

Committee on Energy and Commerce
U.S. House of Representatives
 Witness Disclosure Requirement - "Truth in Testimony"
 Required by House Rule XI, Clause 2(g)

1. Your Name: Bruce D. Greenstein		
2. Are you testifying on behalf of the Federal, or a State or local government entity?	Yes X	No
3. Are you testifying on behalf of an entity that is not a government entity?	Yes	No X
4. Other than yourself, please list which entity or entities you are representing: State of Louisiana, Department of Health and Hospitals		
5. Please list any Federal grants or contracts (including subgrants or subcontracts) that you or the entity you represent have received on or after October 1, 2009: N/A		
6. If your answer to the question in item 3 in this form is "yes," please describe your position or representational capacity with the entity or entities you are representing:		
7. If your answer to the question in item 3 is "yes," do any of the entities disclosed in item 4 have parent organizations, subsidiaries, or partnerships that you are not representing in your testimony?	Yes	No
8. If the answer to the question in item 3 is "yes," please list any Federal grants or contracts (including subgrants or subcontracts) that were received by the entities listed under the question in item 4 on or after October 1, 2009, that exceed 10 percent of the revenue of the entities in the year received, including the source and amount of each grant or contract to be listed:		
9. Please attach your curriculum vitae to your completed disclosure form. Attached		

Signature: 

Date: 12/11/2012

BRUCE DAVID GREENSTEIN

PROFESSIONAL EXPERIENCE

LOUISIANA DEPARTMENT OF HEALTH AND HOSPITALS

BATON ROUGE, LOUISIANA

2010-CURRENT

SECRETARY

- Directs the development of strategy and execution of policy for Department's portfolio.
- Chief executive overseeing five agencies and four hospitals.
- Manages about 8,000 employees.
- Responsible for the Department's P&L of the \$9.1 Billion budget.
- Latest new product launches include Bayou Health – a Medicaid managed care program with over 875,000 covered lives; Louisiana Behavioral Health Partnership, a new program to organize and manage behavioral health services to certain populations; and the Louisiana Birth Outcomes Initiative, designed to drive down prematurity and improve outcomes.
- Recent major investments that are underway include construction of a \$1.24 Billion academic medical center, \$134 Million claims and administrative management system; and

Largest Programs in the Department's portfolio:

- Emergency Preparedness and Disaster Response
- The Medicaid program
- Office of Public Health
- Offices of Behavioral Health, Aging and Adult Service, and Developmental Disabilities
- Office of Healthcare Reform

MICROSOFT CORPORATION

REDMOND, WASHINGTON

2006-2010

MANAGING DIRECTOR, WORLD WIDE HEALTH

- Directed Microsoft's worldwide health and human services sales and marketing business.
- Oversaw the worldwide go to market execution of the strategy.
- Developed, promoted and maintained relationships with health systems and government elites to drive better understanding of Microsoft's value to our customers in health.
- Drove sales execution, carrying a number for quota and plan that included health business segments from around the world.
- Grew the health vertical to nearly a billion dollar business, and was fastest growing vertical for several years.
- Beat quota four years in a row and beat plan three out of four years.
- Selected to Microsoft HiPo (High Potentials) Program – the company's senior executive bench program. This selection is made of fewer than 4% of executives.
- Out of four year, my Performance Reviews were at the top level of "Exceed."
- Exceeded revenue growth targets each of the fiscal years.
- Earned the "Win, Drive, Grow" Award.

CNSI

ROCKVILLE, MARYLAND

2005 – 2006

Vice President – Healthcare

CNSI is a systems integrator operating in federal and state government markets. CNSI is a leading innovator in large state IT systems, including the Medicaid Management Information Systems, as well as case management and vital records systems. As vice president for healthcare, I directed all corporate affairs in the healthcare vertical. Primary responsibilities include overseeing the following functions:

- **Business Development** – Grew business. Directed efforts to expand our market, create new markets and assemble promising partnerships, as well as overseeing new product development
- **Government relations** – Developed and maintained relationships with executives and decision-makers, secretaries and commissioners for health and human services, state CIOs, Medicaid directors and governors associations. Directed federal executive agency relationships.
- **Marketing** – Directed the development and dissemination of the company's message on healthcare. This includes both at the state/project level as well as in the market through publishing articles and public speaking. For examples, see attached articles and recent speaking activity.
- **HIT adoption evangelism** – Was chief spokesperson on the advantages and incentives for HIT adoption in the public sector
- **Director of Center for Healthcare Solutions & Strategies** - In addition to corporate affairs, I have also been directing a consulting practice that targets state healthcare policy. Recent activity has focused on cost simulation models covering the uninsured, state health insurance regulatory analysis and state / federal relations. I have also been asked to advise commissioners and governors on state / federal healthcare matters.

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES

CENTERS FOR MEDICARE & MEDICAID SERVICES

2003 – 2005

CENTER FOR MEDICAID AND STATE OPERATIONS

DIVISION OF WAIVERS AND DEMONSTRATIONS

BALTIMORE, MARYLAND

DIRECTOR

When I was asked to come to at CMS headquarters, I had one objective – help move Medicaid Reform. We were successful. I directed a team assisting states in overhauling their Medicaid health care systems. The direct result of the work we did was several health care reform Section 1115 waivers being approved by the Secretary of the Department of Health and Human Services. Several of these initiatives have become widely known. For example:

- Massachusetts's MassHealth Medicaid waiver – this laid the groundwork for the state nationally recognized healthcare reform
- Vermont's Global Commitment to Healthcare – the nation's first fully capped Medicaid program where savings can be used to expand the state's public health efforts
- Florida's Medicaid Reform – to open up the managed care market, provides risk assessments to enrollees and allows benefit packages to be customized
- Tennessee's TennCare Program – approved amendment to enact the state's solvency plan for the Medicaid program that changed benefit packages, eligibility and the program's population

We also provided council and direction to other states interested in reforming their healthcare systems, such as Louisiana, South Carolina, Georgia, Hawaii, New York, and California.

CENTERS FOR MEDICARE & MEDICAID SERVICES, REGION I
BOSTON, MASSACHUSETTS
DIVISION OF MEDICAID AND CHILDREN'S HEALTH
Associate Regional Administrator

The Associate Regional Administrator (ARA) is the federal official overseeing the Medicaid program for the six New England states. As ARA, I oversaw two branches to administer the Medicaid and State Children's Health Program; Financial Management and Medicaid Operations. I also served as the primary liaison to states' commissioners and secretaries for health and human services. As the director of Medicaid, I also worked collaboratively with other federal agencies, and advocacy and professional organizations.

Responsibilities of the Division include:

- Provides consultation and guidance to States on appropriate Medicaid matters including interpretation of Federal requirements, and options available to states under these requirements.
- Monitors State Medicaid Agencies program activities and practices by conducting periodic program management and financial reviews to assure state adherence to Federal law and regulations.
- Reviews, approves, and monitors State reimbursement systems and determines the allowability or non-allowability of claims for Federal financial participation (FFP); and where State expenditures have not been in accordance with Federal requirements, takes action to disallow such claims.
- Reviews States' quarterly budget estimates and statements of expenditures; recommends appropriate action on amounts claimed.
- Defers reimbursement action on questionable State claims, reviews the claims for allowability, and recommends appropriate action.
- Coordinates all of the regional office activities that facilitate the prevention and detection of Medicaid fraud and abuse activities.
- Reviews and approves Medicaid State Plan Amendments (SPAs). Reports SPA waiver activity through the National State plan and waiver (SPW) tracking system.
- Collaborates with Central Office on 1915(b), 1915(c), and 1115 waiver reviews and approval process.
- Reviews SCHIP State plan amendments and monitors SCHIP programs.
- Implements Title XIX special initiatives; provides coordination and leadership on major program initiatives, such as Maternal and Child Health, and AIDS/HIV.
- Responds to beneficiary, Congressional, Freedom of Information Act, provider, and public inquiries and requests concerning Medicaid and State Children's Health Insurance Program (SCHIP) issues.
- Conducts Medicaid Management Information Systems (MMIS) certifications and on-going evaluation of the performance of the Medicaid systems.
- Coordinates with Medicare divisions in resolving dual-eligible problems and concerns.

FRIENDS OF THE AVALANCHE CENTER
SEATTLE, WASHINGTON
501(c)(3) NOT FOR PROFIT ORGANIZATION
1999 - 2003
PRESIDENT AND CHAIRMAN OF THE BOARD OF DIRECTORS

The Friends of the Northwest Weather and Avalanche Center is a coalition of individuals and groups working to support the Avalanche Center (an office of the U.S. Forest Service) and its scientific and educational efforts to promote the safety of mountain travelers. Weather people use ski areas or go into the back-country for recreation, or travel in mountainous terrain commercial purposes, the work of the [Northwest Weather and Avalanche Center](#) is critical to safety in the mountains.

As chief executive of an all-volunteer not-for-profit, my activities were as much about 'doing' as they were about directing. The following efforts are what I directed and did much of the work myself.

- Chief Fundraiser – Developed and directed special events, corporate relationships, initiated a membership program and started many partnership giving programs (including Microsoft)
- Liaison with the US Forest Service – Served as the principle representative for backcountry users as a major stakeholder in negotiations with the federal government
- Event coordination – Directed and organized many events every year. Events included membership meetings, film premiers, fundraising bashes, education programs, and board meetings.
- Business community outreach – cultivated relationships with the local and national business community to drive support for the organization's objectives
- Overall finance, accounting, tax filing, and governance – Oversaw the accountants and attorneys handling of compliance with not-for-profit tax status, membership accounts, financial business relationships, and board of directors.
- Skiing – You have to spend time on the snow to be taken seriously in the ski industry. This was tough.

U.S. GENERAL ACCOUNTING OFFICE (GAO)

SEATTLE, WASHINGTON

HEALTH CARE GROUP

2001 – 2003

SENIOR ANALYST, ANALYST IN CHARGE

The GAO Health Care Team's work has responsibility for assisting Congressional deliberation by conducting analysis and preparing testimony and reports in all areas of health care delivery and financing. Topics of work include: Public Health; Medicare, Medicaid, and other federal / state government health financing programs; private health insurance; and Veterans' Administration and Department of Defense health care programs.

Key Contributions:

- Co-author of reports and testimony covering the following topics:
 - Emergency department and hospital systems – emergency department operations, market and community pressures on delivery systems and hospital capacity;
 - Long-term care – legal responsibility of federal / state programs, state financing arrangements, and estimating demand for services; and
 - Medicaid managed care and children's health care services – regulatory requirements, statutory authority, outcomes and coverage issues.
- Co-authored Congressional Briefing for Senate Majority Leader on health care disparities and potential methods for addressing the disparities
- Co-authored Congressional Testimony on implications of Supreme Court's Olmstead decision and demand for long-term care services
- Briefed Congressional staff on long-term care, potential impact of the Olmstead decision and the prevalence of disability
- Provided consultation to other GAO health care teams in areas of Medicaid long-term care

HEALTH CARE FINANCING ADMINISTRATION, REGION X,

SEATTLE, WASHINGTON

DIVISION OF MEDICAID AND STATE OPERATIONS

1997 - 2001

Senior Health Policy Coordinator

- Regional Principal for eligibility Medicaid policy, including:
 - The interpretation of federal eligibility law and regulations;
 - Development of new state program parameters; and

- Provide technical assistance to states on managed care
- Directed multi-state programs reviews - TANF
- Regional lead on Medicaid waivers, including long-term care, rural health, and employment related
- Provide consultation to HCFA Central Office on the operations of Federally Qualified Health Centers (FQHCs)
- Coordinate state / federal long-term care strategies; specifically:
 - Home and Community Based Waivers;
 - Consumer Directed Care;
 - Program for All Inclusive Care (PACE);
- Serve on the following Boards and Advisory Groups:
 - *Washington Medicare/Medicaid Integration Project Executive Board*
 - *Oregon Acute/Long Term Care Advisory Group*
 - *The Robert Wood Johnson Foundation State Initiative in Long Term Care Review Board*
 - *Balanced Budget Act implementation workgroups, including Quality Assurance for Medicaid Managed Care and PACE*
- **Administrator's Achievement Award – 1999**
- **Health Care Financing Administration's Certificate of Merit - 2000**
- **Health Care Financing Administration's Honor Award – 2000**

STATE OF FLORIDA, DEPARTMENT OF ELDER AFFAIRS

TALLAHASSEE, FLORIDA

4040 ESPLANADE WAY, TALLAHASSEE, FLORIDA 32399

1995 - 1997

Director, Robert Wood Johnson Foundation - State Initiative in Long-Term Care

- Directed the development of a new managed long-term care financing and service delivery product and program with an administrative budget of over \$2 million
- Successfully secured a \$24 million legislative appropriation to fund the implementation
- Developed support for the program through communication and research efforts
- Supervised a professional staff
- Developed application and contracts for providers
- Directed selection and development of managed long-term care demonstration sites
- Spearheaded an overhaul of Florida's nursing home assessment, preadmission and placement program, resulting in reduced institutionalization, lower caseloads, and department-wide budget savings
- Presented Florida's programs at national conferences, including The National Academy for State Health Policy, Agency for Health Care Policy and Research, & Department of Veterans Affairs
- Represented the Administration on Medicare funding issues
- Served as Chairman for the Global Business Research's conferences on Managed Long-Term Care
- Represented the state before national government and private sector health care industry constituencies
- Developed coalitions with state advocacy groups, managed care plans, and provider groups

STATE OF FLORIDA, AGENCY FOR HEALTH CARE ADMINISTRATION

TALLAHASSEE, FLORIDA

1994 - 1995

Senior Management Analyst II - (Senior Health Policy Analyst)

- Administered evaluation of state's managed competition system – a private insurance purchasing pool for small businesses. This study resulted in continued development of the private, small group insurance market for small businesses and greater access to affordable health insurance.
- Participated in state-wide health care reform efforts, including federal and legislative activities by costing-out competing proposals, preparing briefing papers and developing implementation strategies

- Coordinated research activities on the Robert Wood Johnson Foundation's health care reform project. Florida was one of ten states selected to collect detailed household data on health insurance behavior. Research resulted in several articles.
- Devised state uninsurance statistics using RWJ sponsored RAND data set. These statistics were used to develop state strategies to address uninsurance problems.
- Conducted comparative state health care policy studies
- Directed state managed care research efforts
- Provided policy analysis for the Administrator, Governor's Office and Legislature

UNIVERSITY OF TENNESSEE MEDICAL CENTER

KNOXVILLE, TENNESSEE

1994

Medical Ethics Resident

- Participated directly with the hospital's Ethics Committee
- Completed rotations with residents and administrators
- Conducted analysis of ethical elements of cases with teams of attending physicians in ambulatory setting and in-patient cases
- Taught financing and policy component of the medical ethics curriculum to residents

TALLAHASSEE REGIONAL MEMORIAL MEDICAL CENTER

TALLAHASSEE, FLORIDA

1991 - 1992

Strategic Planner - Finance

- Directed study on intra-hospital system transfers, leading to policy changes and realized savings
- Conducted evaluations and analysis of hospital's financial performance
- Collected, synthesized and analyzed financial and patient data to identify utilization outliers
- Prepared reports and rendered recommendations on reimbursement strategies
- Was responsible for the planning and evaluation of research projects
- Directed hospital's sub-acute and post-acute cost-benefit study

UNITED STATES HOUSE OF REPRESENTATIVES – REPRESENTATIVE LARRY SMITH

WASHINGTON, DC

1990

Congressional Intern

- Researched and drafted briefing papers for Member of Congress
- Provided staff support in areas of: Medicare, Social Security and National Endowment of the Arts
- Maintained data base

EDUCATION

UNIVERSITY OF TENNESSEE, KNOXVILLE, TENNESSEE

Pursued Doctor of Philosophy, Political Science - finished coursework, ***no dissertation***
Fields: American Government and Politics; Empirical Theory and Quantitative Methods;
and Medical Ethics

FLORIDA STATE UNIVERSITY, TALLAHASSEE, FLORIDA

Masters of Science, Interdisciplinary Social Science
Concentration: Health Care Policy and Administration
Graduation Date: August 1992

FLORIDA STATE UNIVERSITY, TALLAHASSEE, FLORIDA

Bachelor of Science

Major: Political Science: Minor: Economics
Graduation Date: April 1991

FLORIDA STATE UNIVERSITY, TALLAHASSEE, FLORIDA

Graduate Certificate in Public Administration and Policy, 1992

Graduate Certificate in Health Care Policy and Administration, 1992

LONDON STUDY CENTRE, LONDON, ENGLAND

Pursued undergraduate study of economics, literature and history

Spring 1990