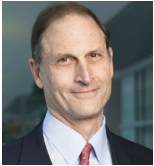


## Presenter Biographies



**David Blumenthal, MD, MPP**, serves as the national coordinator for health information technology under President Barack Obama. In this role he is charged with building an interoperable, private, and secure nationwide health information system and supporting the widespread, meaningful use of health IT.

Dr. Blumenthal received his undergraduate, medical, and public policy degrees from Harvard University and completed his residency in internal medicine at Massachusetts General Hospital. Prior to his appointment to the administration, Dr. Blumenthal was a practicing primary care physician; director, Institute for Health Policy; and the Samuel O. Thier Professor of Medicine and professor of health policy at the Massachusetts General Hospital/Partners HealthCare System and Harvard Medical School.

Dr. Blumenthal is a renowned health services researcher and national authority on health IT adoption. With his colleagues from Harvard Medical School, he authored the seminal studies on the adoption and use of health information technology in the United States. He is the author of over 200 scholarly publications, including most recently, “Heart of Power: Health and Politics in the Oval Office,” which tells the history of U.S. presidents’ involvement in health reform, from FDR through George W. Bush.

A member of the Institute of Medicine and a former board member and national correspondent for the *New England Journal of Medicine*, Dr. Blumenthal has held several leadership positions in medicine, government, and academia, including senior vice president at Boston’s Brigham and Women’s Hospital; executive director of the Center for Health Policy and Management and Lecturer on Public Policy at the Kennedy School of Government; and as a professional staff member on Senator Edward Kennedy’s Senate Subcommittee on Health and Scientific Research.

He was the founding chairman of AcademyHealth and served previously on the boards of the University of Chicago Health System and the University of Pennsylvania Health System. He is recipient of the Distinguished Investigator Award from AcademyHealth, and a doctor of humane letters from Rush University.



**Melinda Beeuwkes Buntin, PhD**, is the director of the ONC’s Office of Economic Analysis and Modeling. In that role she seeks to:

- Use economic analysis and models to describe and understand the factors driving: a) the adoption, meaningful use, and interoperability of EHRs; and b) information exchange.
- Generate reports, data, and strategies to measure ONC’s progress toward its goals and to help ONC achieve those goals.
- Provide consultation on methodologies and metrics for the design and evaluation of ONC grants, contracts, and programs.
- Contribute to ONC’s regulatory processes and policy development activities involving the analysis of costs, benefits, market forces, and other economic issues.
- Represent ONC in departmental discussions involving health policy, economics, and data analysis and policies/reforms that would leverage Health IT in the broader health economics and health services research community.

Dr. Buntin was previously deputy director of RAND Health’s Economics, Financing, and Organization Program, director of Public Sector Initiatives for RAND Health, and co-director of the Bing Center for Health Economics. Her research at RAND focused on insurance benefit design, health insurance markets, provider payment, and the care, use, and needs of the elderly. Her most recent projects include: an analysis of the best way to design a national health insur-

ance pooling system or “connector”; a study of the effects of consumer-directed health care on health care access, costs, and quality involving over 40 employers offering consumer-directed plans; and an NIA-funded study of the effects of Medicare payment changes on post-acute care costs and outcomes. Dr. Buntin has also worked on projects and published in the areas of disease management, the market for individual health insurance, Medicare payment for post-acute care, the financing of end-of-life care, physician payment, and Medicare managed care plan design and payment. She graduated from the PhD program in health policy at Harvard University where she concentrated in health economics and specialized in the economics of the Medicare program.



### **A. Mark Fendrick, MD**

Dr. Fendrick’s research focuses on the clinical and economic assessment of medical interventions with special attention to the study of emerging technologies. He has performed analyses of interventions for several common conditions including: gallbladder disease, heartburn/gastroesophageal reflux disease, arthritis/inflammatory conditions, viral infections, coronary heart disease, pediatric vaccinations, and cancer screening. These analyses are supplemented by research describing how outcomes research data can be incorporated into clinical practice and how they impact health care systems.

Dr. Fendrick has authored over 100 articles and book chapters and has given several national and international presentations pertaining to outcomes research and economic evaluation of medical interventions. He is the co-editor in chief of *The American Journal of Managed Care* and is an editorial board member for 3 additional peer-reviewed publications. He has collaborated with several government agencies and professional societies and has consulted for numerous health care companies. Dr. Fendrick has served on the board of directors of the International Society for Technology Assessment in Health Care (ISTAHC) and the International Society for Pharmacoeconomics and Outcomes Research (ISPOR).



**Sachin H. Jain** is senior advisor to the Administrator of the Center for Medicare and Medicaid Services and acting deputy director for policy and programs at the Center for Medicare and Medicaid Innovation. Previously, he was special assistant to the National Coordinator for Health Information Technology.

Dr. Jain holds his bachelor’s degree (AB), medical degree (MD), and MBA from Harvard University. He has worked previously at McKinsey and Company, WellPoint, and the Institute for Healthcare Improvement. He is the founder of [ImproveHealthCare.org](http://ImproveHealthCare.org).

While faculty at Harvard Business School, Dr. Jain worked closely with strategy professor Michael Porter on research into health care delivery reform. He was a founding member and associate director of the Global Health Delivery Project and has consulted widely across the health care sector, including for several health information technology companies. He is a recipient of the Paul and Daisy Soros Fellowship, the Henry Asbury Christian Award, and the Harvard Business School Dean’s Award.

Dr. Jain’s writings have appeared in *The New England Journal of Medicine*, *Health Affairs*, *JAMA*, and other publications. He is an editorial board member of *The American Journal of Managed Care*. The book he co-edited, *The Soul of A Doctor* (Algonquin Press: Chapel Hill), was published in 2006 and has been translated into Chinese (2008).

A native of Bergen County, NJ, Dr. Jain now resides in Washington, DC.



**Aaron McKethan, PhD**, currently serves as national program director for the Beacon Communities Program in the Office of the National Coordinator for Health Technology at the U.S. Department of Health & Human Services. Previously, he served as Research Director at the Brookings Institution's Engleberg Center for Health Care Reform, where he managed research and implementation projects focused on health IT, provider payment, quality improvement, and delivery system reform at the state and regional level. He also led several projects related to Medicare and Medicaid payment policy, quality improvement demonstrations, and national health reform. McKethan was previously a management consultant, where he focused primarily on state health reform, Medicaid financing issues, and delivery system reform initiatives. He is currently a health policy lecturer at the Department of Health Policy at the George Washington University Medical Center. He received his PhD in public policy analysis from the University of North Carolina at Chapel Hill.



**Amol Navathe, MD, PhD**, is medical officer and senior program manager, Comparative Effectiveness Portfolio for the Office of the Secretary, Department of Health and Human Services. At DHHS, he coordinates the Comparative Effectiveness Research program, including managing the implementation of funds through the Office of the Assistant Secretary of Planning and Evaluation (ASPE). Dr. Navathe leads the data infrastructure initiatives within the CER portfolio and spearheads an effort to increase coordination of these activities within the federal government as well as with states and the private sector. He brings a diverse background to this position, with training as a medical doctor, economist and health services researcher, and engineer. He is currently an adjunct faculty member at the Leonard Davis Institute of Health Economics at The Wharton School, University of Pennsylvania. His past experience includes serving as a visiting fellow at the Council of Economic Advisers in the White House, serving health care clients as a consultant with McKinsey and Company, and numerous technical and research consulting roles. He holds an MD from the School of Medicine and Ph.D. in health economics from The Wharton School at the University of Pennsylvania, and a BS in electrical engineering and economic systems from Stanford University.



**Katlyn L. Nemani** is a first-year medical student at Tufts University. She graduated with a BA from McGill University with first class honors in psychology. She has worked in clinical neurological and psychiatric research at the Montreal Neurological Institute and Massachusetts General Hospital. Her article focuses on cancer epidemiology and the role electronic health records might play in facilitating advances in this field. She is a native of Hampstead, New Hampshire.



**William Shrank, MD, MSHS**, is an assistant professor of medicine at Harvard Medical School and an associate physician in the Division of Pharmacoepidemiology and Pharmacoeconomics at Brigham and Women's Hospital. His research is focused on evaluating and comparing innovative strategies to improve adherence to chronic medications. His research interests also include evaluating quality in pharmacologic care, optimizing pharmacy benefit design, and improving prescription drug labels. He is the director and principal investigator of the CVS Caremark Harvard Partnership for Improving Medication Adherence, a multi-disciplinary research initiative to improve how patients take medication.

He is also supported by a career development award from the National Heart, Lung, and Blood Institute of the National Institutes of Health to evaluate interventions to improve rational prescribing in cardiovascular disease.

Dr. Shrank serves on the FDA's Nonprescription Drugs Advisory Committee as well as Committees on Prescription Drug Labeling for the American College of Physicians Foundation and for the USP. He attended Brown University, received his MD from Cornell University, completed his residency training in Internal Medicine at Georgetown University, and earned an MS in Health Services during a health services research fellowship at UCLA, Rand, and the West Los Angeles VA Hospital. He also practices general internal medicine at Brigham and Women's Hospital.



**Deneen Vojta, MD**, is Senior Vice President of the UnitedHealth Center for Health Reform and Modernization. As a member of the core leadership group, she supports the development of innovative new solutions to the health care challenges facing the nation. In this role, she created the partnership between the Centers for Disease Control and Prevention and the YMCA-USA, to launch the National Diabetes Prevention Program, and now serves as Executive Vice President and chief clinical officer of the Diabetes Prevention and Control Alliance.

Dr. Vojta previously served as vice president of research and innovation for UnitedHealthcare. Under her leadership, Vojta forged practical and sustainable solutions for issues confronting the health care system, including payment reform and chronic care delivery – most notably introducing a diabetes health plan to the commercial marketplace.

Before joining UnitedHealth, Vojta held several senior management positions in health care. Most recently, she served as CEO of MYnetico, a company she founded to focus on the child obesity epidemic facing the nation. Deneen has 15 years of executive experience in health system and health plan administration. Throughout her career she has successfully partnered with community stakeholders to improve the health care outcomes of her constituents, served as a board member of non-profit healthcare institutions, and received numerous federal and foundation grants to investigate complex health care concerns. Dr. Vojta is well published and frequently invited to speak on a number of health issues.

She was educated at the University of Pittsburgh (Senior of the Year) and Temple University School of Medicine (Alpha Omega Alpha). She trained in Pediatrics at the Children's Hospital of Philadelphia, and in 2003 she was named "Top 40 under 40" by the *Philadelphia Business Journal*. She lives in Edina, Minnesota, with her husband and three children.