



## Participant Biographies

### **Thomas A. Berg**

As General Manager IS Strategic Relations, one of Mr. Berg's responsibilities is government relations for the Information Systems Division of Marshfield Clinic. Mr. Berg has been with Marshfield Clinic for 36 years and has played key roles in the development of Cattails MD, the electronic health record used at many locations throughout central and northern Wisconsin.

### **Kevin Carr, MD**

Kevin Carr, MD has achieved national recognition as founder of the TRUST model of community-wide informatics and seasoned clinical transformation professional. He has significant experience in medical informatics, clinical process improvement, physician adoption in the use of CIS and CPOE, and the management of clinical content as a part of advanced clinical information systems. Dr Carr has served as Chief Medical Information Officer of a Yale-affiliated community-based teaching hospital, helping guide the rapid implementation of Cerner's electronic medical record system with 100% physician adoption. He also served as a key founder of the multi-institutional programs Waterbury Health Access Program and eHealth Connecticut, Inc. He currently volunteers as Board of Directors Treasurer and Co-chair of the Clinical Committee for eHealth Connecticut. Dr Carr attended medical school at the University of Alabama at Birmingham. Thereafter, he completed his internal medicine residency at Yale University, going on to serve as Chief Resident and then Assistant Professor of the Yale Primary Care Internal Medicine Residency. Dr Carr has been involved in varied projects such as the US Office of the National Coordinator Program Management Office, United Kingdom London Cluster Clinical Content Strategy Team, and clinical transformation for multiple EMR systems. He strives to bring a practical voice of both physician and patient perspectives to these initiatives.

### **Gustav P. Chiarello**

Gus Chiarello is an Attorney Advisor in the FTC's Office of Policy Planning where his work focuses on competition and consumer protection regulatory advocacy and analysis. Prior to joining the FTC, Mr. Chiarello was in private practice at the law firms of White & Case LLP and Whiteford Taylor & Preston, the primary focus of which was litigation and advocacy in antitrust and regulatory law. Mr. Chiarello earned his J.D. from George Mason University, a Master of Public Policy from Georgetown University, and his B.A. in Economics from the Catholic University of America. Mr. Chiarello is a member of the Pharmaceutical and Health Care Committee of the American Bar Association's Antitrust Section, and is a member of the Board of Governors for the Virginia State Bar's Antitrust Section.

### **James Cooper**

James Cooper is the Deputy Director of the Office of Policy Planning at the Federal Trade Commission. One of his primary areas of responsibility is competition advocacy involving a wide range of industries. Prior to joining the FTC, James practiced law in the antitrust group at Crowell & Moring in Washington, D.C. James holds a J.D. from George Mason University School of Law and a Ph.D. in economics from Emory University. He has published articles on topics such as price discrimination, antitrust treatment of vertical relationships, state restrictions on competition, and the theory of competition advocacy in academic journals such as the *Antitrust Law Journal*, *George Mason Law Review*, *Journal of Law, Economics, & Policy*, and the *International Journal of Industrial Organization*.

### **Robert M. Corwin, MD, FAAP**

Dr Robert Corwin received his medical degree from the University of Health Sciences, The Chicago Medical School. After obtaining his degree, he completed his residency program in Pediatrics at the State University of New York (SUNY) Upstate Medical University (formerly SUNY Health Science Center at Syracuse). Dr Corwin served as the Chief of Pediatrics in a United States Air Force hospital for 2 years before returning to New York, where he continued practicing in various settings and where he is currently in practice at Elmwood Pediatric Group in Rochester, NY. Dr. Corwin served as Chief Medical Officer for MedBest Medical Management Company and was Medical Director for a large IPA. Dr Corwin was also managing partner in 10-pediatrician group practice for over 20 years. Dr Corwin also served as the Co-director of the Pediatric Nurse Practitioner Program at the SUNY Upstate Medical University, as Clinical Professor of Pediatrics (now Clinic Professor Emeritus) and as the Associate Chair for Community Affairs in the Department of Pediatrics. He is also currently Clinical Professor of Pediatrics at the University of Rochester School of Medicine and Dentistry.

Dr Corwin has served on the American Academy of Pediatrics National Board of Directors (1999-2005) and has held several positions on the New York State AAP Executive Committee for more than 25 years. He has provided particular expertise in the areas of finance; practice management; quality improvement; strategic planning; and chapter, state, and government affairs. Dr Corwin was elected to the New York Chapter I Executive Committee, serving from 1982-1998, serving as President from 1990-93. In addition, he was elected to the AAP District II – New York State Executive Committee in 1987. He served until 2005, acting as District Chairperson from 1999-2005.

**Mark Dente, MD**

Mark Dente started his informatics career over 17 years ago after graduating Boston University School of Medicine, focusing on new approaches to increase patient safety, drive physician adoption of technology, and create new methods to implement evidence-based medicine. As Vice President of Healthcare Solutions for GE Healthcare Integrated Information Technology, Dr Dente's responsibilities include Strategic Evaluation of Emerging Technologies. He also leads "knowledge management-clinical content strategy" for GE, including such areas as evidence-based medicine and clinical decision support. As a physician executive, Dr Dente continues to maintain close academic and industry contacts and is passionate about driving GE's "Early Health - Personalized Medicine" initiative at the national and international level.

Prior to joining GE Healthcare Dr Dente served as President of MBS Service Inc, a consulting company providing international executive healthcare management and venture capital services. Earlier in his career, he served as Vice President and Chief Medical Officer for Wang Healthcare Information Systems, and led that company's design of an ambulatory electronic medical record.

**Pam Dixon**

Pam Dixon is a researcher, author, and the executive director of the World Privacy Forum. She founded the World Privacy Forum -- a public interest research group focused on conducting in-depth privacy research -- in November 2003. There, she publishes widely cited privacy research and analysis. Ms. Dixon has authored key privacy studies, including the groundbreaking Medical Identity Theft report (2006), the first major research to be published on the topic and widely considered the definitive report on the topic. She has testified before numerous bodies, from Congressional subcommittees to NCVHS to SACGHS to the California Senate. She was appointed by California's secretary of health to the California Privacy and Security Advisory Board, where she serves as Co-Chair.

**Jamie Ferguson**

Jamie Ferguson is Executive Director of Health Information Technology Strategy and Policy for Kaiser Permanente (KP), with responsibility for health IT informatics standards, for the development of KP's health IT priorities and policies, and for supporting government and industry relations for IT along with relevant strategic planning. Mr. Ferguson leads the KP Health IT Strategy Committee, a subcommittee of the KP Health Policy Committee which develops KP's public policy related to IT. Prior to these assignments Mr. Ferguson was Executive Director of Information Management at Kaiser Permanente.

Mr. Ferguson serves on a number of national health IT organizations. In standards development and adoption, he has been active in the American National Standards Institute (ANSI) Health IT Standards Panel (HITSP), the Certification Commission for Health IT (CCHIT) and Health Level Seven (HL7). On the HITSP Board he is the national representative of healthcare providers, and he was founding co-chair of the HITSP Care Delivery Technical Committee. He leads the Transactions subgroup of the CCHIT Network Certification workgroup developing national certification criteria for Health Networks. He is HITSP chair of the CCHIT-HITSP Joint Working Group which recommends joint priorities and schedules for national standards in federal certification of electronic health records systems and health networks. Mr. Ferguson also is a member Health Level Seven (HL7) where he is active in the HL7 Electronic Health Records (EHR) Technical Committee and the Orders and Observations

Technical Committee. In an advisory capacity, Mr. Ferguson serves on the Board of Directors of the Workgroup for Electronic Data Interchange (WEDI) promoting e-commerce in healthcare and designated in HIPAA legislation as advisor to the Secretary of DHHS in HIPAA implementation. In 2007 he served on the DHHS EHR Anti-Fraud Model Requirements Executive Team. Mr. Ferguson also is active in health care industry initiatives including the personal health record (PHR) standard developed by America's Health Insurance Plans (AHIP).

### **Daniel J. Gilman, JD, PhD**

Daniel Gilman is an attorney-advisor in the Office of Policy Planning at the Federal Trade Commission, where his work focuses on competition and consumer protection issues raised by health care and technology markets. Gilman came to the FTC from the University of Maryland, where he was for two years a Visiting Professor of Law, teaching law and economics, torts and health law. Prior to Maryland, he was in private practice in Washington, DC and an Adjunct Professor and Olin Fellow at Georgetown University Law Center. Gilman earned his A.B. from Dartmouth College in 1982 and his Ph.D. from the University of Chicago in 1988, and taught bioethics, neuroscience, and the philosophy of science for a decade before pursuing his J.D., which he received from Georgetown University in 2001.

### **Web Golinkin**

Web Golinkin is the chief executive officer of RediClinic, LLC (formerly InterFit Health), which operates 'convenient care' facilities located in Wal-Mart and H-E-B stores, and provides health screenings and flu shots at retail outlets and employer worksites nationwide. For the past 23 years, Mr. Golinkin has served as chairman, vice chairman, president and/or chief executive officer of five companies, including three in the health field. In 1988, he co-founded and served as president and chief executive officer of American Medical Communications, Inc., which became one of the nation's largest producers and distributors of health-related television and video programming before it was acquired by Medsite. In 1993, he co-founded and served as chairman and chief executive officer of America's Health Network, Inc., which became the nation's largest health-related cable television network, with one of the most popular health-related websites, before it was acquired by Fox Entertainment Group, a division of NEWS Corporation. Mr. Golinkin earned a B.A. from Harvard University, is a member of World Presidents' Organization, and is president of the Convenient Care Association.

### **David Hyman**

David A. Hyman is the Richard W. and Marie L. Corman Professor of Law and Professor of Medicine at the University of Illinois, where he directs the Epstein Program in Health Law and Policy. He focuses his research and writing on the regulation and financing of health care. He teaches or has taught health care regulation, civil procedure, insurance law, law & economics, professional responsibility, and tax policy.

While serving as Special Counsel to the Federal Trade Commission, Professor Hyman was principal author and project leader for the first joint report ever issued by the Federal Trade Commission and Department of Justice, "Improving Health Care: A Dose of Competition" (2004). He is also the author of "Medicare Meets Mephistopheles," which was selected by the U.S. Chamber of Commerce/National Chamber Foundation as one of the top ten books of 2007. He has published widely in student edited law reviews and peer reviewed medical, health policy, and law journals. He is the author or co-author of more than 75 articles and book chapters.

### **Stephanie Kanwit**

Stephanie Kanwit is a senior health care consultant based in Washington, D.C. She currently serves as Special Counsel to two Washington, D.C.-based healthcare trade associations: America's Health Insurance Plans (AHIP), which represents nearly 1,300 member companies that provide health, long-term care, dental, disability, and supplemental coverage to more than 200 million Americans. And the Pharmaceutical Care Management Association (PCMA), which represents pharmacy benefit managers (PBMs) and their health care partners in pharmaceutical care.

Ms. Kanwit has been in private law practice and Government service in Chicago and Washington, D.C. for over thirty-five years. Formerly General Counsel and Senior Vice President of Public Policy and Research at the American Association of Health Plans (AAHP), she also was a Partner at the law firm Epstein Becker & Green, P.C. in Washington, D.C., where she focused on health litigation and counseling in the managed care industry. Until 1996, she served as Vice President of Health Litigation for Aetna's health businesses, responsible for managing Aetna's litigation involving antitrust, provider network issues, Medicare and ERISA issues, health care fraud and abuse in the private and governmental sectors, adverse medical outcomes, and life and long-term disability insurance.

Prior to 1992, she was in private legal practice in Chicago, at Lamet, Kanwit & Davis and before that at Chadwell & Kayser. At both firms, she represented both defendants and plaintiffs in complex commercial litigation, including antitrust, securities, Robinson-Patman, FTC Act and state unfair trade practices. She served for four years as Regional Director for the Federal Trade Commission for a seven-state region, based in Chicago. She has served on the BNA *Health Law* Advisory Board since 1999.

### **Robert M. Kolodner**

On April 19, 2007, Robert M. Kolodner MD was appointed to the position of National Coordinator for Health Information Technology (HIT). He had served as the Interim National Coordinator for HIT beginning in September 2006. Dr. Kolodner leads the Office of the National Coordinator (ONC) in making steady progress towards advancing the President's Health IT initiative. His experience in patient care, health IT, and government is invaluable to such efforts.

Dr. Kolodner came from the Veterans Health Administration in the Department of Veterans Affairs (VA), where he had been serving as Chief Health Informatics Officer, involved with the development and oversight of VistA – VA's electronic health records systems – and My Health<sub>e</sub>Vet – VA's Personal Health Record for veterans. Dr. Kolodner was a key clinical leader for the Decentralized Hospital Computer Program, VA's healthcare information system starting in 1983. In 1993, Dr. Kolodner moved to Washington, DC into a health IT management position leading all health automation activities in VA.

Since 1997 Dr. Kolodner has served in several different health IT leadership positions in VA overseeing, promoting, and guiding VA activities related to the establishment of a life-long, comprehensive, computerized clinical record for military personnel and our nation's veterans. Dr. Kolodner received his undergraduate degree from Harvard College and his medical degree from Yale University School of Medicine. He completed a clinical fellowship in Medicine at Harvard University School of Medicine and his Psychiatric residency at Washington University School of Medicine. Dr. Kolodner has medical specialty board certification in psychiatry. He is a member

of numerous professional societies, task forces and editorial boards. He has authored and co-authored articles, book chapters and books in medical and medical informatics literature and has lectured on medical informatics throughout the United States.

### **Susan D. McAndrew**

Ms. McAndrew is the Deputy Director for Health Information Privacy (HIP), Office for Civil Rights (OCR) at the US Department of Health and Human Services (HHS). As Deputy Director, Ms. McAndrew has responsibility for implementing and enforcing the Privacy Rule issued pursuant to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Ms. McAndrew has worked primarily on the HIPAA Privacy Rule for HHS since May 2000 and is the senior advisor to Winston Wilkinson, Director of OCR on HIPAA Privacy Rule matters. In addition to the HIPAA Privacy Rule, in 2006, the Secretary delegated to OCR the responsibility for enforcement of the confidentiality protections for patient safety work product under the Patient Safety and Quality Improvement Act of 2005, and the HIP Division will also lead this new enforcement effort. Ms. McAndrew has over 20 years of federal government experience. Ms. McAndrew received her J.D. from Georgetown University Law Center and, prior to joining HHS, practiced law in the District of Columbia, including twelve years at Wilmer, Cutler & Pickering (now WilmerHale).

### **Deven McGraw**

Deven McGraw is the Director of the Health Privacy Project at CDT. The Project is focused on developing and promoting public policies that ensure individual privacy as personal health information is shared electronically. Ms. McGraw has been active in efforts to establish a nationwide health information network. She serves on two workgroups of the American Health Information Community (AHIC): she is co-chair of the Confidentiality, Privacy and Security Workgroup and a member of the Personalized Health Care Workgroup. Both workgroups provide recommendations to AHIC and the Department of Health and Human Services about policies and practices to facilitate greater use of health information technology. She also serves on the Policy Steering Committee of the eHealth Initiative.

Prior to joining CDT, Ms. McGraw was the Chief Operating Officer of the National Partnership for Women & Families, providing strategic direction and oversight for all of the organization's core program areas. Ms. McGraw also was an associate in the public policy group at Patton Boggs, LLP and in the health care group at Ropes & Gray. She also served as Deputy Legal Counsel to the Governor of Massachusetts and taught in the Federal Legislation Clinic at the Georgetown University Law Center. Ms. McGraw graduated magna cum laude from the University of Maryland. She earned her J.D., magna cum laude, and her L.L.M. from Georgetown University Law Center and was Executive Editor of the Georgetown Law Journal. She also has a Master of Public Health from Johns Hopkins School of Hygiene and Public Health.

### **Amalia Miller**

Amalia Miller is an Assistant Professor of Economics at the University of Virginia. She earned a Bachelor of Science degree in Economics from MIT in 1999 and a PhD in Economics from Stanford University in 2004. Her research focus is in empirical applied microeconomics, and she is particularly interested in health policy issues that affect women and children. Her

paper on the impact of midwifery-promoting insurance regulation was awarded the 2007 Arrow Prize for Junior Economists by the Berkeley Electronic Press.

In joint work with Catherine Tucker of MIT Sloan School, Professor Miller has studied the determinants of electronic medical records (EMR) technology adoption, with a particular focus on the role of state privacy laws. They find that privacy rules inhibit hospital adoption of EMR by as much as 25%, by reducing the network benefits that would otherwise flow from the transfer of information between healthcare providers. Building on this finding, they then quantify the impact of healthcare IT adoption, which standardizes treatment options and improves patient monitoring, on infant health outcomes. Using privacy laws and adoption of health IT in nearby areas as sources of exogenous variation in IT adoption, they estimate that adoption of healthcare IT by one additional hospital in a county reduces infant mortality in that county by 13 deaths per 100,000 live births. Rough cost-effectiveness calculations suggest healthcare IT is associated with a \$450,140 cost per infant saved.

### **Nancy Nielsen**

Nancy H. Nielsen, MD, PhD, an internist from Buffalo, N.Y., was elected president-elect of the American Medical Association (AMA) in June 2007. Previously, Dr Nielsen served four terms as speaker of the AMA House of Delegates (HOD) and three terms as vice speaker. She is a delegate from New York and served two terms on the AMA Council on Scientific Affairs.

Among other AMA positions, Dr Nielsen has served as a member of the National Patient Safety Foundation board of directors, the Commission for the Prevention of Youth Violence, and the Task Force on Quality and Patient Safety. She currently serves as a delegate to the AMA Medical School Section, and she is a liaison to the Council on Medical Education. In 2002 Dr Nielsen was appointed to serve on the U.S. Department of Health and Human Services Advisory Committee on Regulatory Reform. She is the AMA representative on several quality initiatives, including the National Quality Forum, the AMA-convened Physician Consortium for Performance Improvement®, and the Ambulatory Care Quality Alliance. She serves on the Institute of Medicine's Roundtable on Evidence Based Medicine, and on the Consumer Empowerment Committee of America's Health Information Community. Dr Nielsen holds a doctorate in microbiology and received her medical degree from the State University of New York (SUNY) at Buffalo School of Medicine and Biomedical Sciences.

### **Maureen Ohlhausen**

Maureen Ohlhausen is the Director of the Office of Policy Planning at the FTC. The Office of Policy Planning coordinates the Commission's competition advocacy program, through which the Commission advises federal and state legislatures, other federal agencies, and courts about the likely effects of their actions on consumers and markets. Before coming to the FTC in 1997, Maureen worked at the U.S. Court of Appeals for the D.C. Circuit from 1992 to 1997. While there, she served as a law clerk for Judge David B. Sentelle. She graduated with distinction from George Mason University School of Law in 1991 and is a 1984 honors graduate of the University of Virginia. Maureen is an Associate Editor of the Antitrust Law Journal, Vice Chair of the Advocacy Committee of the American Bar Association Antitrust Section, and an adjunct faculty member at George Mason University School of Law, where she teaches unfair trade practices. She is a frequent speaker on competition and consumer protection topics.

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### **Joy Pritts**

Joy Pritts is a Research Associate Professor at Georgetown University's Health Policy Institute, where her research focuses on health information policies and practices. She has studied the treatment of health information under a wide range of laws including the HIPAA Privacy Rule, Medicaid confidentiality regulations, federal alcohol and substance abuse treatment regulations, the Gramm-Leach-Bliley Act, the Fair Credit Reporting Act, and state health information access and privacy laws. She has testified numerous times before Congress, the National Committee on Vital and Health Statistics, and other governing bodies. Currently, Ms. Pritts is a consultant to the IOM's Committee on the HIPAA Privacy Rule and Research. She has served on the AHRQ-funded Health Information Security and Privacy Collaboration's Technical Advisory Panel for the last 2 years. She is a board member of the National Governors Association's State Alliance for e-Health, sits on the advisory board for the Privacy Rights Clearinghouse, and is a participant of the Markle Foundation's Connecting for Health Workgroup on Consumer Access to Health Information Exchange.

### **Sara Ratner**

Sara Ratner joined MinuteClinic, a division of CVS Caremark, in 2006 as Senior Legal Counsel. At MinuteClinic, Ms. Ratner leads the legal and regulatory strategy to enable the business's growth objectives, and to become the largest retail clinic in the country currently operating over 500 clinics in 25 states. Previously, she served as Vice President, Deputy General Counsel and Chief Compliance Officer at Fiserv Health where she also chaired the company's political action committee. Prior to Fiserv Health, Ms. Ratner was an associate at the law firm Leonard Street and Deinard where she represented multi-state health plans and provider organizations.

Ms. Ratner is frequently invited to speak about the retail clinic business model and the evolving regulatory and legislative environment. She has published a number of health care articles in various journals including the Journal of Health Law and the American Health Lawyers Association. Recently, she was appointed to serve on the National Governors Association Health Care Task Force, as well as participate in the Women Business Leaders of the U.S. Health Care Industry Foundation. Ms. Ratner received her B.A., cum laude, from Washington University in St. Louis and her J.D., magna cum laude, from St. Louis University.

### **Jessica L. Rich**

Since July 1998, Jessica L. Rich has served as an Assistant Director in the Federal Trade Commission's Bureau of Consumer Protection, first in the Division of Financial Practices and now in the Division of Privacy and Identity Protection. In that position, she has handled or overseen a variety of matters related to consumer privacy and data security, including investigations, enforcement, rulemakings, workshops, surveys, reports, testimony to Congress, consumer and business education, and general policy development. Such matters have included: the FTC's privacy and data security enforcement actions against ChoicePoint, Microsoft, CardSystems, DSW Shoe Warehouse, and a variety of other commercial entities; development of the FTC's Safeguards Rule, Disposal Rule, and Children's Online Privacy Protection Act Rule; testimony to Congress regarding data breaches, data security, and the need for broader safeguards requirements; and several workshops examining emerging technologies and related privacy issues, including the FTC's recent Town Hall on behavioral advertising.

Prior to her appointment as Assistant Director, Ms. Rich served as Legal Advisor to the



Director of the Bureau of Consumer Protection and a staff attorney in one of the FTC's consumer fraud divisions. Before joining the FTC, Ms. Rich was an attorney in private practice in New York City. She received her law degree from New York University and her undergraduate degree from Harvard University.

### **William Sage, MD, JD**

William M. Sage, MD, JD, an authority on health care law and policy, is Vice Provost for Health Affairs and James R. Dougherty Chair for Faculty Excellence at the University of Texas at Austin. Before joining the faculty of UT-Austin's School of Law in 2006, he was professor of law at Columbia University. He has also had appointments as a visiting professor at Harvard and Duke. As Vice Provost for Health Affairs, Prof. Sage is charged with expanding UT-Austin's contributions to biomedical research, the health professions, and health policy in partnership with other University of Texas campuses and the Austin community. Prof. Sage's classroom offerings include Health Law, Regulation and Public Policy, Professions and Professionals, and Antitrust. His areas of research are patient safety, health care quality, access to health care, health insurance, medical liability, competition in health care, health care information, and the regulation of health professionals.

From 2002 to 2005, Prof. Sage was principal investigator for the Project on Medical Liability in Pennsylvania, an intensive investigation of medical malpractice policy funded by The Pew Charitable Trusts. In 1998, he received an Investigator Award in Health Policy Research from the Robert Wood Johnson Foundation to study antitrust and regulatory oversight of quality in health care. Prof. Sage's edited books include *Medical Malpractice and the U.S. Health Care System* (Cambridge University Press, 2006) and *Uncertain Times: Kenneth Arrow and the Changing Economics of Health Care* (Duke University Press, 2003). He has written more than 90 articles or book chapters for legal, health policy, and clinical publications, including *JAMA*, *Health Affairs*, and the *Journal of Health Politics, Policy and Law*, and the law reviews of Columbia, Duke, Texas, and Vanderbilt. He is an elected fellow of the Hastings Center on bioethics, and is a member of the editorial board of *Health Affairs*. Prof. Sage received his A.B. from Harvard College and his medical and law degrees from Stanford University. He completed internship at Mercy Hospital and Medical Center in San Diego, and served as a resident in anesthesiology and critical care medicine at the Johns Hopkins Hospital. Before entering teaching, Prof. Sage practiced corporate and securities law at O'Melveny & Myers in Los Angeles and, in 1993, headed four working groups of the White House Task Force on Health Care Reform.

### **Mary Kate Scott**

Mary Kate Scott is the Principal of Scott & Company, a strategy consulting firm for health provider and technology firms, their investors, and leading healthcare organizations. Her interests lie at the intersection of consumers, health technology, new delivery and business models. She works with leaders of hospitals, medical device firms, pharmaceutical companies, retailers and investors to evaluate the opportunity and impact of retail clinics and other growth strategies. Her recent publications include *The Hospital Retail Clinic Toolkit: a guide for hospitals to assess the opportunity and risk of operating a retail clinic*, two groundbreaking California HealthCare Foundation landscape reports on retail healthcare clinics: *Health Care in the Express Lane*; new market approaches for medical device firms; the future of remote health services, and shifting consumer healthcare payments and incentives. Ms. Scott is an Adjunct

Professor at University of Southern California, Marshall School of Business teaching Entrepreneurship in Life Science focusing on new business models in healthcare. Previously she was with McKinsey & Company and Procter & Gamble. She can be reached at [mks@marykatescott.com](mailto:mks@marykatescott.com) or via her website at [marykatescott.com](http://marykatescott.com).

### **George Scriban**

George Scriban has been involved in the business side of technology for 15 years. Today, as senior product manager for Microsoft Corp.'s new consumer health platform, HealthVault, Scriban is responsible for product strategy, marketing and planning for the core Microsoft® HealthVault platform in such areas as privacy policies, security strategy, and compatibility with industry standards. Before joining Microsoft in August 2007, Scriban served as research director with Gartner Inc.'s The Research Board Inc., a New York-based private think tank serving senior technology executives from Fortune Global 200 organizations. There Scriban ran the Digital Security Board, which delved into issues of strategic importance to member companies that included CIGNA, Merck & Co. Inc., Bank of America, The Boeing Co., BP plc, GlaxoSmithKline plc, Altria Group Inc. and Shell.

Before his work with Gartner, Scriban was product manager for search and Web analytics products at 24/7 Real Media and sales director for Insight First, which 24/7 Real Media later acquired. He has also served as director of Business Development and Strategic Relationships at OpenCola and vice president of Marketing and Sales at e-mail response management startup ESPONSIVE. He began his career in sales and marketing management at Andyne Computing Ltd., working in a variety of roles as the company grew from fewer than 20 employees to more than 250. Scriban holds an undergraduate degree in politics and English literature from Queen's University in Canada.

### **Maribeth Shannon**

Maribeth Shannon is director of the California HealthCare Foundation's Market and Policy Monitor program, which promotes greater transparency and accountability in California's health care system. Ms. Shannon's work involves the development of reliable information to assist decision-making for policymakers, providers, and purchasers of health care. She focuses on the reporting on market trends and policy analysis, such as informing statewide efforts to expand access to affordable care and coverage; advancing health care and insurer performance measurement and reporting; and increasing the availability and usefulness of information and tools for consumers. She has served on a number of state and national advisory groups regarding transparency, and is currently participating in the National Quality Forum project to develop consensus standards for public reporting of hospital quality information.

Prior to joining CHCF, she worked in health care from the provider, employer and insurer perspectives. She served as assistant vice president for clinical services development for the University of California. She has also been executive director for HCP, a Partnership for Health, an alliance of hospitals and medical groups in the San Francisco area; benefits manager for Mervyn's California; and in various management positions at Blue Cross of California. Ms. Shannon received a bachelor's degree in communications and industrial engineering from Northwestern University and a master's degree in health administration from the University of Colorado.

## **Tony Trenkle**

Tony Trenkle is the Director of the Office of E-Health Standards and Services (OESS) in the Centers for Medicare and Medicaid Services (CMS), Department of Health and Human Services (HHS). OESS is responsible for the overall coordination of CMS' e-health initiatives (including personal health records) as well as regulations, enforcement and outreach for the HIPAA Administrative Simplification standards (with the exception of privacy) and the Medicare Modernization Act e-prescribing program. Tony was also recently named as CMS' Senior Privacy Official and chairs the agency's Data Governance Board. Tony's office coordinates major HIT initiatives with a number of HHS agencies including: working with the Office of the National Coordinator on national HIT priorities especially the American Health Information Community, providing technical support to the National Committee on Vital Health Statistics' (NCVHS) subcommittee on Standards and Security, coordinating HIPAA privacy and security enforcement with the Office for Civil Rights, and collaborating with AHRQ and ASPE on HIT pilot projects.

Prior to joining CMS in 2005, Tony held a number of leadership roles for several public and private organizations. These included the Social Security Administration (SSA) where he oversaw the development of SSA's Internet on-line services for the public, and the General Services Administration (GSA) where he led GSA and Federal initiatives in electronic procurement, electronic grants, smart cards, and electronic government. As part of his GSA responsibilities, he co-chaired the Federal Electronic Commerce Program Office, where he was responsible for coordinating Federal-wide electronic commerce activities.

## **Paul L. Uhrig, JD**

As general counsel and executive vice president in charge of corporate development, Mr. Uhrig oversees all legal matters, corporate development and federal legislative affairs for SureScripts. Mr. Uhrig came to SureScripts from the law firm of Gardner Carton & Douglas LLP in Washington, D.C., where he was vice chairman of the firm's corporate department, chairman of the corporate department's regulated industries transactions practice group, and a member of the firm's health department. Prior to joining SureScripts, Mr. Uhrig represented SureScripts as its outside general counsel since its inception.

Mr. Uhrig brings 20 years of legal experience to SureScripts, focusing on the healthcare industry throughout that time. At Gardner Carton & Douglas, Mr. Uhrig focused on mergers, asset and stock acquisitions, joint venture formation and corporate planning with healthcare clients. His clients included private equity investors in middle market transactions, portfolio companies, health care systems, ancillary providers of health care services, physician groups, and investors involved with health industry projects and various other enterprises related to the healthcare industry. Prior to joining Gardner Carton & Douglas, Mr. Uhrig was a partner in the Washington office of Akin Gump Strauss Hauer & Feld LLP.

Mr. Uhrig has extensive experience structuring joint ventures and business arrangements in compliance with applicable corporate, securities and tax laws, federal and state fraud and abuse provisions, privacy laws, fee-splitting statutes and other corporate and health care regulatory provisions. Mr. Uhrig received his law degree from the American University, Washington College of Law, and his Bachelors of Arts in Economics from The University of Notre Dame.

**Douglas Wood, MD, FACP, FACC**

Dr Wood is Vice-Chair, Department of Internal Medicine, and a practicing cardiologist at the Mayo Clinic in Rochester, Minnesota. He is also co-director of the Department of Medicine Program in Innovative Health Care Delivery that has developed new laboratories to evaluate innovative health care delivery methods. He is also chair of the Division of Health Care Policy and Research. Outside Mayo, Dr Wood was a founding member of the Institute for Clinical Systems Improvement in Minnesota, a group that widely implemented practice guidelines in Minnesota which has served as a basis of other initiatives in Minnesota. Dr Wood was the leader of the Minnesota Medical Association's Health Care Reform Task Force Quality Planning Group in 2004. He now serves on the Minnesota QCare Team, appointed by Governor Tim Pawlenty as part of the National Governors Association Best Practices Academy. He has recently been named to a working group of the Legislature's Health Care Access Commission.

He is also a charter member of the JCAHO Advisory Council on Performance Measurement. In the early 1990s, Dr Wood worked on the Cooperative Cardiovascular Project, a collaborative effort between the American College of Cardiology and CMS and the forerunner to the Cardiovascular Quality Improvement Project at CMS. Dr Wood has held several important posts in coding and regulatory affairs. He is former chair of the Coding and Nomenclature Committee of the American College of Cardiology, a former member of the American Medical Association CPT Editorial Panel. Secretary of Health and Human Services Tommy Thompson, appointed Dr Wood to chair the Secretary's Advisory Committee on Regulatory Reform in 2002. This advisory group provided the Secretary with more than 250 recommendations to reduce regulatory burden and to craft long-term solutions for the way HHS conducts its business to improve processes of regulation. Dr Wood chaired the Minnesota Medicare Carrier Advisory Committee for 12 years and has served as a member of the Practicing Physicians Advisory Council of the Department of Health and Human Services.

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