Rachelle “Shelly” Spiro, RPh, FASCP is Executive Director of the Pharmacy HIT Collaborative (Collaborative). The Collaborative is an organization of the major national pharmacy associations and associate members focused on advocating and educating key stakeholders regarding the meaningful use of health IT and the inclusion of pharmacists within a technology-enabled integrated health care system. The goals of the Collaborative are to assure pharmacists’ services through health IT are accessible, can connect, and support national quality initiatives. Spiro is active in national pharmacy associations, standards development organizations (NCPDP, HL7 and X12) and is a leader in Pharmacy HIT. She is an American Society of Consultant Pharmacists (ASCP) Past President and an ASCP representative member of the LTPAC HIT Collaborative. She has authored several articles relating to various professional pharmacy, HIT systems and electronic prescribing topics.

Steven Handler, MD, PhD, CMD is an Assistant Professor with a primary appointment in the Department of Biomedical Informatics, where he serves as the Director of Clinical and Translational Informatics. He has secondary appointments in Geriatric Medicine, and Clinical and Translational Research. Dr. Handler also serves as the Medical Director for Long-term Care Health Information Technology at the UPMC and as the Medical Director for Telemedicine and Health Information for the RAVEN (Reduce AVoidable hospitalization using Evidence-based interventions for Nursing facilities in Western Pennsylvania) CMS Innovation Award to reduce avoidable hospitalizations from the nursing home.
Dr. Handler is a practicing geriatrician with direct patient care and medical director responsibilities in the nursing home settings. His primary research area focuses on medication and patient safety primarily in the nursing home setting. As part of this research, his team has developed the first nursing home-specific, Institute for Healthcare Improvement (IHI)-endorsed trigger tool for conducting rapid and targeted chart reviews for detecting potential adverse drug events. This tool has recently been evaluated for use in the VA Community Living Centers (i.e., nursing homes) and for inclusion and by the Office of the Inspector General (OIG) for determining the incidence of harm in a national sample of nursing homes.

His current research, at the intersection of biomedical informatics and geriatrics, is funded largely by an R01 from Agency for Healthcare Research and Quality (AHRQ). This research utilizes an active medication monitoring system to detect and manage adverse drug events among older nursing home residents. Dr. Handler will be expanding the use of this system to the ambulatory care setting with support from the PA Dept. of Aging, the UPMC Health Plan and UPMC health system. Dr. Handler has published over 65 peer-reviewed articles in various geriatrics, nursing, informatics, health services, and patient safety journals over the past seven years.

Dr. Brian Yeaman, MD, is a primary care physician and is the Chief Medical Informatics Officer at Norman Regional Health System in Norman, Oklahoma. He has been named Norman Regional Health System Physician of the Year. Dr. Yeaman has over ten years of informatics experience in helping organizations transform the capture, integration and delivery of clinical data, information, and knowledge. Dr. Yeaman was instrumental in establishing the Health Information Exchange in Oklahoma, which currently serves over three million patients. Passionate about consumer engagement and care coordination, Dr. Yeaman is interested in caring for patients in a medical home model. He has leveraged meaningful use to track admissions, readmissions, and emergency department visits for long term care patients, which has reduced the cost of care and improved outcomes.

Dr. Nimalie D. Stone, MD, MS is the Medical Epidemiologist for Long-term Care for the Division of Healthcare Quality Promotion (DHQP) at the Centers for Disease Control and Prevention (CDC). She is a Board-certified infectious disease physician who has a research and clinical background in managing infections and antibiotic resistant pathogens in post-acute care settings. She completed her internal medicine residency at Johns Hopkins University followed by an infectious disease fellowship at Emory University. Prior to joining CDC, she spent several years providing clinical care and advising infection control programs for a long-term care hospital and affiliated nursing home. She continues to hold an appointment as a clinical assistant professor in the Emory University Division of Infectious Diseases.
Within her division at the CDC, which promotes safe healthcare delivery, Dr. Stone works to address the needs for infection prevention programs in long-term care settings. She develops guidelines, educational resources and quality improvement programs to reduce healthcare associated infections in long-term care facilities. Her efforts include leading the publication of newly revised infection surveillance definitions for long-term care facilities and overseeing the inclusion of infection reporting infrastructure designed for use by nursing homes and assisted living facilities within the CDC’s National Healthcare Safety Network. Additionally, she raises awareness of the infection prevention needs in long-term care and serves as a resource for several state-based and national initiatives in which are supporting infection prevention and surveillance activities by long-term care providers.

**Panel 2: Clinical Perspective**

**Care Planning**

Terry O’Malley, Partners HealthCare

**Nursing**

Laura Tubbs, Southwest LTC Management Services
Lauri Harris, Avalon Healthcare

Dr. Terry O’Malley is an internist/geriatrician who specializes in the care of nursing home patients. He graduated from Amherst College and Cornell University Medical College followed by training in Primary Care Medicine at the Massachusetts General Hospital. He is on the teaching faculty at MGH and HMS, where he provides clinical care and supervises medical students, house staff and geriatric fellows.

He is the Medical Director of Non-Acute Care Services for Partners HealthCare System, an integrated network and Pioneer ACO, where he provides network oversight of efforts to improve transitions of care and the exchange of clinical information at transitions. Through an ONC Challenge Grant, IMPACT (Improving Massachusetts Post Acute Care Transitions), he is conducting research to measure the impact of the electronic exchange of essential clinical data at the time of a care transition on the utilization of healthcare services.

He co-chairs the Long Term and Post Acute Care Sub-workgroup within the Standards and Interoperability Framework at the Office of the National Coordinator for Health Information Technology (ONC) and is one of the Leads of the Longitudinal Coordination of Care Workgroup which are creating a standard national data set for transitions of care to be part of Meaningful Use Stage 3 and the framework for the exchange of a longitudinal care plan.
He has published numerous articles on transitions of care and quality measurement, and lectures frequently on these topics at the local, regional, and national level.

**Laura Tubbs, RN MSed, MSN** is VP of Clinical Services for Southwest LTC Management. Laura is committed to centralizing the clinical platform with solid benchmarks, developing sustainable systems utilizing QAPI. Including, strong partnerships with TMF advancing quality improvement projects. She currently serves on the National Nurse Executive Counsel, the THCA Nurse Counsel, AHCA Clinical Practice Committee, and is a team lead for the AHCA Quality Awards for the last 5 years. Laura has partnered with AMDA in editing/assisting in creating Clinical Practice Guidelines. The latest publication is the AMDA Young Adult in Long Term Care. She is a member of Sigma Theta Tau. Laura embraces the values of compassion, respect, kindness and love for those we serve and the lives we touch. Together we can make a difference in those who depend on us to take care of them. Prior employment included Director of Clinical for the Evangelical Lutheran Good Samaritan Society an 186 facility non-for-profit provider and nurse consultation with Stonegate and Diversicare. At Good Samaritan. Laura was the lead clinician for the company with facilities in 22 states, creating policies, procedures, clinical practice guidelines, company clinical benchmarks/dashboard projects, EHR development team, on-line clinical leadership teaching for nurses, survey management, corporate compliance partnership with risk management, creating/reviewing on-line audits, taught survey readiness in the AIT program, and presented at numerous region workshops. As a consultant, Laura led facilities towards a proactive approach to clinical systems, managing, monitoring, integrating strong quality assurance processes with strong outcomes.

**Lauri Harris** has 30 years experience in Long Term Care and has held a variety of positions in multi-state Long Term Care organizations. She is a credentialed RN in the RAI process and has provided MDS/ Reimbursement training to multiple audiences throughout the country. She has spoken to state, regional and national audiences on a variety of topics including but not limited to the RAC audits and the EHR in long term care. She has led multiple organizations through the adaptation of the EHR utilizing a variety of Long Term Care software packages. She currently serves as the Director of Clinical Applications for Avalon Healthcare, Inc. headquartered in Salt Lake City, UT. She and her team are responsible for leading the Implementation and support of Avalon’s “Amazing Race to Electronic Health Records”. She graduated from West Nebraska General Hospital School of Nursing. She recently received certification in the Healthcare IT Workforce program as a Clinician/Practitioner IT Consultant and currently attends classes at Santa Barbara City College in pursuit of a degree in Health Information Technology.
Panel 3: Provider Perspective

Lisa Harvey McPherson, Eastern Maine Homecare  
Steve Chies, Benedictine Health System  
Scott Ranson, Brookdale Living  
Terry Leonard, Life Care Centers of America

Steven E. Chies serves as senior vice president for operations at the Benedictine Health System (BHS) and is responsible for the operation of the BHS Senior Care Services, which includes: post-acute care, skilled nursing care, assisted living care, independent living services, and home care services. Additionally, he has oversight responsibilities for the information technology services, culinary services and rehabilitation services for BHS.

Chies has an extensive background in the health care field, with recognized expertise in facility operation, non-profit management, reimbursement for services, health information technology, and post-acute care services.

Chies has been active in professional and community organizations, including as a Past Chair for the American Health Care Association. He current chairs AHCA Health Information Technology Committee. He was also a member of the board of directors and president of Care Providers of Minnesota, and chair and officer of the National Association of Boards of Examiners of Long Term Care Administrators.

Steven has presented at many national and regional meetings as well as a guest lecturer at the University of Minnesota School of Public Health, Minnesota State University at Mankato, and St. Joseph College of Maine. He has testified before the U. S. Congress, the Institute of Medicine and the Legislature in the State of Minnesota. Most recently he was member of a research team investigating licensure qualifications for long term care administrators.

Chies is an undergraduate of the University of Minnesota, where he also attended the graduate program in Long Term Care Administration. Additionally, he has a master’s degree in health care administration from St. Joseph’s College of Maine and teaches at the College as an adjunct faculty for health informatics.

Scott Ranson is the Chief Information Officer at Brookdale Senior Living with over 26 years’ experience in IT; 22 years are at the senior management level. He oversees all aspects of information technology for Brookdale to include application development and
support, infrastructure security and advanced technology planning, telecommunications, and project management. He has been involved with over 52 mergers and acquisitions, integrating the technology systems to maximize efficiency. He is a visionary leader with a history of establishing and exceeding short and long-range goals instrumental to overall company growth. Prior to joining Brookdale, Scott served as VP of Information Technology for Marketing Specialists located in Dallas Texas.

Scott is a 1987 graduate of Ashland University, he holds B.S. in Business Administration, with a double major in Business Management and Computer Information Systems.

**Terry Leonard** has served as chief information officer and senior vice president at Life Care Centers of America for more than 9 years and possesses more than 30 years of experience in research, development and information systems for both public and private companies. Leonard’s primary responsibilities at Life Care include oversight of the corporation’s information systems for over 220 facilities nationwide. Prior to his promotion to CIO, Leonard was vice president of technical services for four years. He holds a B.S. degree in computer science from Tennessee Wesleyan College.

**Panel 4: Vendor Perspective**

*John Damgaard, MDI Achieve
Doc DeVore, Answers on Demand
Karen Utterback, McKesson
Cheryl Hertel, Cerner*

**John M. Damgaard**, following a successful take-private of Mediware Information Systems, Inc. by PE firm Thoma Bravo, became MDI Achieve’s President in September 2012 and Chief Executive Officer in August 2013.

Mr. Damgaard brings an exceptional record in both regulated and non-regulated healthcare technology solutions and has a comprehensive background in various areas including strategic planning, healthcare software solutions development, interoperability, client services, sales and marketing, and human capital management.

Prior to MDI Achieve, Mr. Damgaard was Chief Operating Officer at Mediware Information Systems Inc. and also held business management and technical positions with CGN and Associates, Maytag Corporation, and IBM.
Mr. Damgaard holds an MBA with Distinction from Bradley University and a Bachelor of Arts of Computer Science and Mathematics from the University of Northern Iowa as a Presidential Scholar.

Doc DeVore is the Director of Clinical Informatics & Industry Relations at AOD Software. Doc has been in the long-term care industry since 1992 working in research and development as well as industry strategy. Since 2005, he has been a member of the National Association for the Support of Long Term Care (NASL) where he has held roles of president, secretary and vice president and Information Technology Committee chair.

Doc was also on the CCHIT Advisory Task Force for the Long Term and Post-Acute Care in 2009 that was tasked with determining the future of EHR certification for long-term care. Additionally, Doc was part of the HL7 Long Term Care Functional Profile Committee from 2006 through 2008. Doc also participated in the first ONC LTPAC Roundtable in 2012.

Karen Utterback, MSN, RN is responsible for establishing McKesson’s Connected Care and Analytics - Extended Care Solution Group’s strategic direction for clinical products and services and is responsible for the group’s marketing team. Karen joined the McKesson team in 2004, and brings over 32 years of home care experience to the role, including patient care, clinical supervision, project management, and operations. She has served as President of the Board of Directors for the Mississippi Nurses Association, as a member of the Department of Health & Human Services Secretary’s Advisory Committee on Regulatory Reform and a member of the Board of Directors for the Mississippi Association for Home Care. She continues to be active in the Mississippi Nurses Association, and currently serves as Chair of The Joint Commissions Homecare PTAC, as a member of the VNAA Quality Task Force, and as Chair NAHC’s HCTAA Board of Directors, and the S&I Framework collaborative.

Cheryl Hertel, vice president, Population Health, is responsible for Cerner strategies and market direction related to community continuum of care venues including connected network and interoperability, extended care including long term care, assisted living, home care and retail pharmacy, consumer and member health and wellness engagement, and research.

Hertel joined Cerner in 1996, managing clinical design strategy for emergency medicine development followed by an expanded role to enterprise practice leader, responsible for all emergency medicine client engagements on the Cerner Classic™ and Cerner Millennium® platforms. In 2003, she moved into a leadership role within the IP
organization to define strategic direction for Cerner’s core clinical documentation, nursing, pharmacy and ancillary therapy workflows.

From 2006-2012, Hertel expanded her leadership role to include managing Cerner’s international software localization investments. She resided in France for 3 years defining strategic IP investments necessary to support clinical workflow variances in the EMEA markets, as well as the launch of the clinical transformation services model.

She was responsible for Cerner’s international market entry process broadening Cerner’s international presence into additional markets, and contributing significantly to international client achievements which have resulted in HIMSS level 7 awards in 5 countries and 3 languages.

Hertel has more than 12 years of nursing experience in critical care, ICU and emergency medicine specialties. She gained clinical experience internationally, spending three years in Germany as a trauma nurse and trauma supervisor at a U.S. Army military hospital.

Hertel has an MBA from the University of Phoenix and a bachelor’s degree in nursing from Fort Hays State University in Hays, Kan. She is also a recipient of Cerner’s Certificate in Healthcare Leadership in partnership with UMKC Bloch School.

Panel 5: Regulatory / Quality Improvement Perspective

Karen Tritz, CMS  
Stella Mandl, CMS, CCSQ  
Crystal Kallem, Lantana Group  
Darrell Shreve, Aging Services of Minnesota

Stella Mandl, RN, BSN, BSW, PHN has over 20 years of healthcare, clinical and nursing leadership experience and has dedicated her professional career to the improvement of patient care quality, safety and patient outcomes.

Stacy currently serves as a Technical Advisor in the Division of Chronic and Post-Acute Care at CMS. She provides strategic and advisory support for the post-acute quality reporting programs, including Skilled Nursing Facilities (SNF), Long-Term Care Hospitals (LTCHs), Inpatient Rehabilitation Hospitals (IRFs) and Hospices. In this role, she was responsible the implementation of the Patient Protection and Affordable Care Act (Affordable Care Act) Section 3004 regulation. Her responsibilities include providing
strategic direction to measure development and measurement selection for post-acute setting programmatic use and quality reporting; measurement harmonization and alignment with critical, overarching, strategies such as the HHS Healthcare Acquired Infection (HAI) Action Plan, the National Quality Strategy, and CMS’ three-part aim of better care for individuals, better health for populations, and lower growth in expenditures.

Stacy is passionate about the opportunity to improve care coordination, efficiency and patient outcomes and is engaged in a variety of CMS initiatives to improve the coordination and exchange of information across care settings. These efforts include: harmonizing CMS’ re-use of post-acute assessment data elements for improved care coordination and creating a vision for how CMS could provide a supportive role in the utilization of health information technology (IT) by post-acute providers, community based services, and beneficiaries; leading the CMS Pressure Ulcer Work Group charged with examining an approach to harmonize pressure ulcer-related quality measurement for in-stay settings as well as a potential cross-setting application and developing an implementation strategy and vision for CMS’ Assessment Data Element Library and Data Governance Board. In addition, while in the Division of Chronic and Post-Acute Care, and while in the Division of Quality Systems and Operations Support (DQSAS) formerly known as the Division of National Systems (DNS) Stacy played a key, lead role in the development of the assessment data element requirements and the electronic submission specification requirements for the electronic submission of the LTCH Continuity Assessment Record & Evaluation (CARE) Data Set; providing a unique convergence of her clinical expertise, policy development experience, while working to support the development of the technical requirements—three areas of critical, interdependent, importance. Additionally while in DQSAS, Stacy also supported the work required for the October, 2012 release of the IRF Patient Assessment Instrument (IRF PAI) and supported the design, development and implementation of the web-based data entry tool for hospices, “The Hospice Data Submission Form”.

Stacy has a Bachelor of Science is Nursing from San Francisco State University and a Bachelors of Science in Social Work from the State University of New York at Stony Brook. She has a diverse healthcare background, specializing in clinical leadership in nursing service specialty areas such as emergency care, general surgery, Phase I post-anesthesia care, medical-surgical, clinical research, and psychiatric care services. Prior to her career in nursing, Stacy was a professional, clinical social worker specializing in working with adolescents and women with eating disorders, drug and alcohol addiction and dissociative disorders.

Stacy began her nursing career as a US Army Nurse Corps officer at Walter Reed Army Medical Center where electronic health record (EHR) capabilities were implemented into in clinical practice during her assignment in the late 1990’s; including using a completely paperless system. Since then, Stacy has utilized EHRs throughout her
clinical career. She has experienced facility-wide transition from paper medical records to EHRs. As a manager and mentor, she has assisted others in such transitions; identifying a need for new nurse graduates, and new users of technology, to find mechanisms in their patient care approach that preserved patient centeredness, critical thinking and balance; while meeting the requirements generated by time-sensitive, electronic data entry. Due to her vast patient care experience and passion to improve healthcare, Stacy recognizes the potential EHRs and Health IT have to improve patient care processes and patient outcomes and lower the cost of care in our country.

**Crystal Kallem, RHIA, CPHQ** is a leader in health information and quality management. She is a Registered Health Information Administrator (RHIA) with the American Health Information Management Association (AHIMA) and a Certified Professional in Healthcare Quality (CPHQ) with the National Association for Healthcare Quality (NAHQ).

At Lantana, Crystal serves as project director and advisor to multiple Centers for Medicare and Medicaid Services (CMS) initiatives aimed at developing, evaluating and recommending tools and processes for measuring national healthcare quality. Crystal also leads strategic initiatives for Lantana’s Policy Center of Excellence and provides leadership for client projects and business analysis functions.

Previously Crystal was Director of Practice Leadership for AHIMA where she served as the Association’s representative on issues related to data content standards for quality measurement, electronic health records, personal health records, and health information exchange.

Crystal supported the development of the Health Level Seven (HL7) International Quality Reporting Document Architecture (QRDA) and Healthcare Quality Measure Format (HQMF/eMeasure) specifications. She is co-chair of the HL7 Clinical Quality Information Work Group and an instructor for Lantana’s CDA Academy.

**Darrell Shreve** is the Vice President of Health Policy at Aging Services of Minnesota, where he has worked since 1986. His principal responsibilities include regulatory advocacy on nursing home issues, technical assistance to members on Medicare reimbursement issues, preparation of resource publications on care center regulations and survey procedures, technical assistance for members on a variety of regulatory topics, and participation on a number of advisory committees and workgroups. He is also the lead staff person on topics related to health information technology, electronic health records, and privacy and security.
He holds a Master's degree in Public Affairs from the Hubert H. Humphrey Institute at the University of Minnesota, a Ph.D. and an M.A. in American Studies, also from the University of Minnesota, and a B.A. in English from Millsaps College in Jackson, Mississippi.

Panel 6: Patient and Caregiver Perspective

*Leslie Kelly Hall, Healthwise*
*Sandy Atkins, Partners in Care Foundation*
*Joanne Lynn, Altarum*

**Ms. Leslie Kelly Hall** is Senior Vice President for Policy for Healthwise, a leading innovator in consumer/patient education through interactive online tools. In this role, she leads Healthwise’s activities to shape public policy to support better patient decisions about health and healthcare. Her work seeks to ensure that consumer health information technology is maximized to make health content a regular and efficient part of care delivery. Previously she was Senior Vice President for Products at Healthwise. In that role she led product, market, and partner development to successfully deliver the health information and support tools to help people make better health decisions. She achieved the integration of Healthwise solutions within EMR and PHR systems. She established strategy to ensure interoperability of products and consistency with industry standards.

**Sandy Atkins** has over 30 years of experience planning and managing services for older adults. She is currently the Vice President, Institute for Change/Research Center at Partners in Care Foundation, in charge of HomeMeds dissemination, consulting, evaluation, IT and new initiative development. Prior to joining Partners in Care, Sandy served as executive director of Hospice of Pasadena. At the USC Andrus Gerontology Center, she directed the Center for Long Term Care Integration, a state-funded effort to help counties integrate Medicare and Medicaid systems (both medical and long term care services) for the aged, blind and disabled population. Sandy also directed the STARS Minnesota Rural Elder Services Community Initiative to help small towns plan services for their rapidly aging populations. She also spent 10 years as administrator of several California continuing care retirement communities. Sandy has a Master of Public Administration in Long Term Care Administration, with a certificate in gerontology, from the University of Arizona, and a BA in Spanish from SUNY Buffalo.

Related to the perspective of the work of the LTPAC certification committee, she been a provider (implementing original MDS and first software systems in retirement home/SNF), and as VP at Partners in Care is involved with care transitions and other community-based LTC services (Medicaid waiver) all of which have vertical software solutions. As leader for the HomeMeds evidence-based program, Sandy is also a “vendor” of a medication safety risk screening software for homecare programs. Finally,
Sandy is a caregiver of parents in their mid to late 80’s and is, like everyone, a consumer of healthcare, actively using every electronic tool made available by Kaiser.

Joanne Lynn, MD, MA (Philosophy and Social Policy), MS (Quantitative Clinical Sciences), is Director of the Center for Elder Care and Advanced Illness at Altarum Institute. She has led development of the MediCaring model for comprehensive reform of care for the frail period at the end of most long lives now. The model relies upon comprehensive individual care planning, substantial reform of the service supply, and local management and control, and will depend upon using shared savings from medical care to support social services. Substantial financing models support the feasibility of the approach and the Center is working with nine communities toward implementing the model. Dr. Lynn is an accomplished health services researcher with more than 250 peer-reviewed articles and more than 70 professional books and chapters. Her recent publications include the first manuscript that presented statistical process control alongside standard statistics in evaluating a major national demonstration (JAMA. 2013;309(4):381-391) and a featured overview of MediCaring (JAMA 2013; 310(18):1935-6). She is a leader in developing new models of evaluation that build on statistical process control and conventional difference of differences statistics. She also communicates with the public through myriad news stories and the award-winning Handbook for Mortals (Oxford Univ Press, 2nd ed., 2011). Dr. Lynn has served as Bureau Chief for Cancer and Chronic Disease in the public health department for Washington, DC; as medical officer for quality measurement in the Centers for Medicare and Medicaid Services; as senior natural scientist at RAND; as tenured professor of community medicine and medicine at Dartmouth Medical School; as tenured professor of health care sciences and medicine at the George Washington University; and as medical director of various hospice, nursing home, and home care services in Washington, DC. Honors include membership in the Institute of Medicine and the National Academy of Social Insurance, fellowship in the Hastings Center and the American Geriatrics Society, and mastership in the American College of Physicians.