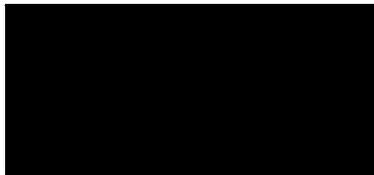


**Committee on Energy and Commerce**  
**U.S. House of Representatives**  
Witness Disclosure Requirement - "Truth in Testimony"  
Required by House Rule XI, Clause 2(g)(5)

<b>1. Your Name: Elizabeth Mitchell</b>		
<b>2. Your Title: Vice-Chair</b>		
<b>3. The Entity(ies) You are Representing: Physician-Focused Payment Technical Advisory Committee</b>		
<b>4. Are you testifying on behalf of the Federal, or a State or local government entity?</b>	<b>Yes</b>	<b>No</b> x
<b>5. Please list any Federal grants or contracts, or contracts or payments originating with a foreign government, that you or the entity(ies) you represent have received on or after January 1, 2015. Only grants, contracts, or payments related to the subject matter of the hearing must be listed.</b>		
<b>6. Please attach your curriculum vitae to your completed disclosure form.</b>		

**Signature:**



**Date: Nov 6 2017**

## PRESIDENT & CEO

### EXPERTISE

Executive Leadership | Strategic Planning and Partnerships | Multistakeholder Collaboration  
Transparency & Public Reporting | Healthcare Cost & Quality Measurement  
Employer Engagement and Value Based Purchasing | Healthcare Data and Analytics | Healthcare Payment Reform  
Public Policy & Government Affairs | Communications

### PROFESSIONAL EXPERIENCE

#### **Network for Regional Healthcare Improvement**

*Portland, ME, 2013-Present*

#### **President and Chief Executive Officer**

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- Responsible for all strategic, financial and operational functions of national membership organization of multi-stakeholder Regional Health Improvement Collaboratives (RHICs). Increased staff from 1 to 23 in 36 months and budget from \$700k to \$7m.
- Launched the Center for Healthcare Transparency, a national non-profit to make healthcare cost and quality information publicly available through a regional network of healthcare data intermediaries.
- Launched the Collaborative Health Network, a national network to disseminate and share healthcare improvement strategies.
- Launched and led the Total Cost of Care pilot to measure and report standard commercial cost and resource use across seven states and engage physicians and employer to use data for improvement.
- Established NRHI as research partner with Harvard and NBER to understand healthcare system structure and impact on patient outcomes and as a CMS Support and Alignment Network to assist practices transitioning to risk models.
- Developed and led NRHI's Government Affairs program, established Regional Health Improvement Collaboratives in federal statute and significantly influenced Qualified Entity program regulations and MACRA rules.

#### **Maine Health Management Coalition**

*Portland, ME, 2008-2013*

#### **Chief Executive Officer**

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- Responsible for all strategic, financial and operational functions of employer-led multi-stakeholder coalition to improve value of healthcare services and for Coalition its related Foundation. Increased staff from 1 to 13 and annual budget from \$700k to \$6m in 5 years.
- Built multi-payer commercial claims database and established governance structure, negotiated arrangements with all commercial health plans, and construction of legal architecture for data sharing across multi-stakeholder membership with varying levels of transparency and access to data.
- Developed healthcare data analytics team and product suite of quality, cost and utilization analyses for employers and physicians.
- Oversaw development of physician practice reports working directly with physicians and population health management reports for employers.
- Named fourth Qualified Entity in the US under CMS Qualified Entity Certification Program.
- Led statewide multi-stakeholder performance measurement and public reporting program of hospitals and physician practices. Website rated among best in the US. Only state in US with 100% hospital participation in Leapfrog and medication safety surveys.
- Supported multiple private employers to integrate publicly reported performance information into value based purchasing and benefit designs.

# J. ELIZABETH MITCHELL

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- Led statewide voluntary public reporting initiative of patient experience using CG-CAHPS. Program evaluation showed correlation to greater physician engagement in quality improvement and Maine ranked 2nd in improvement in healthcare quality in 2010 by the Agency for Healthcare Research and Quality (AHRQ).
- Led direct employer-provider delivery system redesign and payment reform pilots with multi-stakeholder governance.
- Designed and led effort for Maine's successful State Innovation Model (SIM) Award from Center for Medicaid and Medicare Innovation resulting in \$33 million award to Maine with Maine Health Management Coalition as designated 'Implementation Partner'.
- National speaker in multiple forums including, providing invited testimony before Congress on the role of Regional Health Improvement Collaboratives.

## **MaineHealth**

*Portland, ME 2004–2008*

### **Senior Director for Public Policy**

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- Initiated, developed and launched MaineHealth's first systemwide transparency efforts and public reporting of cost and quality information.
- Initiated development of MaineHealth Center for Quality and Safety, obtained senior executive and board support and funding; served on CQS Steering Committee, MaineHealth Quality Improvement Council, and faculty member for Boards on Board curriculum to educate new hospital board members.
- Initiated adoption of Balanced Scorecard format to integrate performance data and targets into strategic planning at three member hospitals and system level.
- Directed MaineHealth's Government Relations Program and managed contracted lobbyists. Achieved passage of critical legislation and budget items including The Hospital Cooperation Act and Medicaid settlement funding. Maintained MaineHealth's involvement and leadership in state health care reform efforts.
- Directed MaineHealth's Employer Relations Program and served on Board of Maine Health Management Coalition.
- Co-Chair of Maine Health and Education Collaborative with regional community colleges, University and hospitals to plan for healthcare workforce needs; awarded \$1.8m federal grant to expand training.

## **Mitchell Health Solutions**

*London, England, 2002-2003*

### **Independent Health Policy Consultant**

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- Developed and ran seminar series for senior representatives of UK Government, NHS, and private health care sector on care integration. Findings published by The Nuffield Trust.
- Organized briefing on private sector health contracting for Blair Senior Health Advisor and policy staff.
- Contracted by NHS Confederation for review of Commission for Health Improvement; findings submitted to Government and published.
- Contracted by National Patient Safety Agency to write report on cultural changes required to reduce medical errors.

## **The Nuffield Trust**

*London, England, 2000-2002*

### **Director of Public Affairs**

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- Developed and implemented new public affairs strategy to increase visibility and authority of Trust; identified priorities for Trust funding and policy projects.
- Managed media relations and contracted Public Relations firm: achieved significant increase in media coverage.
- Represented Trust with national and international health officials and served as spokesperson for television and news interviews.

# J. ELIZABETH MITCHELL

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## Atlantic Fellow in Public Policy

*London, England, 1998-1999*

### Academic Visitor, London School of Economics

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- One of 8 US public policy professionals selected nationally by Commonwealth Fund and British Council for 10-month fellowship.
- Conducted research on NHS quality reforms; findings submitted to British Foreign Commonwealth Office.
- Presented seminars and lectures on US health policy and politics.

## Maine State Legislature

*Augusta, ME, 1994-1998*

### State Representative

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- Represented Portland's East End and Casco Bay Islands in Maine State Legislature.
- Served as House Chair, Health and Human Services Committee in second term, achieved record number of unanimous committee reports.
- Sponsored and passed major health and welfare reform legislation.
- Selected for numerous national leadership and executive education programs, including American Council of Young Political Leaders, and UVA's Darden School Program for Emerging Political Leaders.

## National Academy for State Health Policy

*Portland, ME, 1993-1998*

### Senior Policy Analyst

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- Identified health care trends; designed and managed policy studies.
- Authored policy reports, briefs and journal articles; published in national journals.
- Conducted site visits to research state health policy reform.

## EDUCATION

London School of Economics and Political Science, *Department of Social Policy*

Cambridge University, *Judge Institute for Management Studies*

Reed College

London, England

Cambridge, England

Portland, Oregon

## LEADERSHIP POSITIONS

### Current

- Vice Chair, Physician Focused Payment Model Technical Advisory Committee
- Guiding Committee Member: Health Care Payment Learning and Action
- Editorial Board of The American Journal of Managed Care
- Member, CMS Quality Improvement Systems Technical Expert Panel
- Member: International Women's Forum

## Former

- Board and Executive Committee Member: National Quality Forum
- Consensus Committee: Institute of Medicine Core Measures for Better Health at Lower Cost
- Coordinating Committee: Measures Application Partnership
- Board member: National Business Coalition on Health, Chair, Government Affairs Committee
- Board Chair: Network for Regional Healthcare Improvement
- Member: Maine State Legislature, Chair Health and Human Services

## Relevant Recent Publications

Mitchell E, Hasselman D Healthcare Reform Post AF4Q: A national Network of Regional Collaboratives Continues Healthcare Reform from the Ground Up, AJMC, Aug 23, 2016

Sadran D, Steele G, Mitchell E Population-Based Payment Models: Overcoming barriers, Acceleration Adoption, HCP LAN, May 16, 2016