

## **STEPHEN S. CHA, M.D., M.H.S.**

(b)(6)

Primary care physician in homeless medicine, thought leader across multiple health domains, current private sector leader and former senior government official with experience in health and health care transformation, research, and regulation of drugs and devices. Passionate about making health and health care work better for all Americans.

Currently leading Medicaid innovation to connect provider value-based models with interventions in social determinants of health and care management. Served as first chief medical officer for the Center on Medicaid and CHIP Services and led billions in Medicaid investments in delivery innovations. Led state-based innovation and oversaw investments of approximately \$1 billion in federal awards to 38 states and territories to support health system transformation.

Authored legislative provisions to improve the quality of and access to health care as well as legislation regulating drugs and medical devices, including the renewal of FDA user fee acts. Background and training in health services research and policy analysis.

### **PROFESSIONAL EXPERIENCE**

**May 2018–present**

**Chief Medical Officer**

**United Healthcare Community & State**

- Responsible for clinical strategy and operations for 6 million Medicaid and CHIP members covered under United Healthcare’s Medicaid line of business.
- Developed and launched the Care Pathways strategy, connecting provider value-based models, care management models, social determinants of health, and community investments around winnable battles of population health.
  - Supported partnership with March of Dimes and HHS on maternal mortality, connecting provider payment models, community investments, and care management capabilities.
  - Launched models on opioids and encouraging medication assisted treatment.
  - Oversee models on housing and health and other social determinants of health.
- Responsible for medical and pharmacy policy and framework for medical necessity, in partnership with our enterprise capabilities at United Clinical Services.
- Support and oversee CMOs in each of our 30 state plans.
  - Oversee recruitment, training, and onboarding of CMOs.
  - Oversee process to write the responses to requests for applications for new bids and renewals.
  - Partner with CMOs across other lines of business at United.
- Led our Medicaid response to COVID, including rapid changes to our utilization and care management strategies in areas of crisis; supporting federally qualified health centers in crisis; launching specialized testing centers.
- Extensive external engagement, including public speaking, TV, and radio.

**April 2015 – May 2018**

## **Group Director, State Innovations Group**

### **Center on Medicare and Medicaid Innovation (CMMI)**

#### **Centers on Medicare and Medicaid Services, Department of Health and Human Services**

- Created strategy and oversaw implementation for unique all-payer state health transformation models. (Maryland All Payer Model, Vermont All Payer Accountable Care Organization Model, and Pennsylvania Rural Hospital Model).
  - Partner with states to create the first-in-the-nation multi-payer health transformation models that includes Medicare participation.
  - Designed two of these models (Vermont, Pennsylvania), and negotiated the next phase model for Maryland.
  - Collaborate on program design, develop and negotiate unique financial models such as global budgets, created new methodologies for ACO benchmarks, design unique care transformation partnerships, and develop new quality metric frameworks for improved population health outcomes.
- Responsible for the oversight and strategic direction for the CMMI State Innovation Model (SIM), approximately \$1 billion in grants to states to accelerate state-led health system transformation.
  - Collaborate with senior leadership from 17 states to create and execute strategies for federal/state partnerships for multi-payer state transformation.
  - Lead in-person site visits for nearly every one of the 17 test states and multiple design states for strategic conversations on challenges, successes, and implementation of SIM models.
- Lead staff of 20 team members, including five direct reports including a deputy, two team leads and two senior advisors.
  - Evaluate performance, including direct feedback to staff.
  - Develop mission and vision for State Innovation Group and maintain morale and vision in a fast-paced and highly political environment. In May 2017, group reported higher-than-average scores on employee satisfaction and sense of mission on CMS's Employee Viewpoint Survey.
- Coordinate efforts with other divisions within CMMI and centers within CMS.
- Speak to groups about CMMI and SIM payment reform efforts at national conferences, webinars, and panel discussions.

## **December 2011 - April 2015**

### **Chief Medical Officer/Medical Director**

#### **Center on Medicaid and CHIP Services (CMCS)**

#### **Centers on Medicare and Medicaid Services, Department of Health and Human Services**

- Served as the first Chief Medical Officer for the Center on Medicaid and CHIP Services, pioneering a position created in 2011.
- Provided clinical input and guidance for benefit coverage of over 70 million people who are served by Medicaid and CHIP.
- Served as the driving force to develop the Medicaid Innovation Accelerator Program (IAP), a joint initiative at CMS to support state efforts in Medicaid innovation with over \$100 million in targeted investments.
- Designed key elements of federal investments of over \$30 billion in quality and delivery innovations, in collaboration with states including Oregon, Texas, and New York, including the

quality and transformation elements of Delivery System Reform Incentive Pool (DSRIP) waivers.

- Served as a lead negotiator with state partners on key aspects of Medicaid transformations, including overall vision for transformation, quality framework, attribution models, benchmarking for incentive payments.
- Led efforts to write informational bulletins and state Medicaid director letters to create new and easier pathways to innovation through federal processes, including integrated care model letters.
- Provided strategic direction to strengthen quality metrics and reporting foundation across Medicaid and CHIP programs.
- Led the center's participation in HHS agency and departmental efforts such as prevention and population health, including housing and health, tobacco, HIV, perinatal health and others.
- Represented CMCS as a senior leader with states, providers, and other stakeholders, including multiple keynote sessions. Presentations include Institute of Medicine, Academy Health, Brookings Institution, U.S. AIDS Conference, Association for Territorial and State Health Officers, American Public Health Association, National Association of Medicaid Directors, National Health Care for the Homeless, ACO Congress, Medicaid Managed Care Congress, and multiple provider and consumer organizations.

#### **January 2009 - December 2011**

##### **Senior Professional Staff**

##### **United States House of Representatives, Committee on Energy and Commerce**

##### **Congressman Henry A. Waxman, Chair**

- Represented the chairman on a range of health finance and public health, spanning multiple agencies and programs, including Medicare, Medicaid, NIH, CDC, HRSA, FDA, and AHRQ.
- Oversaw the drafting of the Pandemic and All-Hazards Preparedness Reauthorization Act of 2011 in a bipartisan process.
- Oversaw the drafting of multiple sections of health reform, including provisions relating to: health care quality; delivery system reforms including medical homes, Independence at Home, and home visitation programs; workforce policy and graduate medical education; comparative effectiveness research; emergency and trauma care; physician payment disclosure; health care data collection; prevention and public health fund; and health disparities.
- Drafted sections of American Recovery and Reinvestment Act of 2009 pertaining to comparative effectiveness research and NIH.
- Staff hearings on public health and finance issues for the Energy and Commerce Committee including the Subcommittee on Health.
- Prepare analyses of legislation and amendments for Subcommittee on Health and full Committee markups.
- Educate public and media through written materials and frequent speaking engagements.

#### **July 2006 - January 2009**

##### **Professional Staff**

##### **United States House of Representatives, Committee on Oversight and Government Reform**

##### **Congressman Henry A. Waxman, Chair and Ranking Member**

- Led investigations and hearings on the safety of the diabetes drug Avandia, drug and device safety, off-label drug marketing, and healthcare-associated infections.
- Wrote reports on emergency room overcrowding and citizenship documentation requirements for Medicaid.
- Conducted investigations and staffed hearings on steroids in sports and on pandemic flu.

- Drafted and negotiated key provisions of the Food and Drug Administration Amendments Act of 2007, including clinical trials disclosure provision.
- Supervised interns and fellows.

## **February 2008 - present**

### **Physician**

#### **Unity Health Care, Homeless Health Care Program**

- From 2013 until start of pandemic, provided medical care in shelter for homeless men as solo physician in once-weekly evening clinic, along with a medical assistant and outreach worker
- For 7 years prior to this, provided care in a transitional housing shelter for men with substance abuse. Implemented new electronic medical records, oversaw installation of lab services and adding capability for referral services.
- On pause during pandemic.

## **June 2004 - June 2006**

### **Robert Wood Johnson Clinical Scholar**

#### **Robert Wood Johnson Clinical Scholar Program, Yale University School of Medicine**

- Completed post-residency fellowship training in health services research and health policy.
- Analyzed Medicare datasets for projects in quality of care at safety net hospitals, and racial disparities in cardiac care, including methodological work in risk adjustment and socioeconomic disparities.
- Used publicly available data for analyses of gifts to physicians.
- Taught clinical skills for medical students and principles of research for physician assistants.
- Supervised medical students in free clinic.

## **July 2005**

### **Expert witness**

- Testified in U.S. District Court as unpaid expert physician witness regarding Medicaid coverage policy and the definition of “medically necessary”, on behalf of TennCare enrollees.

## **2004-2006**

### **Founding board member**

#### **National Physicians Alliance**

- Original board member of a nonprofit organization founded to “restore physicians’ primary emphasis on the core values of our profession: service, integrity, and advocacy”
- Developed initial mission statement and bylaws
- Developed original budget, helped raise initial funds, and established original contracts with outside service providers
- Provided original direction and message for the organization

## **July 2003 – July 2004**

### **Ambulatory Chief Resident**

#### **Department of Medicine, Montefiore Medical Center/Albert Einstein College of Medicine**

- Supervised the outpatient training for interns, including daily case review, lectures on selected clinical topics, and oversight of clinical care.
- Organized schedules for residents and helped transition program into compliance with new residency work hours requirements

**July 2000 – July 2003**

**Medical Resident, Internal Medicine/Social Medicine**

**Department of Medicine, Montefiore Medical Center/Albert Einstein College of Medicine**

- Trained as a medical resident at safety net hospital in Bronx
- Saw ambulatory patients in a community health center

**June 1998 - August 1998**

**Researcher/Writer**

**Governor’s Advisory Council on Health Care, Rhode Island Dept of Human Services**

**June 1997 - August 1997**

**Researcher/Writer**

**Center on Budget and Policy Priorities, Washington, DC**

**September 1995 - July 1996**

**Field Coordinator**

**Long Term Care Campaign, Washington, DC**

**August 1994 - August 1995**

**Field Coordinator**

**Families USA, Washington, DC**

## **EDUCATION**

2004-2006 Masters of Health Services Research. Yale University School of Medicine.

1996-2000 Doctor of Medicine. Brown University School of Medicine.

1990-1994 Bachelor of Arts, Political Science. Brown University.

## **LICENSURE AND BOARD CERTIFICATION**

2006 District of Columbia Medical License. Active.

2003 Diplomate, American Board of Internal Medicine. Certification valid through 2023.

## **BOARD SERVICE**

Board of Directors: National Institute of Child Health Quality

Advisory Boards: National Institution for Exceptional Care; National Institute for Medical Respite Care

## **SELECTED PUBLICATIONS**

### PEER REVIEWED PUBLICATIONS

Sapra KJ, Yang W, Walczak WB, **Cha SS**. “Identifying high-cost Medicare beneficiaries: impact of neighborhood socioeconomic disadvantage.” *Population Health Management*, February 23, 2020.

Volkow ND, Friedan TR, Hyde PS, **Cha SS**. “Medication-assisted therapies—tackling the opioid overdose epidemic.” *New England Journal of Medicine*, May 29, 2014.

Ross JS, Ho V, Wang Y, **Cha SS**, Epstein AJ, Masoudi FA, Nallamotheu BK, Krumholz HM. “Certificate of Need Regulation and Cardiac Catheterization Appropriateness After Acute Myocardial Infarction.” *Circulation*, February 27, 2007.

Ross JS, **Cha SS**, Epstein AJ, Wang Y, Bradley EH, Herrin J, Lichtman JH, Normand SL, Masoudi FA, Krumholz HM. “Quality of Care for Acute Myocardial Infarction at Urban Safety-Net Hospitals.” *Health Affairs*, January-February 2007.

**Cha SS**, Ross JS, Sacajiu G, Lurie P. “Description of a Research-Based Health Activism Curriculum for Medical Students.” *Journal of General Internal Medicine*, September 1, 2006.

#### NON-PEER REVIEWED PUBLICATIONS

“Barriers to Chronic Disease Care in the United States of America: The Case Of Diabetes.” Prepared by Yale University School of Medicine and Public Health for Novo Nordisk, USA. October 2005.

**Cha S**. “These Gifts Are Bad for Our Health.” *Washington Post*. July 24, 2005: Outlook, B2.

**Cha S**. “Why Hours Limits Are Only a First Step.” Accessed at [www.hourswatch.org](http://www.hourswatch.org), December 30, 2003.

**Cha S**. “The Development of Health Insurance.” *Medicine and Health/Rhode Island*. Volume 83, No. 9. September 2000.

Schneider A, **Cha S**, Elkin, S. “Overview of Medicaid 'DSH' Provisions in the Balanced Budget Act of 1997.” Produced by the Center on Budget and Policy Priorities, funded by the Kaiser Commission on the Future of Medicaid. August 1997.