



**NEHI Presents:  
Next Generation Value-based Arrangements in Massachusetts:  
The Road Ahead**

October 27, 2020 | 12:00-1:30PM EST | [Zoom](#)

**Description:** Outcomes-based contracts and other value-based arrangements (“VBAs”) between pharmaceutical manufacturers and health care payers have become a “tool in the payment toolbox” VBAs are being employed by payers in Massachusetts and elsewhere to negotiate payments for highly novel pharmaceuticals such as gene therapies, but payers and manufacturers throughout the country are experimenting with VBAs for chronic disease medications as well.

What are the implications for Massachusetts? NEHI’s October 27th briefing will review the status of VBAs in Massachusetts and elsewhere, and lessons learned that may prove useful when Massachusetts state government resumes deliberation on pharmaceutical pricing and payment, largely suspended since the COVID-19 outbreak.

## PANEL OVERVIEW

---

### Panelists:

- Annie Kennedy, Chief of Policy and Advocacy, EveryLife Foundation for Rare Diseases
- Eleanor Perfetto, PhD, MS, Interim Chief Executive Officer and Executive Vice President of Strategic Initiatives, National Health Council
- Michael Sherman, M.D., Chief Medical Officer, Harvard Pilgrim Health Care
- Dan Wygal, Executive Director of Contract and Channel Strategy, AstraZeneca

## PANEL BIOS

---

### **Annie Kennedy, Chief of Policy and Advocacy, EveryLife Foundation for Rare Diseases**

Focused on improving health outcomes for people living with rare diseases by advancing the development of treatment and diagnostic opportunities for rare disease patients through science-driven public policy, Annie’s work includes building strong partnerships with policy makers, federal agencies, Industry, and alliances. Current areas of emphasis include leading the national Burden of Rare Disease Study, 21<sup>st</sup> Century Cures Act and PDUFA VII engagement, national newborn screening program engagement and state RUSP alignment legislation, and innovating around therapy valuation and access issues. Annie has served within the community for nearly three decades through her roles with Parent Project Muscular Dystrophy (PPMD) and the Muscular Dystrophy Association (MDA). In that time she helped lead legislative efforts around passage and implementation of the MD-CARE Act (2001, 2008, 2014), the Patient Focused Impact Assessment Act (PFIA) which became the Patient Experience Data



provision within the 21<sup>st</sup> Century Cures Act (sec 3001), engagement with the FDA and Industry around regulatory policy and therapeutic pipelines, led access efforts as the first therapies were approved in Duchenne, and engaged with ICER around the development of the modified framework for the valuation of ultra-rare diseases. Annie's community roles include service on the Board of Directors of Cure SMA, the PFDD Works coalition, the Steering Committee of the Patient Driven Values in Healthcare Evaluation, Cures for Life, the FasterCures Patient Exchange Working Group, the National Health Council's PCORI Valuation Group, National Health Council's Medical Innovation Action Team, and recently served as a Design Team member of the NCATS/ORDR Tool Kit Project.

### **Eleanor M. Perfetto, PhD, MS, Interim Chief Executive Officer**

Dr. Eleanor M. Perfetto was named Senior Vice President of Strategic Initiatives for the National Health Council (NHC) in July of 2015 and was promoted to Executive Vice President in January 2019. She also holds a part-time faculty appointment at the University of Maryland, Baltimore School of Pharmacy where she is Professor of Pharmaceutical Health Service Research. Her research and policy work primarily focus on patient engagement in comparative effectiveness and patient centered-outcomes research, medical product development; patient-reported outcome selection and development; and health care quality. Dr. Perfetto holds BS and MS degrees in pharmacy from the University of Rhode Island, and a PhD from the University of North Carolina School of Public Health with concentrations in health policy and epidemiology.

### **Michael Sherman, MD, MBA, MS, Chief Medical Officer, Harvard Pilgrim Health Care**

Dr. Michael Sherman, Chief Medical Officer and Senior Vice President for Health Services at Harvard Pilgrim Health Care, is widely recognized as a pioneer in the race to control skyrocketing drug costs. His work in the development of value-based payment agreements with pharmaceutical companies, which tie payment for a drug to patient outcomes, has placed him at the forefront of the issue. Dr. Sherman is credited with cementing Harvard Pilgrim's position as a leader among insurers in crafting agreements with pharmaceutical companies that tie payments for a drug to its performance. In 2018, he received Xconomy's "Contrarian Award" for his contributions, which include having signed the nation's first such payment model for a gene therapy, helping pave the way for the development of innovative financing models.

Harvard Pilgrim is a not-for-profit health plan that has been recognized by NCQA as one of the top health plans in the nation for over a decade and which provides a variety of insurance options to 1.2 million members in Massachusetts, New Hampshire, Maine, and Connecticut. As Harvard Pilgrim's chief physician executive, Dr. Sherman has focused the organization on introducing innovative outcomes-based reimbursement models that more effectively engage providers, pharmaceutical companies, and diagnostics companies. He is responsible for medical trend management, pharmacy management, provider engagement strategy, clinical policy and utilization management, disease and care management services, quality, and wellness offerings.

Dr. Sherman is chair of the Board of Managers of the Harvard Pilgrim Health Care Institute, which encompasses the Department of Population Medicine at Harvard Medical School—the nation's only appointing medical school department based in a health plan. He holds additional board appointments



with several well-respected nonprofit organizations, including the Institute for Clinical and Economic Review (ICER), the Personalized Medicine Coalition, the Harvard Business School Healthcare Initiative, and the Center on Media and Child Health. Until recently, he chaired AHIP's CMO Leadership Council, a trade association comprising chief medical officers from health plans throughout the United States, and also served as a board member and as Co-President of the Harvard Business School Healthcare Alumni Association. Dr. Sherman has also served as a mentor for emerging physician executives enrolled in the AHIP Executive Leadership Program.

Prior to joining Harvard Pilgrim in 2011, Dr. Sherman served as corporate medical director for physician strategies at Humana, where he developed collaborative provider-payer partnerships with provider organizations to support their mutual goal of delivering the highest quality care to patients. He also served as vice president of network and consumer solutions for UnitedHealth Group's subsidiary Ingenix (now part of Optum) and as chief business development officer for United's Medicare Part D business. Formerly, Dr. Sherman held the position of vice president and general manager at Thomson Medstat (now IBM Truven), and he previously held management roles at Immusol, a San Diego-based biotechnology company; HealthAllies, an organization created to provide discretionary medical benefits to the cash-pay market, which was purchased by UnitedHealth Group; and Da Vita, a national provider of dialysis services.

Before pursuing an M.B.A. at Harvard Business School, Dr. Sherman received his M.D. from Yale and practiced as a cardiac anesthesiologist. He also holds a B.A. in Anthropology and Natural Sciences and an M.S. in Biomedical Anthropology from the University of Pennsylvania. Dr. Sherman is a diplomate of the American Board of Anesthesiology and the American Board of Medical Management. In 2009, he was named a fellow of the American College of Physician Executives in recognition of his national contributions to the field of medical management. Dr. Sherman frequently speaks at regional, national, and international conferences and lectures as a faculty member of Harvard Medical School's Department of Population Medicine. He has also been called upon to provide legislative testimony at the national level. Speaking at the White House in 2017, Dr. Sherman presented Harvard Pilgrim's efforts to combat the opioid epidemic at a meeting of the President's Commission on Combating Drug Addiction and the Opioid Crisis.

### **Dan Wygal, Executive Director of Contract and Channel Strategy, AstraZeneca**

Dan Wygal is responsible for leading the development and delivery of gross-to-net contract and channel strategies for the US Oncology and BioPharmaceuticals Business. With over 18 years in the industry, Dan has held roles in Market Access, Marketing and Sales Leadership at AstraZeneca, MedImmune and GSK. Dan has been instrumental in evolving AstraZeneca's strategic thinking, particularly in helping AstraZeneca emerge as an industry leader in value-based agreements. Dan holds a Bachelor's Degree in Business Administration from State University of New York at Oswego. Dan currently resides in Leesburg, VA with his wife and two sons.