Edmund Pezalla, MD, MPH
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I am a respected leader in health insurance, health policy, and technology assessment, consulting with drug and device manufacturers on a range of compensation and payer issues including health technology assessment, value development and payer strategy.

Industry Leadership

- Scholar-in-Residence at the Duke-Margolis Center for Health Policy focusing on value frameworks and acceleration of development of antimicrobials
- Appointed by Connecticut State Legislature to the Advisory Board of the Connecticut Innovations Biosciences Fund
- Invited expert: white paper on reform of drug approval regulations for the President's Council of Advisors on Science and Technology (PCAST) 2012
- Founding member of the MIT Center for Biomedical Innovation's New Drug Development Paradigm Project (NEWDIGS) working with pharmaceutical firms, US and overseas regulators and European payors to create a collaborative approach to improving the efficiency and quality of drug development and approval processes
- Board Member: Pharmacy Quality Alliance, 2011-2015
- Commercial Advisory Board Member: Naia Pharmaceuticals
- Scientific Advisory Board Member: Temple Therapeutics

Education and training

- Fellowship and all but dissertation in PhD program: Health Services Organization and Policy; with a concentration in quantitative methods: economics, statistics, and complex systems – University of Michigan
- MPH focused on population based health measures and maternal and child services – University of California
- Pediatric Residency – Bethesda Naval Hospital
- MD, cum laude, Alpha Omega Alpha – Georgetown University School of Medicine
- BS Quantitative Biology/Biophysics, Sigma Psi – Georgetown University College of Arts and Sciences

Experience

2016-present

Enlightenment Bioconsult, LLC: **CEO and Consultant**

Taking a design thinking approach to development of market strategies:

- Development of phase specific strategies
    - Choosing primary indications that will appeal to patients, providers and payers
    - Creating an approach to payment that will appeal to investors and partners
    - Developing trial strategies that will inform HTA and Value Framework evaluations
- By developing strategies with clients we establish the value inherent in their products and develop an approach to move ahead with development, approval and market access
    - Incorporation of key data elements into Phase III programs
    - Development of effective value propositions for on-market products

Projects have included

- Applying health technology assessment and value frameworks to potential in-licensing opportunities for a small bio-pharma firm
- Developing a pathway to payment for a Part D drug to demonstrate viability to investors for an innovative drug/device combo
- Creating economic research plan and economic materials for use with payers for an oncology company in a rare cancer type
- Developing innovative approach creating financing models for a curative therapy for a rare chronic disease

Current public policy activity

- Duke-Margolis Center: Antimicrobial payment project, non-volume based approaches to supporting antimicrobial development and stewardship
- MIT NEWDIGS: Project on valuation and payment for expensive curative therapies including gene and cell therapy

2007 – 2016

Aetna: **Vice President, National Medical Director for Pharmaceutical Policy and Strategy**

(Aetna Inc., Office of the Chief Medical Officer)

- ❖ Provide strategic direction and leadership for innovative projects in life sciences including
    - Creation of strategies to cover costs of new expensive therapies
    - Establish framework and contract for outcomes based risk sharing arrangements with device and pharmaceutical firms; in 2013 completing two coverage with evidence development deals with pharmaceutical firms, one shared-saving arrangement with a device firm and a landmark

agreement to reduce costs and create revenue from the sale of devices to select partner hospitals

- ❖ Oversee integration of the pharmacy and medical clinical policy and business strategies
- ❖ Corporate strategy: as part of the Aetna Senior Leadership Team created the new Aetna clinical and care management strategy to refocus on supporting the member/provider interaction, reduce gaps in care and improve cost-effective use of medical benefits
- ❖ Represent Aetna to government agencies, policy makers, industry work groups and media
    - Developed Aetna's "paying for value" position
    - Participate in public policy debates and development of science and technology policy

Aetna: Fall of 2014 Temporary assignment as Chief Medical Officer at SEHA in Doha, Qatar

- ❖ As acting Chief Medical Officer worked as a member of the senior leadership team to implement key programs in the development of Qatar's national health insurance program (SEHA)
- ❖ Payment policy
- ❖ Clinical policy
- ❖ Process evaluation and improvement
- ❖ Quality Improvement Program: bariatric surgery
- ❖ Oversight of case and disease management programs for maternity care, diabetes and heart disease
- ❖ Recruiting
- ❖ Leadership
    - Project management
    - Medical Management
    - Staff training and development
    - Relationship building
- ❖ Communications and reporting
    - Data requests
    - Program reports

Aetna: **National Medical Director and Chief Clinical Officer** (pharmacy management)

- ❖ Oversee clinical policy and cost/trend management for 8MM pharmacy members with over $9BB in spending in commercial, Medicare, and Medicaid programs
- ❖ Provide consultation and advice to Aetna's senior management on public policy, pharmacy and medical management strategy and issues
- ❖ Represent Aetna to government agencies, policy makers and the market place
- ❖ Achieving results: managed $9B in pharmacy spending for Aetna realizing over $180MM in annual savings for commercial membership from new initiatives while reducing overhead cost by $2MM

- Leading people: managed 70 team members with a $10MM budget creating an innovative program (Prescription for the Future) which resulted in creation of multiple new product/benefit designs and clinical programs that contributed over $100MM in savings for the 800,000 member Medicare program

2004 - 2007
Prescription Solutions: (PacifiCare and United Health Group) **Vice President for Clinical Services**

- Developed and oversaw cost and quality management programs for 6MM Medicare members and 6MM commercial members with over $24BB in total spending
- Provided consultation and support to the senior management team
- Managed a team of 50 professionals with an annual budget of over $10MM
- Strategy and new programs: created the first Part D Medicare drug benefit program under the Medicare Modernization Act resulting in the most successful product launch in the history of PacifiCare (1MM members in 2005 and 6MM in 2006, annual revenue exceeded $12BB)

2001 – 2004
University of Michigan

- Doctoral student
- Health Services research fellow
- Graduate instructor in public health policy

1995 – 2001
Pfizer Health Solutions: Director for Clinical Sciences

- Head of development for clinical software decision support
- Oversee outcomes research and analytic projects
- Clinical sales and client engagement

1991 – 1995
The Permanente Medical Group: Chief of Pediatrics, Fremont Medical Center

- Manage budgets and activities of pediatric care delivery team
- Perform utilization and quality review and management for inpatient activities
- Develop continuous quality improvement programs to reduce costs, improve efficiency and promote high quality care for outpatient and inpatient functions

1988 -1991
Naval Hospital Millington: Chief of Pediatrics

- Oversee activities of inpatient and outpatient pediatric practitioners

- ❖ Manage injection and allergy clinics and infection control

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3) *A New Market Access Pathway for Repurposed Drugs.* Pahud D, et al. Ewing Marion Kauffman Foundation. May 14, 2014. www.kauffman.org/what-we-do/research/2014/05/a-new-market-access-pathway-for-repuprosed-drugs
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