



Health Policy Alternatives, Inc.

Advisors on Health Policy,
Legislation, Regulations,
and the Policy-Making
Process

Principals

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Lisa A. Potetz joined HPA in 2006 with many years of health policy experience in both the public and private sectors. Immediately before joining the firm, she worked for the March of Dimes developing and managing a public policy research program focused on health insurance coverage and other issues of importance to women of childbearing age and children. She also authored a number of reports on Medicare trends and reform proposals as an independent consultant. Lisa previously spent two years on the policy staff of the American Hospital Association. Her government experience includes service as a professional staff member to both the Senate Committee on Finance and the Subcommittee on Health of the House Committee on Ways and Means, developing legislation involving Medicare payment policy, private health insurance, and health care reform. Lisa began her career at the Congressional Budget Office and, prior to her time on Capitol Hill, was an analyst at the Prospective Payment Assessment Commission. She earned a BA from Boston College and a Master's in Public Policy from the University of Michigan.
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Pierre C. Poisson, J.D. joined HPA in 2008 after more than 13 years providing legal and legislative drafting services with respect to U. S. health entitlement laws and other areas of federal law. In 2005, Pierre formed his own company providing policy analysis, procedural counsel, and drafting services for clients seeking assistance in developing legislation involving Medicare and Medicaid payments to providers and suppliers as well as for clients seeking improvements in health care services and other benefits under law for service members and veterans of the U.S. Armed Forces. Until 2005, he served as Assistant Counsel in the Office of the Legislative Counsel, U.S. House of Representatives, where for ten years he provided policy analysis and drafted legislation in the areas of Medicare, Medicaid, veterans' benefits, and the U.S. intelligence community. He previously served as a judicial clerk for a U.S. Tax Court judge. He earned a law degree from the Dickinson School of Law and his B.A. from Middlebury College.
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Marjorie Kanof, M.D., M.P.H. joined HPA in 2011 after 14 years in the federal government. Prior to joining the firm, she was the Managing Director for Health Care at GAO. In that role, she was responsible to Congress for testimonies and reports covering the complete range of health care issues. She also provided leadership for implementation of portions of health care reform legislation. Before GAO, Marjorie worked at CMS and held a variety of positions including Deputy Director for Medicare Payment Policies and Deputy Director for Medicare Contractors. In these positions, she provided leadership for development and implementation of Medicare payment policies, Medicare claims contractors, and program integrity issues. Before government service, she was the Medicare Medical Director at BCBS of Massachusetts, where she developed local medical review policies for several Medicare products and was involved in national physician payment committees. Her medical background includes academic and clinical components. She was NIH funded in the field of immunology. She held a faculty position at the Harvard Medical School and Massachusetts General Hospital. She trained in pediatrics and gastroenterology at the Johns Hopkins Hospital. Marjorie earned a Master's in Public Health from the Harvard School of Public Health. She earned her M.D. from the University of Kansas. Email: mk.hpa@ssso.org

Thomas Walke, Ph.D. joined HPA in 2013 after 10 years of federal government experience. Prior to joining the firm, he was an Assistant Director for Health Care at the United States Government Accountability Office (GAO). In this role, he was responsible for assisting the Congress in developing reports and testimonies on a wide range of health care topics including Medicare payment and financing issues, Medicare program integrity, and the Department of Veterans Affairs and Department of Defense health care systems. Thomas also has served as Deputy Director for the Center for Sustainable Health Spending at Altarum Institute. In this role, he led research projects involving the macroeconomics of health spending, workforce, prices, and long-term fiscal sustainability. He also served as Practice Area Leader of Forecasting and Economic Analyses at Altarum, conducting and supporting economic analyses for government and private sector clients, including analyses of new diagnostic technologies, among other responsibilities. His background includes health economics, program evaluation, and other quantitative and qualitative methods. He earned a Master of Science in Public Health and a Ph.D. in health policy and administration from the University of North Carolina School of Public Health. Email: tw.hpa@ssso.org

Jean P. Hearne joined HPA in 2014 after working more than twenty years as a policy advisor to the United States Congress. Twelve of those years were at the Congressional Budget Office (CBO) and ten at the Congressional Research Service. Most recently, she served as the chief of the Low-Income Health Programs and Prescription Drugs cost estimating unit of CBO. There, Jean led a team of analysts specializing in analyzing the budgetary and policy effects of legislation affecting Medicaid, the Children's Health Insurance Program (CHIP), health programs established under the Affordable Care Act (ACA), and many other programs. She has had extensive involvement in major legislation, including the ACA, legislation establishing the CHIP program, as well as numerous budget reconciliation bills. As a Medicaid financing expert Jean has authored a large number of reports for Congress on Medicaid subjects. She earned an M.P.H. from San Diego State University and a B.A. from the University of Rochester. Email: jh.hpa@sso.org

Karen R. Borman, M.D., joined HPA in 2016 from her position as the Vice-Chair for Surgical Education and Quality at Medstar Washington Hospital Center. She is Board certified in Surgery and has held faculty and administrative positions at university and independent academic medical centers, including Professor of Surgery with tenure. Her clinical focus was on endocrine surgery, and her research focus was on surgical education. Karen was a founding member of the General Surgery CPT/RUC Committee of the American College of Surgeons (ACS). She served on the AMA CPT Editorial Panel, including five years as Vice-Chair, after representing the ACS on the CPT Advisory Committee and the RUC's Practice Expense Advisory Committee. She served on the AMA Diagnostic and Therapeutic Technology Assessment Panel, the Carrier Medical Advisory Committees for North Texas and Mississippi, and the CMS Hospital Outpatient Payment Advisory Panel. Karen was a MedPAC Commissioner from 2006 through 2012. She is a Senior Director of the American Board of Surgery, and a Past-President of the Association of Program Directors in Surgery. Karen completed her residency at the University of Texas Southwestern Medical Center in Dallas, her MD at Tulane University, and her BS in Chemistry at the Georgia Institute of Technology. Email: kb.hpa@sso.org

Marc Hartstein joined HPA in 2016 after 26 years of Medicare policy experience. His areas of focus have included Medicare payments for inpatient hospital services, outpatient hospital services, physician services, Part B drugs, and clinical laboratory fee services among others. Marc has been central to the development of such issues as the Medicare Severity DRGs, the 2 midnight rule, off-campus hospital outpatient department payments, the mis-valued code initiative and regulations to implement Medicare's new clinical laboratory fee schedule. Marc's experience not only gives him detailed knowledge of the workings of the executive branch of government, he also has worked extensively with the legislative branch. He has assisted in the drafting of legislation, working with the Congressional Committees that have subject matter jurisdiction over Medicare. Marc has a master's degree in public policy from the University of Minnesota's Hubert H. Humphrey Institute of Public Affairs and a bachelor's degree in political science and economics from the University of Vermont. Email: mh.hpa@ssso.org

HPA combines technical expertise and analytical skills with an in-depth knowledge of the federal health policy-making process to help clients develop proposals and strategies that take into account the current legislative, regulatory, and political climate.

- Assessment and monitoring of the policy environment and analysis of regulations and legislation
- Design and analysis of policy proposals
- Presentations and educational programs
- Strategic advice and consultation related to new and emerging products
- Written products to support advocacy efforts, including legislative analysis, Congressional testimony, regulatory comments, draft legislation and supporting documents for client proposals.

HPA special projects have included analyses of provider payment and health system reform; comprehensive overview of the current health-care system and possible future scenarios; analysis of insurance regulation; assessments of coding and coverage policies, including use of comparative effectiveness; analysis of trends in the utilization of physician and other health care services; and review of Medicaid payment policies and financing mechanisms available to State governments.



HPA provides consulting services on a retainer or special project basis to a broad range of clients. Since 1978, we have helped organizations meet their objectives by offering technically sound and practical advice about health care issues and the health policy-making process.

HPA clients include hospital associations; physician, nursing and other practitioner associations; insurance associations and companies; health delivery organizations; consumer and patient representatives; foundations; manufacturer associations and individual corporations providing a variety of health care products and services.

HPA principals have a long and varied history working for the U.S. Congress and the Department of Health and Human Services. They also have had extensive experience in health-related trade associations. The principals offer diverse academic backgrounds, including individuals with advanced degrees in medicine, law, public health, political science, public policy, health administration, and public administration.

HPA works closely with the leadership, committees and staffs of client organizations to address their health policy needs. Our products are wide-ranging, including:

- Timely, strategic advice about policy risks and opportunities

Our Founders' Vision

After many years of health policy work on Capitol Hill and in Federal executive branch agencies, Bill Fullerton, Stan Jones, and Irv Wolkstein founded HPA on December 15, 1978. They modeled the firm after the Congressional Research Service (CRS) of the Library of Congress, a source of confidential, objective and nonpartisan expert analysis and advice for congressional committees and Members of Congress. Bill, Stan and Irv wanted HPA to provide private sector organizations—both large and small—with CRS-like analytic support to help them be more effective participants in health policy debates and deliberations. We are proud to continue this tradition.



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