, and served as an editor of the *Stanford*

Law Review. He received his BA from Lawrence University in 1972 where he graduated *cum laude* and Phi Beta Kappa.

Mark J. Botti is a partner and co-head of the Global Antitrust and Competition Practice at Squire Patton Boggs LLP in Washington, DC. He represents clients from all sectors of the health care industry, including health plans, hospitals, pharmacy benefits managers, physicians, consultants, and information technology providers. Prior to re-entering private practice, Mr. Botti was an attorney in the Antitrust Division of the U.S. Department of Justice. During his tenure at the Division, he worked as a Trial Attorney in the Healthcare Task Force and as the Chief of the Litigation I Section, where he had significant responsibility for matters arising in the health care industry. Among other duties at the Division, Mr. Botti had a leadership role in the hearings held by the Division and the Federal Trade Commission on health care during the years 2004-2005, as well as the drafting of the Agencies' joint report, *Improving Health Care: A Dose of Competition*. He

also worked extensively on the *1996 Revisions to the Agencies' Statements of Antitrust Enforcement Policy in Health Care*. Mr. Botti is currently the Chair of the American Bar Association's Unilateral Conduct Committee. He has served since 2007 as a nongovernmental adviser to the International Competition Network.

Lawton Robert Burns, PhD, MBA, is the James Joo-Jin Kim Professor in the Health Care Management Department at the Wharton School at the University of Pennsylvania. He is also director of the Wharton Center for Health Management & Economics, and co-director of the Roy & Diana Vagelos Program in Life Sciences and Management. He received his doctorate in Sociology and his MBA in Health Administration from the University of Chicago. Dr. Burns taught previously in the Graduate School of Business at the University of Chicago and the College of Business Administration at the University of Arizona.

Michael E. Chernew, PhD, is the Leonard D. Schaeffer Professor of Health Care Policy at Harvard Medical School. Dr. Chernew's research activities focus on several areas, most notably the causes and consequences of growth in health care expenditures, geographic variation in medical spending and use, and Value Based Insurance Design. Dr. Chernew is a member of the Congressional Budget Office's Panel of Health Advisors and of the Institute of Medicine Committee on National Statistics. Dr. Chernew is the former Vice Chair of the Medicare Payment Advisory Commission, which is an independent agency established to advise the U.S. Congress on issues affecting the Medicare program. In 2000, 2004 and 2011,

he served on technical advisory panels for the Centers for Medicare and Medicaid Services that reviewed the assumptions used by the Medicare actuaries to assess the financial status of the Medicare trust funds. Dr. Chernew is a Research Associate of the National Bureau of Economic Research. He co-edits the *American Journal of Managed Care* and is a Senior Associate Editor of *Health Services Research*. In 2010, Dr. Chernew was elected to the Institute of Medicine of the National Academy of Sciences and served on the Committee on the Determination of Essential Health Benefits. Dr. Chernew earned his undergraduate degree from the University of Pennsylvania and a doctorate in economics from Stanford University.

Ellen Connelly is an attorney in the Health Care Division of the Federal Trade Commission's Bureau of Competition. She leads and participates in antitrust conduct investigations involving physicians and pharmaceutical companies. She also has responsibility for providing guidance to the health care industry through the Health Care Division's advisory opinion process. Additionally, she has extensive experience providing antitrust counseling and training to international antitrust authorities, primarily in Latin America. Prior to joining the Commission in 2001, Ms. Connelly was an associate at Pillsbury Winthrop Shaw Pittman LLP in New York City. She received her JD from Harvard Law School and a BS, *summa cum laude*, from Georgetown University. She also holds an MA from The George Washington University's Elliott School of International Affairs.

Cynthia Cox is a senior policy analyst at the Kaiser Family Foundation's Study of Health Reform and Private Insurance, where she conducts economic and policy research on the Affordable Care Act (ACA) and its effects on private insurers and enrollees. She has been the lead researcher on numerous studies examining enrollment, pricing, and competition in the ACA's exchange markets. She also redesigned and oversaw development of the Foundation's Health Insurance Marketplace Calculator, an interactive tool that has been used by consumers, brokers, insurers, and employers to determine eligibility for financial assistance through the exchanges. Ms. Cox also manages the Peterson-Kaiser Health System Tracker, a partnership of the Peterson Center on Healthcare and the Kaiser Family Foundation, aimed at monitoring the cost and performance of the U.S. health system over time and in relation to other developed countries. Prior to joining the Kaiser Family Foundation, Ms. Cox held research and advocacy positions at Columbia University Medical Center and the American Cancer Society. She also serves on the Board of Directors of the Berkeley Free Clinic. Ms. Cox holds a BS from the University of California at Berkeley and an MPH from Columbia University.

Leemore Dafny, PhD, is a Professor of Strategy, the Herman Smith Research Professor in Hospital and Health Services, and Director of Health Enterprise Management at Northwestern University's Kellogg School of Management. Her research examines competitive interactions among payers and providers of health care services, and the intersection of industry

and public policy. Dafny's work has been published in journals such as the *American Economic Review* and the *New England Journal of Medicine*, and featured in *The New York Times*, *BusinessWeek*, *Bloomberg*, and *The Washington Post*. She has won several teaching awards as well as Kellogg's leading research prize, the Stanley Reiter Best Paper award. Dafny is a Research Associate of the National Bureau of Economic Research, a Faculty Fellow at Northwestern's Institute of Policy Research, and a Board member of the American Society of Health Economists and the Health Care Cost Institute. She currently serves on the Panel of Health Advisers for the Congressional Budget Office. In 2012-13, she took academic leave to assume the role of deputy director for health care and antitrust in the Bureau of Economics at the Federal Trade Commission in Washington, DC. Dafny graduated *summa cum laude* from Harvard College and earned a PhD in economics from the Massachusetts Institute of Technology.

Suzanne Delbanco, PhD, MPH, is the executive director of Catalyst for Payment Reform (CPR). CPR is an independent, non-profit corporation working on behalf of large health care purchasers to catalyze improvements to how we pay for health services and to promote better and higher value care in the U.S. In addition to her duties at CPR, Dr. Delbanco serves on the Coordinating Committee of the Measures Application Partnership for the U.S. Department of Health and Human Services, the Health Care Incentives Improvement Institute board, and participates in the Healthcare Executives Leadership Network. Previously, Dr. Delbanco was the founding CEO of The Leapfrog Group. She holds a PhD in Public

Policy from the Goldman School of Public Policy and an MPH from the School of Public Health at the University of California, Berkeley.

R. Adams Dudley, MD, MBA, is the director of the University of California San Francisco's Center for Healthcare Value. He has spent decades helping consumers, employers, providers, insurers, and government develop strategies for measuring and rewarding performance. He currently leads California's efforts to develop a multi-payer claims database and to establish price and utilization transparency. Previously, he founded the California Hospital Assessment and Reporting Taskforce (CHART), a multi-stakeholder non-profit organization that established a voluntary, universal, robust hospital performance reporting system. CHART was the first public reporting program in the nation to report Hospital Consumer Assessment of Healthcare Providers and Systems data, breast feeding rates, NSVT C-section rates, and NQF-endorsed ICU measures developed by Dr. Dudley's team. Dr. Dudley now has several projects using natural language processing and machine learning to extract information from electronic health records. In 2005, he received the Robert Wood Johnson Foundation Investigator Award in Health Policy; in 2010 he was elected to the American Society for Clinical Investigation; and in 2013 he received UCSF's Distinction in Mentoring Award.

Daniel T. Durham is the executive vice president for strategic initiatives for America's Health Insurance Plans (AHIP) where he leads strategic planning, expands new partnerships and alliances, and identifies opportunities

for collaborative research and innovative policy. Previously, Dan served as executive vice president for policy and regulatory affairs at AHIP and led health care reform implementation efforts and policy activities. Before joining AHIP, he was vice president for policy at the Pharmaceutical Research and Manufacturers of America where he played a leadership role during health care reform and implementation of the Medicare prescription drug program. Dan also served in high-level policy positions in the federal government at the U.S. Department of Health and Human Services, the Social Security Administration, and the Office of Management and Budget. Dan received his undergraduate degree in government and philosophy from the University of Notre Dame and a masters degree in public policy from Duke University.

Ezekiel J. Emanuel, MD, PhD, is the vice provost for Global Initiatives, the Diane v.S. Levy and Robert M. Levy University Professor, and chair of the Department of Medical Ethics and Health Policy at the University of Pennsylvania. He was the founding chair of the Department of Bioethics at the National Institutes of Health and held that position until August of 2011. Until January 2011, he served as a special advisor on health policy to the Director of the Office of Management and Budget and National Economic Council. He is also a breast oncologist and author. After completing his internship and residency in internal medicine at Boston's Beth Israel Hospital and his oncology fellowship at the Dana-Farber Cancer Institute, he joined the faculty at the Dana-Farber Cancer Institute. Dr. Emanuel has published widely on the ethics of clinical research, health care

reform, international research ethics, end-of-life care issues, euthanasia, the ethics of managed care, and the physician-patient relationship. He is also an op-ed contributor to the *New York Times*. After completing Amherst College, he received his M.Sc. from Oxford University in Biochemistry. He received his MD from Harvard Medical School and his PhD in political philosophy from Harvard University.

Keith M. Marzilli Ericson, PhD, is an assistant professor of markets, public policy, and law at the Boston University School of Management, and a faculty research fellow at the National Bureau of Economic Research. Professor Ericson's research has examined health care markets, such as the Massachusetts Health Insurance Exchange and Medicare Part D. He has shown how pricing regulation interacts with imperfect competition, and how health insurers use dynamic pricing strategies. His recent work has studied how product standardization affects choice on insurance exchanges and how mandates to purchase insurance affect behavior. Professor Ericson has also explored foundations of economic decision-making (behavioral economics), running experiments on limited memory, the endowment effect and expectations about the future, intertemporal choice, and the effect of privacy on truthful disclosure of sexual orientation. His work has been published in the *Quarterly Journal of Economics*, *American Economic Review*, *Journal of the European Economic Association*, *Inquiry*, and the *American Economic Journal: Economic Policy*, among others. Various media outlets have featured his research, including *Slate*, *The Atlantic*, *Freakonomics Radio*, *Time*, *The Los Angeles*

Times, *The Washington Post*, and *The New York Times*. He has a PhD in economics from Harvard University.

Alison Fleury is Sharp HealthCare's senior vice president of business development and has nearly 30 years of experience in the health care industry. Prior to joining Sharp HealthCare in 1991, she was a manager and firm-designated health care specialist of an international public accounting firm. From 2012 to 2014, Ms. Fleury served as the chief executive officer of the Sharp HealthCare ACO, where she worked with the Center for Medicare and Medicaid Innovation to pilot a program for Medicare beneficiaries that enhanced the engagement between patients and their medical providers in the coordination of care and services. Ms. Fleury was recognized as one of California's Most Powerful and Influential Women by the California Diversity Council. She received the YWCA Tribute to Women in Industry Award in 2000 and was named one of San Diego's "40 Under Forty" by *San Diego Metropolitan Magazine*. Ms. Fleury is a past president of the San Diego-Imperial Chapter of Healthcare Financial Management Association and currently serves on the Board of Directors, Executive Committee and Finance Committee of the YWCA of San Diego County and the Board of Directors of Sharp Health Plan. Ms. Fleury received her BS, *summa cum laude*, from San Diego State University.

Mark W. Friedberg, MD, MPP, is a senior natural scientist at the RAND Corporation, practice lead in payment models and health care delivery for RAND Health Advisory Services, and a practicing general internist. His research focuses on performance

improvement by health care providers, innovations in primary care, and methods for measuring health system quality and efficiency. Dr. Friedberg has developed and fielded surveys of patients, physicians, medical group leaders, and other clinical staff. His clinical work has included ambulatory primary care and hospital-based internal medicine, and he is an assistant professor of medicine, part-time, at Brigham and Women's Hospital and Harvard Medical School. Dr. Friedberg received his BA in economics and statistics from Swarthmore College; his MD from Harvard Medical School; and his MPP in health care policy from the Harvard Kennedy School of Government.

Martin Gaynor, PhD, is the E.J. Barone Professor of Economics and Public Policy at Carnegie Mellon University and former director of the Bureau of Economics at the Federal Trade Commission. He is one of the founders of the Health Care Cost Institute, an independent non-partisan non-profit dedicated to advancing knowledge about U.S. health care spending, and served as the first chair of its governing board. He is also a research associate at the National Bureau of Economic Research and an international research fellow at the University of Bristol. Prior to joining Carnegie Mellon, Dr. Gaynor held faculty appointments at Johns Hopkins and a number of other universities, and was a visitor at the Hungarian Academy of Sciences in Budapest in 1991. His research focuses on competition and antitrust policy in health care markets. He has written extensively on this topic, testified before Congress, and advised the governments of the Netherlands and the United Kingdom on competition issues

in health care. Dr. Gaynor received his BA from the University of California, San Diego and his PhD from Northwestern University.

Paul Ginsburg, PhD, is the Norman Topping chair in medicine and public policy at the University of Southern California, professor at the Sol Price School of Public Policy, and serves as the director of health policy for the USC Schaeffer Center for Health Policy and Economics. Dr. Ginsburg teaches graduate health administration courses and conducts health policy research. From 1995 through the end of 2013, he was president of the Center for Studying Health System Change (HSC), which conducted research about changes in organization, financing and delivery of care and their effects on people. Prior to his founding HSC, Dr. Ginsburg served as the founding executive director of the Physician Payment Review Commission (now the Medicare Payment Advisory Commission), as a senior economist at RAND, and as deputy assistant director at the Congressional Budget Office. He has given presentations on the evolution of health care markets, including cost trends and drivers, consumer driven health care, provider payment reform, future of employer-based health insurance and competition in health care. He has been named to *Modern Healthcare's* "100 Most Influential Persons in Health Care" eight times and received the first annual HSR Impact Award from AcademyHealth. He earned his doctorate in economics from Harvard University.

Karen A. Goldman, PhD, is an attorney advisor in the FTC's Office of Policy Planning, where she focuses on competition issues involving health care and intellectual property. She was one of the primary authors of the FTC's Report, *Authorized Generic Drugs: Short-Term Effects and Long-Term Impact*, and has published in both legal and scientific journals. Before joining the FTC, Dr. Goldman held a number of legal and scientific positions at the National Institutes of Health, the National Science Foundation, and the California Institute of Technology. She has also served as an adjunct professor at the Georgetown University Law Center. Dr. Goldman received her JD from Georgetown and her PhD in neurosciences from the University of California at San Francisco.

Thomas L. Greaney, JD, is the Chester A. Myers Professor of Law and co-director of the Center for Health Law Studies at Saint Louis University School of Law. His research focuses on the application of antitrust law to the health care sector, health care financing, and health care law and policy. He is co-author of the nation's leading health law casebook, *Health Law: Cases, Materials and Problems* and a treatise on health law, *Health Law*. He has testified on these antitrust issues before the Judiciary Committee of the House of Representatives and at prior workshops of the Federal Trade Commission. Before joining the Saint Louis University faculty, he served as an assistant chief in the Department of Justice Antitrust Division, supervising health care antitrust litigation. He has also been a Fulbright Fellow studying European Community competition law

in Brussels, Belgium. He received his BA from Wesleyan University and his JD from Harvard Law School.

Caroline Holland serves as Chief Counsel for Competition Policy and Intergovernmental Relations at the Antitrust Division of the United States Department of Justice. Before joining the Antitrust Division in 2015, Ms. Holland served as Chief Counsel and Staff Director for Senator Klobuchar on the Senate Judiciary Committee's Subcommittee on Antitrust, Competition Policy, and Consumer Rights. In addition to managing the Subcommittee's antitrust business, she staffed Senator Klobuchar on a variety of Judiciary Committee issues including intellectual property and immigration. She held a similar position for Senator Kohl and had been working for the Antitrust Subcommittee since 2007. Before joining the Subcommittee, Ms. Holland was an attorney with Patton Boggs, LLP in Washington, D.C. focusing on public policy and regulatory work. Before attending law school, she was a paralegal at Department of Justice Antitrust Division and a staff assistant and legislative aid to the Antitrust Subcommittee. Ms. Holland holds a J.D. from Georgetown University Law Center and a B.A. in Public Policy from Trinity College in Hartford, Connecticut.

Kim Holland is vice president of state affairs for the Blue Cross and Blue Shield Association (BCBSA), a national federation of 37 independent, community-based and locally operated Blue Cross and Blue Shield companies. In her role with BCBSA, Ms. Holland is responsible for ensuring that Blue Cross Blue Shield Plan interests are represented in the

development of federal and state legislative and regulatory positions and priorities. She is also responsible for coordinating resource development and deployment to assist member plans in advancing Blue positions in the states. Ms. Holland has worked on many priority issues for BCBSA, including state flexibility for exchanges and appropriate accounting treatment of the health insurance tax. Before joining BCBSA, Ms. Holland, a former career insurance producer and independent agency executive, was the first woman elected insurance commissioner in Oklahoma, an office she held for six years. Ms. Holland has served on numerous health care related boards and commissions, including the state's employees benefits board and Medicaid authority.

Pinar Karaca-Mandic, PhD, is an associate professor at the University of Minnesota's School of Public Health, Division of Health Policy and Management. She is also a research associate at the National Bureau of Economic Research's Health Economics and Healthcare programs. She serves as an associate editor of *Forum for Health Economics and Policy*. Her research focuses on health insurance benefit design, health care regulations, insurance markets, pharmaceutical use, and medical technology diffusion. Her research has been published in leading economics, policy and medical journals. Her research has been funded by the National Institute on Aging, the National Institute of Child Health and Human Development, the Agency for Healthcare Research and Quality, the U.S. Department of Health and Human Services, Health Resources and Services Administration, and the Robert Wood Johnson Foundation. She is the recipient

of a KO1 career grant from the National Institutes of Health, through which she has been studying physician medical technology adoption. Dr. Karaca-Mandic received her PhD in economics from the University of California-Berkeley in 2004, and her BA in economics and mathematics from Swarthmore College.

Kenneth W. Kizer, MD, MPH, is a distinguished professor at the University of California, Davis School of Medicine and Betty Irene Moore School of Nursing and the director of the Institute for Population Health Improvement, UC Davis Health System. He also serves as the chief quality improvement consultant for the California Department of Health Care Services. An honors graduate of Stanford University and UCLA, he is a fellow or distinguished fellow of numerous professional societies and has the rare distinction of being a fellow of the National Academy of Public Administration and a member of the Institute of Medicine, National Academy of Sciences. Dr. Kizer has held senior leadership positions in state and federal government, academia and the private sector, including: founding president and CEO, National Quality Forum; Under Secretary for Health, U.S. Department of Veterans Affairs, where he engineered what has been described as the largest health care turnaround in U.S. history; director of the California Department of Health Services and the state's top health official; and president, CEO and chairman of Medsphere Systems Corporation, a leading commercial provider of open source health information technology. His accomplishments have been recognized with dozens of awards, including the Justin Ford Kimball Innovator Award, American Hospital

Association; Earnest Amory Codman Award, The Joint Commission; Nathan Davis Award for Outstanding Government Service, American Medical Association; Award of Excellence, American Public Health Association; and Gustav O. Lienhard Medal and Award, Institute of Medicine.

Helen C. Knudsen, PhD, has been an economist in the Economic Analysis Group of the Antitrust Division of the U.S. Department of Justice since 2008. She has focused on health care for the last four years. She received her PhD in economics from the University of Pittsburgh.

Tara Isa Koslov is deputy director of the FTC's Office of Policy Planning, a position she has held since March 2011. Her portfolio includes a broad range of competition and consumer protection issues, with a particular emphasis on health care topics. Ms. Koslov previously spent almost twelve years as an attorney advisor to three different FTC commissioners (focusing primarily on competition issues), and also worked in one of the agency's merger enforcement divisions, following several years in private practice. She completed a three-year term as editorial co-chair of the *Antitrust Law Journal*, having served on the editorial board for 15 years. Ms. Koslov earned her JD from Harvard Law School and an AB from Brown University.

Patrick M. Kuhlmann is an attorney in the Legal Policy Section of the Antitrust Division of the U.S. Department of Justice, which provides analyses of complex antitrust matters, supports the Division's competition advocacy efforts, legislative program, and comments

on rulemakings, serves as liaison with other governmental agencies on competition issues, and coordinates long-range planning projects and programs of special interest to the Assistant Attorney General. Prior to joining the Antitrust Division, Mr. Kuhlmann practiced antitrust and appellate law with Foley & Lardner in Milwaukee, Wisconsin, and served as a judicial law clerk for Judge John M. Rogers of the U.S. Court of Appeals for the Sixth Circuit. He graduated *summa cum laude* from the University of Wisconsin Law School, where he served on the Law Review, and earned an MA in History from the University of Rochester.

James Landman, JD, PhD, is director, healthcare finance policy, perspectives and analysis, for the Healthcare Financial Management Association (HFMA). Dr. Landman is responsible for leading HFMA's thought leadership efforts, which have covered value creation, payment reform, price transparency, accounting and financial reporting, revenue cycle management, and many other areas that drive health care organizational high performance. Results of these initiatives are used by hospitals, rating agencies, regulatory agencies, congressional committees, accounting standard setting bodies, state hospital organizations, and other government and industry leaders. Dr. Landman started at HFMA in 2008. Prior to HFMA, he worked for the American Bar Association, the University of North Texas, and the Faegre & Benson law firm (now Faegre Baker Daniels). He holds a BA from Northwestern University, a JD from the University of Michigan Law School, and a PhD from the University of Minnesota.

Bruce E. Landon, MD, MBA, MSc, is professor of health care policy and medicine at Harvard Medical School. He practices internal medicine at the Beth Israel Deaconess Medical Center. Dr. Landon's primary research interest has been assessing the impact of different characteristics of physicians and health care organizations, ranging from health plans to physician group practices, on the provision of health care services. He has over fifteen years of experience in health services research and has been the principal investigator of numerous federal and foundation grants. Dr. Landon has been elected to the American Society of Clinical Investigation and the Association of American Professors and serves on the Health Policy Advisory Committee of the Myers JDC Brookdale Institute's Smokler Center for Health Policy Research. He also chairs the Contracts and Payments Committee at the Beth Israel Deaconess Physician Organization. Dr. Landon graduated *summa cum laude* from the Wharton School at the University of Pennsylvania with a major in finance. He received his MD from the University of Pennsylvania School of Medicine, and an MBA with a concentration in health care management from the Wharton School. He also received an MSc in Health Policy from the Harvard School of Public Health.

Marina Lao, JD, LLM, is the director of the Office of Policy Planning at the Federal Trade Commission (FTC), on leave from Seton Hall University School of Law, where she has been a member of the faculty since 1994. She has written and presented extensively in the U.S. and in Spain, Germany, and China on a range of antitrust topics. Additionally,

Ms. Lao has offered invited testimony to the House Judiciary Committee, Subcommittee on Intellectual Property, Competition and the Internet, and at hearings sponsored by the FTC and the Antitrust Division of the Department of Justice (DOJ). She is a member of the advisory board of the American Antitrust Institute, and was chair of the Section of Antitrust and Economic Regulation of the Association of American Law Schools. Prior to joining Seton Hall, she was a partner in Wilson, Cobb, Lichtenstein & Lao in Atlanta, Georgia, and she began her legal career with the DOJ Antitrust Division, as a trial attorney under the Honors Program. Ms. Lao received her BA from Stony Brook University, her JD from Albany Law School, and an LLM from Temple University School of Law.

Kevin Lewis is the chief executive officer of Maine Community Health Options (MCHO) and has extensive experience in health care management and advocacy in various leadership roles. Before joining MCHO, Mr. Lewis was the chief executive officer of Maine Primary Care Association, where his efforts included improving health care access for underserved populations and representing Maine's community health centers. He served as director of continuing care at Maine Hospital Association and as the legislative liaison at the Wisconsin Department of Health and Family Services. Mr. Lewis has a BA from Dartmouth College, an MPP from the University of Michigan, and is a graduate of the Johnson & Johnson Health Care Executive Program at UCLA.

Dionne Lomax is a partner in the Washington, D.C. office of Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C. Her principal area of practice is antitrust and trade regulation law. Her antitrust work includes representing large health systems, major medical associations, large multi-specialty physician groups, pharmaceutical companies, and medical device manufacturers in connection with mergers and acquisitions, joint ventures, and other commercial arrangements. Ms. Lomax also represents clients before the U.S. Department of Justice (DOJ), Federal Trade Commission, and various state Attorneys General. Ms. Lomax previously served as a trial attorney at the DOJ Antitrust Division's Health Care Task Force where she analyzed the structure and operation of PHOs and IPAs, analyzed and investigated health plan mergers such as the Aetna/Prudential merger, investigated other collaborative arrangements in the health care industry, and played a significant role in several litigated matters. Ms. Lomax has also represented and advised clients on a broad range of antitrust issues in a number of other industries, including pharmaceutical, energy, book publishing, consumer products, software, technology, petrochemicals, and industrial liquids.

Matthew C. Mandelberg is an attorney in the Legal Policy Section of the Antitrust Division of the U.S. Department of Justice, where he provides support to senior Division officials on a wide array of legal and policy issues. Mr. Mandelberg joined DOJ through the Attorney General's Honors Program in 2011. His assignments at DOJ have included

supporting the Division's competition advocacy on health care, conditional pricing practices, and the appropriate remedies for FRAND-encumbered, standards-essential patents. He has drafted DOJ filings submitted to the FCC in response to notices of proposed rulemakings and lead a business review investigation of a novel IP licensing exchange. Before joining DOJ, Mr. Mandelberg interned for the White House Counsel's Office and the Counsel's Office to the Los Angeles Mayor and worked as a research assistant at the RAND Corporation. Mr. Mandelberg earned his JD from Stanford Law School and his MPA from the Woodrow Wilson School at Princeton University in 2011. He earned his BA from Columbia University in 2005.

Mark B. McClellan, MD, PhD, is a senior fellow in economic studies and director of the Health Care Innovation and Value Initiative at the Brookings Institution. Within Brookings, his work focuses on promoting quality and value in patient centered health care. Dr. McClellan is a former administrator of the Centers for Medicare & Medicaid Services (CMS) and former commissioner of the U.S. Food and Drug Administration (FDA), where he developed and implemented major reforms in health policy. These include the Medicare prescription drug benefit, the FDA's Critical Path Initiative, and public-private initiatives to develop better information on the quality and cost of care. Dr. McClellan chairs the FDA's Reagan-Udall Foundation, is co-chair of the Quality Alliance Steering Committee, sits on the National Quality Forum's Board of Directors, is a member of the Institute of Medicine, and is a research associate at the National Bureau of Economic Research. He previously served as a

member of the President's Council of Economic Advisers and senior director for health care policy at the White House, and was an associate professor of economics and medicine at Stanford University. Dr. McClellan holds an MD from the Harvard University–Massachusetts Institute of Technology (MIT) Division of Health Sciences and Technology, a PhD in economics from the Massachusetts Institute of Technology, an MPA from Harvard University, and a BA from the University of Texas at Austin.

Lisa M. McDonnell is the senior vice president, Network Strategy & Innovation UnitedHealthcare Networks. In this role Ms. McDonnell is responsible for UnitedHealthcare's value-based reimbursement programs as well as the intentional integration of network, clinical and benefit strategies to align incentives among payors, providers, and consumers in support of health care transformation. Ms. McDonnell began her managed care career 25 years ago and has experience building and maintaining networks across the country. In 1997, she joined UnitedHealthcare, where she has continued to advance through various network leadership roles. Ms. McDonnell earned a BA in Psychology at the University of California, Irvine. She attended the MPA/MPH program at the University of San Francisco and is currently pursuing a Master of Health Care Delivery Science at Dartmouth.

Joe Miller is General Counsel of America's Health Insurance Plans (AHIP), a national trade association representing the health plan industry. Joe represents AHIP as a leader and speaker in public discussion forums related to health insurance topics, manages AHIP's legal

team as they provide services to the association, and directs AHIP's amicus program. Joe joined AHIP in 2010 after 12 years at the Antitrust Division of the U.S. Department of Justice, where he was Assistant Chief of the litigation group with responsibility for the health care and insurance sectors. He also spearheaded the Division's health care competition advocacy program. Before joining the DOJ, Miller worked for Collier, Shannon, Rill & Scott and as a trial attorney for the Federal Trade Commission. Joe earned his law degree from George Mason University School of Law and his undergraduate degree in economics from Emory University.

Kristen Miranda leads Blue Shield of California's statewide Accountable Care Organization (ACO) program as Vice President, Strategic Partnerships and Innovation. First implemented in 2010, the program has been described by *Health Affairs* as "one of the oldest and most successful ACOs in the country." Prior to joining Blue Shield, Ms. Miranda held leadership positions with Anthem, Health Net and CIGNA in provider contracting and provider services. Her experience on the provider side includes the position of executive director for a large integrated physician/hospital organization in Northern California. As a consultant, Ms. Miranda has worked with a number of health care foundations and physician organizations on issues of access. She is also a member of the Health System Transformation Task Force. Ms. Miranda holds a degree in anthropology from the University of California, Davis and was an Honors Collegium scholar at the University of California, Los Angeles.

Peter J. Mucchetti is the Chief of the Litigation I Section of the Antitrust Division of the U.S. Department of Justice, which investigates and prosecutes civil cases in the health-care, paper, food products, and other industries. Prior to assuming his current position, Mr. Mucchetti was the Assistant Chief of the Litigation I Section and a trial attorney with the Antitrust Division. He also previously practiced antitrust law with Wilmer, Cutler & Pickering. Mr. Mucchetti's other experience includes working as a Special Assistant United States Attorney in the Eastern District of Virginia in Alexandria, Virginia, and as a judicial law clerk for the Honorable Lee H. Rosenthal in the Southern District of Texas. He graduated *cum laude* from Harvard Law School and received a B.A. in economics *cum laude* from Yale University

David Muhlestein, PhD, JD, is senior director of research and development at Leavitt Partners. He directs the study of accountable care organizations through the LP Center for Accountable Care Intelligence and leads the firm's quantitative evaluation of health care markets. He is an expert in using policy analysis, predictive modeling and applied analytics to understand the evolving health care landscape and his insights have been quoted by publications such as *The Wall Street Journal*, *The Seattle Times* and *Modern Healthcare*. Dr. Muhlestein earned his doctorate in health services research, JD, MHA and MS from The Ohio State University and a BA from Brigham Young University.

Danica Noble is a competition attorney in the Northwest Regional Office of the FTC. She clerked for the Hon. Judge Darryl Dean Donohue in the U.S. Virgin Islands after graduating from Georgetown University Law Center in 2005. Ms. Noble joined the FTC Honors Attorney Program in 2006. In 2008, she earned the FTC's Stephen Nye Award and in 2014 she was awarded the Janet D. Steiger Award for her work on the Commission's *St. Luke's* team. Ms. Noble works on a variety of competition issues including many health care cases. She is currently the Chair of the Washington State Bar Association's Antitrust & Consumer Protection Section.

Monica Noether, PhD, specializes in antitrust analysis and other competitive issues related to the health care industry for law firms, professional associations, government agencies, and other clients. She has analyzed dozens of hospital, physician, health plan and pharmaceutical mergers as well as disputes between different players in the health care sector. She is also expert in public and private payor reimbursement policies. She has provided expert testimony in antitrust and reimbursement litigation, analyzing class certification, merits, and damages questions. While she is best known for her work in the health care industry, she also has broad general expertise in all aspects of antitrust analyses. Dr. Noether is currently a vice president in the Antitrust and Economics Practice at Charles River Associates. She has also served in several senior leadership positions at CRA, including as Chief Operating Officer from 2009 to 2012. Prior to joining CRA 19 years ago, Dr. Noether

served as a managing vice president at Abt Associates, where she specialized in federal reimbursement policy for hospitals and physicians and in antitrust issues. She also spent several years at the Federal Trade Commission as a deputy assistant director in the Bureau of Economics and Commissioner Advisor. Dr. Noether received her PhD (Economics) and MBA (Economics and Finance) from the University of Chicago's Booth School of Business and her BA from Wesleyan University.

Leslie C. Overton serves as deputy assistant attorney general (DAAG) for civil enforcement in the Antitrust Division of the United States Department of Justice. Ms. Overton also is the DAAG responsible for supervising the Antitrust Division's international program. She rejoined the Antitrust Division in July 2011, and previously served from 2002 until 2004 as Counsel to the Assistant Attorney General. Ms. Overton returned to government service from the Washington office of Jones Day, where she was a partner in the antitrust and competition practice. She has been recognized by: Best Lawyers 2010-2012); National Bar Association/IMPACT, 40 Lawyers Under 40 (2010); *Nightingale's Healthcare News*, Outstanding Healthcare Antitrust Lawyers (2009); and *Global Competition Review*, 40 Under 40 Leading Competition Lawyers (2008). Ms. Overton is a 1994 graduate of the University of Michigan Law School, where she served on the *Michigan Law Review*. She received her B.A. from the University of Pennsylvania in 1991.

Hoangmai Pham, MD, MPH, is a general internist and Director of the Seamless Care Models Group (SCMG) at the Center for Medicare & Medicaid Innovation (CMMI), where she is responsible for overseeing portfolios of demonstrations on accountable care organizations (ACO) and advanced primary care. SCMG sponsors the Pioneer ACO Model, the Advance Payment and ACO Investment Models, the Comprehensive Primary Care Initiative, and the Comprehensive End Stage Renal Disease Care Initiative, and continues to develop new models. Prior to joining CMMI, Dr. Pham was a senior researcher and co-director of research at the Center for Studying Health System Change and Mathematica, Inc. She has published extensively on care fragmentation and coordination, provider market trends, health disparities, primary care, and quality measurement/improvement, and the intersection of each of these with provider payment policy. Dr. Pham also contributed to the design of Medicare demonstrations and programs, including the Physician Quality Reporting System and Resource Use Reports. She practiced for many years at safety net clinics in the Washington area. Dr. Pham received her AB from Harvard, her MD from Temple University, and her MPH from Johns Hopkins, where she was also a Robert Wood Johnson Clinical Scholar.

Terri L. Postma, MD, serves as Medical Officer and Advisor in the Center for Medicare at the Centers for Medicare & Medicaid Services (CMS). She advises senior leadership on policy issues related to Medicare's payment systems and quality initiatives, particularly value-based

purchasing initiatives resulting from passage of the Affordable Care Act. In her role as the Medicare Shared Savings Program policy lead, Dr. Postma coordinates the development and publication of the program regulations and works closely with staff to implement program operations. Before joining CMS, she was awarded the Kenneth M. Viste Neurology Public Policy Fellowship, in partnership with the American Association for the Advancement of Science, to serve on the staff of the Senate Finance Committee during the health care reform debate. Dr. Postma received her medical degree from the University of Maryland School of Medicine in Baltimore and completed her residency training in neurology at the University of Kentucky Chandler Medical Center where she served as Chief Resident.

Robert Potter has been chief of the Legal Policy Section of the Antitrust Division of the U.S. Department of Justice since 1995. As chief of the Legal Policy Section, he is responsible for analyzing and helping to resolve difficult and complex competition policy issues, special projects in support of the Division's enforcement programs, and interagency and congressional matters. Mr. Potter joined the Antitrust Division in 1992 to serve as counselor to the assistant attorney general. Prior to joining the Department of Justice, Mr. Potter was in private practice with the law firm of Skadden, Arps, Slate, Meagher & Flom, where he specialized in antitrust counseling and litigation. His clients included a wide array of

Fortune 500 companies. Mr. Potter graduated magna cum laude from Georgetown University Law Center, where he was an articles editor of the *Georgetown Law Review*. He is a member of the Order of the Coif.

Lynn Quincy is director of the Health Value Resource Hub at Consumers Union, the policy and advocacy division of *Consumer Reports*. The Health Value Resource Hub is a new center that uses evidence to help advocates work on health care cost and value issues. Ms. Quincy works at the federal and state levels on a wide variety of policy issues, with a particular focus on health care costs, transparency, consumer protections, and consumers' health insurance literacy. Ms. Quincy serves as a consumer expert in several venues, including as a consumer representative with the National Association of Insurance Commissioners, on a technical expert panel advising the development of new enrollee satisfaction surveys, and on an advisory group that focuses on consumer price transparency. Prior to joining Consumers Union, Ms. Quincy held senior positions with Mathematica Policy Research, Inc., the Institute for Health Policy Solutions and Watson Wyatt Worldwide (now Towers Watson). She holds a master's degree in economics from the University of Maryland.

Edith Ramirez was sworn in as a Commissioner of the Federal Trade Commission in April 2010 and became Chairwoman of the FTC in March 2013. At the FTC, Chairwoman Ramirez has focused on promoting competition and innovation in the technology and health care sectors, protecting underserved communities from deceptive and unfair practices, and safeguarding consumer privacy. Before joining the FTC, Chairwoman Ramirez was a partner in the Los Angeles office of Quinn Emanuel Urquhart & Sullivan, LLP, where she litigated complex business disputes, including intellectual property, antitrust, unfair competition, and advertising matters. She is a graduate of Harvard Law School, where she was an editor of the *Harvard Law Review*, and Harvard College.

Natalie Rosenfelt is a trial attorney in the Litigation I Section of the Antitrust Division of the U.S. Department of Justice, which investigates and prosecutes civil cases in a variety of industries, including health care, insurance, paper, and food products. Ms. Rosenfelt joined the DOJ through the Attorney General's Honors Program. Her experience includes working as a Special Assistant United States Attorney in the Eastern District of Virginia in Alexandria, Virginia. Ms. Rosenfelt earned her JD from the University of Virginia School of Law and received a BA with distinction in all subjects from Cornell University.

Dana Gelb Safran, ScD, is senior vice president for performance measurement and improvement at Blue Cross Blue Shield of Massachusetts (BCBSMA). In this role, she leads the company's initiatives to measure and improve health care quality, safety and outcomes. Dr. Safran also retains an active academic practice as Associate Professor of Medicine at Tufts University School of Medicine, and has authored more than 75 peer reviewed articles. She was among the lead developers of the BCBSMA Alternative Quality Contract and is widely recognized as having contributed to the empirical basis for our nation's push toward a more patient-centered health care system. Dr. Safran earned her Master and Doctor of Science degrees in Health Policy from the Harvard School of Public Health.

Richard M. Scheffler, PhD, is a distinguished professor of Health Economics and Public Policy at the School of Public Health and the Goldman School of Public Policy at the University of California, Berkeley. He also holds the Chair in Healthcare Markets & Consumer Welfare endowed by the Office of the Attorney General for the State of California. Professor Scheffler is the founding director of The Nicholas C. Petris Center on Health Care Markets and Consumer Welfare. He has been a Rockefeller and a Fulbright Scholar, and he served as President of the International Health Economists Association. Professor Scheffler has published over 190 papers and edited and written twelve books. He has recently completed a longitudinal study and survey of

health insurance rate review regulations in all 50 states from 1995-2013 funded by the Robert Wood Johnson Foundation. He is also co-chair of the Berkeley Forum for Improving California's Healthcare Delivery System and the lead author of the Berkeley Forum Report "A New Vision for California's Healthcare System: Integrated Care with Aligned Financial Incentives" published in the *California Journal of Politics and Policy* (2014). He has just completed a study entitled "Covered California: The Impact of Provider and Health Plan Market Power on Premiums."

Patricia Schultheiss is an attorney advisor in the FTC's Office of Policy Planning. Ms. Schultheiss co-organized this series of public workshops examining competition issues in the health care industry, an initiative that earned the Janet D. Steiger team award for outstanding contributions to the FTC's mission. Since she joined the FTC in 1980, she has served in many capacities, including as an advisor to the director of the Bureau of Consumer Protection, and as an attorney advisor for antitrust to two commissioners. Throughout her career, Ms. Schultheiss has worked on a variety of investigations and projects involving the health care and pharmaceutical industries. She was a contributing author to the 2004 FTC/DOJ Report: *Improving Health Care: A Dose of Competition*, and the 2005 FTC Report: *Pharmacy Benefit Managers: Ownership of Mail-Order Pharmacies*. From March 1987 to June 1990, Ms. Schultheiss served as in-house counsel and director of policy for the American Pharmacists Association. During this time, she also taught business law at the George

Washington University School of Government and Business Administration. Ms. Schultheiss received her BA *summa cum laude* from The State University College of New York at Oneonta, and her JD *magna cum laude* from Rutgers University School of Law-Newark, where she was editor-in-chief of the *Women's Rights Law Reporter*.

Simeon A. Schwartz, MD, is founding president and CEO of WESTMED Medical Group and the CEO of WESTMED Practice Partners (WPP). The group has grown into a 285+ physician primary care focused multi-specialty group practice. He has been committed to improving both operational and clinical efficiency with a focus on quality. To accomplish this, Dr. Schwartz and WESTMED have been early adopters of health care information technology and have worked with many IT vendors with process and system redesign to improve care. WPP, established in 2011, is a management services company that has evolved from the success of the WESTMED Medical Group. The mission of WPP is to provide comprehensive, turnkey solutions for advanced ambulatory care sites. Dr. Schwartz is a hematologist and oncologist. He received his undergraduate degree from the Massachusetts Institute of Technology and his MD from Yale University School of Medicine in New Haven. Dr. Schwartz then completed his internship and residency at The New York Hospital-Cornell Medical Center and a fellowship in hematology and medical oncology at Memorial Sloan Kettering Cancer Center.

Fiona M. Scott Morton, PhD, is the Theodore Nierenberg Professor of Economics at the Yale University School of Management, where she has been on the faculty since 1999. Her area of academic research is empirical industrial organization, with a focus on empirical studies of competition in areas such as pricing, entry, and product differentiation. Her published articles range widely across industries, from magazines, to shipping, to pharmaceuticals, to internet retailing, and her work is published in leading economics journals. From 2011-12 Professor Scott Morton served as the deputy assistant attorney general for economics at the Antitrust Division of the US Department of Justice, where she helped enforce the nation's antitrust laws. At Yale, she teaches courses in the area of competitive strategy. She served as associate dean from 2007-10 and in 2007 she won the School's teaching award. Professor Scott Morton has a BA from Yale and a PhD from the Massachusetts Institute of Technology, and she previously taught at the Graduate Schools of Business at the University of Chicago and Stanford University.

Anna D. Sinaiko, PhD, MPP, is a research scientist in the Department of Health Policy and Management at the Harvard School of Public Health. Her research focuses on consumer decision-making in health care settings and how information and financial incentives alter consumer behavior. Specific empirical projects include an examination of consumer response to tiered physician networks, of consumer response to price transparency, and of consumer choice of health insurance plans in Medicare and in the ACA Health Insurance Marketplaces. Dr.

Sinaiko's work has been published in the *Journal of Health Economics*, *Health Affairs*, and numerous other peer-reviewed journals. Dr. Sinaiko received her PhD in Health Policy with a concentration in Economics from Harvard University in 2010.

Chapin White, PhD is a senior policy researcher at the RAND Corporation, specializing in health economics. His work combines quantitative and qualitative methods, and focuses on provider payment reform and the implementation and impacts of the Affordable Care Act (ACA). He is currently leading analyses of price transparency in health care and its potential to slow health spending growth, and state-coordinated ("Section 1332") waivers. His recent work examined the effects of changes in Medicare payments for inpatient hospital care and variation in the prices paid by private health plans for hospital care and physician services. He was also one of the lead researchers for a multi-site qualitative study funded by the Robert Wood Johnson Foundation that used structured stakeholder interviews to examine ACA-driven changes in health insurance markets. Prior to joining RAND, White was a senior health researcher at the Center for Studying Health System Change and a principal analyst at the Congressional Budget Office (CBO). His work at the CBO focused on microsimulation modeling of health reform, long-term trends and geographic variation in health spending, medical malpractice, and provision of community benefits by nonprofit hospitals. White earned his PhD in health policy from Harvard University and a master's degree in public policy from Harvard's Kennedy School of Government.

John P. Wiegand is an attorney in the San Francisco office of the Federal Trade Commission. He practices antitrust law, primarily in the health care and telecommunications industries. He has been involved in several health care matters that have resulted in litigation, including hospital merger and physician price fixing cases. He was part of the Commission's trial team in *North Texas Specialty Physicians*. Mr. Wiegand has addressed policy issues relating to the application of the antitrust laws to the health care and telecommunications industries in both published articles and speeches. He has co-authored six Commission-authorized public comments on competition issues in the telecommunications industry. In the 2003 FTC/DOJ Hearings on Health Care and Competition Law and Policy, he served as both a moderator and a presenter. He has received the FTC's Paul Rand Dixon Award for Legal and Economic Analysis. He earned his JD in 1985 from the University of Illinois and his AB in 1982 in economics from the University of Chicago.

Stephanie A. Wilkinson is an attorney advisor in the FTC's Office of Policy Planning (OPP). Ms. Wilkinson co-organized this series of public workshops examining competition issues in the health care industry, an initiative that earned the Janet D. Steiger team award for outstanding contributions to the FTC's mission. Other significant projects for Ms. Wilkinson include contributing to the FTC-DOJ Statement of Antitrust Enforcement Policy Regarding Accountable Care Organizations Participating in the Medicare Shared Savings Program and organizing a public workshop on Competition and Consumer Protection issues in the Pet Medications Industry. Ms. Wilkinson joined the FTC in 2001. Before joining OPP, she served as a staff attorney in the Bureau of Competition, where she investigated mergers involving a range of industries including pharmaceuticals, hospitals, medical devices, laboratory services, high technology, and chemicals. Ms. Wilkinson earned her JD from William and Mary School of Law in 2001 and a BA from Vanderbilt University in 1996.