

## **Innovations in Employment-Based Health Benefits: Lessons Learned for Public Policy**

*EBRI-ERF Policy Forum #69*

Barbara Jordan Conference Center  
Henry J. Kaiser Family Foundation  
1330 G Street NW  
Washington, DC 20005

Thursday, December 15, 2011  
8:30 a.m. – 12:30 p.m.

### *Speakers & Discussants*

#### **Charlie Clark**

---

Charles J. Clark is Milliman's Director of Employee Benefit Research Group, and Chairman of the EBRI Research Committee. Charlie's time is devoted to assisting Milliman's benefits consultants and their clients with the impact of regulatory related issues on their employer sponsored benefits plans. He is very honored to have assumed his EBRI Executive Committee responsibilities this year, as Milliman was a founding member of EBRI in 1978.

He has been a consulting actuary since 1980 concentrating on US retirement systems. He has been an active member of Washington DC retirement committees at ABC, ERIC and FEI for many years. He also represents Milliman on committees serving the actuarial profession.

In 2004, Charlie was appointed by Secretary of Labor Elaine Chao for a three-year term as the actuary on the ERISA Advisory Council, and in 2006 he was appointed by President Bush and Congress as a delegate to the 2006 Saver's Summit.

#### **Sander Domaszewicz**

---

Sander is a Principal and Senior Consultant housed in the Mercer Health & Benefits Services (Mercer) Newport Beach, California office. He is Mercer's National Practice Leader for Consumerism and leads Engagement efforts for the Total Health Management group, specializing in emerging benefits and ways to encourage groups to become involved and informed around health care cost and quality. Areas of focus include health care strategy, consumer directed health care, health management, health and benefits decision support tools, web health resources, HR portals and online benefits.

Sander's prior experience includes project management in the Health & Group Benefits Delivery Services group at a large multi-national consulting firm for flexible benefits administration outsourcing. In this capacity he addressed outsourcing issues, systems integration, design, and testing as well as database administration and training relating to flexible benefits. Prior to benefits outsourcing project management, Sander managed a hearing health care facility in Southern California, giving him exposure to issues from the provider perspective.

Sander is a frequent presenter at health care and benefits-related events and has published articles in Benefits Quarterly, Employee Benefit News, HR Magazine, Workforce and HR Executive. His consulting assignments include work with many large and small public and private organizations in both the benefits and product development areas.

Sander holds a Bachelor of Science degree in Mechanical Engineering from San Diego State University, a Masters degree in Business Administration from the University of Phoenix and a certificate in Human Resources Management from Cornell.

## **Jim Dwyer**

---

Jim Dwyer is the Vice President of Employee Benefits for the American Express Company.

He is the senior leader for several global HR functions at American Express: health, wellness, employee incentives/recognition, work/life benefits, employee communication and expatriate services. Since joining American Express, he has supported senior business in HR consulting roles and led corporate groups such as compensation, benefits and employee/labor relations.

He is a graduate of Iowa State University's School of Business (M.S. ILR). Jim is a Certified Compensation Professional and a member of the Executive Committee of EBRI, a trustee of the American Benefits Council, and a board member of NBGH's Institute for Cost Solutions.

## **Paul Fronstin**

---

Paul Fronstin is a senior research associate with the Employee Benefit Research Institute, a private, nonprofit, nonpartisan organization committed to original public policy research and education on economic security and employee benefits. He is also Director of the Institute's Health Research and Education Program, and oversees the Center for Research on Health Benefits Innovation. He has been with EBRI since 1993.

Dr. Fronstin's research interests include trends in employment-based health benefits, consumer-driven health benefits, the uninsured, retiree health benefits, employee benefits and taxation, and public opinion about health benefits and health care. In 2010, Dr. Fronstin was appointed to the Institute of Medicine (IOM) Committee on Determination of Essential Health Benefits. He currently serves on the steering committee for the Emeriti Retirement Health Program. He is also the associate editor of *Benefits Quarterly*. In 2002 he served on the Maryland State Planning Grant Health Care Coverage Workgroup. In 2001, Dr. Fronstin served on the Institute of Medicine Subcommittee on the Status of the Uninsured.

Dr. Fronstin earned his Bachelor of Science degree from SUNY Binghamton and his Ph.D. in economics from the University of Miami. Dr. Fronstin can be reached at [fronstin@ebri.org](mailto:fronstin@ebri.org).

## **Jon Gabel**

---

Jon Gabel is a Senior Fellow with NORC at the University of Chicago in Washington D.C., a non-profit research organization dedicated to objective research in the public interest. From 1986-2008 he was the principal investigator or co-principal investigator of the Kaiser Family Foundation Health Benefits Survey and its predecessors' surveys. Mr. Gabel's was Vice President of the Center for Studying Health System Change from 2005-2006. From 1999-2005 Mr. Gabel was Vice President for Health Systems Studies at the Health Research and Educational Trust (HRET). He formerly was Director of the Center for Survey Research for KPMG Peat Marwick LLP. He has served as Director of Research for the American Association of Health Plans and the Health Insurance Association of America, industry trade associations representing HMOs and health insurance companies. Mr. Gabel is the author of more than 130 published articles in scholarly journals and books including 57 in the influential journal *Health Affairs*. He has served on the editorial boards of a number of journals. He is a frequent speaker at business and professional meetings, is often quoted in the media, and has appeared on many major national television news networks. He holds degrees in economics from the College of William and Mary and Arizona State University.

## **LuAnn Heinen**

---

LuAnn Heinen is vice president of the National Business Group on Health with responsibility for the Institute on Health, Productivity and Human Capital and the Institute on Innovation in Workforce Well-being. The National Business Group on Health is a Washington, DC based nonprofit representing large self-insured employers. Heinen earned a Master of Public Policy from the Kennedy School of Government at Harvard University and an A.B. in human biology with distinction from Stanford University.

## **L. Doug Melton**

---

Doug Melton, a Senior Health Economic Evaluator for the Cigna Analytics department, leads the development, production, and application of healthcare-related analytics to identify opportunities for continuous improvement of products and services. He supports analytic needs across multiple US business lines including employer segments, medical, disability, and network. He helps support the business by providing expertise in:

- behavioral economics,
- advanced trend analytics,
- measurement of health risks and employee productivity, and
- evaluation of programs and services using pragmatic experimental designs.

By partnering with the business lines, these analytic capabilities enable efficient and informed, evidence-based decision-making about the effectiveness of the organization's products and services. Doug and his analytic colleagues recently completed work related to post-discharge case management, employee incentives, employee wellness engagement, short-term disability, employee productivity, and consumer-directed benefit design. Doug remains connected and involved in the health services research community and industry. He has spoken on behavioral economics at national account client forums. He has also presented his research on employer-sponsored health plan selection at Academy Health, a professional organization that promotes interactions across the health research and policy arenas by bringing together diverse constituents to share their perspectives. He has authored and co-authored white papers and peer-reviewed publications, including those in behavioral economics, clinical oncology, and hospital readmissions.

Doug holds a Ph.D. in Health Policy and Management from the University of North Carolina at Chapel Hill. He was a recipient of the prestigious pre-doctoral fellowship that was funded by the Agency for Healthcare Research and Quality.

Contact Info:  
[Larry.Melton@Cigna.com](mailto:Larry.Melton@Cigna.com)  
(919) 260-1568

## **Stephanie Pronk**

---

Stephanie Pronk is a principal and leads Aon Hewitt's national clinical and health solutions team. Stephanie combines more than 25 years of experience in developing, implementing and evaluating health improvement strategies both domestically and globally while using the power of data analytics to provide evidence-based health solutions for clients that improve health and productivity while positively impacting the bottom line.

## **Ann Robinow**

---

With more than 35 years of health care experience, Ann currently serves as an independent consultant to providers, plans, public and private purchasers, specializing in incentive alignment for improved value.

Previously, she co-founded and served as President, Patient Choice Healthcare Inc. a spin-off of the widely acclaimed Buyers Health Care Action Group where she led their innovative value based purchasing initiative, winner of the 2005 National eValue8 Innovations Award, and the 2006 “NBCH Driving Value in Health Care” award. Representative projects include working with providers on ACO transformation, health plan development of aligned payment models and products, strategy and implementation of MN’s health reform law, and a Commonwealth Fund paper, *The Potential of Global Payment, Insights From the Field*.

## **Murray Ross**

---

Murray Ross is Vice President, Kaiser Foundation Health Plan, and leads the Kaiser Permanente Institute for Health Policy in Oakland, California. The Institute seeks to leverage evidence and experience from the nation’s largest private integrated health care delivery system to shape policy and practice. His current work focuses on how the U.S. health system can make more effective use of new drugs, devices, and medical procedures and how to encourage greater integration of care delivery to improve quality. Before joining Kaiser Permanente in 2002,

Dr. Ross was a policy advisor to the United States Congress. He served five years as the executive director of the Medicare Payment Advisory Commission, an influential nonpartisan agency charged with making recommendations on Medicare policy issues to the Congress. Previously, he spent nine years at the Congressional Budget Office, ultimately leading the group charged with assessing the budgetary impact of legislative proposals affecting Medicare and Medicaid.

Dr. Ross earned his doctorate in economics from the University of Maryland, College Park, and completed his undergraduate work in economics at Arizona State University. He enjoys distance running, writing, and traveling.

## **Dallas Salisbury**

---

Dallas Salisbury, president and CEO of the Employee Benefit Research Institute (EBRI), joined EBRI as the chief staff executive at its founding in 1978. EBRI is a nonprofit, nonpartisan research organization that does not lobby and does not advocate or oppose any policy position. EBRI’s mission is to provide objective information regarding the employee benefit system based on verifiable facts.

Salisbury serves on numerous advisory groups and boards, has written and lectured extensively on economic security issues, and is interviewed regularly by the news media. Prior to joining EBRI, Salisbury held full-time positions with the Washington State Legislature, the U.S. Department of Justice, the Employee Benefits Security Administration of the U.S. Department of Labor, and the Pension Benefit Guaranty Corporation (PBGC). He holds a B.A. degree in finance from the University of Washington and an M.P.A. from the Maxwell School of Citizenship and Public Affairs at Syracuse University. Dallas grew up in Everett, WA, and now resides in Washington, D.C.

More detail is available at EBRI’s Web site at [www.ebri.org](http://www.ebri.org)

## **Joe V. Selby**

---

Joe V. Selby, M.D., M.P.H., is the first Executive Director of the Patient-Centered Outcomes Research Institute (PCORI). A family physician, clinical epidemiologist and health services researcher, he has more than 35 years of experience in patient care, research and administration. He will identify strategic issues and opportunities for PCORI and implement and administer programs authorized by the PCORI Board of Governors.

Building on the work of the Board and interim staff, Selby will lead the organizational development of PCORI, which was established by Congress through the 2010 Patient Protection and Affordable Care Act. In addition to creating an organizational structure to carry out a national research agenda, Selby will lead PCORI's external communications, including work to establish effective two-way communication channels with the public and stakeholders about PCORI's work.

Selby joined PCORI from Kaiser Permanente, Northern California, where he was Director of the Division of Research for 13 years and oversaw a department of more than 50 investigators and 500 research staff working on more than 250 ongoing studies. He was with Kaiser Permanente for 27 years. An accomplished researcher, Selby has authored more than 200 peer-reviewed articles and continues to conduct research, primarily in the areas of diabetes outcomes and quality improvement. His publications cover a spectrum of topics, including effectiveness studies of colorectal cancer screening strategies; treatment effectiveness, population management and disparities in diabetes mellitus; primary care delivery and quality measurement.

Selby was elected to membership in the Institute of Medicine in 2009 and was a member of the Agency for Healthcare Research and Quality study section for Health Care Quality and Effectiveness from 1999-

2003. A native of Fulton, Missouri, Selby received his medical degree from Northwestern University and his master's in public health from the University of California, Berkeley. He was a commissioned officer in the Public Health Service from 1976-1983 and received the Commissioned Officer's Award in 1981.

He serves as Lecturer in the Department of Epidemiology and Biostatistics, University of California, San Francisco School of Medicine, and as a Consulting Professor, Health Research and Policy, Stanford University School of Medicine.

Selby was appointed PCORI executive director on May 16, 2011, and formally begins his duties on July 1, 2011.

## **Erick Shrauger**

---

Erick Shrauger is Healthways' leader for Colleague benefits and well-being. Erick and the human resources team are focused on delivering benefits that improve the well-being of Healthways' Colleagues and their families. This focus is supported by our internal purpose to create a community that inspires each Colleague to live their best life, as well as our organizational purpose to create a healthier world, one person at a time.

Erick has more than 15 years of experience in the healthcare market. Prior to joining Healthways in early 2010, Erick worked in the benefits consulting environment as a senior consultant in Towers Watson's (previously Watson Wyatt) Healthcare & Benefits Practice and Mercer's Health & Welfare practice. Erick has worked on the health plan side for Oxford Health Plans and HealthNet of the Northeast (both purchased by UHC) as a senior underwriter.

Erick holds a B.S. degree in business administration from the University of Connecticut and an M.B.A. degree in finance from Fairfield University. He has attained the CEBS (Certified Employee Benefits Specialist) professional designation.

## **Gretchen Young**

---

Gretchen Young is the Senior Vice President, Health Policy, for the ERISA Industry Committee (ERIC). She works in Washington, D.C., where her primary responsibilities include working as a registered Congressional lobbyist on federal health issues and monitoring the work of Congress and the executive agencies with respect to health benefits. Her primary focus over the past three years has been the Patient Protection and Affordable Care Act and the accompanying regulations. She also has devoted considerable time and attention to employer wellness programs and the threats to them posed by the Genetic Information

Nondiscrimination Act and the Americans with Disabilities Act. Prior to her work at ERIC, Ms. Young covered both retirement and health issues for several large consulting firms. She has worked for over 25 years in the employee benefits field, including stints at three federal agencies that regulate ERISA plans - IRS, PBGC, and DOL.