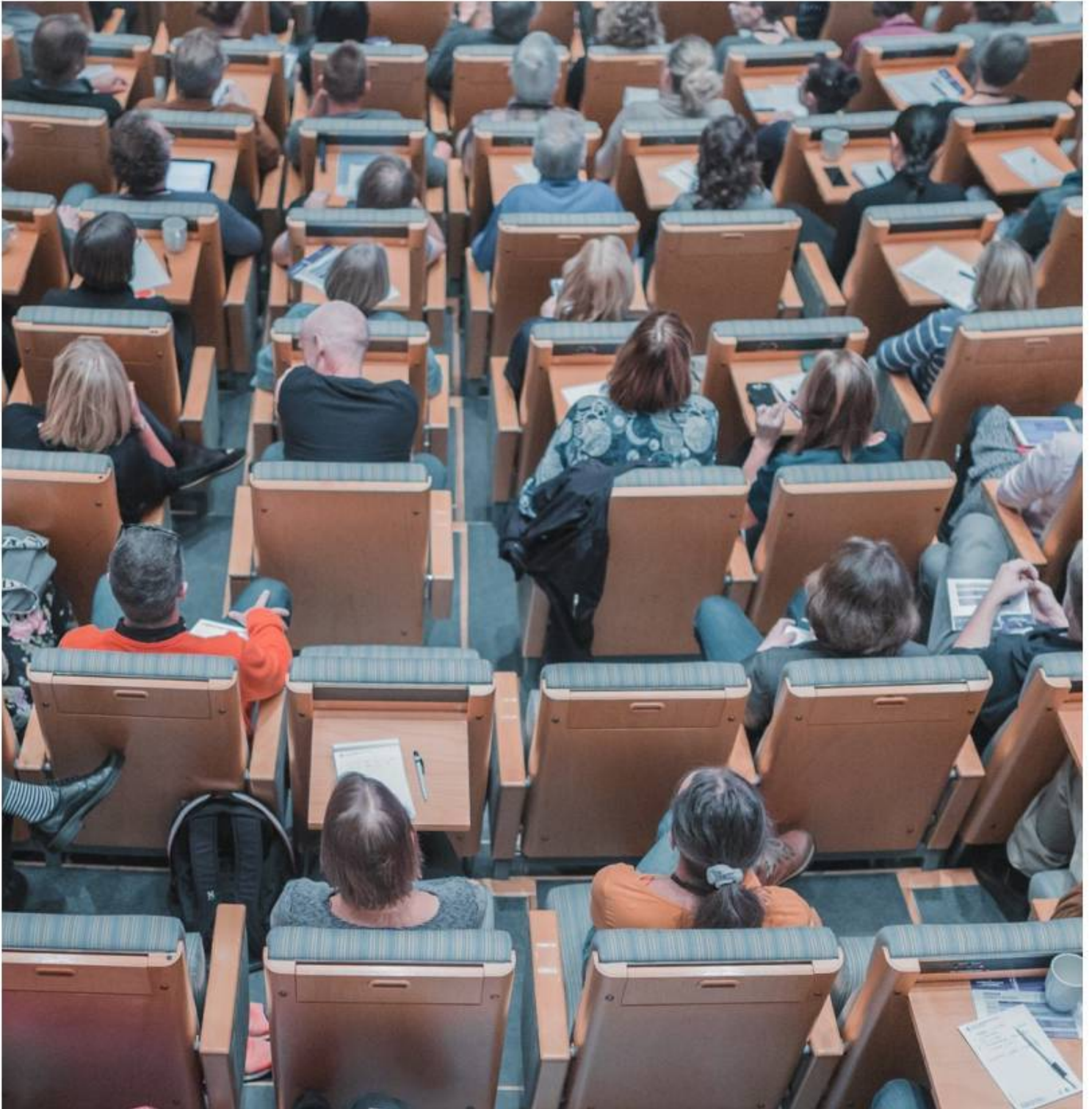


2020 Impact Report

Annual Summary of CHI Initiatives to Make Healthcare More Equitable





"An outstanding cross-sectional representation of healthcare experts provided the basis for a stimulating discussion on the meaning of patient-centricity and healthcare value from diverse perspectives." - Dr. Greg Gilmet, MD, MPH, Vice President Medical & Scientific Affairs, Upsher-Smith Laboratories

Who We Are

The Center for Healthcare Innovation (CHI) is an independent, non-profit research and educational institute dedicated to making healthcare more equitable for all patients.

Our Vision

To be the leading global platform for meaningful change in health equity.

Our Mission

To bring together experts and ideas from all over the world to improve healthcare for everyone, regardless of socioeconomic status, gender, race, ethnicity, or other social determinants.

Our Value Proposition

Embracing new perspectives to make healthcare more equitable.

Our Values

- Welcoming - We bring together diverse viewpoints and invite all to participate
- Committed - We see our work through
- Imaginative - The possibilities for the next solution are endless
- Forward-thinking - We're already thinking about what's next

Our Objectives

- Advocate for vulnerable, at-risk, and underserved patients.
- Convene influential leaders, thinkers, and doers to develop collaborative relationships to make healthcare more equitable for all patients.
- Increase the understanding of the definition, framework, and metrics of health equity.
- Produce primary, impactful research focused specifically on the latest trends, challenges, and opportunities of health equity.
- Analyze, identify, and disseminate best practices for reducing healthcare disparities for underserved patient groups.
- Develop ideas for policymakers aimed at eliminating obstacles to care and reducing health disparities.



What Makes CHI Unique

- We focus on research and education that aims to optimize healthcare as a core human value
- We are a 501(c)(3) non-profit, charitable organization dedicated to making healthcare more equitable for all patients
- We are rigorously objective, unbiased, and non-partisan
- We are an independent, neutral institute, not associated with or captive of industry, academia, government, or other institutions
- We approach our research, solutions, and education through a multi-perspective lens, including the patient, provider, pharma, pharmacy, payer, and policymaker perspectives
- We aim to bring in new perspectives into healthcare - including consumerism, technology, artificial intelligence
- We are a global organization, and we view U.S. healthcare through a global lens
- We are an interdisciplinary group of innovative healthcare leaders, physicians, executives, entrepreneurs, authors, academics, and innovators
- We operate for the benefit of other healthcare groups - including patients, providers, pharma, pharmacy, payers, and policymakers - and we incorporate each unique perspective into our research

"The Healthcare Executive Roundtable on Patient-Centric Healthcare Value was excellent. The quality of the program and the expertise of the other executives added extreme value to the experience. It was an excellent use of my time." - Matt Portch, Team Lead Commercial Effectiveness, Pfizer

Frequently Asked Questions

What is CHI?

We are a healthcare research and educational institute.

What type of organization is CHI?

We are an independent, objective 501(c)(3) non-profit.

What does CHI hope to accomplish?

We hope to improve healthcare for everyone, regardless of socioeconomic status, gender, race, ethnicity, or other social determinants.

What activities does CHI do to achieve these goals?

We advocate, research, educate, communicate, train, convene, and report on healthcare equity.

How does CHI make the world a healthier place?

Our research and education focus on improving healthcare equity, eliminating and reducing healthcare disparities, and increasing access for all patient groups.

How is CHI funded?

CHI is funded through a combination of grants from philanthropic foundations, program revenue from educational events and memberships, and individual and corporate donations from our Board of Directors and external stakeholders.

What are CHI's future goals?

- (1) Increase the quantity and breadth of our research and education,
- (2) Continue to attract the best and brightest human talent and grow our team, and
- (3) Continue our journey to be the leading global platform for meaningful change in health equity.

An Unprecedented Year of COVID-19 Disparities and Systemic Inequities for Communities of Color

2020 has been an incredibly challenging year as the global COVID-19 pandemic has claimed hundreds of thousands of lives in the U.S. and millions more around the globe. COVID-19 has also disproportionately devastated communities of color. Infection, hospitalization, and mortality rates for black and brown communities are well above those of whites. The pandemic's economic impact has been devastating for many families facing food insecurity, layoffs, evictions, and other financial hardships. Moreover, a significant percentage of front-line hospital, health, and service employees are communities of color. COVID-19 has reminded us how pervasive health disparities are in the U.S., as communities of color are afflicted by highly-prevalent, chronic conditions, social determinants of health, lack of access to care, and systemic inequities that permeate healthcare.

In addition to the pandemic, 2020 has been a stark reminder of the widespread systemic inequities and structural racism that impact communities of color in America. The tragic killings of George Floyd, Ahmaud Arbery, and Breonna Taylor are just recent instances of a long history of police brutality against communities of color. The mistreatment and harassment of African Americans have abruptly thrust racism back into the national and global spotlight. Set against the backdrop of the unprecedented global COVID-19 pandemic that has disproportionately impacted communities of color, it has been a painful year for many of us, leaving us struggling to find the right words to say.

COVID-19 health disparities and systemic racism are a chilling reminder that racism has been a part of American history since our founding, from slavery, civil war and reconstruction, the Jim Crow era, civil rights, to the events of 2020. These racial incidents are only one chapter of racial inequality in the U.S. Just like the inequalities witnessed in every aspect of American life - including economic opportunity, housing, education, and wealth, to name a few - healthcare is no different. We've seen inequality permeate healthcare - from blatant medical racism, the Flexor Report, and the Tuskegee Syphilis Study. It is difficult, if not impossible, to point to even one health measurable where African American health outcomes are better than those of whites.

We are committed to working closely with our stakeholder community, from grassroots advocates and community voices to Chief Executive and Chief Diversity/Inclusion Officers at large healthcare enterprises, to identify and understand the root causes of health inequities and inspire and empower each other to serve as change agents. We will make a difference in the healthcare and lives of African Americans, which will have ramifications for all communities of color.

We are committed to identifying health disparities, shining a light on health inequities, and working collaboratively with the broader healthcare community to devise actionable solutions to make healthcare more equitable for African Americans and all marginalized BIPOC communities.

Although 2020 has presented unique challenges for CHI, it has also presented new opportunities. In response to the pandemic, we've converted all educational programs to virtual. We have designed educational programs focusing on chronic conditions, rising medical mistrust, and COVID-19 disparities. We've provided trusted, updated, reliable, and culturally competent COVID-19 information and tips and debunked some common myths around the virus. Additionally, we continue to grow and scale our Science Runway mentorship program for girls and young women. We are also refocusing on providing mentorship support for young women of color.

As CHI and the nation continue to reflect on the turmoil, emotions, and anger of the year, it's become even more apparent that now is the time for greater empathy that begins with listening and continuing to foster dialogue about racial inequalities. Nationally, we must be prepared to understand the unique challenges facing communities of color, continue to empathize with their challenges, and be one of the voices that make a difference. We must continue to foster a culture that acknowledges the pain and challenges unique to communities of color. We must continue to listen for as long as it takes to disrupt the status quo and affect real action and change.



Joseph Gaspero
CEO & Co-Founder



Julius Pryor III
Chair of the Board of Directors



Our Education

Our events bring a robust variety of influencers together into the same room to create collective impact.

Best Practices of Addressing COVID-19 Health Disparities

Tuesday, June 9, 2020 | 11:00 AM - 12:00 PM CST

As the global COVID-19 pandemic has gripped the world, crucial health disparity and health inequity concerns are already emerging. For instance, in Chicago, Illinois, African-Americans comprise over 50% of positive COVID-19 tests and 72% of virus-related deaths, even though they comprise less than a third of the population. In Michigan, African-Americans comprise a third of positive tests and 40% of deaths, while only comprising 14% of the total population. And health experts expect COVID-19 to disproportionately impact those with underlying health conditions, including cardiovascular and respiratory illnesses and diabetes. Additionally, many lower-income workers do not have the luxury to work from home, and social distancing can be more difficult. A report from the Economic Policy Institute asserted that less than one in five black workers in roughly one in six Hispanic workers have the ability to work from home. This webinar features two Chief Diversity officers from two of the country's most renowned integrated health delivery networks to discuss the critical health equity challenges that are emerging, how organizations can respond to ensure that vulnerable and marginalized communities receive adequate support, and how COVID-19 could be a catalyst for driving equitable transformation for the future.

[Watch the Video](#)



Dr. James Gillespie, PhD, JD, MPA

President & Co-Founder of CHI



Dr. Ronald L. Copeland, MD

Chief Equity, Inclusion and Diversity
Officer of Kaiser Permanente



Erickajoy Daniels, MS

Senior Vice President and Chief
Diversity and Inclusion Officer at
Advocate Aurora Health

COVID-19 Health Disparities, Diabetes, and Communities of Color

Wednesday, July 22, 2020 | 11:00 AM - 12:00 PM CST

As the global COVID-19 pandemic has gripped the world, alarming health inequities have emerged. Recently released data from the non-partisan APM Research Lab indicate that African Americans are dying from COVID-19 at almost three times the rate of white Americans. The figures indicate that African Americans have died at a rate of 50.3 per 100,000 people, compared with 20.7 for whites. And certain parts of the country are seeing Latino Americans dying at a higher rate. In New York alone, Latinos comprise 19.2% of the population but have suffered 26.6% of deaths. Furthermore, COVID-19 health disparities are driven in large part to highly-prevalent, chronic conditions, such as diabetes and cardiovascular disease, that disproportionately impact communities of color. According to the American Diabetes Association, the rates of diabetes for African American and Hispanic adults are 11.7% and 12.5% respectively, compared to just 7.5% for whites. This webinar brings together leading diabetes experts to discuss systemic inequities and social determinants of health that make communities of color more susceptible to diabetes, as well as best practices to address these disparities.

Watch the Video



Simintha Esson, MA

Nonprofit Strategist
Chief Development Officer (CDO) at
Council of Chief State School



Dr. Benée Brown, PharmD

Associate Director, Medical Science
Liaison at Boehringer Ingelheim



Sheila Harmon, MSN

Board Member of the Chicago
Chapter of the American Diabetes
Association

Distinguished Opening Remarks



Congresswoman Robin Kelly (D-IL)

Member of the House Energy and
Commerce Committee

Member of the House Committee on
Oversight and Reform

Chair of the Congressional Black Caucus
Health Braintrust

Sponsor

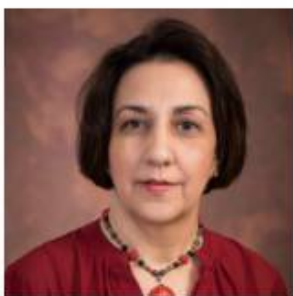


COVID-19 Health Disparities, Cardiovascular Disease, and Communities of Color

Wednesday, August 19, 2020 | 12:00 PM - 1:00 PM CT

While health inequities for marginalized communities are not new by any means, the global COVID-19 pandemic has thrust health disparities and systemic health inequities to the forefront of the national health conversation. Recently released data from the non-partisan APM Research Lab indicate that African Americans are dying from COVID-19 at almost three times the rate of white Americans. Moreover, certain parts of the country are seeing Latinx Americans dying at a higher rate. COVID-19 health disparities are driven in large part to highly-prevalent, chronic conditions, such as cardiovascular disease, respiratory conditions, and diabetes, that disproportionately impact communities of color. Regardless of race, over eighty-six million Americans live with some form of cardiovascular disease, but African American adults have a fifty percent chance of living with CVD or after-effects of stroke. It is also estimated that cardiovascular disease contributes to nearly forty percent of the life expectancy difference between Blacks and Whites, which amounts to 3.4 years. According to the Kelly Report, African Americans have the highest rate of high blood pressure globally, and Blacks have significantly higher obesity rates than Whites, which increases the risk of heart disease, stroke, and other health problems. In addition, disparities exist in the quality of care. Patients of color are less likely than non-Hispanic Whites to receive referrals for cardiac rehabilitation, a medically supervised program that has proven to lower mortality rates and prevent second cardiac events. Moreover, According to the CDC, heart disease is the leading cause of death for women in the United States, killing 299,578 women in 2017—or about 1 in every 5 female deaths. This webinar brings together leading experts in cardiovascular and neurological care to discuss systemic inequities and social determinants of health that make communities of color more susceptible to cardiovascular disease, stroke, and sequelae from both of these conditions as well as best practices to address these disparities.

[Watch the Video](#)



Dr. Neelum Aggarwal, MD

Chief Diversity Officer at American Medical Women's Association

Associate Professor, Department of Neurological Sciences at Rush University Medical Center



Joseph Gaspero

CEO & Co-Founder of CHI



Dr. Annabelle S. Volgman, MD

Medical Director, Rush Heart Center for Women

Sponsor

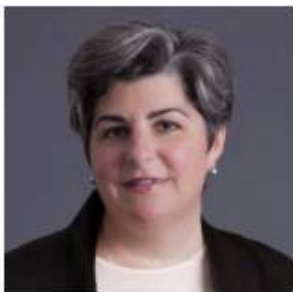


COVID-19 Health Disparities, Respiratory Illness, and Communities of Color

Wednesday, October 7, 2020 | 11:00 AM - 12:00 PM CT

As the global COVID-19 pandemic has gripped the world, crucial health inequity concerns are already emerging. While health disparities for marginalized communities are not new, the pandemic has thrust health disparities and systemic health inequities to the forefront of the national health conversation. Recently released data from the non-partisan APM Research Lab indicate that African Americans are dying from COVID-19 at almost three times the rate of white Americans. Furthermore, COVID-19 health disparities are driven in large part to highly-prevalent, chronic conditions, such as cardiovascular disease, respiratory disorders, and diabetes, that disproportionately impact communities of color. Chronic respiratory illnesses also make COVID-19 particularly dangerous. Respiratory health has seen inequality for years, both in the prevalence of respiratory diseases in marginalized patient groups as well as access to care. Respiratory diseases such as asthma, lung diseases, and pulmonary hypertension are the third-leading cause of death in America, and they are some of the costliest diseases for those affected. Furthermore, according to the 2015 Kelly Report on Health Disparities in America, African-American children suffer the highest-burden of asthma with more than 16 percent of children likely to have asthma compared to Hispanic (9 percent) or non-Hispanic White (8 percent) children, and the prevalence of asthma is increasing among low-income minority children. This webinar brings together leading respiratory illness experts to discuss systemic inequities and social determinants of health that make communities of color more susceptible to respiratory illness as well as discuss best practices to address these disparities.

[Watch the Video](#)



Lynn Hanessian
Chief Strategist at Edelman



Dr. Susan Corbridge, Ph.D.
Clinical Professor, Department of Medicine, Division of Pulmonary, Critical Care, Allergy & Sleep Medicine at UI Health



Kenneth Mendez
CEO & President of the Asthma and Allergy Foundation of America

Building & Maintaining Trust in Communities of Color

Tuesday, November 10, 2020 | 11:00 AM - 12:00 PM CT

Medical mistrust from communities of color is certainly not a new trend. A legacy of medical racism in the U.S. can be traced to historical events such as the Flexner Report and Tuskegee Syphilis Study, the current lack of minority participation in clinical trials, and ongoing research that uncovers differences in minority care even after equalizing socioeconomic variables. A recent New York Times article that highlighted the work of several prominent economists asserts that black men are less likely than white men to seek healthcare and more likely to die at younger ages, and one-third of the black-white gap in male life expectancy could be attributed to the legacy of distrust connected to the Tuskegee study. As the global COVID-19 pandemic kills Black Americans at almost three times the rate of white Americans, many systemic inequities that communities of color face and the resulting medical mistrust are being laid bare. To rebuild trust in medical professionals, organizations need to actively seek out and engage communities of color. Just some of the strategies that organizations can employ include: (1) leveraging faith-based community organizations and other trusted individuals to circulate health information, (2) developing community health worker programs that employ individuals who live and work in communities of color, and (3) training physicians and staff on the importance of gaining cultural competency and recognizing unconscious biases. This webinar brings together senior executives and physicians from integrated hospital systems who are developing new and novel strategies to build and maintain trust in communities of color.

[Watch the Video](#)



Josepg Gaspero

CEO & Co-Founder of CHI



Shannon Stephenson

CEO of Cempa Community Care



Phyllis Rodgers

Founder and CEO, Peer Plus
Education and Training Advocates



Addressing Gender Disparities in Healthcare and STEM

The Science Runway



Introduction

The Science Runway is a mentorship and educational platform that encourages and inspires girls and young women to explore careers in STEM and healthcare-related fields. The primary objective of the Science Runway is to address gender disparities in these fields and increase the number of women exploring and joining these fields by showcasing successful female STEM leaders and matching girls with role models. The Science Runway is a curated collection of personal stories of women who have inspiring careers in the STEM and healthcare fields and a mentorship program designed to inspire girls by showcasing the multitude of careers possible with a scientific foundation. Through a unique matching system focused on natural aptitudes and interests, the role models show girls and young women that anything is possible with a scientific education. The successes and lessons shared by the mentors demonstrate how much the mentees can achieve and ways by which they can positively contribute to society.

More info can be seen at: thesciencerunway.org.

Sex and Gender-Based Medical Education Summer Program - St. Laurence High School

The Science Runway Sex and Gender-based Medical Education is a 6-week program to enhance the potential of high school students to learning about Sex and Gender considerations in medical diseases and healthcare considerations.

Welcomed senior executive and physician healthcare leaders as guest lecturers throughout the six weeks course including:

- C-suite diversity equity and inclusion executive at leading pharmaceutical organization
- Clinical trialist research and expert
- Breast cancer survivor and founder of multiple breast cancer patient advocacy groups
- Geriatric health executive
- Chief diversity officer of American medical women's Association
- Digital start up entrepreneur and founder



The Science Runway



Mentor Testimonials

"My personal thanks to the organizers of the Science Runway Mentoring program for the amazing opportunity to impact lives of young girls by providing the much needed real life role models who can help shape their thinking about science and open their minds. As I sit across the table listening to their dreams and aspirations I wish to serve as the wind under their wings to motivate them to soar to new heights and achieve all their dreams by giving them tools and access to options."

Dr. Khaudeja Bano
Executive Medical Director, Combination Product Safety Head
| R&D | R&D Strategy & Operations | Global Patient Safety & Pediatrics
Amgen

"I wish I had access to a program like Science Runway when I was in middle school and high school. It may have changed my career trajectory. As a woman of color, access to mentors and "outside the box" experiences to expose me to various career options were few and far between. It's great that I can now give back to young women and provide the guidance and inspiration that I never received. "

Ms. J. Mori Johnson
Title Ambassador Engagement Director & Health Equity Liaison
American Medical Association (AMA)

"The biopharmaceutical industry, now more than ever, is researching sustainable ways to address health disparities, create equitable paths to health and wellness, and enhance diverse talent pipelines into and throughout our companies. A significant path to reaching these goals includes the specific focus on how we are collectively and specifically focusing on female students. I've seen first-hand how mentoring female students and their communities opens new career conversations that drive young women to seriously consider biopharmaceuticals as a way to make a change. I've actually been a recipient, myself, of focused mentoring that moved me from academia to healthcare, and eventually to Astellas Pharma. I am confident that the Science Runway mentoring program will also benefit other young women, and its mission is critical to growing more opportunities for female talent to contribute to the biopharma field and the healthcare industry."

Ms. Eloiza Domingo
Executive Director, Diversity & Inclusion
Astellas Pharmaceuticals



Education for Underserved Patients

Healthy Aurora



Healthy Aurora is a collaborative, community-wide education and outreach effort designed to increase health literacy, education, and awareness for all Aurorans. Our goal is to improve wellness by increasing literacy about health and healthcare options. Healthy Aurora provides easy to understand information about healthcare options, raises awareness of the importance of scheduling annual wellness and preventative exams, assists patients in building relationships with their doctors, demystifies healthcare options, and provides resources to help Aurorans understand and seek available insurance and coverage. Please visit healthyaurora.org for more information.



Other Projects



Black Breast Cancer & Barriers to Clinical Trials Research



The overall goal is to change how the breast cancer ecosystem engages Black women regarding Black Breast Cancer and clinical trial research. We strive towards health equity for Black women diagnosed with or at risk for breast cancer, and also to get Black women the best breast cancer care. By conducting a rigorous research project, we will glean learnings to develop targeted strategies to educate Black women to encourage and motivate clinical trial participation. This education will also address the need to foster better relationships with the medical community to favorably impact a sincere understanding of our unique breast cancer risks, screening recommendations, and the actionable steps Black women can take to achieve better health outcomes.

TOUCH, The Black Breast Cancer Alliance is collaborating with a stellar group of partners to do this important work: Breastcancer.org, Ciitizen, Center for Healthcare Innovation, Equify Health, Morehouse School of Medicine and Susan G. Komen. Together, we aspire to uncover the most compelling messaging to educate and motivate clinical trial participation, and launch a robust marketing campaign. We hope to thereby create the largest cohort of longitudinal clinical and patient reported and genomic data of Black Breast Cancer patients in the US to serve as a databank for research. Our plan also calls for a provocative intervention to empower providers to more effectively communicate with Black patients.

Consortium On Diversity & Equity (CODE)

The Consortium On Diversity & Equity (CODE) is a new CHI initiative focused exclusively on challenges and opportunities related to diversity, equity, and inclusion for the global biotechnology and pharmaceutical sectors. Integration with four pillars: (i) workforce, (ii) workplace, (iii) clinical trials and (iv) marketplace. The mission is to facilitate the global biopharmaceutical industry as an exemplar for diverse, equitable, and inclusive business best practices that address social determinants of health and improve healthcare outcomes. The vision is to become a leading international resource for the biotechnology and pharmaceutical sectors to promote diversity, equity and inclusion in the workforce, workplace, clinical trials, and marketplace. One key overriding goal is achieving diversity, equity, and parity globally regardless of disability, ethnicity, gender, race, religion, sexual orientation, socioeconomic status, and veteran status.

OUR IMPACT



4,000⁺

Total Event Attendees

15,000⁺

Monthly Digital Impressions

93%

Satisfied with the
Events

*Rated "excellent" or "very good"

4,000⁺

Recipients of
Research Reports

250⁺

Mentoring Sessions
via Science Runway

1,000⁺

Healthy Living Kits Distributed
at COVID Testing Site

3,000⁺

Social Media Followers

OUR IMPACT

Chronic Diseases Disproportionately Impact the Most Underserved Patient Groups

Since 2012, we've convened over 250 C-Suite and senior executives from the provider, pharma, payer, patient and other healthcare sectors to share new ideas around reducing barriers to care and addressing social determinants of health.

African Americans Represent 12% of the U.S. Population but only 5% of Clinical Trial Participants

CHI organizes an educational symposium focusing on diversity and clinical trials since 2011, and we've brought together over 700 clinical trial and diversity experts to share ideas and learn.

26% of Americans Reported Barriers that Restrict their Access to Care

In 2019, CHI convened over 400 leading healthcare professionals, clinicians, technologists and patient groups at our symposium focusing on healthy equity and disparities.

Eliminating Health Disparities That Affect Minorities Could Save the U.S. Economy Nearly \$230 Billion

We've compiled extensive research surrounding how to better serve minority patients via more culturally competent care, data analytics, and increased patient engagement.

SUPPORTING INNOVATION

CHI offers our deepest gratitude to all the generous supporters who assist our efforts to make the world a healthier place through communication, education, training, symposia, reports, and research. We would like to give special thanks for the support, donations, gifts, and resources made by the following supporters:

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- Dr. James Su, PhD**, Chief Science Officer, Lap IQ

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CHI
- Ms. Lindsay Moore-Fields**, Healthcare Analyst, CHI
- Mr. Brian Sandoval, MPH, MBI**, Advisor, CHI, Co-
Founder, Binary Health

Our vision is
to be the
leading global
platform for
meaningful
change in
health equity.



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