



E-Consult Workgroup Annual Meeting

Monday, November 16, 2020

Speaker Biographies

8-9 AM FIRESIDE CHATS

AristaMD presents *E-Consult in PACE Settings*

Pamela Gould, RN, MHA, is a registered nurse with an extensive clinical background, who brings over 20 years of healthcare industry experience in nursing and healthcare sales leadership. Her healthcare career began with clinical nursing in the acute, subacute, home health care, and case management settings. As her experience grew, she transitioned her focus to healthcare sales, sales management, and training within the specialty pharmacy, provider, and payer contracting industries. Throughout Ms. Gould's career, she has had proven success in team leadership, strategic planning, market analysis, and business development, significantly growing employer revenues and profit margins. Prior to joining AristaMD, she served as the senior vice president of payer strategies for Happify Health, a digital therapeutic solutions company headquartered in New York, NY. At Happify, she oversaw national sales efforts to managed care insurers. Ms. Gould holds a master's degree in healthcare administration from Worcester State University and a registered nurse (RN) degree from Becker College. She is an active member of the American Nurses Association, American College of Healthcare Executives, and The Project Management Institute.

ConferMED presents *Nutrition Guidance through E-Consult*

Daren Anderson, MD, is Director of the Weitzman Institute and the President and Founder of its subsidiary, ConferMED, in Middletown, Connecticut. The Weitzman Institute is a research and innovations center dedicated to improving primary care for underserved populations. ConferMED is a national telehealth provider focusing on improving access to specialty care through asynchronous communication with its national network of specialists. As leader of the nation's only research and innovation center embedded within a Federally Qualified Health Center, Dr. Anderson leads a diverse team of innovators, health services researchers, educators, and quality improvement specialists working together to design new models to transform primary care for the underserved. Under his leadership, Weitzman has grown from a small, Connecticut-based institute to a national organization working closely with health centers, payers, funders, and agencies in 35 states. Weitzman researchers are engaged in a range of studies focused on issues such as health equity, telehealth, chronic disease management, and pain management in primary care. Dr. Anderson has served as the principal investigator for multiple federal and privately funded research projects, several of which focused on health disparities, healthcare access, and pain management in primary care. He has published widely and speaks nationally on primary care redesign, telehealth, and health disparities. Dr. Anderson's research in telehealth and electronic consultation at the Weitzman Institute formed the basis of a new model for embedding eConsults into safety net primary care practices. This model was the basis for creating ConferMED, a national eConsult provider now engaged in supporting practices in 18 states across the US, as well as internationally. Dr. Anderson began his career as a general internist providing primary care for medically underserved patients in New Britain, Connecticut. He subsequently served as Chief Medical Officer and then Chief Quality Officer for Community Health Center, Inc., a large, multisite health center providing

primary care to over 150,000 patients across Connecticut. Dr. Anderson obtained his undergraduate degree at Harvard College and his medical degree from the Columbia University College of Physicians and Surgeons. He completed his residency training in internal medicine at Yale-New Haven Hospital and is a board certified general internist. He is Associate Professor of Medicine at the Frank Netter School of Medicine at Quinnipiac University, and Assistant Clinical Professor for the Yale School of Public Health

RubiconMD presents *Managing Behavioral Health Conditions*

Nicole Deaner, MSW, is the Senior Director of Behavioral Health Solutions at RubiconMD. Nicole spent the first decade of her career providing direct mental health services to children, women, and elders, as well as advocacy in the court system. Over the last 18 years, she has worked in a variety of leadership roles building products and services to support primary care networks to evolve their care models and improve patient experience and outcomes. She helped to build and lead the Colorado statewide implementation of the Comprehensive Primary Care Initiative as well as the statewide family medicine residency collaborative to improve residency training and education around primary care transformation. During her most recent tenure at CareAllies, she built a practice transformation service line that had proven results for independent practices in improving their quality and cost outcomes.

Safety Net Connect presents *Lessons Learned from the VA*

The Honorable Dr. David J. Shulkin was the ninth Secretary of the US Department of Veterans Affairs (VA). Nominated by President Trump to serve in his Cabinet, Secretary Shulkin was confirmed by the US Senate by a vote of 100-0. Secretary Shulkin previously served as Under Secretary for Health having been appointed by President Obama and confirmed unanimously by the US Senate. As Secretary, Dr. Shulkin represented the 21 million American veterans and was responsible for the nation's largest integrated health care system with over 1,200 sites of care, serving over 9 million Veterans. VA is also the nation's largest provider of graduate medical education and major contributor of medical research and provides veterans with disability payments, education through the GI bill, home loans, and runs a national cemetery system. Prior to coming to VA, Secretary Shulkin was a widely respected healthcare executive having served as chief executive of leading hospitals and health systems including Beth Israel in New York City and Morristown Medical Center in Northern NJ. Secretary Shulkin has also held numerous physician leadership roles including the Chief Medical Officer of the University of Pennsylvania Health System, the Hospital of the University of Pennsylvania, Temple University Hospital, and the Medical College of Pennsylvania Hospital. Secretary Shulkin has held academic positions including the Chairman of Medicine and Vice Dean at Drexel University School of Medicine. As an entrepreneur, Secretary Shulkin founded and served as the Chairman and CEO of DoctorQuality, one of the first consumer oriented sources of information for quality and safety in healthcare. He has served on boards of managed care companies, technology companies, and health care organizations. Secretary Shulkin is the University of Pennsylvania Leonard Davis Institute Distinguished Health Policy Fellow. He is a board-certified internist. He received his medical degree from the Medical College of Pennsylvania, his internship at Yale University School of Medicine, and a residency and Fellowship in General Medicine at the University of Pittsburgh Presbyterian Medical Center. He received advanced training in outcomes research and economics as a Robert Wood Johnson Foundation Clinical Scholar at the University of Pennsylvania. Over his career, Secretary Shulkin has been named as one of the Top 100 Physician Leaders of Hospitals and Health Systems by Becker's Hospital Review and one of the "50 Most Influential Physician Executives in the Country" by *Modern Healthcare* and *Modern Physician*. He has also previously been named, "One Hundred Most Influential People in American Healthcare" by *Modern Healthcare*.

9 AM-2PM MAIN SESSION

Alpesh Amin, MD, MBA, MACP, SFHM, FACC, is with the University of California–Irvine (UCI) in the capacity of the Tom and Mary Cesario Chairman, Department of Medicine. He is Professor of Medicine, Business, Public Health, Nursing, and Biomedical Engineering at UCI. He is also founder and executive director of the Hospitalist Program. Dr. Amin has served as Vice Chair for Clinical Affairs and Quality for 12 years, Chief of the Division of General Internal Medicine (GIM) for six years, Associate Program Director of the Internal Medicine Residency Program for 14 years, and Medicine Clerkship Director for 14 years. Dr. Amin obtained his MD degree at Northwestern University Medical School, Chicago, Illinois, and later he completed his internship and his residencies in internal medicine, including a chief residency, at UCI. Also at UCI, he earned a healthcare MBA. Dr. Amin is the first Hospitalist to be named Chief of a Division of GIM, and then subsequently the first Hospitalist to be named Chairman of a Department of Medicine nationally. Throughout his career, Dr. Amin has been innovative in clinical, quality, and educational program development. He has advised the Hamad Medical Corporation in Doha, Qatar on quality improvement efforts across eight hospitals under the national health ministry council. He has developed processes to improve patient care delivery looking at ways to reduce readmission and avoidable admissions, as well as improvements in length of stay, mortality, and customer service. Dr. Amin is an expert in implementation science and measuring outcomes to improve sustainable long lasting results. He has also applied information technology to improve the delivery of care through development of projects such as NHCPlus, eConsults, Apps for Safe Anticoagulation Use, and others. Dr. Amin has served as principal investigator, co-investigator, and faculty sponsor on clinical trials and research projects focusing on clinical topics such as VTE, pneumonia, and heart failure. His research interest is in health outcomes related to patient safety & quality improvement and medical education. He is a member of professional organizations such as the Society of Hospital Medicine, the American College of Physicians, the Society of General Internal Medicine, Academic Chiefs and Leaders of General Internal Medicine, Academic Alliance of Internal Medicine, and Association of Professors of Medicine. Dr. Amin has authored or co-authored over 225 peer-reviewed articles. He is the co-editor/co-author of the *Core Competencies for Hospital Medicine* by SHM. He served as Chair of SHM's Education Committee for four years, the 2006 SHM Annual Meeting Course Director, and was on the SHM's Board of Directors. Dr. Amin was Associate Editor of *Hospital Medicine Secrets*. Dr. Amin is also co-editor of the book *Contemporary Hospitalist Guide to Anticoagulation and OB/GYN Hospital Medicine*. Among Dr. Amin's numerous awards and honors include the American College of Physicians Special Recognition Award, a Masters of the ACP, a Senior Fellow of SHM, Fellow of the ACC, and Fellow of the RCP (London), named as one of "America's Top Physicians" by the Consumers' Research Council of America, Orange County Physician of Excellence Award, and ACP's Top 10 Hospitalist Award. Dr. Amin is also the recipient of the Alfred Soffer Award from the ACCP, the Venous Research Award for Quality Improvement and Implementation of Best Practices from the Venous Disease Coalition (VDC)/Vascular Disease Foundation (VDF), Exceptional Leadership Award by ALCGIM, CDC's HA-VTE Prevention Champion, and HMC's Stars of Excellence Award. He founded and directs the UCI Anticoagulation Clinic, which is recognized nationally as an AC Forum Center of Excellence.

Lisa M. Arfons, MD, is currently serving as the Acting Clinical Deputy, Office of Veteran Access to Care, at the Veterans Health Administration (VHA), where she has also been a Senior Medical Advisor focusing on specialty care access initiatives for the past 2.5 years. She also works as a Hematology/Oncology staff provider at the Louis Stokes Cleveland VAMC where she has been the sole E-consult provider for her section for over nine years. Dr. Arfons has also served as program planning committee member for the Association of VA Hematology/Oncology and is a member of the VHA Oncology Field Advisory Committee. She received her Bachelor of Classics degree from John Carroll University before matriculating at Case Western Reserve University School of Medicine. She was named the Community-Based Outpatient Clinic Subspecialist Provider of the Year in both 2012 and 2016 by her Cleveland VAMC colleagues.

Bill Barcellona serves as the Executive Vice President for Government Affairs for America's Physician Groups, a national professional association of over 300 medical groups and independent practice associations across the US. Physician group members share a common goal to provide accountable, value-based health care services. Mr. Barcellona develops and advocates state and federal policy for the organization, manages litigation and appellate cases, and manages legislative and regulatory issues. He has been with the Association since 2005. Mr. Barcellona is a former Deputy Director for Plan-Provider Relations at the California Department of Managed Health Care (DMHC). He has practiced law since 1985 in California, and prior to his service at DMHC, he spent 16 years at two major law firms in Newport Beach and Sacramento, primarily as a civil litigator. His current legal experience includes general health law matters with an emphasis in Knox Keene Act and managed care issues. He enjoys teaching and lecturing across the country on health care management, operations, and policy matters, and he has served as an adjunct faculty member at the USC Price School from 2006 to 2019, teaching health administration policy and management courses in the MHA, MPA, and MMM programs.

Michael Barnett, MD, is Assistant Professor of Health Policy and Management at the Harvard T.H. Chan School of Public Health and a primary care physician at Brigham and Women's Hospital. Dr. Barnett received his MD from Harvard Medical School and completed a residency and fellowship in primary care and general internal medicine at Brigham and Women's Hospital. His research focuses on understanding and improving the health care delivery system with a specific interest in the opioid crisis, nursing homes, and studying innovative models for health care payment and care delivery. His research has received best research of the year awards from the Society of General Internal Medicine and AcademyHealth and has also been featured in national media including the *New York Times*, National Public Radio, and CNN. He is an Associate Editor at *Healthcare: The Journal of Delivery Science and Innovation*, the official journal of AcademyHealth, and a recipient of a Career Development Award from the National Institute on Aging.

Greg Buchert, MD, MPH, is the CEO of GSB Health Management Solutions, an independent consulting firm. He is also engaged in angel investing and serves on the advisory boards of several healthcare start-ups. Dr. Buchert is an E-Consult Workgroup Clinical Advisor. He is the former President and Chief Executive Officer of Blue Shield of California's Promise Health Plan that serves 500,000 Medicaid, Medicare, and dual eligible members in California. He previously served as the Chief Executive Officer that launched Centene's first Medicaid Managed Care Plan in California and later as Chief Medical Officer of HealthNet. His previous positions include work as a Principal Consultant with Health Management Associates, a national healthcare consulting firm, and as the Chief Operating Officer and Medical Director for CalOptima, a public managed care company for which he was a founding executive. Dr. Buchert started his career as a pediatric emergency physician serving in leadership positions at two children's hospitals and as administrative director of a medical group.

Robby Franceschini, JD, MPH, is Director of Policy at BluePath Health (BPH). In this role, he supports clients' strategic needs for health policy, government relations, and business development. His expertise encompasses Medi-Cal, telehealth, and health information exchange (HIE), and his client experience includes work with foundations, government agencies, health care start-ups, and payers. Prior to joining the BPH team, Mr. Franceschini worked with Cleveland Clinic's legal department and also supported Medi-Cal policy development at the National Health Law Program's Los Angeles office. He also gained experience in science and technology policy and ethics as an AAAS Emerging Leaders in Science and Society Fellow and research assistant for NIH- and Wellcome Trust-funded projects. He holds a BA, JD, and MPH from the University of Washington.

Stan Frencher Jr., MD, MPH, is the CMO of WISE Healthcare. He is a father, husband, surgeon activist, health services researcher, physician executive, and virtual care innovator with a focus on vulnerable and underserved populations with the goal of ameliorating healthcare inequities and health disparities. He is an Associate Professor of UCLA Urology, Director of Urology, and Chair of Perioperative Services Department at Martin Luther King, Jr. Community Hospital (MLKCH). Dr. Frencher received his MD from Albert Einstein College of Medicine and concurrently his MPH as a Macys Scholar from Columbia University's Mailman School for Public Health, completed his residency in general surgery and urology

from Yale-New Haven Hospital, and completed a Robert Wood Johnson Foundation Clinical Scholars Program at UCLA. He focuses on developing, implementing, and evaluating innovative approaches to addressing health inequities by improving access to specialty care, expanding the role of virtual care among vulnerable populations, men's health, outcomes and community-partnered research, as well as leading the urology effort at MLKCH.

Andrea Frey, JD, MPH, is an Associate Attorney in the San Francisco office of Hooper, Lundy & Bookman, PC. Her practice focuses on transactional and health care regulatory matters, with an emphasis on health privacy, digital health, licensure and certification, scope of practice, and medical staff issues. She regularly assists providers, including hospitals, health systems, health care districts, digital health providers, and health care businesses on general corporate and regulatory matters, including compliance issues presented by telehealth. Ms. Frey is also the co-chair of the firm's Digital Health Task Force.

Paul Giboney, MD, is the Associate Chief Medical Officer for the second largest public health system in the US, the Los Angeles County Department of Health Services (LADHS). In this role, he seeks to leverage innovative technologies and care delivery systems to improve the quality of, and access to, health services. He oversees the LADHS eConsult program that has conducted over 1.2 million consultations and has transformed specialty care access for more than 5,000 health care providers seeking assistance in 65 specialty services. In performance improvement programs like PRIME and QIP, he directs LADHS' patient care enhancements in over 100 projects that touch every area of the health care system. He has served on the National Quality Forum (NQF) Telehealth Committee and is currently on the Board of Directors for the California Health Care Safety Net Institute. Dr. Giboney is an E-Consult Workgroup Clinical Advisor. Before joining LADHS, he spent more than 10 years in clinical care and leadership at two Los Angeles area community health centers. He is a graduate of Northwestern University Medical School. He completed his training in family medicine and served as Chief Resident at John Peter Smith Hospital in Fort Worth, Texas. He is a practicing provider and currently sees adult and pediatric patients at the H. Claude Hudson Comprehensive Health Center.

Joel Gray serves as Executive Director for Anthem Blue Cross' California Medicaid health plan, which services over 1.2M members across 29 urban and rural counties. In this role, he is responsible for provider network performance, provider account management, clinical & quality value-based payment (VBP) programs, operations support, growth strategies, and telehealth/virtual care innovation. Mr. Gray has two decades of diverse industry experience across commercial, Medicare, and Medicaid markets. He is highly passionate about improving health equity for underserved populations, collaborating with providers, and driving operational excellence. Prior to his current role, he led the northern California regional Medicaid health plan for Anthem Blue Cross, which served over 500k members. He was accountable for financial performance (P&L) and state-level operations, including provider relations, contracting, marketing, medical management, quality, health education, and county relations. Mr. Gray has also served in other leadership roles with Anthem, including as the California Compliance Officer and as a Growth Director. Prior to joining Anthem, he served in several operational roles at Health Net, including customer service, account management, employer group sales, underwriting, data analytics, compliance, and enterprise risk management. He also founded and grew a successful physical therapy corporation into five outpatient clinics in Los Angeles, where he primarily served as the Chief Operating Officer. He currently serves on the Governance Committee for the Integrated Healthcare Association (IHA). In this role, he helps drive the strategy of a statewide VBP collaboration of 10 health plans and over 200 physician organizations caring for 9 million patients. He also serves on the board for the River City Food Bank to help alleviate hunger in Sacramento County. Mr. Gray earned a bachelor's degree from Western Governor's University in Computer Information Systems.

Susan R. Kirsh, MD, MPH, has served as the National Access Executive for VA since August of 2018 and in numerous roles during her 23 year career with the Veterans Health Administration. Dr. Kirsh practiced as an internist for many years at the Cleveland VAMC and has led initiatives in VA Central Office in the Primary Care Program Office with Patient Centered Medical Home and Shared Medical Appointments and in Specialty Care nationally implementing e-Consults, SCAN-ECHO, Specialty Care

Neighborhoods, and Mini-Residencies. Since March 2015, she has led access to care efforts such as implementation of the practice management program for outpatient care across VA, same day services, direct scheduling for specialty care, and is currently a senior executive in VA nationally leading access to care. Dr. Kirsh is currently leading efforts to improve access through telehealth and Clinical Contact Centers across VA. She received her Doctor of Medicine degree from the Medical College of Ohio in Toledo, Ohio. She completed her residency in Internal Medicine at the University of Cincinnati in Cincinnati, Ohio and Northwestern Medical Center in Chicago, Illinois. Dr. Kirsh is certified with the American Board of Internal Medicine and received a Master of Public Health degree from Case Western University in Cleveland, Ohio. She is a member of the American College of Healthcare Executives, Society of General Internal Medicine, Medical Group Management Association, and the American College of Physicians. Dr. Kirsh was a Faculty Scholar in the VA Quality Scholar Program in 2008 and holds a Professor of Medicine appointment at Case Western Reserve University in Cleveland, Ohio, and an Assistant Professor position at the Georgetown University School of Nursing.

Kenneth W. Kizer, MD, MPH, currently serves as the Chief Health Care Transformation Officer and Senior Executive Vice President of Atlas Research. Dr. Kizer is a highly experienced physician executive whose diverse professional experience includes senior leadership positions in the public and private sectors, academia, and philanthropy; and he has the rare distinction of having been elected to both the National Academy of Medicine and the National Academy of Public Administration. He has previously served as founding President and CEO, National Quality Forum; Under Secretary for Health, US Department of Veterans Affairs, and chief executive officer of the nation's largest healthcare system, during which time he engineered the internationally acclaimed transformation of the Veterans Healthcare System in the late 1990s; founding Chairman, President and CEO, Medsphere Systems Corporation, a leading commercial provider of subscription-based health information technology; founding Director, Institute for Population Health Improvement and Distinguished Professor, University of California, Davis; inaugural Chief Medical Officer, California Department of Managed Health Care; Director, California Department of Health Services; and Director, California Emergency Medical Services Authority, where he was the architect of the state's EMS and trauma care systems in the early 1980s. During his record tenure as California's top health official, he won high praise for orchestrating the state's response to the HIV/AIDS epidemic, implementing California's famed Tobacco Control Program and the '5-a-Day' for Better Nutrition Program that was later adopted for national implementation, pioneering Medicaid managed care, and restructuring many of the state's public health programs. He also has served on the US Preventive Services Task Force and as Chairman of The California Wellness Foundation, as well as on the governing boards of a number of managed care, health IT, and telehealth companies; foundations; and non-profit organizations. He is an honors graduate of Stanford University and the UCLA Schools of Medicine and Public Health, the recipient of two honorary doctorates, and a fellow or distinguished fellow of 12 professional societies. He is board certified in six medical specialties and/or subspecialties and has authored over 500 original articles, book chapters, and other reports in the professional literature. His accomplishments have been recognized with dozens of awards, and he has been selected as one of the '100 Most Powerful People in Healthcare' by *Modern Healthcare* magazine on several occasions. His work has been featured in *Time*, *BusinessWeek*, *Fortune*, the *Wall Street Journal*, *New York Times*, and numerous other magazines, newspapers, and national television shows.

Timi Leslie is the Founder of BluePath Health and has worked for more than 20 years with healthcare policy organizations, IT providers, and consulting firms. With her "inside the beltway" experience at federal healthcare agencies, Ms. Leslie offers a unique combination of expertise in both national and California health care policy and regulation. She is a recognized expert in health IT and health care policy, analysis, and futures, and she is frequently asked to join policy committees and to contribute to and speak at industry events. Ms. Leslie began her career as part of the health care and technology strategy practices at Andersen Consulting and Coopers and Lybrand. She left the consulting industry to lead product management and business development for CareScience's health information exchange and interoperability division. After four years at CareScience, Ms. Leslie started a boutique health care consulting firm that later merged with Manatt, Phelps & Phillips, LLP, a legal and health policy firm. Prior to founding BluePath Health, she was a vice president at Booz Allen Hamilton where she led the San Francisco commercial and government health care practice. Ms. Leslie brings broad-based experience

working with public and private boards and executive leadership to her BluePath clients. She has worked with think tanks and policy groups to convene and facilitate summit meetings on health care policy and strategy. Ms. Leslie is also an expert on the future of health IT. In 2013, she served as a judge for Allscript's Open App Challenge for which 98 developers entered applications that integrate directly with the company's EHR software. She is an advisor and judge for the Southern California Health Technology Acceleration Program (HTAP), created in 2011 by the von Liebig Entrepreneurism Center at UC San Diego. She holds a BS in civil and environmental engineering from University of California at Davis.

Julia Murphy, MSc, is Director of Dissemination at the Peterson Center on Healthcare. In this role, she is responsible for designing and implementing the Center's initiatives to spread and scale models of care that have been identified and validated as producing the best outcomes at the lowest cost. Previously, she was a consultant to the Clinical Excellence Research Center at the Stanford School of Medicine where she jointly led an effort to identify the highest performing primary care practices in the US on measures of both quality of outcomes and total cost of care. Ms. Murphy was a 2012-13 UK Commonwealth Fund Harkness Fellow in Health Care Policy and Practice working on healthcare value. Before that, she headed the National Health Services of London's primary care quality improvement program. She designed and guided implementation of the first regional transparency-based primary care improvement initiative for the London district of the NHS. The initiative was selected by the NHS for national replication implementation, and she was awarded the Health Service Journal award for Enhancing Care with Data and Information Management. Ms. Murphy was also responsible for the design and execution of programs that rapidly increased childhood immunization uptake across London and that were recognized by the Health Protection Agency as a national example of rapid improvement. Prior to her work in London, she served as health improvement performance management lead for NHS Health Scotland, where she designed and implemented Scotland-wide health improvement initiatives.

Denise D. Payán, PhD, MPP, is an Assistant Professor of Public Health in the Department of Public Health at the University of California, Merced (UC Merced). She is the principal investigator of the Community Health & Innovative Policy (CHIP) Lab at UC Merced and is Deputy Director of the statewide research translation center known as the California Initiative for Health Equity & Action (Cal-IHEA). Dr. Payán is a health policy researcher whose interests include examining the health policymaking process, evaluating interventions to address obesity and nutrition-related health disparities, and understanding how policy impacts health behavior. Her work has been published in *Social Science & Medicine*, *Health Communication*, *Health Education & Behavior*, *Health Promotion Practice*, and many other peer-reviewed journals.

Christopher Perrone, MPP, is Director of the California Health Care Foundation's Improving Access team, which works to improve access to coverage and care for low-income Californians. He was previously Director of the foundation's Health Reform and Public Programs initiative, where he led efforts to improve the policies and practices that shape Medi-Cal and other publicly funded health care programs, and to promote greater transparency and accountability within these programs. Prior to joining CHCF, Mr. Perrone served as Director of Planning for the Massachusetts Division of Medical Assistance. He was the first external recipient of the Globe Award, given by the Office of Strategic Planning at HCFA (now CMS), for his work to improve the delivery and financing of acute and long-term care services for low-income seniors. He has also held positions with The Lewin Group, the American Psychological Association, and the Center for Health Policy Studies at Georgetown University. Mr. Perrone received a bachelor's degree from the University of California, Berkeley, and a master's degree in public policy from Harvard University.

Libby Sagara has deep experience in health care and technology program management, facilitation, business development, and communications. Her work focuses on managing clients, teams, technology partners, and program funders. Prior to consulting for BluePath Health, she was a Senior Associate at Booz Allen Hamilton, where she managed projects in health information exchange, strategic and operational planning, life sciences process improvement, and not-for-profit business planning. Ms. Sagara worked at Manatt Health Solutions, the policy and business advisory division of Manatt, Phelps, & Phillips, LLP, where she managed health information exchange planning efforts. Her past experience

includes instructional design and technology usability management at BenefitPoint, and change management and communications consulting at Cambridge Technology Partners. She holds a BA in international relations from the University of California at Davis.

Abbie Totten joined Health Net, Inc. in January 2015 and serves as Medi-Cal Program Officer. She is responsible for the combined Health Net and California Health & Wellness 31 county Medi-Cal service area. In this role, she is responsible for overall business performance including growth, program development, and profit and loss. Ms. Totten previously served as the Vice President of Government Programs Policy & Strategic Initiatives, overseeing Medi-Cal product performance and regulatory policy development. Prior to her role at Health Net, Ms. Totten served as the Director of State Programs for the California Association of Health Plans (CAHP). In this capacity, she represented California's health plans participating in the public programs, including Medicaid and CHIP. Ms. Totten oversaw CAHP's regulatory response to proposals and new policies impacting the public programs and health plan operations. Prior to this position, Ms. Totten was a consultant to CAHP from 2007 – 2010. She also served for three years as the Policy Director for the Local Health Plans of California (LHPC), representing California Medi-Cal Managed Care Local Initiative Health Plans. In addition, she was Legislative Advocate for Molina Healthcare of California, working in the Legislature to support the interests of California's Medi-Cal Managed Care Program. Ms. Totten graduated Summa Cum Laude from the University of Minnesota, earning bachelor of arts degrees in child psychology and English.

Delphine S. Tuot, MDCM, MAS, is an Associate Professor of Medicine in UCSF's Division of Nephrology at Zuckerberg San Francisco General Hospital and Trauma Center (ZSFG), Associate Chief Medical Officer for Specialty Care at Diagnostics at ZSFG, and Director of the UCSF Center for Innovation in Access and Quality. Dr. Tuot is also an E-Consult Workgroup Clinical Advisor. She obtained her undergraduate degree at Stanford University, medical degree from McGill University Faculty of Medicine, and she completed her residency and fellowship at the University of California San Francisco.

Susie White, MBA, is the Chief Operating Officer (COO) of Inland Empire Health Plan (IEHP) as of July 2019. She leads IEHP's overall day-to-day operations and is responsible for implementing strategic initiatives and policies that support the Mission, Vision, and Core Values of IEHP and the delivery of cost-effective and efficient care to its more than 1.2 million members. Her areas of accountability include Member Services, Provider Services, facilities management, security, business systems configuration and support, and delegation oversight. Ms. White has more than 20 years of experience at all levels of health plan operations. She has demonstrated progressive leadership with a focus on innovation, efficiency, and transparency from a collaborative, process-based perspective. She is highly regarded for her commitment to driving IEHP's team culture, developing new leaders, and fostering key relationships across the organization and the community. Her vast knowledge of complex regulations covering Medi-Cal and Cal MediConnect Plan (Medicare-Medicaid Plan) membership, especially network administration and oversight, are integral to the operations and strategic direction of IEHP. Ms. White embodies the IEHP team culture and is committed to its Vision and Mission, having joined IEHP in 1998 and having served in various roles of increasing responsibility in the Provider Services department. In her most recent position as Executive Director of Health & Provider Services, she directed multiple diverse teams in the integrated delivery of company-wide strategic objectives, seamless medical (health care) service operations, process and system improvement, and support of IEHP's LEAN transformational journey. Ms. White was instrumental in the development of the organization's Provider Call Center, which centralized calls into one location with an emphasis on improving customer service and increasing Provider satisfaction survey scores. She also spearheaded the innovative \$45 million Network Expansion Fund (NEF), which resulted in the addition of more than 300 board-certified primary care physicians (PCPs), specialists, and mid-level providers to the Inland Empire. Ms. White earned both her bachelor of science degree in health care management and her MBA in management and leadership from the University of La Verne.

Adam Whitlock is manager of primary care for Arkansas Blue Cross and Blue Shield, where he serves as the leader of a multi-organization and multi-payer primary care stakeholder group supporting practices across the state of Arkansas. Mr. Whitlock is responsible for the day-to-day management of primary care programs. He has worked closely with practices and providers in the state Patient-Centered Medical

Home and Comprehensive Primary Care Plus initiatives in addition to hospital systems partnered with Arkansas Blue Cross in accountable care organization models. He earned his bachelor's degree in biblical studies from Central Baptist College in Conway, Arkansas in 2008.

Carol Yarbrough is Business Operations Manager, TRC, UC Health and E-Consult Workgroup Clinical Advisor. She is a healthcare compliance and reimbursement specialist. Providing a unique background in legal, technology, revenue management, clinic management, and both federal and state regulations, for the past four years, she has actively contributed to telehealth initiatives at UC Health. Ms. Yarbrough works hands-on with professional fee and hospital-based fee professionals to implement billing strategies and provides real-time feedback to clinicians regarding documentation and staff with encounter guidance. She also trains CPT coding professionals at UC Medical Center in order to maximize EMR workflow with greater documentation and coding understanding.