



**Terry Boch, Senior Vice President, Sales & Marketing, Wellcentive**

Terry Boch is a 25-year healthcare industry veteran with a proven track record of bringing innovative and energetic leadership in establishing, developing, growing, and operating high growth healthcare technology companies. Ms. Boch joined Wellcentive as Senior Vice President in February 2013 with responsibility for driving strategic growth and market positioning initiatives as the industry leading provider of innovative population health management and data analytics solutions. In this role, she leads global business strategy, marketing, sales, and business development. Ms. Boch has a broad range of experience across the healthcare spectrum, including business and strategic planning, executive sales and marketing leadership, strategic acquisitions, and operations and technology deployment across provider, payer, and consulting market segments. She has served in leadership roles for companies such as Covisint, Allscripts, United Healthcare, Carolinas Healthcare System, MediClick, and KPMG. In addition to her executive responsibilities at Wellcentive, Ms. Boch serves as an Advisory Board member for JET Health Solutions, a subsidiary of AAJ Technologies based in Fort Lauderdale, Florida.



**Robert Greene, MD, Executive VP and Chief Population Management Officer, Dartmouth Hitchcock**

Dr. Greene started in July 2014 at Dartmouth Hitchcock in the new role of Chief Population Management Officer. Prior to DH he was at UnitedHealthcare in Minnetonka, MN, where he served as Senior Vice President for Innovation and Applied Analytics. In that role, he led the Clinical Analytics Division of UHC, where he was responsible for coordinating clinical performance measurement across the company. He also was in charge of research and development for UHC's national physician public reporting program, the UnitedHealthcare Premium<sup>®</sup> designation program; analytic support for patient centered medical home pilots; clinical performance measurement for performance based contracting and value based incentives; and multiple provider-facing quality improvement programs. Additionally, Dr. Greene was the executive sponsor for design of the UHC Patient Centered Care Model, a model of care that integrates the medical, behavioral, and social needs of patients especially those with multiple complex chronic diseases; and alignment of UHC clinical models under the PCCM framework. Dr. Greene is a 1978 graduate of Harvard College and a 1986 graduate of the University Of Pennsylvania School of Medicine in Philadelphia, PA. He completed his Internship and Residency in Internal Medicine at Strong Memorial Hospital in Rochester, N.Y. He recently graduated from the Master in Health Care Delivery Science Program at Dartmouth and the Tuck School of Business.



**Joe Kimura, MD MPH, Atrius Health**

Dr. Kimura serves as Deputy Chief Medical Officer for Atrius Health, a multispecialty physician group practice based in Eastern Massachusetts with 1100 physicians serving over 1 million patients. Joe provides executive oversight over five departments including Quality and Performance Measurement, Clinical Variation and Quality Standards, Clinical Research, Medical Education, and Analytics and Reporting Systems. He has provided strategic and operational leadership for enterprise analytics and business intelligence systems since 2010. Joe is a native of St. Louis, Missouri and a graduate of Stanford University, Washington University School of Medicine, and Harvard University School of Public Health. He completed his clinical residency in primary care internal medicine at the University of California, San Francisco and a two year health services research fellowship in the Department of Ambulatory Care and Prevention at Harvard Medical School. In Massachusetts, Joe serves on the Center for Health Information and Analysis (CHIA) Enterprise Data Warehouse Advisory Group and the Provider Technical Advisory Group for the Massachusetts Health Policy Commission. At the National level, he is co-chair of the ONC Health IT Policy Workgroup on Advanced Care Models and Meaningful Use. He previously chaired the sub-workgroup on Accountable Care Quality Metrics. Dr. Kimura is board certified in internal medicine and maintains a weekly clinical practice at the Harvard Vanguard Kenmore Office in Boston. He was recognized by Modern Healthcare as a Top Clinical Informaticist in 2012.



**Sally-Ann Polson, President, MedWatch, LLC**

Sally-Ann Polson's initial venture into health care set the stage for an exciting and varied career. After University Ms. Polson entered the Peace Corps in Gambia, West Africa, and went on to develop a Primary Health Care System for a 50-village area that had never had healthcare services. Ms. Polson was recognized by the World Health Organization for developing the "model" for primary health systems in the third world. Upon returning to the United States, Ms Polson held management positions with the American Red Cross, and INOVA, the Metropolitan Washington D.C. area's largest Health Care System. During her tenure with INOVA, Polson was charged with developing corporate health programs and starting a new Cost Containment Company, Health Cost Consultants. In 1989, Polson transitioned to Senior Vice President of INOVA and President of Health Cost Consultants, and created a medical management firm providing software and medical management services to TPAs, self-insured employer groups and health and welfare funds nationwide. HCC was successful and eventually sold to AETNA. Ms. Polson spent the next 12 years as Executive Vice President of American Health Holding (AHH) applying her broad-base clinical, technical and business acumen to lead AHH from a small managed care company to becoming the largest in the industry in cost containment and subsequently sold to AETNA as well. Now, as President of MedWatch and partnering in her own company with other industry experts, Ms. Polson is addressing the "Pain Points" of the Industry and delivering services that are truly making a difference in the medical management and cost of healthcare. Ms Polson is passionate about health cost containment and fiscal control and continues to successfully create change in the industry benefiting patients, health plans and payors. Ms Polson received her undergraduate degree with honors from Sweet Briar College and her graduate business education from the Darden School at the University of Virginia.



**Peter D. Stetson, MD, MA, ColumbiaDoctors**

Dr. Stetson is the Chief Medical Officer and Chief Medical Informatics Officer for ColumbiaDoctors, one of the nation's largest multi-specialty physician organizations. He developed and oversees ColumbiaDoctors' Quality Program, and all clinical IT and clinical analytics. He is an NIH-funded investigator, hospitalist, and informatician. He has overseen the successful implementation of Allscripts Touchworks EHR to over 1200 physicians in ColumbiaDoctors, and has developed novel interoperability solutions between vendor EHRs. Under his direction, ColumbiaDoctors has attested successfully for Meaningful Use and numerous other quality programs, leveraging Health IT to improve care coordination. He has built advanced physician documentation systems, and has developed and validated underlying models and measurement tools for provider documentation, including physician handoff tools. His research lab (Informatics Intervention Research Collaboration- I2RC) has developed novel methods for detecting redundancy of work and data in electronic health records, and care coordination.



**Tariq Abu-Jaber, MA, MPH, Vice President, Harvard Pilgrim Health Care Medical Informatics**

Tariq Abu-Jaber serves as Vice President of Medical Informatics at Harvard Pilgrim Health Care, the premier not-for-profit health plan in New England. Tariq joined HPHC in January of 2012 to establish this new department and foster an information-driven strategy for HPHC, including specialized staff, methodologies and applications. Prior to joining HPHC, Mr. Abu-Jaber spent seven years at WellPoint (Anthem Blue Cross Blue Shield) building out their Information Management function, developing new data resources, creating decision support solutions, and driving adoption of new models to augment the value of information solutions throughout WellPoint/Anthem, the largest health plan in the USA. Prior to WellPoint, Tariq spent several years directing Product Management for analytic products and services at McKesson Health Solutions. Before that, he served as Vice President for Consulting Services with Cambridge Health Economics Group, a clinical and financial consulting and analytic firm with hundreds of US payer and provider clients. Previous activities involved non-profits and education. Mr. Abu-Jaber received his BS from Cornell University in Anatomy and Physiology, an MA from Lesley University in Community Health and an MPH from the Harvard School of Public Health with a focus in Healthcare Management. He lives in the suburbs west of Boston, Massachusetts, where he gardens, writes, rides his bicycle and watches, fascinated, as his 20-something children prepare themselves for 21<sup>st</sup> century careers and lives.



**Michael Nix, MS, Jeffords Institute for Quality & Operational Effectiveness**

Michael Nix is Leader of the Analytics Group of the James M. Jeffords Institute for Quality and Operational Effectiveness at Fletcher Allen Health Care, Burlington Vermont. Fletcher Allen Health Care is the academic medical center hub of the Fletcher Allen Partners Network which encompasses 4 hospitals and multiple primary care and specialty physician practices in Northern Vermont and New York. With an academic background in Industrial Management (University of Alabama) and Systems Management (University of Southern California) he has worked for over 30 years in healthcare including quantitative analysis, quality management, clinical operations analysis, consulting, material management as well as general hospital data collection and distribution. He is a past (2012 & 2013) healthcare track chair for the MIT Annual Chief Data Officer and Information Quality Symposium. He has also taught a variety of business, management and finance courses at the college level for over 25 years and is currently a Graduate Faculty member at Champlain College in Burlington Vermont teaching Financial and Economic Modeling their MBA programs.



**Todd Rogow, PMP, MPA, Chief Technology Officer, HealthInfoNet**

Todd is HealthInfoNet's Chief Technology Officer and provides the technology vision and leadership for all technical aspects of the company including system architecture, strategic planning, operational system management, acquisition and deployment, data integrity, and information security. In his prior role at Northrop Grumman he managed project teams of up to 300 people on nationally recognized programs such as the US Armed Forces Health Longitudinal Technology Application (AHLTA), the largest Electronic Medical Records (EMR) system in the U.S. With over 20 years of experience, primarily in directing technical projects, he has provided business and consulting services to a range of Fortune 100 companies, including defense, telecommunications, manufacturing, and natural resource industries. Todd has a Master's degree in Public Administration, is a certified Project Management Professional (PMP) and a 2012 graduate of the Hanley Center's Health Leadership program in Maine. He also currently serves on the Board of Directors for New England HIMSS as the HIE Liaison.



**Frank Stearns, Executive Vice President, HBI Solutions**

Frank currently serves as Executive Vice President of HBI Solutions, an early stage healthcare analytics and services company that focuses on helping healthcare organizations improve their performance and the health of the people they serve. Prior to HBI, he served in senior executive positions in healthcare technology and consulting companies including Nuance Communications, Eclipsys (Allscripts), Cerner, Computer Sciences Corporation, and MediQual Systems. His experience includes managing overall business operations, professional services, product development, and client support services. He is a frequent speaker and lecturer on strategies to improve operational and clinical performance in healthcare organizations. Frank holds a Master of Health Care Administration degree from Clark University and a Bachelor's degree in Zoology from the University of Maine.



**David Wennberg, MD, MPH, NNEACC**

Dr. Wennberg currently serves as the Chief Executive Officer of the Northern New England Accountable Care Collaborative (NNEACC). Formed by Dartmouth-Hitchcock, Fletcher Allen Health Care, Eastern Maine Healthcare Systems and MaineHealth, NNEAC creates common financing and accountability models and provides a common infrastructure to support the delivery of value-based accountable care. Dr. Wennberg also serves as the Chief Scientist at the High Value Health Collaborative at The Dartmouth Institute. Prior to his work with the Northern New England Accountable Care Collaborative, Dr. Wennberg co-founded Health Dialog Analytic Solutions, the analytic division of Health Dialog and served as Health Dialog's Chief Science Officer. Dr. Wennberg received his medical degree from McGill University and his MPH from the Harvard School of Public Health. He is an internationally recognized authority on the root causes of unwarranted variation. His work has been published in many peer-reviewed medical journals including the NEJM, Jama and the Annals of Medicine.