

[Health System Transformation, LLC \(HST\)](#) as a business entity has been in existence for five years. The organizational roots, however, span across the decades that founder and President Joshua Slen has worked in direct state and state facing roles. The HST approach is to develop a bespoke team for each engagement made up of individuals with the necessary expertise to provide deep subject matter expertise, analytics, research, writing, project management, and a host of other supports to assure that your project is superbly staffed. Every member of the curated team that HST assembles has worked in the healthcare space for decades. Collectively, HST brings together experts from all areas of state facing healthcare. Joshua and the individual HST team highlighted below are nationally known health policy experts responsible for designing and implementing state-wide health system improvements including transformational population health interventions and federally approved Medicaid Waivers. Over the past thirty years Joshua has worked in multiple states, including Vermont, directly for the State Legislature and Governors. He has lead state budget development, run the Medicaid program, negotiated federal waivers, supported state-wide quality improvement, built population management programs, worked for and with multiple Health Information Exchanges, and more. HST works today with multiple corporate and non-profit clients on complex health policy and strategy issues. HST continues to lead the health system improvement conversation nationally supporting multiple initiatives across multiple states and with the federal government.

Your HST team includes hand-picked individuals that provide the skills and expertise gained through decades of healthcare experience at the state and federal levels along with system level experiences in health information technology, quality improvement, and many other healthcare areas. Joshua and Julie have done dozens of projects pulling together bespoke teams to support state health system efforts over the past several years. Key individual team member background information is included below.

[Julie Trottier, MSA](#)

is a native Vermonter who brings 30 years of experience in public and private sector health and human service care delivery system development, care management, quality assurance and improvement, and healthcare administration. She has worked for three departments within the VT Agency of Human Services, including DAIL, DCF, and DVHA and has been a leader and team contributor to a number of healthcare initiatives including the Vermont Chronic Care Initiative, the Blueprint for Health, and several national federally sponsored practice transformation demonstrations. In her work both within Vermont and on consulting projects in other states and for the Centers for Medicare and Medicaid Services, Julie has facilitated connections between state and federal government agencies and community providers to develop value-based practices for health and human services funding and delivery, operational procedures, and improved care coordination for Medicare and Medicaid enrollees.

[Tim Hill, MPA](#)

is the Senior Vice President, Health, for IMPAQ International. He is a highly experienced health policy executive with a demonstrated ability to lead diverse teams developing and implementing health policy solutions in fast paced environments. He has strong policy, financial management and program implementation qualifications and a 25-year track record of successful interactions at the highest levels of the executive branch, Congress, oversight agencies and the press. Mr. Hill is a recognized expert in the health policy community as a strong communicator who brings a risk-based, solutions-oriented mindset to problem solving and policy development. Immediately prior to joining IMPAQ, Mr. Hill was the senior career executive with policy and operational oversight of Medicaid and Children's Health Insurance Program (CHIP) as the Deputy Director of the Center for Medicaid and CHIP Services (CMCS)

within CMS. Mr. Hill also served as Deputy Director of the Center for Medicare, overseeing policy and operations of the Medicare Part D and Medicare Advantage programs. Mr. Hill has been an accountable leader in several other senior positions within CMS, including CMS Chief Financial Officer, CMS Program Integrity Director and Deputy Director of the Center for Consumer Information and Insurance Oversight.

Beth Waldman, JD, MPH

is a Senior Consultant at Bailit Health with national expertise in health care policy, program development and implementation, specializing in Medicaid and CHIP programs and coverage for the uninsured. During her fourteen plus years with Bailit Health, Beth has been actively involved in efforts across the country to improve access and delivery of health care to low-income individuals while working to make coverage more affordable and assist payers in efforts to expand value-based purchasing. Beth's work includes assisting states and other stakeholders in delivery system and payment reform design, including PCMH and ACO development; Medicaid managed care procurements; care management and health home program design; behavioral health reform, including integration, opiate prevention and treatment; design and implementation of Medicaid and other public program expansions; quality measurement; and long-term services and supports strategy and integration. Immediately prior to joining Bailit, Beth served as the Massachusetts Medicaid Director and was responsible for the administration of all aspects of the Massachusetts Medicaid program, MassHealth, including DSH policy. Beth played a key role in the development and implementation of the Commonwealth's historic Health Reform Law. Beth negotiated the federal waiver, oversaw the implementation of several MassHealth population and service expansions, and served as a member of the Board of the Commonwealth Health Insurance Connector Authority. Prior to becoming Medicaid Director in September 2003, Beth spent nine years in various roles at the Division of Medical Assistance. In her various roles, Beth gained expertise in all aspects of the state's Medicaid program – including eligibility, provider rate payments, managed care contracting, and long-term care services.

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