



Friday, June 19, 2009

## **Medicaid Disproportionate Share Hospital Payments and Health Care Reform**

### **MODERATOR**

**Judith D. Moore**  
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### **SPEAKERS**

**James Frizzera**  
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**James Frizzera** worked at the Centers for Medicare & Medicaid Services (CMS) (formerly the Health Care Financing Administration, or HCFA) for the last 20 years. Mr. Frizzera oversaw federal Medicaid grant outlays, state budget and expenditure reporting, national Medicaid reimbursement, and state Medicaid financing policy. He was responsible for the review and recommended decision-making for all institutional and non-institutional reimbursement Medicaid State Plan Amendments (SPAs); the development and application of national policy related to institutional and non-institutional Medicaid reimbursement, including Medicaid disproportionate share hospital (DSH) payment and Medicaid upper payment limit (UPL) policy; and the development and application of national policy related to state Medicaid financing for all Medicaid and SCHIP (State Children's Health Insurance Program) SPAs and all Medicaid and SCHIP waivers and demonstration programs. Mr. Frizzera is also recognized as a national expert in the area of Medicaid financing, including health care-related taxes, provider-related donations, intergovernmental transfers, and certified public expenditures. Mr. Frizzera works in HMA's office in the District of Columbia.



**John Curless**

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**John Curless** is the director of the Bureau of Coverage and Reimbursement Policy in Utah's Division of Health Care Financing, which administers the state's Medicaid program. He has held this position since January 2008. Mr. Curless has worked in the division for four years serving as an actuarial specialist prior to becoming the bureau director. In addition to his work in the Division of Health Care Financing, he previously worked for Intermountain Healthcare's Select Health. He held various positions in the finance area during the eight years he worked for Intermountain. Mr. Curless holds a bachelor of arts degree in finance and a master of business administration degree from Utah State University.



**Peg Burnette**

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**Peg Burnette, CPA**, is chief financial officer (CFO) for Denver Health and Hospital Authority. Denver Health is Colorado's primary "safety net" institution. Denver Health is also the state's largest Medicaid provider. Ms. Burnette has 20 years of experience in health care finance including positions as CFO and associate CFO/Controller at Denver Health, and previous positions in financial management at National Jewish Medical and Research Center, Kaiser Permanente and Myers & Stauffer, CPAs. She has been active in the Colorado Healthcare Financial Management Association since 1992 and serves on its board. She is also a senior policy fellow with the National Association of Public Hospitals. Ms. Burnette was appointed to the Colorado Blue Ribbon Commission for Healthcare Reform by Gov. Bill Ritter in 2007; this commission delivered its recommendations to the Colorado Legislature in January, 2008. Ms. Burnette is a certified public accountant with a bachelor's degree in business administration and accounting from the University of Kansas.



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**Thomas P. Traylor** is vice president for Federal, State and Local Programs at Boston Medical Center. He is responsible for oversight of the Medical Center's 250,000 member Managed Care Plan. He directs the hospital's government relations activities. He previously held a number of positions with the Boston Department of Health and Hospitals, including commissioner and chief financial officer. He served on Gov. Deval Patrick's health care transition team. He is a board member of the National Association of Public Hospitals. Mr. Traylor received a BA degree in economics/accounting from Holy Cross College and an MBA degree from Northeastern University.

