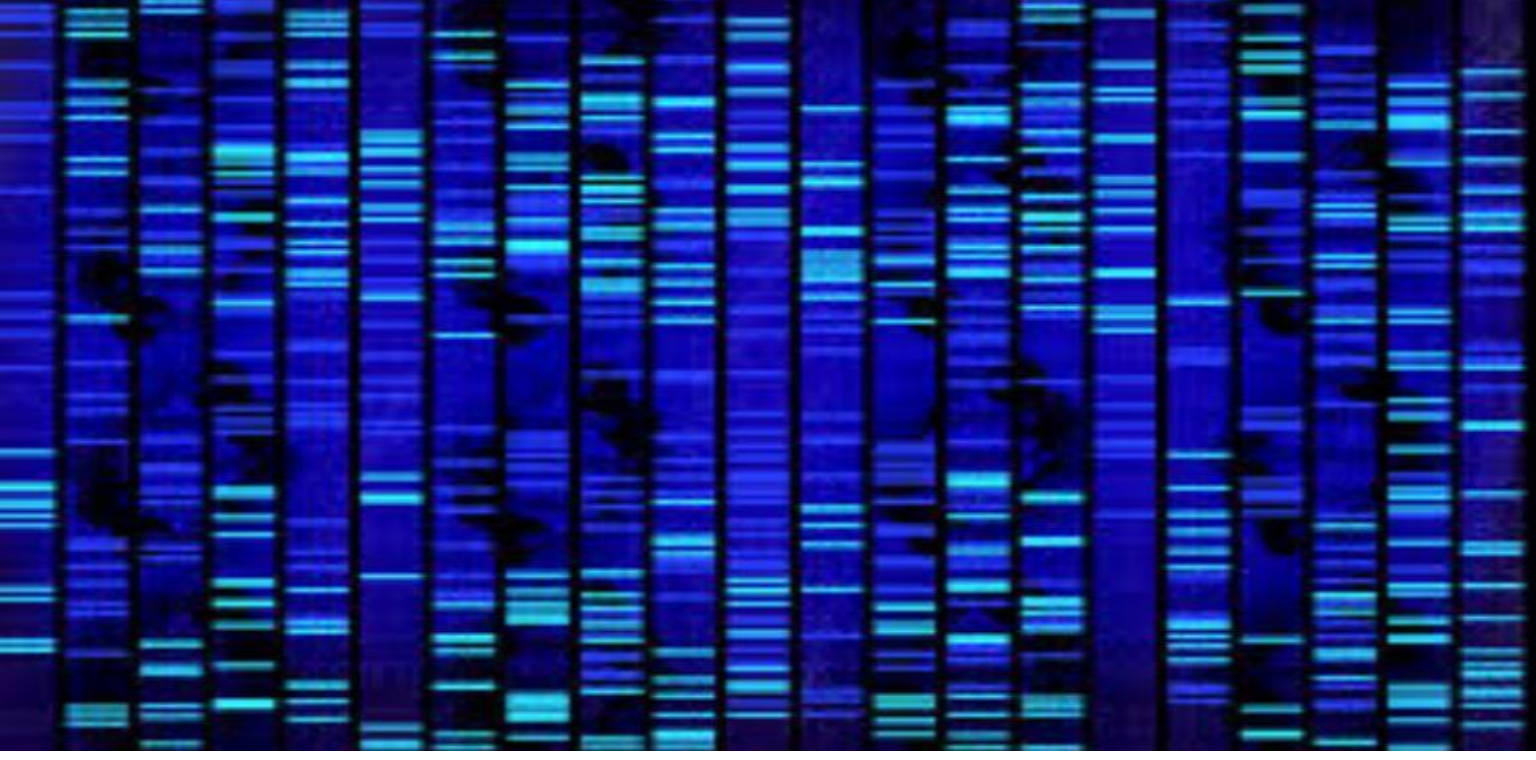

PARS 2020
Pharmacogenomics Access & Reimbursement Symposium

Uniting Internationally to Advance Precision Medicine

October 8, 2020

The GoldenHelix FOUNDATION

PARC Pharmacogenomics Access & Reimbursement Coalition

Dear Colleague,

The Pharmacogenomics Access & Reimbursement Symposium, PARS 2020, is a symbol of progress as a coalition, as an industry and as a nation. The promise of precision medicine is strong; the ability of value-based care to advance the highest-quality, cost-conscious outcomes is resolute; the approach of value-based care and payments to all aspects of health care is sound. With your participation along with key stakeholders across industries, sectors and the globe, we can together champion the promise of precision medicine.

PARS 2020 serves as a platform to increase patient access to high-quality, cost-conscious personalized health care provided by health insurance. Through this gathering, we seek to break down barriers - real or perceived - that stand in the way of advancing and paying for the promise of personalized medicine, which we know will dramatically improve the quality of and delivery of health care to patients around the world.

PARS 2020 is a symbol of opportunity to every patient, provider and purchaser of health insurance to align with and share in this vision for the future. Through this landmark symposium, we will explore the possibilities of what we can accomplish together when we create new ways of thinking about access to and reimbursement for the highest-quality, cost-conscious care.

Please join us this fall and participate in a unique opportunity to champion the beliefs, ideas and vision that will inspire others to redefine the definition of what is possible.

Sincerely,

Benjamin Brown
Co-Chair, PARC

SL Rogers

Sara Rogers, Pharm.D.
Co-Chair, PARC

PARS 2020

Venue

NATIONAL ACADEMY OF SCIENCES BUILDING

2101 Constitution Ave NW

Washington, D.C.

PARS 2020

Agenda

Session I

8:00 am **Registration and Breakfast**

8:30 am **Opening Remarks**

Benjamin Brown, CEO, Dynamic Life Sciences

Sara Rogers, PharmD, Director of Clinical Affairs, American Society of Pharmacovigilance

8:35 am **Welcome & Introduction**

Christina Mitropoulou, MBA, Managing Director, The Golden Helix Foundation

George Patrinos, PhD, Professor and Head, University of Patras Department of Pharmacy

8:40 am **Health Technology Assessment: Global and US trends, challenges in its use in pharmacogenomics and digital health**

PRESENTER | **Finn Børlum Kristensen**, MD, PhD, Managing Director, Science & Policy Consultancy

9:00 am **Towards clinical implementation of pharmacogenomics in British Columbia, Canada: The case of drug treatments for people with depression**

PRESENTER | **Stirling Bryan**, PhD, President, BC Academic Health Science Network

9:20 am **PGx in a New Era of Healthcare: Keeping it REAL**

PRESENTER | **April Zambelli - Weiner**, PhD, CEO, TTi Health Research & Economics

9:40 am **Open Forum**

10:10 am **Short Break**

Session II

10:30 am **Targeting Value Assessment for Personalized Medicines**

PRESENTER | **Richard Willke**, PhD, Chief Science Officer, ISPOR

10:50 am **Bringing Adverse Drug Events Out of The Shadows**

PRESENTER | **Kristine Ashcraft**, MBA, Head of Pharmacogenomics, Invitae

11:10 am **Pragmatic application of modeling from diverse perspectives: Examples from genomic medicine implementation projects**

PRESENTER | **Marc Williams**, MD, Genomic Medicine Institute, Geisinger Health System

11:30 am Open Forum

12:00 pm Luncheon

***Webcast Exclusive*: Breakout Sessions**

PARS 2020

Agenda

Session III

1:00 pm **Better Medication Management for All**

PRESENTER | **Frank Federico**, RPh, Vice President, Institute for Healthcare Improvement (IHI)

1:20 pm **Global Perspectives on High Value Health Care: the German example**

PRESENTER | **John Rother**, President, National Coalition on Health Care (NCHC)

1:40 pm **Insurance Coverage for PGx: Resolving the Catch – 22**

PRESENTER | **Joseph Antos**, PhD, Wilson H. Taylor Scholar in Health Care and Retirement Policy, American Enterprise Institute

2:00 am Open Forum

2:30 pm Networking Break

Session IV

2:50 pm **Building Value-Driving Capabilities in your Health System, Building the Essential People and Culture Skills**

PRESENTER | **Rick Gundling**, CMA, Senior Vice President, Healthcare Financial Practices Healthcare Financial Management Association (HFMA)

3:15 pm **Capturing and Measuring Value: The Foundations of Value-based Reimbursement Models**

PRESENTER | **Sara Teppema**, FSA, President and Founder, Alta Advisers

3:40 pm **Round Table Discussion**

PANELIST | **Brandon Batiste**, MPH, Chief Operating Officer, DC Connected Care Network

PANELIST | **Gabriel Bien-Willner**, MD, Medical Director, MolDx; Chief Medical Officer, Palmetto GBA

PANELIST | **Pamela Pelizzari**, MPH, Principal and Healthcare Consultant, Milliman

4:15 pm **The New Health Economy comes of age: the precision medicine landscape**

PRESENTER | **Benjamin Isgur**, FACHE, Managing Director, PwC Health Research Institute Leader

4:50 pm Keynote Q&A

5:00 pm Closing Remarks

Health Technology Assessment

A lack of dedicated framework leading to high transaction costs

Established in the mid 1970's, defunded by Congress and done away with by the mid 1990's, the Office of Technology Assessment, now a historical artifact, once stood as a well organized apparatus designed to provide a structured, systematic approach to understanding the policy implications of introducing new health technologies. The absence of the OTA program in the US since the 1990's has contributed to the creation of entry barriers to access and reimbursement of many promising health technologies, including PGx. However, elsewhere around the world, things have been very different. In the early 2000's a well-organized group of diverse professionals came together to champion health technology assessments (HTA) in a new way; the result was EUnetHTA, which led to a new framework called the "HTA Core Model."

What are the biggest rate limiting factors affecting the diffusion of this vital health technology?

- How many different methodologies and frameworks are available to perform and conduct a systematic evaluation of the impact of PGx?
- What methodologies and frameworks are available for systematic economic evaluation of policy-driven rate limiting factors affecting access and reimbursement for PGx?
- What are the most recognized methods for the construction, design and implementation of a value assessment framework to determine and measure evidence of effectiveness?

Listen, learn and leave with new knowledge

- Learn the origin of HTA and its role in the creation of an intellectual infrastructure utilized by governments around the world to adopt health technologies
- Learn and better understand the application of HTA to diagnostics and PGx
- Learn a process to construct, design and implement a value assessment framework for PGx to inform policy making
- Learn how Real-World Evidence (RWE) and Real-World Data (RWD) create new opportunities to expand the scope of evidence for PGx
- Describe the linkage between a value assessment framework and reimbursement decisions

April Zambelli-Weiner, PhD

CEO, TTi Health Research & Economics

Dr. April Zambelli-Weiner is the founder and CEO of TTi Health Research & Economics located in Westminster, Maryland. April is a seasoned executive and researcher with nearly two decades of experience in working with manufacturers, payers, providers and other healthcare leaders to improve patient access to hundreds of new, cost-effective medical technologies and programs, including precision medicine technologies, through real-world evidence strategy, evidence generation and synthesis, comparative effectiveness research, clinical-economic studies and modeling, and value communication. Additional areas of expertise include human genetics and genetic epidemiology, chronic diseases, rare diseases, clinical immunology, and the study of health outcomes across the lifespan.

Dr. Zambelli-Weiner holds a Ph.D. in Human Genetics & Epidemiology from Johns Hopkins University, an M.P.H. in Epidemiology from Saint Louis University and a B.A. in Chemistry and English from Washington & Jefferson College.

Finn Børlum Kristensen, MD, PhD

Managing Director, Science & Policy Consultancy

Finn Børlum Kristensen is an international strategic consultant in HTA and HEOR implementation and management and is a Professor in Health Services Research and HTA at University of Southern Denmark since 1999. He is also External Lecturer at Copenhagen Business School. He headed the Coordinating Secretariat of the European Network for HTA, EUnetHTA (www.eunethta.eu) from its inception in 2006 and was Chairman of the EUnetHTA Executive Committee until 2016.

Dr. Kristensen directed the Danish Centre for HTA (DACEHTA) from its establishment in 1997 until 2009. His PhD is in Epidemiology, and he is a medical specialist in public health. He also worked as a primary care physician for several years. He publishes frequently in scientific journals and was editor of a Health Technology Assessment Handbook. He is now a consultant to public and private organizations and companies.

Dr. Kristensen served on the ISPOR Board of Directors from 2011-13 and has chaired the ISPOR HTA Council since 2013.

Stirling Bryan, PhD

President, BC Academic Health Science Network

Dr. Stirling Bryan is a university-based health economist with extensive experience of engagement with the policy and decision-making world. He began his career in the UK with appointments at St Thomas' Hospital Medical School and then Brunel University, before moving to the University of Birmingham. His research track-record reveals a long-standing goal of informing policy and practice, demonstrated, in part, through extensive engagement with the National Institute for Health & Care Excellence (NICE). For many years he led the University of Birmingham team that conducted economic analyses for NICE, and subsequently served for three years as a member of the NICE technology appraisals committee. In 2005 he was awarded a Commonwealth Fund Harkness Fellowship and spent one year at Stanford University, researching technology coverage decision making in US health care organizations. He immigrated to Canada in 2008, taking on the roles of professor in UBC's School of Population & Public Health, and Director of the Centre for Clinical Epidemiology & Evaluation. Over recent years, Dr. Bryan has become a strong advocate for, and practitioner of, patient-oriented research, and now partners with patients in all of his research activities. In 2016, he was appointed Scientific Director for the BC SUPPORT Unit, an operational unit of the BC Academic Health Science Network (BC AHSN), focused on promoting patient-oriented research. In 2020, Dr. Bryan became the president of BC AHSN which includes oversight of its operational units: the BC SUPPORT Unit, Clinical Trials BC and Research Ethics BC.

Health Econ-OMIC's

Measuring and valuing the economic benefits of genomics technologies

How do we actually measure and value the health economic benefits of PGx? What kinds of incentives and tradeoffs continue to enable an imprecise approach to an imprecise method for managing and prescribing drugs? How much money is actually on the table?

What are some new ways of thinking?

- Personalized medicine policy as a new source of competitive advantage and differentiation
- Precision required to determine cost effectiveness, complete budget impact analysis or financial analysis
- Select the right model for your economic evaluation of PGx

In what ways might employers, payers and policy makers measure and calculate the health economic benefits of implementing new, targeted personalized medicine policies?

Listen, learn and leave with new knowledge required to evaluate and assess the health benefits and value of increasing access to and reimbursement for PGx

- Learn available methods for evaluating and measuring costs of providing access and coverage for PGx across diverse populations
- Understand upstream and downstream financial impact of increasing access and integrated delivery networks
- Learn the gold standard costing method for pharmacogenetics testing
- Measure, calculate and value health benefits from PGx

Kristine Ashcraft

Head of Youscript, Invitae

Kristine Ashcraft, BS, MBA is a molecular biologist by training and is the former CEO and founder of YouScript, recently acquired by Invitae. She has worked in pharmacogenomics since 2000 and was recently named one of the 25 leading voices in precision medicine. Kristine has authored multiple publications on the clinical and economic benefits of pharmacogenomic testing including one lauded as one of the most influential publications at an American Medical Informatics Association meeting. She has been interviewed by numerous media outlets including the New York Times, the Wall Street Journal, and NBC Nightly News and has spoken at SXSW, American Society of Human Genetics, and numerous precision medicine conferences. She is committed to being a catalyst in the adoption of precision medicine.

Marc Williams, MD

Director, Genomic Medicine Institute, Geisinger Health System

Marc S. Williams, MD, FAAP, FACMG, FACMI is a clinical geneticist. He is the director of Geisinger's Genomic Medicine Institute. He is the co-PI of the Geisinger eMERGE project and is the medical director of the whole genome sequencing clinical research project. He is site PI and leads the EHR workgroup of the NHGRI funded ClinGen project. He is on the NHGRI Genomic Medicine working group. He has participated in the Personalized Medicine Workgroup of the Department of Health and Human Services' American Health Information Community Task Force and was a member of the Secretary's Advisory Committee for Genetics, Health and Society. He is a member of the EGAPP working group. He is a member of the American College of Medical Genetics and Genomics (ACMG) Board of Directors, serving as Vice-President for Clinical Genetics and rejoined the board as president-elect in 2019. He is past chair of the ACMG Committee on the Economics of Genetic Services and founded the ACMG Quality Improvement Special Interest Group. He is a member of the Scientific Advisory Board of the Clinical Pharmacogenetic Implementation Consortium (CPIC) and a member of the CPIC informatics committee.

He recently joined the Scientific Advisory Boards of the NIH Undiagnosed Diseases Project, and Online Mendelian Inheritance in Man. He has authored nearly 200 articles on a variety of topics including the economic evaluation and value of genetic services, implementation of genomic medicine, and the use of informatics to facilitate genomic medicine and precision health.

Richard Willke, PhD

Chief Science Officer, ISPOR

Richard J. Willke, PhD is chief science officer of ISPOR, the leading global professional society for health economics and outcomes research. Dr Willke has more than 25 years of experience in the life sciences arena and has specialized in outcomes research in a succession of group leadership roles with Pfizer and its legacy companies. At ISPOR, Dr Willke is responsible for designing and implementing strategic initiatives related to scientific research and content priorities that will advance the Society's mission of promoting health economics and outcomes research excellence to improve decision making for health globally.

Previously, Dr Willke was vice president, Outcomes and Evidence Cluster Lead at Pfizer for its Global Health and Value division. He has also served in a number of leadership roles with affiliated organizations, including the Chair of ISPOR Institutional Council (2010), ISPOR Board of Directors (2007-2009), and Chair of the PhRMA Health Outcomes Committee (2002-2004).

Prior to joining industry, Dr Willke served as department director in the Center of Health Policy Research at the American Medical Association and held research and teaching positions at The Ohio State University.

Dr. Willke earned a PhD and MA in economics from Johns Hopkins University. He has authored more than 80 scholarly publications that examine the science and methodologies of health economics and outcomes research.

Health Policy

Institutionalizing personalized medicine policy

How long can we afford to ignore an essential health technology as non-essential, when the evidence of effectiveness is clear? What role does PGx play in enabling high-value, cost-conscious care for the most vulnerable and needy? How essential is an essential element required to improve patient outcomes and advance the promise of personalized medicine? What's really holding back employers, payers and policy makers from institutionalizing personalized medicine policy that champions PGx?

The lack of a standardized approach to evaluating evidence of effectiveness disables widespread adoption, coverage and access to an essential health technology. Would ubiquitous personalized medicine policy accelerate the adoption of advanced diagnostic testing that dramatically reduces suffering and prevents premature death due to adverse drug events?

How much does society really care about health equity?

What price does society want to pay to enable the safest and most effective medication experience for every employee, patient and citizen?

What are our options?

Listen, learn and leave with new knowledge

- Learn how to think about the construction, design and implementation of health policy that will dramatically increase access and reimbursement for an essential element of high-value, cost-conscious patient-centered care.
- Ascertain key tradeoffs and economic incentives of Essential Health Benefits 2.0
- Learn how to think about the economic impact and societal benefits of instituting Corporate Personalized Medicine Policy and improved essential health benefits
- Navigate the political pathways required to secure safe passage of new policy
- Learn key components of personalized medicine policy design for ERISA plans

John Rother

President, National Coalition on Health Care

John Rother is President of the National Coalition on Health Care, America's oldest and most diverse group working to achieve comprehensive health system change. The Coalition's membership of more than 80 participating organizations includes medical societies, businesses, unions, health care providers, faith-based associations, pension and health funds, insurers, and groups representing consumers, patients, women, minorities, and persons with disabilities.

Prior to joining the Coalition in 2011, Mr. Rother served as the longtime Executive Vice President for Policy, Strategy, and International Affairs at AARP. There he led the development of AARP's policy positions and advocacy strategies. Under his leadership, AARP engaged in robust public policy research and analysis, public education, and advocacy on health and retirement issues at the federal, state and international levels. Mr. Rother wrote numerous articles and was a frequent speaker on health, retirement security, the federal budget, and the boomer generation.

From 1981 to 1984, Mr. Rother was Staff Director and Chief Counsel for the U.S. Senate Special Committee on Aging under the direction of Chairman John Heinz (R-PA). From 1977 to 1981 he served as Special Counsel for Labor and Health to U.S. Senator Jacob Javits (R-NY).

In 2010 Mr. Rother received the Robert Ball Award for Outstanding Achievements in Social Insurance from the National Academy of Social Insurance for "lifetime advocacy to strengthen Social Security and Medicare."

Joseph Antos, PhD

Wilson H. Taylor Scholar in Health Care and Retirement Policy, American Enterprise Institute

Joseph Antos is the Wilson H. Taylor Resident Scholar in Health Care and Retirement Policy at the American Enterprise Institute (AEI), where his work focuses on the economics of health policy, including Medicare, single-payer health insurance proposals, the uninsured, the Affordable Care Act, and the overall reform of the health care system. He is also an adjunct associate professor of emergency medicine at the George Washington University. He is the Vice-Chair of the Maryland Health Services Cost Review Commission, where he is serving a fourth term as a commissioner.

Before joining AEI, Dr. Antos was assistant director for health and human resources at the Congressional Budget Office (CBO). He later served as a health adviser to CBO from 2007 to 2013. He has also held senior positions in the US Department of Health and Human Services, the Office of Management and Budget, and the President's Council of Economic Advisers.

Dr. Antos has been published in a variety of academic journals and in the popular press, including Health Affairs, the Journal of the American Medical Association, the New England Journal of Medicine, RealClearPolicy, the New York Times, and the Wall Street Journal. He is frequently interviewed on radio and television and often testifies before Congress.

He has a Ph.D. and an M.A. in economics from the University of Rochester and a B.A. in mathematics from Cornell University.

Frank Federico, RPh

Vice President, Institute for Healthcare Improvement (IHI)

Frank Federico, RPh, Vice President, Institute for Healthcare Improvement (IHI), works in the areas of patient safety, application of reliability principles in health care, preventing surgical complications, and improving perinatal care. He is faculty for the IHI Patient Safety Executive Training Program and co-chaired a number of Patient Safety Collaboratives. Prior to joining IHI, Mr. Federico was the Program Director of the Office Practice Evaluation Program and a Loss Prevention/Patient Safety Specialist at Risk Management Foundation of the Harvard Affiliated Institutions, and Director of Pharmacy at Children's Hospital, Boston.

He has authored numerous patient safety articles, co-authored a book chapter in Achieving Safe and Reliable Healthcare: Strategies and Solutions, and is an Executive Producer of "First, Do No Harm, Part 2: Taking the Lead." Mr. Federico serves as Vice Chair of the National Coordinating Council for Medication Error Reporting and Prevention (NCC-MERP). He coaches teams and lectures extensively, nationally and internationally, on patient safety.

Value-based Payment Models & Innovation

Navigating the possibilities of value-based payment models for personalized medicine

How would you describe your value-based payment model (VBPM) and innovation toolkit? How comfortable are you exploring and navigating the possibilities of value-based payment models for personalized medicine? What skills, knowledge and expertise are required to construct, design and implement value-based payment models for personalized medicine?

The lack of innovation and alternative payment models for pharmacogenetics is disabling the imminent transition from fee-for-service to value-based purchasing. It is irreversible and irresistible if you know how it works.

You've got questions. We've got answers.

- What are the key characteristics of profitable VBPMs?
- How are VBPMs the new source of competitive differentiation and competitive advantage?
- What are the interrelationships between plan and benefit design and VBPM?
- What are the key domains of innovation in alternative payment models?

What are the top five pathways for payment model innovation for pharmacogenetics?

What are the key sources of value-based payment model innovation?

Learn the ins and outs of the construction, design, and implementation of value-based payment models for personalized medicine diagnostics. Navigate the possibilities and master the mechanics of new pathways for payment of pharmacogenetics. Acquire the skills and knowledge required to demonstrate how value-based payment models for PGX translate into actuarially-sound cost savings.

Listen, learn and leave with new knowledge

- Learn the state of the art in payment model innovation for personalized medicine diagnostics
- Uncover new sources of value-based payment model innovation
- Acquire core competencies required to construct, design and implement value-based payment models
- Decipher key differences and features of profitable and unprofitable value-based payment models
- Highlight new sources of competitive advantage by understanding the implications and impact of plan design elements on value-based payment models

Value-based Payment Models & Innovation

Sara Teppema, FSA

President, Alta Advisors

Sara Teppema is President of Alta Advisers, where she focuses on quantifying the value of population health programs. Before launching her consulting practice, Sara led the design of innovative and value-based payment models at Blue Cross Blue Shield of Illinois, Montana, New Mexico, Oklahoma and Texas. She has over 25 years of health care and actuarial experience, primarily in consulting with a wide variety of clients, including providers, health plans, employers and government entities. She is a member of the Society of Actuaries' Board of Directors, and she chairs the SOA's Diversity & Inclusion strategy. She is the past chair of the SOA's Research Executive Committee and led a task force as part of the SOA's Health Section's strategic initiative for Public Health. She is also on the advisory board of the actuarial program at the University of Illinois at Urbana-Champaign (her alma mater).

When she is not involved in work and volunteer activities, Sara spends time with her husband and three young adult daughters; plays music and sings as much as possible; and regularly hikes and practices yoga.

Rick Gundling, CMA

Senior Vice President, HFMA

As Senior Vice President, Healthcare Financial Practices, Rick is responsible for overseeing HFMA's technical and content direction, leading the organization's Washington, DC activities, and managing the association's thought leadership efforts. Results of HFMA's policy initiatives have been used by hospitals, rating agencies, regulatory agencies, congressional committees, accounting standard setting bodies, state hospital organizations, and other government and industry leaders. Rick also serves as staff liaison to the HFMA Principles and Practices Board and has written an extensive number of published articles on broad topics within healthcare finance and the healthcare industry.

Prior to joining HFMA, Rick worked at the National Hospital for Orthopaedics and Rehabilitation in many leadership roles. In addition, he was Budget and Reimbursement Analyst for Prince William Hospital Corporation and served as Controller at the Visiting Nurse Association of Northern Virginia. Rick is a Fellow of HFMA, a Certified Management Accountant, and a member of the Institute of Management Accountants.

Gabriel Bien-Willner, MD

Chief Medical Officer, Palmetto GBA;
Medical Director, MolDx

Gabriel Alejandro Bien-Willner, M.D., Ph.D., is the Medical Director of the MolDX program at Palmetto GBA, which seeks to understand the molecular testing landscape to implement payer controls, coverage, and to set policy. He is a leader in the Precision Medicine space and practices as a board-certified Anatomic Pathologist and Molecular Genetic Pathologist. Dr. Bien-Willner received his M.D. and Ph.D. from Baylor College of Medicine, with a doctorate in Human Molecular Genetics. His clinical training and academic tenure were at Washington University in St. Louis.

Throughout his career, he has been active in research, development and advancement of molecular diagnostic services, specifically next-generation sequencing. His experience spans both academia and industry. He has worked closely with clinicians to develop clear clinical diagnostic and treatment pathways directing Precision Medicine programs for community cancer centers.

Brandon Batiste, MPH

Chief Operating Officer, DC Connected Care Network

Mr. Brandon Batiste, MPH, is the Chief Operating Officer of the DC Connected Care Network (DCCCN), a clinically integrated network formed in partnership with the DC Primary Care Association and seven DC based federally qualified health centers.

Prior to starting with the DCCCN, Brandon served as the Director of Network Strategy & Provider Solutions with Magellan Health working to transform healthcare delivery by building quality-focused and financially aligned relationships with providers and health systems nationally. Most notably, he managed network cost of care reduction and value-based payment initiatives while helping providers improve their quality scores and financial outcomes. He also has experience developing and managing population health-based provider solutions with Evolent Health, The Johns Hopkins Health System and the Department of Veterans Affairs. Additionally, Brandon has international experience managing the behavioral and physical health of populations in Saudi Arabia, South Africa and Haiti.

Through his tenure in population health, his efforts can be linked to over $100M in savings to systems, practices and providers. Additionally, he has over 18 years of successful leadership experience developing and implementing multi-layered, coordinated systems to improve population health outcomes. Recognized as an accessible, forward-thinking and solutions-oriented leader, he is actively engaged in the national dialogue on health care reform, meeting regularly with state and federal policymakers to advocate for measures that work to eliminate disparities, lower costs and improve access and the quality of health care. Among his many accomplishments, Brandon is also a Howard Hughes scholar and has been honored for his leadership as the 2011 Young Healthcare Executive by the National Association of Health Services Executives, a 20 in Their Twenties 2012 Honoree by The Daily Record, Xavier University of Louisiana, 40 under 40 alumni honoree, and 2019 40 Under 40 honoree with the National Minority Quality Forum.

Pamela Pelizzari, MPH

Principal and Senior Healthcare Consultant, Milliman

Pamela Pelizzari has a broad background in integrated delivery system administration and healthcare payment reform. She has worked in both clinical and payer settings and has extensive experience in alternative risk contracting strategies.

Pamela has expertise in analysis of healthcare claims and the development of episode-based payment definitions and benchmarking methodologies. She also has experience implementing both prospective and retrospective payment methodologies, including developing gainsharing methodologies, claims adjudication techniques, and quality monitoring programs.

Prior to joining Milliman, Pamela held a technical advisory role in the U.S. federal government. She was responsible for developing and implementing novel payment methodologies to transform healthcare delivery and payment nationwide. Previously, Pamela worked at an academic medical center, building consensus for redesigning care delivery among diverse stakeholders including physicians, administrators, and patient advocates.

Keynote Presentation

Benjamin Isgur

Health Research Institute Leader, PwC US

Benjamin Isgur leads PwC's Health Research Institute. HRI is a dedicated research group that provides new intelligence, perspective, and analysis on major health-related business issues. In this role, he oversees thought leadership and research initiatives for the firm and clients. He also consults with healthcare systems, trade associations, and policy groups on strategic planning, and industry intelligence and trends.

Ben is a published writer and his research is often cited by health leaders across the industry. In addition, he frequently speaks on a range of topics, including physician-hospital alignment, government policy, medical cost trends, consumerism, academic medicine and digital health. Prior to joining PwC he developed health policy as a legislative director in the Texas House of Representatives and as a government relations officer for the City of Austin.

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Pharmacogenomics Access & Reimbursement Coalition

To address barriers to patient access and payer coverage of pharmacogenomics (PGx) tests by sharing resources and leveraging shared expertise in PGx.

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www.parcoalition.org/symposium

Contact us: Info@parcoalition.org

The Golden Helix Foundation

The transfer of knowledge and results from ground-breaking science among local researchers and internationally renowned scientists to the scientific community and the society through participation in collaborative scientific projects, a variety of scientific symposia and educational events, and establishment of public health policies in the field of pharmacogenomics and personalized medicine.

The GoldenHelix FOUNDATION

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