

NATIONAL Sciences Engineering Medicine

ATTENDEE PACKET
JUNE 2022

ROUNDTABLE ON POPULATION HEALTH IMPROVEMENT

POPULATION HEALTH FUNDING AND ACCOUNTABILITY TO COMMUNITY

A Virtual Workshop

June 22, 2022 | 11:00 AM - 4:30 PM EDT

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POPULATION HEALTH FUNDING AND ACCOUNTABILITY TO COMMUNITY

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Agenda

WEDNESDAY, JUNE 22, 2022

11:00 AM ET Welcome and Introduction

Ray Baxter (Roundtable Co-chair), Trustee, Blue Shield of California Foundation; Board Member, CDC Foundation

11:10 AM Panel I: Context and overview

Moderator: Meshie Knight, Program Officer, Robert Wood Johnson Foundation

- Kristin Giantris, Interim Chief Client Services Officer, Nonprofit Finance Fund
- Karen Minyard, CEO, Georgia Health Policy Center; Professor, Department of Public Management and Policy, Andrew Young School of Policy Studies, Georgia State University

12:00 PM Panel II: Perspectives on the progress made in funding population health and health equity, with accountability to community

Moderator: **Marsha Lillie-Blanton**, Adjunct Professor of Health Policy and Management, Milken Institute School of Public Health, The George Washington University

- **Kimberly DiGioia**, Program Officer, Evaluation and Analysis, Patient-Centered Outcomes Research Institute (PCORI)
- **Suma Nair**, Director, Office of Quality Improvement, Bureau of Primary Health Care, Health Resources and Services Administration, U.S. Department of Health and Human Services (DHHS)
- Lauren Taylor, Assistant Professor, Department of Population Health, New York University Grossman School of Medicine

1:15 PM Break

2:00 PM Panel III: Perspectives on the emerging opportunities and challenges for funding population health and health equity, with accountability to community

Moderator: **Joshua Traylor**, Senior Director, Health Care Transformation Task Force

- Carly Hood-Ronick, Executive Director, Project Access NOW
- **Ana Novais**, Acting Secretary, Rhode Island Executive Office of Health and Human Services
- **Tequila Terry**, Group Director, Innovation Center, Centers for Medicare & Medicaid Services

Emily Yu, Executive Director, BUILD Health Challenge, de Beaumont Foundation; Managing Director of Partnerships, de Beaumont Foundation

3:15 PM Panel IV: Research and evaluation of collaborative funding efforts

Moderator: Richard Vezina, Senior Program Officer, Blue Shield of California Foundation

- **Seth Berkowitz**, Associate Program Director, Sheps Center for Health Services Research, University of North Carolina, Chapel Hill
- Melissa Jones, Executive Director, Bay Area Regional Health Inequities Initiative
- Barbie Robinson, Executive Director, Harris County Public Health, Texas

4:15 PM Closing Remarks

• Ray Baxter, (Roundtable Co-chair), Trustee, Blue Shield of California Foundation; Board Member, CDC Foundation

4:30 PM Adjourn

Workshop Planning Committee | This workshop was organized by the following experts: Marc Gourevitch (NYU, Langone), Hilary Heishman (RWJF), Janet Heinrich (GWU), Dora Hughes (CMS), and John Lumpkin (Blue Cross Blue Shield of NC).

Note: The planning committee's role is limited to planning the workshop. A proceedings based on workshop will be prepared by an independent rapporteur.

Follow the conversation



#pophealthrt @NASEM_Health | Roundtable web page: https://nas.edu/pophealthrt

Roundtable on Population Health Improvement Roster

Vision | A thriving, healthful, and equitable society

Mission | In recognition that health and quality of life for all are shaped by interdependent historical and contemporary social, political, economic, environmental, genetic, behavioral, and health care factors, the Roundtable on Population Health Improvement exists to provoke and catalyze urgently needed multi-sector community engaged collaborative action.

Members

Raymond Baxter, Ph.D. (Co-Chair)

Trustee, Blue Shield of California Foundation Board Member, CDC Foundation San Francisco, CA

Philip M. Alberti, Ph.D.

Senior Director, Health Equity Research and Policy Association of American Medical Colleges Washington, DC

Dawn Alley, Ph.D.

Head of Healthcare Innovation Morgan Health JP Morgan Chase Washington, DC

Kirsten Bibbins-Domingo, M.D., Ph.D.

Professor and Chair of the Department of Epidemiology and Biostatistics Lee Goldman, MD Endowed Professor of Medicine Vice Dean for Population Health and Health Equity UCSF School of Medicine University of California, San Francisco San Francisco, CA

Debbie I. Chang, M.P.H.

President and CEO Blue Shield of California Foundation San Francisco, CA

Marc N. Gourevitch, M.D., M.P.H.

Professor and Chair Department of Population Health NYU Langone Health New York, NY

Meg Guerin-Calvert, M.P.A.

Senior Managing Director and President, Center for Healthcare Economics and Policy FTI Consulting Washington, DC

Dora Hughes, M.D., M.P.H.

Senior Advisor, Center for Medicare and Medicaid Innovation Centers for Medicare and Medicaid Services U.S. Department of Health and Human Services Washington, DC

Sheri Johnson, Ph.D.

Director, Population Health Institute Associate Professor (CHS), Department of Population Health Sciences School of Medicine and Public Health University of Wisconsin-Madison Madison, WI

Wayne Jonas, M.D.

Executive Director Integrative Health Programs H & S Ventures, Samueli Foundation Alexandria, VA

Robert M. Kaplan, Ph.D.

Professor Center for Advanced Study in the Behavioral Sciences Stanford University Stanford, CA

Milton Little, M.A.

President United Way of Greater Atlanta Atlanta, GA

Phyllis D. Meadows, Ph.D., R.N., M.S.N.

Senior Fellow, Health Program Kresge Foundation Troy, MI

Bobby Milstein, Ph.D., M.P.H.

Director ReThink Health Morristown, NJ

Hilary Heishman, M.P.H.

Senior Program Officer Robert Wood Johnson Foundation Princeton, NJ

José T. Montero, M.D., MHCDS

Director, Office for State, Tribal, Local and Territorial Support (OSTLTS) Deputy Director Centers for Disease Control and Prevention Atlanta, GA

Willie (Billy) Oglesby, Ph.D.

Interim Dean College of Population Health Jefferson University Philadelphia, PA

Jason Purnell, Ph.D.

Vice President of Community Health Improvement BJC Health Care Associate Professor Brown School at Washington University in St. Louis Saint Louis, MO

Lourdes J. Rodríguez, Dr.P.H.

Senior Program Officer St. David's Foundation Austin, TX

Kosali Simon, Ph.D.

Herman B. Wells Endowed Professor Associate Vice Provost for Health Sciences Paul H. O'Neill School of Public and Environmental Affairs Indiana University Bloomington, IN

Kara Odom Walker, M.D., M.P.H, M.S.H.S.

Senior Vice President and Chief Population Health Officer Nemours Washington, DC

Terry Williams, M.B.A., Dip. Econ.

Executive Vice President & Chief, Population, Corporate, & Government Affairs Officer Atrium Health Winston-Salem, NC

Hanh Cao Yu, Ph.D.

Chief Learning Officer The California Endowment Oakland, CA



POPULATION HEALTH FUNDING AND ACCOUNTABILITY TO COMMUNITY

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Biosketches of Speakers, Moderators, and Planning Committee Members

*denotes planning committee member, †denotes roundtable member

Ray Baxter†

Raymond Baxter, Ph.D., currently serves as the co-chair of the Population Health Roundtable of the National Academies of Science, Engineering and Medicine; a Trustee of the Blue Shield of California Foundation; and a member of the Board of Directors of the CDC Foundation. Dr. Baxter most recently was CEO of the Blue Shield of California Foundation. He currently serves on the advisory boards to the Deans of the UC Berkeley School of Public Health and the UCSF School of Nursing.

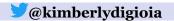
For 15 years, Dr. Baxter was Kaiser Permanente's national senior vice president for community benefit, research and health policy. There he built the largest community benefit program in the US, investing over \$2 billion annually in community health. He led Kaiser Permanente's signature national health improvement partnerships, including the Weight of the Nation, the Convergence Partnership and the Partnership for a Healthier America. Dr. Baxter also established Kaiser Permanente's Center for Effectiveness and Safety Research and built out its national genomics research bank, served as President of KP International, and chaired Kaiser Permanente's field-leading environmental stewardship work. He was a founding sponsor of the KP School of Medicine.

Previously he headed the San Francisco Department of Public Health, the New York City Health and Hospitals Corporation, and The Lewin Group. Dr. Baxter holds a doctorate from Princeton University. In 2001 the University of California, Berkeley, School of Public Health honored him as a Public Health Hero for his service in the AIDS epidemic in San Francisco. In 2006 he received the CDC Foundation Hero Award for addressing the health consequences of Hurricane Katrina in the Gulf Coast. In 2016, the San Francisco Business Times recognized his philanthropic contributions with its first Legacy Award.

Seth Berkowitz

Seth Berkowitz, M.D., M.P.H., is an Associate Professor of Medicine at the University of North Carolina at Chapel Hill School of Medicine in the Division of General Medicine & Clinical Epidemiology. He is a general internist and primary care doctor. Dr. Berkowitz studies the relationship between health-related social needs, such as food insecurity, and health outcomes. His current work emphasizes interventions that address these needs as part of clinical care, and the health effects of policies that affect the distribution of unmet health-related social needs.

Kimberly DiGioia



Kim DiGioia, Dr.P.H., M.S., is a recent graduate from the public health doctoral program in Health Policy and Management at The George Washington University. She currently works as a Program Officer at the Patient-

Centered Outcomes Research Institute (PCORI) in Washington, DC. Before joining PCORI, Dr. DiGioia was a Health Care Delivery System Fellow at the Lown Institute, a Boston-based nonprofit that seeks to catalyze a grassroots movement for transforming health care systems and improving the health of communities. Her work at the Lown Institute and in other previous roles at Kaiser Permanente and Brigham and Women's Hospital has been at the nexus of health care and population health. Dr. DiGioia earned a BA in health psychology from Smith College, and an MS in social and behavioral sciences from the Harvard T.H. Chan School of Public Health.

Kristin Giantris, M.P.A., is Interim Chief Client Services Officer of the Nonprofit Finance Fund (NFF). Giantris leads NFF's national Client Services practice, which delivers a wide variety of financing and consulting services to NFF's community-centered clients, funders, and investors across the U.S. She leads a team of 50 that bring grounded perspectives along with innovative capital and capacity to organizational, sector, and systems-levels challenges. Giantris oversees a financing portfolio of over \$429 million and she brings 30 years of experience in the nonprofit and finance sectors to her work. Throughout her career, she has focused on strategic and management support for frontline organizations and financing for both nonprofit and for-profit enterprises.

Prior to joining NFF, Giantris was a Vice President at Citigroup Global Markets, where she managed bond financings for various financial institutions and governmental clients, both domestic and international. She came to Citigroup after an initial career in the nonprofit sector, where she worked for over eight years for the international nonprofit organization, Volunteers in Overseas Cooperative Assistance. While working in international development, Giantris served as a multi-country Program Officer in Washington, D.C. and as a Country Director in Albania, managing technical assistance programs for small businesses and nonprofit associations. Giantris earned a master's degree in public affairs from the School of International and Public Affairs at Columbia University and a B.A. in Political Science from Kenyon College. She brings her experience to various boards, including Board Chair of The Access Challenge, a pan Africa public health organization, and as an Independent Member of the American Bank of Investments, a private bank in Albania.

Marc Gourevitch*†

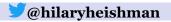
Marc N. Gourevitch, M.D., M.P.H., is the Muriel and George Singer Professor and founding Chair of the Department of Population Health at NYU Langone Medical Center. The focus of Dr. Gourevitch's work is on developing approaches that leverage both healthcare delivery and policy- and community-level interventions to advance the health of populations. Dr. Gourevitch leads the City Health Dashboard initiative, funded by the Robert Wood Johnson Foundation, to equip city and community leaders with an accurate understanding of the health of their populations, including its social, economic, and environmental drivers, to support population health improvement. He directs the NIDA-supported Substance Abuse Research Education and Training (SARET) program, as well as NYU Langone's participation in the New York City Clinical Data Research Network funded by the Patient-Centered Outcomes Research Institute (PCORI). Dr. Gourevitch previously served as founding Director of NYU Langone's Division of General Internal Medicine, and led NYU Langone's CDC-funded Fellowship in Medicine and Public Health Research.

Janet Heinrich*

Janet Heinrich, Dr.P.H., M.P.H., R.N., FAAN, has over 50 years working and teaching in public health. Most recently, she has been teaching and conducting research in health policy in the School of Public Health, GWU focusing on aligning health care, public health and social determinants of health through the lens of health equity. Dr. Heinrich worked in the Obama Administration at CMMI/CMS advising on workforce issues, Accountable Health Communities and State Innovation Models. Where she directed the Bureau of Health Professions/HRSA as we implemented new workforce programs in the ACA and established the National Center for Health Workforce Analysis. Dr. Heinrich was a Director, Health Care and Public Health Issues at the US Government Accountability Office for seven years with many congressional requests on topics related to

nursing shortages, workforce distribution issues, and mental health services for children among other issues. Dr. Heinrich lobbied for and was part of the new team that established the National Center for Nursing Research, now an Institute at NIH.

Hilary Heishman*†



Hilary Heishman, M.P.H., is a senior program officer at the Robert Wood Johnson Foundation (RWJF). She has expertise in a variety of topics, with special attention to improving and connecting systems that enable people to be healthy. She has developed programs related to building communities' capacities to improve health, helping healthcare organizations address patients' social circumstances and play a strong role in improving community health, improving the use of health data and information systems, identifying healthcare payment methods that support community health, and helping people learning from one another in networks.

Heishman has been involved with public health work and research at the Northwest Center for Public Health Practice, the Washington State Department of Health's Public Health Improvement Partnership, and the University of Washington Child Health Institute. She served in the Peace Corps in Ghana, where she taught biology and coordinated HIV/AIDS prevention programs. Heishman received a bachelor's degree in Biology from the University of Virginia and a Master of Public Health in Community Oriented Public Health Practice from the University of Washington, Seattle.

Carly Hood-Ronick



Carly Hood-Ronick, M.P.H., M.P.A., is the executive director of Project Access NOW (PANOW), a non-profit in the Portland, Oregon area working to provide culturally appropriate healthcare and social service navigation for the region's uninsured. Prior to providing strategic leadership at PANOW, Hood-Ronick was a director at the Oregon Primary Care Association where she oversaw health equity and Medicaid strategy efforts with community health centers around the state, strategically identifying ways to align payment and delivery system efforts. Hood-Ronick has worked with communities in multiple states and countries to develop upstream programs and has published work on best practices in financing social care efforts. With over a decade of experience in domestic and international work, she is called upon as a leader in systems-level equity efforts, including past Co-Chair of the Oregon Health Policy Board's Health Equity Committee, supporting Medicaid metric and measurement development, and advising on community and social health data sharing efforts as Chair of the Health Information Technology's Community Information Exchange (CIE) workgroup. Hood-Ronick is deeply committed to health equity and comes at it from a lens that access to healthcare is a fundamental right. She received her Master of Public Affairs in Social Policy from the Robert M. La Follette School of Public Affairs and her Master of Public Health from the University of Wisconsin-Madison School of Medicine and Public Health.

Dora Hughes*†

Dora Hughes, M.D., M.P.H., is Chief Medical Officer at the CMS Innovation Center at the Centers for Medicare & Medicaid Services. She leads the Center's work on health equity, provides clinical input on models, liaises with stakeholder groups, and directs CMMI's clinician community. Previously, Dr. Hughes served as an Associate Research Professor of Health Policy & Management at The George Washington University, where her work focused on the intersection of clinical and community health, health equity, healthcare quality and workforce. Prior to this role, Dr. Hughes was a Senior Policy Advisor at Sidley Austin, where she advised on regulatory and legislative matters in the life science industry. Additionally, Dr. Hughes served as the Counselor for Science & Public Health at the U.S. Department of Health & Human Services in the Obama Administration, helping to implement the Affordable Care Act and providing guidance to the Public Health Service Act authorized agencies and Food and Drug Administration.

Dr. Hughes began her career in health policy as a senior program officer at the Commonwealth Fund, and subsequently was Deputy Director for the HELP Committee for the late Senator Edward M. Kennedy and Health Policy Advisor to former Senator Barack Obama. Dr. Hughes received a B.S. from Washington

University, M.D. from Vanderbilt and M.P.H. from Harvard. She completed an internal medicine residency at Brigham & Women's Hospital.

Melissa Jones

Melissa Jones, M.P.A., is Executive Director of Bay Area Regional Health Inequities Initiative (BAHRII). Her experience includes work in municipal government and non-profits, in the Bay Area's large and small cities. Jones is an active community member in Oakland and serves on the Association of Bay Area Government's Regional Planning Committee, which advises on regional planning issues. Before joining BARHII, Jones served as senior program officer at Boston Local Initiative Support Corporation (LISC), where she launched and ran Boston LISC's Resilient Communities Resilient Families (RCRF) Initiative. The initiative works to ensure that residents of Boston's Roxbury, Dorchester, and Mattapan neighborhoods benefit from the rising tide of transit and other public investments. During her tenure, RCRF engaged several thousand residents and non-profits in neighborhood planning. The program has invested millions of dollars to fund affordable housing, leadership development, Family Financial Opportunity Center programs, and a local entrepreneurship pipeline program to ensure residents' financial lives are improving. She was awarded the LISC's President's award in 2014 for her work on comprehensive community development.

Jones has additional experience funding and implementing programs focused on community economic development, family financial stability, education, and civic empowerment. Specifically, she has served in youth empowerment organizations, as Program Specialist for the City of Alameda, and as Program Analyst for the City of Oakland's Oakland Fund for Children and Youth. Early in her career, she served as Director of Professional Development for Partners in School Innovation where she trained staff to support school reform efforts in San Francisco Unified, San Jose Unified, and Oak Grove Unified school districts.

Meshie Knight, M.A., is a program officer at the Robert Wood Johnson Foundation (RWJF). She joined the RWJF in 2015 as a program associate working to improve the value of the nation's healthcare and public health systems. Knight views her role as an opportunity to use her background and education and a passion that's rooted in her deep personal experiences to shape a health system that is efficient, equitable, and committed to improving the health and well-being of all.

Previously, Knight served as a program and development associate for the Universal Health Care Foundation (UHCF) where her work included grant management, program development, and supporting policy initiatives designed to transform healthcare in Connecticut. As consultant with the Connecticut Choosing Wisely Collaborative, Knight helped establish a multi-stakeholder collective to promote shared decision-making between patients and providers. She earlier served as a communications assistant with the Center for Children's Advocacy, a non-profit law and policy organization. There, she advocated for systemic changes in the education, juvenile justice, health and child welfare systems on behalf of vulnerable children in Connecticut. Knight earned a B.A. from Howard University and an M.A. from Trinity College. She is a 2012 graduate of the Connecticut Health Foundation's Health Leadership Fellows Program.

Marsha Lillie-Blanton

Marsha Lillie-Blanton, Dr.P.H., M.H.S., is an adjunct professor of health policy and management at The George Washington Milken Institute School of Public Health. She has more than 30 years of experience working on health and health care access issues facing vulnerable populations. Dr. Lillie-Blanton previously served as the Chief Quality Officer and Director of the Division of Quality and Health Outcomes at the Center for Medicaid and CHIP Services at the Centers for Medicare & Medicaid Services (CMS). With a budget of \$500 million over 6 years, she had responsibility for establishing a health care quality measurement and reporting program for Medicaid and CHIP, oversight of state contracts for annual external quality reviews of Medicaid

managed care organizations, developing the state-federal partnership in quality improvement activities, and conducting the first-ever nationwide survey of Medicaid beneficiaries' experiences of care.

Prior to Lillie-Blanton's position with CMS, she held senior-level positions with the Henry J. Kaiser Family Foundation and the U.S. Government Accountability Office (GAO). As a vice-president with the Kaiser Family Foundation, she supported the efforts of policy analysts, provider organizations and communities in reducing racial/ethnic disparities in health care access and managed three health policy leadership development programs for students of color. In her role as an Associate Director of Quality and Public Health at GAO, she managed health policy research and evaluation teams to support the Congress in its oversight of federal government agencies.

Dr. Lillie-Blanton is active in her professional and civic community. She was a member of the Institute of Medicine's Committee on Guidance for Designing a National Healthcare Disparities Report, served on the National Advisory Council for the Agency for Healthcare Research and Quality, chaired the D.C. Medicaid Medical Care Advisory Committee for several years, and was a member of the D.C. Health Coverage Advisory Panel. She is currently a member of the Board of Directors of the Northern Virginia Health Foundation. Dr. Lillie-Blanton holds a bachelor's degree from Howard University and a master of health science and doctorate degree from the Johns Hopkins University Bloomberg School of Public Health.

John Lumpkin*

John R. Lumpkin, M.D., M.P.H., is the president of the Blue Cross and Blue Shield of North Carolina Foundation since April 2019. In addition to his role as foundation president, Dr. Lumpkin also serves as vice president, drivers of health strategy for Blue Cross and Blue Shield of North Carolina. Most recently, Dr. Lumpkin served as senior vice president, programs for the Robert Wood Johnson Foundation (RWJF) and as the first African American director of the Illinois Department of Public Health for 12 years.

Dr. Lumpkin is a member of the National Academy of Medicine and a fellow of the American Academy of Nursing, American College of Emergency Physicians, and the American College of Medical Informatics. He has also served on, and advised, several federal-level committees and commissions to advance and improve health in the US. His many distinctions and honors include the Arthur McCormack Excellence and Dedication in Public Health Award from the Association of State and Territorial Health Officials, as well as the Jonas Salk Health Leadership Award. He earned his Medical Degree and Bachelor of Medical Sciences degree from Northwestern University Medical School and his Master of Public Health from the University of Illinois School of Public Health. He was the first African American trained in emergency medicine in the country after completing his residency at the University of Chicago and has served on the faculty of the University of Chicago, Northwestern University and University of Illinois at Chicago.

Karen Minyard, Ph.D., M.N., has been director of the Georgia Health Policy Center (GHPC) since 2001 and is also a research professor with the Department of Public Management and Policy. Dr. Minyard connects the research, policy, and programmatic work of the center across issue areas including population health, health philanthropy, public and private health coverage, and the uninsured. Dr. Minyard has experience with the state Medicaid program, both with the design of program reforms and external evaluation. Her research interests include financing and evaluation of health-related social policy programs; strategic alignment of public and private health policy through collective impact; the role of local health initiatives in access and health improvement; the role of targeted technical assistance in improving the sustainability, efficiency, and programmatic effectiveness of nonprofit health collaboratives; and health and health care financing.

In addition to overseeing the center's overall strategic vision, Dr. Minyard plays a leadership role in several center projects that weave together the key learnings, skillsets, and areas of expertise of the GHPC, including evaluation, technical assistance, policy and economic analysis, backbone and organizational support, health and health care financing, health system transformation, Health in All Policies, and rural health. She is

currently co-principal investigator of Aligning Systems for Health by the Robert Wood Johnson Foundation. She also serves on the executive trio of the Atlanta Regional Collaborative for Health Improvement, along with the Atlanta Regional Commission and the United Way of Greater Atlanta.

Suma Nair

Suma Nair Ph.D., M.S., R.D., is the Director of the Office of Quality Improvement in the Health Resources and Services Administration's Bureau of Primary Health Care. The Bureau of Primary Health Care (BPHC) administers the Health Center Program that supports more than 1,400 health centers, including community health centers, migrant health centers, health care for the homeless centers, and public housing primary care centers. This network of health centers has created one of the largest safety net systems of primary and preventive care in the country providing comprehensive, culturally competent, quality health care to more than 29 million people. The Office of Quality Improvement (OQI) serves as the organizational focus for program performance including, clinical and operational quality improvement, patient safety and risk management, primary care innovation, data reporting, and program evaluation. OQI provides leadership for implementing BPHC clinical quality and performance improvement strategies/initiatives, including ambulatory care accreditation, patient centered medical home recognition, and integration of behavioral health and oral health activities within primary care. In response to the COVID19 pandemic, OQI developed and implemented the Health Center COVID-19 Vaccine, Testing Supply, Therapeutics and Mask Programs directly allocating these critical resources to health centers to advance health equity in medically underserved communities.

Prior to joining BPHC, Dr. Nair worked on program evaluation and performance improvement programs impacting more than 80 different grant programs across HRSA. Dr. Nair earned a Bachelor of Arts degree in Nutrition and a Master of Science degree in Public Health Nutrition from Case Western Reserve University, and a Doctor of Philosophy degree in Health Services Administration from the University of Maryland, College Park.

Ana Novais

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Ana Novais, Lic., serves as the Assistant Secretary for the Rhode Island Executive Office of Health and Human Services (EOHHS), the principal agency of the executive branch of state government responsible for managing the departments of: Health (RIDOH); Human Services (DHS); Office of Healthy Aging (OHA); Office of Veterans Services (VETS); Children, Youth and Families (DCYF); and Behavioral Healthcare, Developmental Disabilities and Hospitals (BHDDH). Novais stared at the Rhode Island Department of Health in 1998 as an Education and Outreach Coordinator focusing on children health issues, and later, as the Minority Health Coordinator, charged with assuring the Department addressed the health needs of the racial and ethnic minority communities of RI. In 2006, as Executive Director of Health, Novais led the department efforts to achieve health equity by focusing in the areas of Health Disparities and Access to Care, Chronic Disease Management and Prevention, Environmental Health, and Maternal and Child Health. In 2015, Novais was charged with implementing the Department Strategic Priorities and assuring the alignment of resources and operations with the strategic priorities. In 2016, Novais assumed the role of Deputy Director of Health.

Novais has developed and implemented various programs and initiatives that have received recognition both at the state and national level. Among them "Vaccinate Before You Graduate" an initiative aimed at improving vaccination rates among adolescents and the "Rhode Island Health Equity Framework" a plan of action for achieving health equity at the state and at local level through the "Health Equity Zones" initiative (HEZ). Both programs have been recognized as a best practice and are currently being implemented in other cities and states. Novais holds a Clinical Psychology degree from UCLN, Belgium, and is a graduate from the Northeastern Public Health Leadership Institute, University of Albany, NY and Leadership RI. Her career in Public Health started in 1985 in Cape Verde and includes five years in Portugal and since 1995 in the U.S.

Barbie Robinson



Barbie Robinson, J.D., M.P.P., CHC, is Executive Director for Harris County Public Health (HCPH) – the nationally accredited county public health agency for the nation's third-largest county serving a population of approximately five million people. She came to Harris County with a vision of HCPH as the Community Health Strategist for leading and enabling cross-sector partnerships that connect safety net services in an integrated way to ensure interventions, services, and programs address the social determinants of health holistically. In Harris County, she currently serves as the At-Large Representative on the Steering Committee of The Way Home Continuum of Care, the lead agency to prevent and end homelessness in the Greater Houston Area.

Prior to her appointment, Robinson served as Director of Sonoma County Department of Health Services (DHS) for five years while concurrently serving as the Interim Executive Director of the Sonoma County Community Development Commission in California for the past year. Robinson's leadership was instrumental in forming Sonoma County's ACCESS Initiative, a nationally and internationally-awarded integrated care coordination model that helps underserved and vulnerable individuals achieve self-sufficiency and well-being. This model is being replicated across the country. She led the County's COVID-19 pandemic response and oversaw the public health responses during the wildfires of 2017, 2019, and 2020 and the response to the County's largest homeless encampment in 2020.

Robinson has over 27 years of experience in health care administration, policy, and research. Before Sonoma County, she worked at the Federal level at the Centers for Medicare & Medicaid Services (CMS) for 15 years overseeing the administration of Federal healthcare programs, including Medicaid, the Children's Health Insurance Program, the Medicare Fee-for-Service program, and the Affordable Care Act. She held numerous leadership positions at CMS, including Associate Regional Administrator (ARA) of the San Francisco and Atlanta Regional Offices Division of Financial Management & Fee-for-Service Operations; her leadership earned her the Administrator's Achievement Award in 2014. Robinson earned her Bachelor of Arts with a triple major (Political Science, Spanish, and International Sociology) from Middlebury College, her Master of Public Policy, Health and Social Policy from Georgetown University McCourt School of Public Policy, and her Juris Doctor from the George Washington University Law School.

Lauren Taylor



Lauren Taylor, Ph.D., M.Div., M.P.H., is an assistant professor in the Department of Population Health at NYU Grossman School of Medicine. She studies governance and management of health improvement efforts within the United States and abroad. Dr. Taylor worked briefly as a consultant for the Global Fund and Bill and Melinda Gates Foundation and has since written on the institutionalization of global health, how to reform the World Health Organization, the responsibilities of health systems to address social determinants of health and the problem of dirty hands for health policymakers. In 2013, she co-authored *The American Health Care Paradox* with Elizabeth Bradley. Dr. Taylor holds a Masters in Public Health from Yale and a Masters in Divinity from Harvard. Her Ph.D. from Harvard Business School focused on organizational theory and business ethics.

Tequila Terry

Tequila Terry, M.B.A., M.P.H., serves as the director of the CMS Innovation Center's state innovation and population health portfolio where she leads teams responsible for the design, implementation, and management of national healthcare payment reform and delivery models across Medicare and Medicaid. In this dual role, Terry partners with states on innovative models designed to transform healthcare delivery systems, improve health outcomes, and reduce healthcare costs. She also leads prevention and population health models related to chronic disease prevention, behavioral health, opioid use disorder, and social determinants of health.

Prior to joining CMS, Terry was with the State of Maryland where she was a principal deputy director and led

the Center for Payment Reform & Provider Alignment within the Maryland Health Services Cost Review Commission (HSCRC). Terry was part of the State of Maryland's work with the Innovation Center on the unique Total Cost of Care Model where she led the team that designed the State's first multi-payer value-based payment model for physicians and the statewide population health strategy. She was responsible for collaborating with hospitals, physicians, and other stakeholders on care transformation and payment reform, and led legislative affairs, communications, and grant strategies. Additionally, she worked closely with Maryland's Medicaid department on initiatives to align with CMS' primary care models, design new episode-based payment models, and expand access to critical behavioral health, post-acute LTSS, and oral health services. Terry earned a Master of Business Administration from Emory University's Goizueta Business School, a Master of Public Health from the Johns Hopkins University Bloomberg School of Public Health, and a Bachelor of Science in Sociology from Towson University.

Joshua Traylor



Joshua Traylor, M.P.H., is a senior director for the Health Care Transformation Task Force. Prior to joining the Task Force, Traylor was with the Center for Medicare and Medicaid Innovation (CMMI) in the State Innovations Group and the Prevention and Population Health Care Models Group. While at CMMI, he supported state efforts to reform care delivery under the State Innovation Model, helped lead the design of the Integrated Care for Kids model, and provided analytic support for the design of other high priority CMMI models. Before joining CMMI, Traylor was a health policy fellow at the Center for Health and Research Transformation (CHRT) where he analyzed claims data for health insurers and developed recommendations to improve health benefit design, facilitated a local health provider collaborative to increase safety net clinic capacity, and wrote briefs on statewide hospital and FQHC service utilization in the state of Michigan. Traylor holds a bachelor's degree in biological anthropology and a master's degree in public health from the University of Michigan.

Richard Vezina



Richard Vezina, M.P.H., is a senior program officer at Blue Shield of California Foundation, leading the Foundation's work to align systems with community priorities in order to make California the healthiest state and end domestic violence. Prior to joining Blue Shield of California Foundation, Vezina was a vice president at Harder+Company Community Research, where he led evaluation and strategy engagements for foundations, nonprofits, and public agencies. Earlier, he worked in wide range of roles at organizations such as amfAR, the UCSF Center for AIDS Prevention Studies, Planned Parenthood, and Greater Philadelphia Health Action. Vezina also currently serves on the board of directors for the hunger relief nonprofit, FoodConnect. He holds a bachelor's degree from Swarthmore College and a Master's of Public Health from the University of California, Berkeley.

Emily Yu



Emily Yu, M.B.A., is the executive director of The BUILD Health Challenge and Managing Director of Partnerships at the de Beaumont Foundation. There she helps change the future of health in America and leads the charge to cultivate cross-sector collaborations that are working to give everyone a fair chance to be healthy. Skilled in program development and social marketing strategy implementation, for both the public and private sectors, Yu brings together a unique perspective that fuels her passion for both identifying and proving sustainable models for social change.

A dynamic funding collaborative, The BUILD Health Challenge is driving sustainable improvements in community health—by improving the social and environmental conditions we less readily associate with health. In support of this bold goal, Yu is forging dynamic partnerships with leading foundations, community-based organizations, hospitals and health systems, public health departments, companies, and others to tackle a wide

variety of issues, including: improving substandard housing stock, eliminating food deserts, creating opportunities for exercise and active living, and ending the cycle of domestic and gang violence, among others.

Yu earned an MBA from New York University's Stern School of Business and a BS from Georgetown University's Walsh School of Foreign Service. Yu also currently serves on the board of Grantmakers in Health.



POPULATION HEALTH FUNDING AND ACCOUNTABILITY TO COMMUNITY

A Virtual Workshop



Readings and Resources

Policy

Kindig, D. 2016, February 10. To Launch And Sustain Local Health Outcome Trusts, Focus On 'Backbone Resources'

Sullivan, J. 2019, February 21. Better State Budget Policy Decisions Can Improve Health

Wallace, J., et al. 2022, May 12. Supporting Innovation in Medicaid Policy — Interventions to Increase Adoption of RCTs. https://www.nejm.org/doi/full/10.1056/NEJMp2119726

Pay for Success

Lantz, P. and Iovan, S. 2017, December 10. When Does Pay for Success Make Sense

Nonprofit Finance Fund. 2019. Pay for Success: The First 25

Oregon Health Authority, 2021, October 16, Waiver Concept Reinvesting Savings

Community Benefit

Barilla, D. et al. 2021, March 9. Blog: Leaders offer 7 standards of excellence in community health investments

Higgins, E. 2020, November 16. Resources to Help States Maximize their Hospitals' Community Benefit Investments

Jutte, D. P., et al. Neighborhood Poverty and Child Health: Investing in Communities to Improve Childhood Opportunity and Well-Being. https://www.academicpedsjnl.net/article/S1876-2859(21)00247-3/fulltext

Kaplan, S. A. and Gourevitch, M. N. 2020, March 31, Leveraging Population Health Expertise to Enhance **Community Benefit**

Levi, J., et al. 2018, October 24. Developing A Common Framework For Assessing Accountable Communities For Health, https://www.healthaffairs.org/do/10.1377/forefront.20181023.892541/full/

Nonprofit Finance Fund. 2021. Advancing Resilience and Community Health

University Hospitals. 2021, December 8. University Hospitals Has Invested 324 billion in community benefit during the past decade

Overview of Funding Approaches

Brookings Institution. n.d. <u>Braiding and Blending Funds to Promote Social Determinants of Health</u>

Federal Reserve Bank of San Francisco and Nonprofit Finance Fund, n.d. What Matters: Investing in Results to Build Strong, Vibrant Communities

Georgia Health Policy. 2016. Financing Population Health (2016 publication from Georgia Health Policy Center, from Bridging for Health: Improving Community Health through Innovations in Financing)

Georgia Health Policy Center. 2022, March. Local Wellness Funds toolkit

Institute of Medicine. 2015. Financing Population Health Improvement: Workshop Summary. Washington, DC: The National Academies Press. https://doi.org/10.17226/18835. Financing Population Health Improvement

National Academies of Sciences, Engineering, and Medicine. 2018. *Exploring Tax Policy to Advance Population Health, Health Equity, and Economic Prosperity: Proceedings of a Workshop—in Brief.*Washington, DC: The National Academies Press. https://doi.org/10.17226/25066. Exploring Tax Policy to Advance Health, Equity, and Economic Prosperity

Nonprofit Finance Fund. 2021. <u>Lessons Learned from Partnerships Between Networks of Community-Based</u> Organizations and Healthcare Organizations

Nonprofit Finance Fund. 2021, April 28. <u>How Do Leaders from Healthcare Institutions View Social</u> Determinants of Health?

Oregon Health Authority. n.d. Community Benefit Spending

Provenzano, B., Lopez, A., Banks, A., Pineda, D. n.d. <u>How To Center Equity in Measurement, Learning, & Evaluation</u>

Additional Resources

Project Access NOW. n.d. Annual Report

Project Access NOW. n.d. Strategic Plan

Jean-Baptiste, et al. 2021, April 28. *How Do Leaders from Healthcare Institutions View Social Determinants of Health?* https://www.mathematica.org/publications/how-do-leaders-from-healthcare-institutions-view-social-determinants-of-health

JSI. n.d. https://www.jsi.com/resource/accountable-communities-for-health-strategies-for-financial-sustainability-report/

PREVENTING DISCRIMINATION, HARASSMENT, AND BULLYING EXPECTATIONS FOR PARTICIPANTS IN NASEM ACTIVITIES

The National Academies of Sciences, Engineering, and Medicine (NASEM) are committed to the principles of diversity, integrity, civility, and respect in all of our activities. We look to you to be a partner in this commitment by helping us to maintain a professional and cordial environment. All forms of discrimination, harassment, and bullying are prohibited in any NASEM activity. This commitment applies to all participants in all settings and locations in which NASEM work and activities are conducted, including committee meetings, workshops, conferences, and other work and social functions where employees, volunteers, sponsors, vendors, or guests are present.

Discrimination is prejudicial treatment of individuals or groups of people based on their race, ethnicity, color, national origin, sex, sexual orientation, gender identity, age, religion, disability, veteran status, or any other characteristic protected by applicable laws.

Sexual harassment is unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature that creates an intimidating, hostile, or offensive environment.

Other types of harassment include any verbal or physical conduct directed at individuals or groups of people because of their race, ethnicity, color, national origin, sex, sexual orientation, gender identity, age, religion, disability, veteran status, or any other characteristic protected by applicable laws, that creates an intimidating, hostile, or offensive environment.

Bullying is unwelcome, aggressive behavior involving the use of influence, threat, intimidation, or coercion to dominate others in the professional environment.

REPORTING AND RESOLUTION

Any violation of this policy should be reported. If you experience or witness discrimination, harassment, or bullying, you are encouraged to make your unease or disapproval known to the individual, if you are comfortable doing so. You are also urged to report any incident by:

- Filing a complaint with the Office of Human Resources at 202-334-3400, or
- Reporting the incident to an employee involved in the activity in which the member or volunteer is participating, who will then file a complaint with the Office of Human Resources.

Complaints should be filed as soon as possible after an incident. To ensure the prompt and thorough investigation of the complaint, the complainant should provide as much information as is possible, such as names, dates, locations, and steps taken. The Office of Human Resources will investigate the alleged violation in consultation with the Office of the General Counsel.

If an investigation results in a finding that an individual has committed a violation, NASEM will take the actions necessary to protect those involved in its activities from any future discrimination, harassment, or bullying, including in appropriate circumstances the removal of an individual from current NASEM activities and a ban on participation in future activities.

CONFIDENTIALITY

Information contained in a complaint is kept confidential, and information is revealed only on a need-to-know basis. NASEM will not retaliate or tolerate retaliation against anyone who makes a good faith report of discrimination, harassment, or bullying.

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