R. Mark Gritz, Ph.D.

Peter W. Shaughnessy Endowed Chair of Health Care Policy and Research Associate Professor and Head, Division of Health Care Policy and Research Director of Operations, Adult and Child Center for Outcomes Research and Delivery Science Director of Operations, Eugene S. Farley, Jr. Health Policy Center

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Biographical Sketch

I have over 35 years of experience in directing and managing demonstrations, evaluations, research, and technical assistance projects designed to improve economic, health, and other outcomes affecting the well-being of vulnerable populations. Many of these projects have involved youth, working women from low-income families, veterans, and other targeted populations, including several research and evaluation efforts examining the needs and experiences of low-income youth, unemployed workers, working single mothers, welfare participants, and disabled veterans. This includes over 15 years of corporate management experience ranging from general management responsibilities, line management of multidisciplinary teams, and program management experience. My general management experience includes implementation of government accounting requirements, management of information systems, and development and negotiation of commercial and government contract terms and conditions. Line management experience ranges from management of small specialized groups to management of over 100 scientific and technical staff including social and behavioral scientist, biological scientists, engineers, technicians and administrative staff. My program management experience includes over 20 years of experience in managing task order and other large contracts funded by the United States Departments of Defense, Education, Health and Human Services, Labor, and Veterans Affairs, as well as related State agencies, to rapidly respond to research and analysis needs of Federal, state, and local governments. These diverse and comprehensive experiences provided me with opportunities to work collaboratively with program staff, policy makers, and advisory groups to translate research and evaluation results into practical solutions that address programmatic needs and facilitate continuous program improvements.

Education

B.S. Economics, Colorado State University, Fort Collins, CO, 1981 Ph.D. Economics, Stanford University, Stanford, CA, 1987

Academic Appointments

Assistant Professor of Economics
University of Washington, Seattle
Adjunct Assistant Professor of Economics
University of Washington, Seattle
University of Washington, Seattle
Associate Professor of Medicine
Division of Health Care Policy and Research
University of Colorado Denver, Anschutz Medical Campus

1987 – 1992
1992 – 1995
2013 – 2016

Director of Operations	
Adult and Child Center for Outcomes Research and Delivery Science	
University of Colorado Denver, Anschutz Medical Campus	2013 – Present
Associate Professor of Medicine and Vice Division Head	
Division of Health Care Policy and Research	
University of Colorado Denver, Anschutz Medical Campus	2016 - 2019
Director of Operations	
Eugene S. Farley, Jr. Health Policy Center	
University of Colorado Denver, Anschutz Medical Campus	2017 – Present
Associate Professor of Medicine and Division Head	
Division of Health Care Policy and Research	
University of Colorado Denver, Anschutz Medical Campus	2019 – Present
Other Professional Positions	
Research Associate	
NORC, Economic Research Center	1987 - 1992
Visiting Research Scientist	
Battelle Memorial Institute, Human Affairs Research Center	1991 – 1992
Research Scientist	
Battelle Memorial Institute, Human Affairs Research Center	1992 – 1993
Senior Research Scientist	
Battelle Memorial Institute, Centers for Public Health Research and Evaluation	1993 – 1995
Research Leader	
Battelle Memorial Institute, Centers for Public Health Research and Evaluation	1995 – 1997
Managing Member	
Acumen, LLC.	1997 - 2001
Vice President and Director of Research	
SPHERE Institute	1997 - 2001
Vice President for Health and Life Sciences	
Battelle Memorial Institute, Health & Life Sciences Global Business	2001 - 2009
Vice President and Director	
CNA, Health Research and Policy Division	2009 - 2013

Current Funded Projects

Title: Optimizing the Clinical Management of Polypharmacy for Children with Medical Complexity **Funder:** Agency for Healthcare Research and Quality (1R01HS028979) (Feinstein PI) 04/2023 – 03/2028 (Total award \$1,991,759)

Role: Co-Investigator

Pediatric polypharmacy increases the risk of medication-related problems (MRPs). Among a group of children with medical complexity and polypharmacy, we will conduct a randomized controlled trial to study the effectiveness of a structured pharmacist-led Pediatric Medication Therapy Management (pMTM) intervention on reducing the primary MRP outcome. In Aim 1, we will measure the reach and effectiveness of the pMTM intervention compared to usual care. In Aim 2, we will study patient and parent characteristics that modify the effectiveness of the pMTM intervention. In Aim 3, we will assess

adoption, implementation, and potential for maintenance of the pMTM intervention by healthcare providers, including program replication costs.

Title: Family Inclusive Childhood Obesity Treatment Designed for Low Income and Hispanic Families **Funder:** NIH/ National Institute of Diabetes and Digestive and Kidney Diseases (5R01DK130176) (Haemer PI) 08/2021 – 05/2026 (Total award \$3,194,852)

Role: Co-Investigator

We propose a type 1 hybrid effectiveness-implementation trial to test effectiveness and simultaneously assess implementation outcomes and processes critical for potential scale- up and public health impact. We will use a prospective, wait-list control RCT to compare HeLP to an active control condition: Recommended Treatment of Obesity in Primary Care (RTOP), which is care recommended by the Academy of Pediatrics, but inconsistently delivered in usual practice. The aims of this study are: to compare the effectiveness of HeLP vs. RTOP at BMI reduction in three age groups of low-income Hispanic children with obesity: 2-6, 7-12, and 13-16 years over 18 months. Secondary measures will include cardiometabolic lab tests, fitness, quality of life, eating behaviors, and food security; to compare the effectiveness of HeLP at obesity prevention by comparing the BMI trajectory of 2-11yr old children with BMI above median but below obesity whose sibling with obesity is enrolled in HeLP vs. RTOP; and to study implementation of HeLP and RTOP within the RE-AIM framework, including: Reach, Adoption, Implementation (fidelity, replication costs, and cost per unit BMI change), and Maintenance.

Title: PATHWEIGH: Pragmatic Weight Management in Primary Care

Funder: NIH/ National Institute of Diabetes and Digestive and Kidney Diseases (5R18DK127003)

(Perreault & Holtrop PI) 09/2020 – 07/2025 (Total award \$3,002,339)

Role: Co-Investigator

Despite the overwhelming prevalence and health implications of obesity, it is rarely addressed in a health care setting. To address this gap, we built PATHWEIGH: a weight-centric flowsheet built into EPIC (an electronic medical record) that prioritizes weight loss in primary care and captures data on best practices that can inform future iterations. This study will examine the implementation of PATHWEIGH in a large, geographically diverse healthcare system and test its effectiveness on patient weight loss and weight loss maintenance.

Title: CGM in Primary Care - REFER or LEARN: Implementation and Evaluation

Funder: The Leona M. And Harry B. Helmsley Charitable Trust (2204-05191) (Oser & Oser PI)

10/2021 – 09/2024 (Total award \$3,280,930)

Role: Co-Investigator

To evaluate the effectiveness and scalability of three implementation strategies for Continuous Glucose Monitoring (CGM) in primary care practices.

Title: Networks for Oral Health Integration within the Maternal and Child Health Safety Net/ Rocky Mountain Network of Oral Health Integration (RoMoNOH)

Funder: Health Resources Services Administration (UK7MC33230) (Braun PI) 09/2019 – 08/2024 (Total award \$6,384,002)

Role: Co-Investigator

Develop, implement, and validate an oral health integration change package and toolkit among 40 community health centers (CHC) in Colorado, Arizona, Wyoming, and Montana. We will use these resources to support our CHC's in integrating oral health into practices, track success, and disseminate new knowledge.

Title: Analytical Support for the Colorado Department of Health Care Policy and Financing **Funder:** Colorado Department of Health Care Policy and Financing Interagency Agreement (Gritz PI) 07/2017 – 06/2024 (Total budget \$3,500,000)

Role: Principal Investigator

A collaboration between the Colorado Department of Health Care Policy and Financing and the University of Colorado School of Medicine is examining Medicaid enrollment and periods of involvement in the child welfare system to inform program and policy decisions that can lead to the achievement of two objectives: (1) Improve the health and well-being of children and youth involved in the Foster Care system; and (2) Promote utilization of high-value, cost-effective health care. Specifically, this project is examining how healthcare cost and utilization changes for children and youth before and after foster care placements and/or service type changes.

Title: Innovative Implementation of a Robust Executive Function (EF) Intervention Delivered in Schools

Funder: Patient Centered Outcomes Research Institute (Contract #: DI-2019C2-17605) (Anthony, PI) 05/2020 – 05/2024 (Total award \$2,003,881)

Role: Co-Investigator

The goal of the overall project is to improve EF for more children and families by broadening the implementation model to increase the number of people able to effectively use Unstuck and On Target (UOT). This project is translating the content of the in-person implementer trainings to an acceptable, effective, and easy to use comprehensive online training that will be free to schools, thus allowing for much broader reach. This will promote UOT's effective implementation for the 5-10% of students who most need an EF intervention and have nowhere else to receive one with an evidence base. This supplement to the original project will use an activity-based costing (ABC) and time-driven activity-based costing (TDABC) approach to estimate the cost for school districts and schools to adopt UOT, implement UOT, and sustain UOT. This cost information will allow school districts and schools to decide whether to adopt UOT, and how much it will cost them, on average, to do so.

Title: Enhanced Enrollment in the National Diabetes Prevention Program for the Underserved: A Randomized Control Trial

Funder: NIH/ National Institute of Diabetes and Digestive and Kidney Diseases (1R01DK119478) (Ritchie PI) 04/2019 – 03/2024 (Subaward total \$298,460)

Role: Co-Investigator

Dr. Gritz is leading the economic analysis components of this project. The main purpose of this study is to conduct a randomized controlled trial comparing National Diabetes Prevention Program (NDPP) attendance and weight loss outcomes between participants who receive an informational and motivational session prior to enrollment in the National Diabetes Prevention Program (NDPP) compared to direct enrollment into the NDPP (usual care).

Title: Evaluation of the SHARE Approach Model

Funder: Agency for Healthcare Research and Quality Contract #: HHSP233201500025I, Task Order #: 75P00120F37005 (Scherer, PI) 11/2019 – 11/2023 (Total award \$1,199,946)

Role: Project Director

The SHARE Approach model provides education and tools for clinicians to support Shared Decision Making (SDM) conversations with patients in diverse clinical contexts. The goal of this project is to systematically implemented and evaluated the usability and acceptability of the SHARE Approach in diverse clinic and patient populations using the RE-AIM implementation science framework.

Completed Project Experience

Title: Comparing Patient-Centered Outcomes of Standardized vs Patient-Driven Diabetes Shared Medical Appointments

Funder: Patient Centered Outcomes Research Institute (Contract #: HIS-1609-36322) (Kwan, PI)

01/2018 - 04/2023 **Role:** Co-Investigator

The goal of this pragmatic, cluster randomized trial is to compare the effectiveness of patient-driven diabetes shared medical appointments to standardized diabetes shared medical appointments in primary care settings. The project is implementing the Targeted Training for Illness Management curriculum, a 12-session modular group intervention for chronic illness self-management. The standardized arm of the comparative effectiveness trial is implementing the standard curriculum is an established order delivered by a health educator. The second arm is implementing a patient-driven curriculum where patients choose the topics and sequence of the modules that are delivered by a multidisciplinary care team consisting of a health educator, medical provider, behavioral health provider and a peer mentor with diabetes.

Title: Facilitating Alcohol Screening and Treatment (FAST), Colorado

Client: Agency for Healthcare Research and Quality (1R18HS027079) (Dickinson PI) 9/2019 – 9/2022

Role: Co-Investigator

The main purpose of this study is to conduct a cluster randomized controlled trial comparing two alternative practice transformation approaches to supporting primary care practices in implementing Patient Centered Outcomes Research findings to improve their identification and management of unhealthy alcohol use among adults, including screening, brief intervention, medication assisted therapy, and (when appropriate) referral to treatment.

Title: Why is the Use of the Medicare Intensive Behavioral Therapy for Obesity Benefit so Low? Finding What Works to Promote Wider Dissemination

Client: Agency for Healthcare Research and Quality (1R01HS024943) (Holtrop PI) 09/2016 – 08/2019 **Role:** Co-Investigator

In November 2011, the Centers for Medicare and Medicaid Services (CMS) approved the use of a new Healthcare Common Procedure Coding System (HCPCS) code for payment in primary care for Intensive Behavioral Therapy (IBT) treatment for obese patients. Despite the widespread prevalence of obesity in primary care, the benefit has been underutilized. This study will add to the field by determining the use of this benefit, reasons for use or non-use, and identify potential strategies for effective implementation of IBT for obesity in primary care.

Title: State Innovation Model Practice Transformation

Client: Centers for Medicare and Medicaid Innovations, as subcontractor to Colorado Department of Health Care Policy and Financing 07/2015 - 07/2019

Role: Project Director

Dr. Gritz is responsible for all operational components of this project to assist the Colorado State Innovation Model (SIM) Office and the Colorado Department of Health Care Policy and Financing in creating a health care system to spur innovation by: (1) providing access to integrated primary care and behavioral health services in coordinated community systems; (2) applying value-based payment structures; (3) expanding information technology efforts, including telehealth; and (4) finalizing a statewide plan to improve population health. The University of Colorado is developing and delivering the practice transformation services to support the SIM program to create observable and measureable

changes to practice behaviors and core competencies that include: engaged leadership and quality improvement; empanelment and improved patient health outcomes; business and financial expertise; continuous and team-based healing relationships that incorporate culture, values, and beliefs; organized, evidence-based care; patience-centered interactions; enhanced access; progression toward population-based care management; state-of-the-art, results-linked care; intentional approach of practices to maximize the systematic engagement of patients and families; and systematic efforts to reduce unnecessary diagnostic testing and procedures. This project will provide practice transformation services to more than 400 primary care practices and community mental health centers comprised of approximately 1,600 primary care providers.

Title: Transforming Clinical Practice Initiative - Colorado Practice Transformation Network **Client:** Centers for Medicare and Medicaid Services (1L1CMS331466-01-00) 01/2016 – 09/2019 **Role:** Project Director

This project is assisting the Colorado Department of Health Care Policy and Financing (HCPF) in the implementation of the Colorado Practice Transformation Network cooperative agreement from the Center for Medicare and Medicaid Innovations as part of the Transforming Clinical Practice Initiative. The goals of this project are to assist healthcare providers in Colorado prepare for the CMS Quality Payment Programs and Advanced Alternative Payment Models as Medicare, Medicaid and commercial payers transition healthcare payments from a fee-for-service model to value-based payment models.

Title: Southwest Health Extension Partnership to Enhance Research Dissemination (Evidence Now Southwest) 05/01/2015 – 04/30/2019

Client: Agency for Healthcare Research and Quality (1R18HS023904-01) (\$14,860,777 Total cost) **Role:** Co-Investigator

Dr. Gritz is responsible for all operational components of this project to implement evidence-based strategies derived from patient-centered outcomes research (PCOR) to greatly reduce the burden of cardiovascular disease (CVD). Primary care practices must transform to deliver a higher level of PCOR evidence-based prevention to decrease CVD risk and this project is implementing and testing through a cluster randomized trial design enhanced practice transformation services that emphasize patient-centered care including self-management support, team-based care, improved information systems, and active quality improvement. This project is a cooperative program to build primary care practice capacity for quality improvement, change management, and implementation of PCOR findings in small and medium size primary care practices in Colorado and New Mexico. This project is evaluating the added value of patient engagement in practice transformation efforts using the Reach, Effectiveness, Adoption, Implementation and Maintenance framework. This project will provide practice transformation services to more than 250 small to medium sized primary care practices randomly assigned to enhanced or standard practice transformation services.

Title: Research, Measurement, Assessment, Design, and Analysis (RMADA) IDIQ 07/14/2014 – 07/10/2019

Client: United States Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS), Center for Medicare & Medicaid Innovations (CMMI)

Role: Project Director/Principal Investigator

Dr. Gritz is responsible for overall management and execution of all task order projects conducted under this IDIQ master contract to support CMMI in moving quickly to develop and test innovative payment and care delivery models that reduce costs and improve access to quality care for all Americans. Specifically, this support includes rapid cycle testing and incremental investment decisions based on results from the rapid cycle testing. By adopting this model, CMS can undertake the first incremental

steps on larger and more complex innovations because models that fail to meet their incremental milestones based on rapid cycle implementation and testing of larger more complex innovations using formative and summative evaluation methods that best complement the incremental investments and frequent go/no-go decisions that are being implemented as part of healthcare reform. He leads a multidisciplinary, multi-organizational team to provide CMMI with the expertise and capabilities needed and the ability to respond quickly to redirect resources to capitalize on near real time evaluation results.

Title: Identifying, Assessing, and Balancing Competing Risks of Multiple Hospital-Acquired Conditions (HACs)

09/26/2016 – 09/25/2018

Client: Agency for Healthcare Research and Quality: Contract #: HHSP233201500025I, Task Order #: HHSP23337003T (\$674,416 Total Cost)

Role: Project Director/Principal Investigator

The goal of this project is to increase our understanding of the extent to which multiple hospital acquired conditions (HACs) in inpatient settings may be interrelated such that strategies for preventing one HAC may increase risks for one or more other HACs through a quantitative assessment of risk tradeoffs. The primary objectives of this project, are: (1) improve our understanding of the extent to which HACs are interrelated such that strategies for preventing one HAC may adversely affect risks for other related HACs resulting in tradeoffs in improving overall patient safety; (2) develop and pilot test a prototype decision support tool that informs clinicians treatment decisions for specific patients taking into account patient-specific risk factors for multiple HACs to improve overall patient safety in acute care settings; and, (3) to assess the potential system level cost implications of these competing risks.

Title: Review of the Colorado Program for All-Inclusive Care for the Elderly (PACE) Program 06/13/2017 - 06/30/2018

Client: Colorado Department of Health Care Policy and Financing (\$75,000 Total cost) **Role:** Principal Investigator

Dr. Gritz is responsible for all components of this project to assist the Colorado Department of Health Care Policy and Financing in conducting a program review of the Colorado PACE program. This program review involves four components: (1) a Utilization and Cost Analysis of PACE Participants Before and After Enrollment; (2) a Local Environmental Scan; (3) a National Environmental Scan; and (4) a Review of the PACE Enrollment Process.

Title: Patterns of Churn Among Commercial and Public Insurance Coverage and Across Eligibility Categories for Health First Colorado and Child Health Plan Plus (CHP+) Clients

07/01/2017 - 06/30/2018

Client: Colorado Department of Health Care Policy and Financing (\$25,000 Total cost)

Role: Principal Investigator

Dr. Gritz is responsible for all components of this project to assist the Colorado Department of Health Care Policy and Financing in understanding the extent to which Health First Colorado clients change insurance coverage among commercial and public insurance, which is referred to as churn. Churning represents a significant public policy concern because with the growth in publicly insured populations it will impact significant segments of the population and could result in compromising access to quality health care, disrupting the continuity of care associated with more cost-effective care, and increasing administrative costs for both public and commercial insurance plans. In addition to impacts on access, cost and quality of care, churning has significant implications for state budgets as individuals not only move on and off Medicaid but also as individuals change eligibility categories.

Title: Vanguard Model Application Review Process Support 05/18/2015 – 03/17/2018

Client: Centers for Medicare and Medicaid Innovations (HHSM-500-2014-00040I)

Role: Project Director

Dr. Gritz is responsible for the overall management and execution of the task order project under the RMADA IDIQ contract. This project is supporting the Centers for Medicare and Medicaid Services (CMS) in implementing the Next Generation Accountable Care Organization model through two rounds of a request for applications. The team Dr. Gritz is managing is providing applicant training and application support, application eligibility and completeness reviews, evaluation panel logistics and reviews, application scoring and normalization, and provider list processing and management.

Title: Adapting and Implementing Patient Safety Practices in Ambulatory Care 09/30/2016 - 01/29/2018

Client: Agency for Healthcare Research and Quality: Contract #: HHSP233201500025I, Task Order #:

HHSP23337004T **Role:** Project Director

The goal of this project is to improve standardization and systemization of laboratory testing processes using a quality improvement-based toolkit to assure patients undergoing laboratory testing in the ambulatory setting do so safely and without harm from laboratory testing mistakes. The primary objectives of this project are: (1) optimize the practicality and relevance of existing toolkits through iterative review and revisions from patient safety experts, primary care clinicians, staff, and patients; and, (2) implement and evaluate the improved, practical toolkit in two medium and/or large primary care practices focusing the efforts on the most common diagnostic tests—primarily blood and urine tests.

Title: Making Patient Navigation and Understanding Easier: Developing Quality Improvement Measures 09/21/2015 – 10/20/2017

Client: Agency for Healthcare Research and Quality: Contract #: HHSP233201500025I, Task Order #: HHSP23337002T

Role: Principal Investigator

Dr. Gritz is responsible for all components of this project to identify and conduct preliminary validation testing of a set of quality measures that can be used to assess the health literacy environment of a health care organization and monitor progress made through implementation of organizational health literacy (OHL)-related QI activities. We will (1) develop a set of OHL quality measures; (2) obtain patient feedback on the most important changes health care organizations can make to support patient understanding, navigation, and self-management; (3) use a multi-stage, modified Delphi procedure to obtain expert review of the measures; and (4) refine and cull the measure set based on patient priorities and expert feedback. This systematic effort will result in establishment of a set of OHL quality measures that reflects patient priorities, has expert support, and is recommended for formal psychometric testing.

Title: The Impact of Increased Medicaid Payments for Primary Care Services on Access to Care for Medicaid Beneficiaries in Colorado 04/08/2015 - 06/30/2016

Client: Colorado Department of Health Care Policy and Financing

Role: Principal Investigator

Dr. Gritz is responsible for all components of this project to assist the Colorado Department of Health Care Policy and Financing in evaluating the impact of Section 1202 of the Affordable Care Act that increased Medicaid reimbursement for primary care services to or above Medicare Part B rates in calendar years 2013 and 2014. This project is the first study to use Medicaid claims data to analyze the impact of enhanced payments on realized access to primary care services for Medicaid beneficiaries. The analysis examined five claims-based access to care measures: (1) a set of provider-based measures

that examine the number of primary care encounters in a month, (2) a measure of the number of emergency room visits for ambulatory care sensitive conditions, (3) a set of the Healthcare Effectiveness Data and Information Set (HEDIS) Adult Access to Preventive Care (AAP) Measure for adult beneficiaries that were eligible for Medicaid in 11 of the previous 12 months, (4) a set of HEDIS Children and Adolescents' Access to Primary Care Practitioners (CAP) Measure for beneficiaries age 1 to 19 that were eligible for Medicaid in 11 of the previous 12 months, and (5) a set of continuity of care measures for adult beneficiaries that were eligible for Medicaid in all 11 of the previous 12 months.

Title: Diabetes Prevention Program – Employer Outreach and Economic Assessment 04/01/2015 – 06/30/2016

Client: Colorado Department of Public Health and Environment, subcontract to Colorado Business Group On Health

Role: Principal Investigator

Dr. Gritz is responsible for the development of an Economic Assessment Tool to support self-insured employers' actuarial calculation of the expected return on investment (ROI) of including a Diabetes Prevention Program (DPP) as a component of their employee benefit. The economic assessment tool based on the ROI framework is designed and implemented in Microsoft ExcelTM and is structured very similarly to other tools that have been developed for employers, such as the AHRQ Diabetes Cost Calculator for Employers. The tool produces two sets of forecasts of costs and returns associated with the decision to provide a DPP benefit over a five-year time horizon. One set of forecasts are associated with the case where the employer includes a DPP as an employee benefit and the second characterizes costs associated with the case where the employer does not include a DPP benefit for employees and dependents. These two sets of forecasts are combined with the projected cost of providing a DPP benefit to summarize the ROI of making the investment in this employee benefit for each of the first five years after offering this benefit to a cohort of employees.

Title: Evaluation of HealthiER-Better Health Through Social and Health Care Linkages Beyond the Emergency Department

Client: Health Foundation for Western and Central New York

Role: Senior Economist

Dr. Gritz is responsible for the utilization and cost analysis on the comprehensive evaluation of a Center for Medicare and Medicaid Innovation supported (Funding Opportunity Number CMS-1C1-12-0001) project to implement and test an emergency room based community health worker model for care delivery to improve care coordination, generate better health outcomes for high-risk, high-need patients in Buffalo, and lower health care costs and inappropriate use of emergency room services.

Title: An Evaluation of the Mental Health Parity and Addiction Equity Act (2010) and the Provision of Integrated Behavioral Health and Primary Care Services (04/01/2015 – 03/30/3016)

Client: Health Care Cost Institute

Role: Co-Investigator and Senior Economist

Dr. Gritz is responsible for the development and oversight of the analytic plan and the economic analysis on this study developing policy-relevant analyses and insight into temporal trends in access to integrated care, utilization patterns, cost of care, comorbid mental and physical health conditions, and healthcare disparities.

Title: More than a Movement Disorder: Applying Palliative Care to Parkinson's Disease 09/01/2016 - 08/31/2021

Client: National Institutes of Health: Grant #: 1R01NR016037

Role: Consultant

The objectives of this project are to improve outcomes for persons living with PD and their family caregivers by implementing and evaluating an outpatient interdisciplinary palliative care model for PD patients at high-risk for poor outcomes. The project will (1) determine whether interdisciplinary outpatient palliative care team including a neurologist improves PD patient quality of life (QOL) and caregiver burden as compared to usual care; (2) describe the effects of an interdisciplinary outpatient palliative care intervention on patient and caregiver costs and service utilization, including informal caregiver time and the use of health and social services; and (3) identify opportunities to optimize palliative care for this population by describing patient and caregiver characteristics associated with intervention benefits.

Title: Hospital Back Up (HBU) Program Analysis 01/09/2015 – 06/30/2015

Client: Colorado Department of Health Care Policy and Financing

Role: Principal Investigator

Dr. Gritz is responsible for all components of this project to assist the Colorado Department of Health Care Policy and Financing in reviewing and developing recommendations for revisions to the Medicaid HBU program that provides payments to approved nursing facilities caring for medically stable ventilator dependent, medically complex, and complex wound care patients that need a higher level of ongoing care than a skilled nursing facility. The project is providing research and other support to identify existing standards of care and best practices, recommending sustainable payment models that provide incentives for improving quality of care and increasing access to care, and proposing program revisions and a regulatory framework for potential implementation.

Title: Funding Options for Medical Assistance Sites (7/2014-11/2014)

Client: Colorado Department of Health Care Policy and Financing (\$78,000)

Role: Principal Investigator

Dr. Gritz is responsible for all components of this project to assist the Colorado Department of Health Care Policy and Financing in designing and implementing a funding mechanism to support Medical Assistance sites to process Medicaid and CHP+ applications in the Colorado Benefits Management System (CBMS) and to make the final determination of eligibility and enrollment for these programs. This project is providing research and other support to identify existing approaches to funding MA Sites, exploring new options through facilitation of a MA Sites Funding Workgroup, assess the feasibility and compliance of selected options, and synthesizing these findings for HCPF and other stakeholders. The project will recommend a funding model and develop an implementation plan that HCPF can use as an ongoing mechanism to allocate available funding to MA sites.

Title: Independent Evaluation of Patient Navigator and Community Health Worker Program Components (7/2014-5/2015)

Client: Colorado Department of Public Health & Environment, Epidemiology, Planning and Evaluation Branch

Role: Senior Economist

Dr. Gritz is responsible for the programmatic cost analysis and cost effectiveness analysis on this evaluation of 18 programs funded by the Office of Health Equity (OHE) and Cancer, Chronic, and Pulmonary Disease (CCPD) that deliver patient navigation and/or community health worker/promotora services.

Title: Center for Naval Analyses

Client: United States Department of the Navy, Office of Naval Research (ONR)

Role: Division Director, Health Research and Policy

Dr. Gritz was responsible for overall corporate management and quality assurance on 34 task orders conducted by the Division of Health Research and Policy under this Federally Funded Research and Development Center contract with CNA Corporation.

Title: Support for Veteran Policy Analysis

Client: United States Department of Veterans Affairs (VA), Assistant Secretary for Policy and Planning (OPP)

Role: Division Director and Task Leader

Dr. Gritz was responsible for the external assessment of how to develop and nurture a field of study in Veteran policy analysis to support OPP's efforts to enhance policy analysis capabilities inside and outside the VA. Specifically, he lead an environmental scan and the collection and analysis of information obtained through key informant interviews with other government agencies and a small number of academic representatives. He also participated in the internal assessment of VA capabilities and resources and jointly developed a series of recommendations for consideration by VA to encourage the development of a Veteran policy analysis field of study.

Title: Technical Assistance for the National Background Check Program

Client: United States Department of Health and Human Services, Centers for Medicare & Medicaid Services (CMS)

Role: Division Director and Program Manager

Dr. Gritz was responsible for overall corporate management and quality assurance on all components of the project conducted by CNA and subcontractors in support of CMS and States participating in the National Background Check Program.

Title: Legacy for Children Longitudinal Follow-up Study

Client: United States Department of Health and Human Services, Centers for Disease Control and Prevention (CDC)

Role: Division Director and Principal Investigator

Dr. Gritz served as the Principal Investigator for six months after providing corporate management oversight for four years on this study examining the long-term effectiveness of the Legacy for Children© intervention program. The Legacy for Children© intervention was a randomized controlled trial of mother and child populations in Miami and Los Angeles to promote strong parental support and involvement to impact positive child development. The follow up study focused on comparing treatment and control mother-child dyads around the time the child was in the third grade. The study involved locating study participants, scheduling and conducting an in-home survey, scheduling and conducting laboratory-based child assessments, the collection of saliva samples for biomarker measurement, and the development of a documented analysis data base.

Title: • Support for Office on Disability, Aging and Long-Term Care Policy

Client: United States Department of Health and Human Services, Assistant Secretary for Planning and Evaluation

Role: Division Director and Program Manager

Dr. Gritz was responsible for overall corporate management and quality assurance on all components of the task orders conducted by CNA and subcontractors in support of ASPE on this Indefinite Delivery Indefinite Quantity Task Order Contract.

Title: Accelerating Change and Transformation in Organizations and Networks II, (ACTION II) **Client:** United States Department of Health and Human Services, Agency for Healthcare Research and Quality (AHRQ)

Role: Division Director and Director of Quality Assurance and Compliance

Dr. Gritz was responsible for overall corporate management and quality assurance on all components of the task orders conducted by CNA and subcontractors in support of AHRQ on this Indefinite Delivery Indefinite Quantity Task Order Contract. He also has responsibility and accountability for compliance with all contractual requirements, including human subjects research protections, Paperwork Reduction Act, and Section 508 of the Americans with Disabilities Act.

Title: Support for Quality Indicators II

Client: United States Department of Health and Human Services, Agency for Healthcare Research and

Quality (AHRQ)

Role: Principal Investigator

Dr. Gritz was responsible for overall supervision and quality assurance on all components of the project conducted by Battelle and subcontractors in support of AHRQ and users in the application of the Quality Indicators to improve the quality of health care provided by hospitals.

Title: Support for Quality Indicators

Client: United States Department of Health and Human Services, Agency for Healthcare Research and

Quality (AHRQ) - Subcontractor to Stanford University

Role: Project Manager

Dr. Gritz was responsible for overall supervision and quality assurance on all components of the project conducted by Battelle including Web site development and maintenance, user support and analytical programming in support of AHRQ and users in the application of the Quality Indicators to improve the quality of health care provided by hospitals.

Title: Assessment of the Service Needs of Unemployed Veterans

Client: United States Department of Labor, Veterans' Employment and Training Services

Role: Project Director

Dr. Gritz was responsible for all components of the project including project management, study design, acquisition of data, data manipulation, statistical analysis and report writing on this comprehensive examination of the labor market service needs of unemployed veterans.

Title: Caseload Dynamics and the Business Cycle: Implications for Welfare Policy

Client: United States Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation

Role: Project Director

Dr. Gritz was responsible for all technical aspects of this two-year project that examined the relationship between economic factors and welfare caseload dynamics. The project examined two critical components of welfare caseload dynamics: (1) the demographic and economic characteristics of the individuals and families comprising the welfare caseload over time; and (2) the extent to which individuals and families returned to welfare after leaving the caseload (recidivism). The project analyzed individual-level administrative data for the State of California using a number of different statistical methods. His duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Welfare Reform and Emergency Services Use in Communities with Rapidly Declining Caseloads **Client:** United States Department of Health and Human Services, Office of the Assistant Secretary for

Planning and Evaluation **Role:** Project Director

Dr. Gritz was responsible for overseeing the technical aspects of this project that examined the relationship between welfare reform and the use of community based emergency services. The project examined this relationship in a single California county that experienced rapid declines in its welfare caseload after enactment of a welfare reform program. The project analyzed individual-level administrative data to determine the size and composition of the welfare caseload before and after welfare reform and related these caseload trends to independent reports regarding the use of community emergency food service organizations (food banks and soup kitchens), homeless shelters, other housing assistance services, and multiple-purpose community service centers. His duties included primary responsibility for the research design, oversight of the data collection, and analyses tasks.

Title: Examining Circumstances of Individuals and Families Who Leave TANF In Contra Costa and Alameda Counties

Client: United States Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation, and Contra Costa County, California

Role: Project Director

Dr. Gritz was responsible for the technical aspects of this two-year project that examined the circumstances of welfare leavers and informally diverted applicants. Subsequent analysis assessed the validity and usefulness of administrative data in examining the circumstances of these leavers by comparing administrative data with data collected in a thirty-minute phone survey. His duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Examining Circumstances of Individuals and Families Who Leave TANF In Three California Counties

Client: United States Department of Health and Human Services, Office of the Assistant Secretary for Planning and Evaluation

Role: Project Director

Dr. Gritz was responsible for the technical aspects of this two-year project that examined the circumstances of two cohorts of welfare leavers (those who left aid in the last calendar quarters of 1996 and 1998), and to assess the validity and usefulness of administrative data in examining the circumstances of these leavers by comparing administrative data with data collected in a thirty-minute phone survey. His duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Technical Assistance for the Solano County California Work Opportunities and Responsibility to Kids (CalWORKs) Administrative Simplification Project

Client: California State Department of Social Services

Role: Project Director

Dr. Gritz was responsible for all aspects of this short-term project that provided technical assistance to the Solano County Health and Social Services Department in developing a database design, a data entry application, and an analysis design to assess the programmatic and information technology consequences of alternative approaches to administrative simplification of the County's CalWORKs and Food Stamp programs. His duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Evaluation of the SUCCESS Program in San Mateo County, California

Client: County of San Mateo Human Services Agency, California

Role: Project Director

Dr. Gritz was responsible for all aspects of this three-year project funded by the County of San Mateo, California. As part of its welfare reform efforts, the county conducted a comprehensive evaluation of

the SUCCESS welfare reform program. This evaluation included a process evaluation, an impact evaluation, and a benefit-cost analysis of the SUCCESS program. The findings from this research project provided the county with the essential information needed to determine whether and to what extent the SUCCESS program worked and the best way to improve the delivery of human services in San Mateo County. His duties involved all aspects of project management and oversight of all tasks and activities.

Title: Examining Circumstances of Individuals and Families Who Leave TANF In Marin County

Client: Marin County, California

Role: Project Director

Dr. Gritz was responsible for the technical aspects of this project that examined the circumstances of welfare leavers since the inception of welfare reform and the implementation of the California Work Opportunities and Responsibility to Kids (CalWORKs) program in Marin County. His duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Assessing the Characteristics and Needs of Two-Parent California Work Opportunities and Responsibility to Kids (CalWORKs) Families

Client: California State Department of Social Services and Private Foundation

Role: Task Leader

Dr. Gritz was responsible for planning research that examined the characteristics and needs of two-parent CalWORKs (welfare) families in California. In addition, he was responsible for all logistical arrangements, conduct of a conference presenting results of research, and highlighting best practices from local programs serving two-parent families for state and local CalWORKs program staff and policy makers.

Title: Study Design to Assess Family and Child Well-Being of Former California Work Opportunities and Responsibility to Kids (CalWORKs) Recipients in Marin and Possibly Other Bay Area Counties

Client: Private Foundation **Role:** Project Director

Dr. Gritz was responsible for all aspects of this short-term project to develop a survey instrument and sampling plan for Marin County to assess the family and child well-being of former CalWORKs recipients. His duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Performance Outcomes Measurement System (POMS) Design Team **Client:** Orange County Children and Families Commission, California

Role: Advisor

Dr. Gritz was jointly responsible for the design of an outcome measurement system and performance measurement system to meet the legislated reporting requirements of the California Children and Families Commission for all programs in Orange County, which served families with children under six years of age.

Title: Evaluation of Child Care Services for High-Risk Families

Client: Orange County Children and Families Commission, California

Role: Project Director

Dr. Gritz was jointly responsible for the evaluation design and implementation of a pilot program to assist high-risk families locate and pay for high-quality child care. His project activities included design and implementation of a data reporting system and the design of a small-scale evaluation of the implementation and outcomes of the program.

Title: Evaluation of the Implementation of Healthy Steps in North Orange County

Client: Orange County Children and Families Commission, California and St. Jude's Hospital

Role: Project Director

Dr. Gritz was jointly responsible for the planning and conduct of an evaluation of the national Healthy Steps program implementation in three pediatric practices affiliated with St. Jude Hospital in Fullerton, California. Dr. Gritz's activities included design and implementation of a data reporting system and the design of a small-scale evaluation of the implementation and outcomes of the program.

Title: Development and Implementation of the County of San Mateo Job Creation Investment Fund Project

Client: California State Department of Trade and Commerce

Role: Project Director

Dr. Gritz was responsible for all aspects of this short-term project that developed a job creation plan to assist California Work Opportunities and Responsibility to Kids (CalWORKs) recipients in San Mateo County California attain and maintain employment. His tasks included identifying skill levels of CalWORKs recipients, identifying the types of jobs that are available in the county, the characteristics of these jobs, and matching available jobs to the skills and aptitudes of CalWORKs recipients. Dr. Gritz's duties included all project management activities and a shared responsibility for technical aspect of all tasks.

Title: Phase I Small Business Innovation Research Grant

Client: United States Department of Health and Human Services, National Institutes of Health, National Institute on Aging – Consultant with Unicon Research Corporation

Role: Principal Investigator

Dr. Gritz managed the initial planning and development phase of this grant to develop public-use research files of Medicare claims data linked to respondents of the Health and Retirement Survey.

Title: The National Job Corps Study

Client: United States Department of Labor, Employment and Training Administration – Subcontractor to Mathematica Policy Research

Role: Task Leader

Dr. Gritz was jointly responsible for the design and implementation of this national evaluation of the impact of the Job Corps program. The evaluation required the development of alternative research designs, both an experimental design and a quasi-experimental comparison group design. He was also responsible for designing and implementing the process evaluation component of the study. Responsibilities included managing all Battelle activities on the project, including supervision of teams of data collection staff, statistical programmers, and data analysts, as well as all Battelle financial aspects of this multimillion dollar project.

Title: The Lifelong Learning Demonstration

Client: United States Department of Labor, Employment and Training Administration – Subcontractor to Abt Associates

Role: Task Leader

Dr. Gritz was responsible for the design and conduct of a non-experimental evaluation of two mass media advertising campaigns promoting lifelong learning and the use of student financial aid by mature incumbent workers in Dayton, Ohio and Fresno, California. The evaluation of the mass media component of the demonstration included both a process evaluation and an outcome evaluation. He was also jointly responsible for the development of an experimental design and evaluation of a targeted direct mail advertising campaign in Baltimore, Maryland to promote lifelong learning. Dr. Gritz's

activities included developing evaluation designs, conduct of process analyses in mass marketing sites, supervision of data base construction, conduct of outcomes evaluations in both mass marketing and targeted marketing sites, and supervision and monitoring of project staff and budgets.

Title: Unemployment Insurance Survival Rate Analysis and Benefits Models

Client: United States Department of Labor, Employment and Training Administration

Role: Principal Investigator

Dr. Gritz was jointly responsible for all components of the study including project management, study design, acquisition of data, data manipulation, and statistical analysis on this comprehensive examination of the dynamic nature of the Unemployment Insurance (UI) benefit payment process. Using the findings from this analysis, Dr. Gritz developed an integrated projection model of UI benefit payments and workloads. The projection model developed under this project enhanced the ability of the U.S. Department of Labor, Unemployment Insurance Service to provide budget and legislative estimates of alternative UI policies to Congress and other policy makers.

Title: Development of Performance Standards for Job Corps

Client: United States Department of Labor, Employment and Training Administration – Subcontractor to Social Policy Research Associates

Role: Analyst

Dr. Gritz provided analytical support assistance as a statistician to the U.S. Department of Labor in the development of performance standards for Job Corps center operators and placement agencies.

Title: An Evaluation of Washington State's Major Workforce Training Programs Client: Washington State Workforce Training and Education Coordinating Board **Role:** Analyst

As the senior economist, Dr. Gritz was responsibilities for designing the comprehensive outcome evaluation and benefit-cost analysis of the workforce education and training programs in Washington State. He provided expert assistance in the development of survey instruments to assess the education and training needs of employers in Washington State as well as the overall design of the outcome evaluation and benefit-cost analysis for high school vocational education programs, adult basic education programs, JTPA programs, and community college vocational and occupational programs.

Title: A Study of Accountability Systems Established by States to Monitor and Evaluate Vocational Education Programs

Client: United States Department of Education, Office of Vocational and Adult Education

Role: Project Director

Dr. Gritz was responsible for the development of mail surveys of State Directors of Secondary and Postsecondary Vocational Education to conduct a comprehensive examination of the accountability systems established by states to evaluate their secondary, postsecondary, and adult vocational education programs receiving assistance under the Carl D. Perkins Vocational and Applied Technology Act of 1990. He was jointly responsible for the design and conduct of in-depth site visits to nine states to discuss the development and implementation of performance measures for vocational education with state and local policy makers. Dr. Gritz was also responsible for the design and conduct of all statistical analyses, including multivariate analysis of the validity, reliability, and unbiasedness of selected performance measures, as well as oversight and monitoring of several study consultants.

Title: The National Longitudinal Survey of Youth - 1997 Cohort

Client: United States Department of Labor, Bureau of Labor Statistics (BLS) – Subcontract with Center for Human Resources Research at the Ohio State University

Role: Task Leader

Dr. Gritz's responsibilities on this large-scale national survey of American youth included: the design of survey questionnaire sections on income, assets, and program participation for youth respondents and their parents. He also provided assistance in the design of survey questionnaire sections on youth participation in education and training programs and for all high schools in over 100 geographic areas throughout the United States. Dr. Gritz then analyzed the quality of survey data concerning income, assets, and program participation. He also coordinated a rapid-response team that provided BLS with high-quality, quick-turnaround research on youth labor market issues that were of policy interest. Finally, Dr. Gritz oversaw the establishment, monitoring, and control of all Battelle time and task schedules and budgets.

Title: An Examination of School-To-Work Transitions in the National Longitudinal Survey of Youth (NLSY)

Client: United States Department of Labor, Bureau of Labor Statistics (BLS)

Role: Project Director and Principal Investigator

Dr. Gritz was responsible for coordinating five individual research projects that used the National Longitudinal Survey Youth (NLSY) Cohort to examine different dimensions of the school-to-work transition of young adults in the 1980s. These responsibilities included the presentation of the findings from these five projects to policy makers and other BLS staff. Dr. Gritz's responsibilities as a Principal Investigator included project management, study design, data manipulation, and statistical analysis to determine the influence of in-school work experience on the school-to-work transitions of young men and women using the NLSY.

Title: An Evaluation of the National Longitudinal Survey of Youth (NLSY) **Client:** National Science Foundation – Subcontract with University of Michigan

Role: Project Director

Dr. Gritz was responsible for all components of the study including project management, study design, data manipulation, and statistical analysis of this study to investigate the nature and potential consequences of attrition in the National Longitudinal Survey – Youth Cohort (NLSY79).

Title: Health Care Financing Administration Research Center Master Contract

Client: United States Department of Health and Human Services, Health Care Financing Administration **Role:** Deputy Project Director

Dr. Gritz was responsible for assisting the Project Director in the overall management of this indefinite quantity/indefinite quality (ID/IQ) contract, with an emphasis on selection of Task Leaders, oversight of selected tasks, and assurance of technical quality of work.

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Seminars and Presentations

The Role of Evaluation in the Colorado SIM Project, Presentation to the Colorado State Innovation Model Workshop, November 20, 2014.

Measuring Return on Investment for Implementations of the National Diabetes Prevention Program, America's Health Insurance Plans National Diabetes Prevention Program Grantees Workshop, March 25, 2015

The Impact of Increased Medicaid Payments for Primary Care Services on Access to Care for Medicaid Clients in Colorado: Preliminary Results for January 2013 through June 2014, Colorado Department of Health Care Policy and Financing, December 7, 2015

The Impact of Increased Medicaid Payments for Primary Care Services on Access to Care for Medicaid Clients in Colorado, AcademyHealth Annual Research Meeting, June 2016

Data Driven Healthcare Policy: The Case of Provider/Physician Payments, Department of Medicine Grand Rounds, University of Colorado School of Medicine, March 7, 2018

Sustaining Health Care Quality in the Midst of Health Care Reform, Panel Discussion, Department of Medicine Quality Symposium, University of Colorado School of Medicine, April 18, 2018

Assessment of Targeted Rate Increases by Colorado Medicaid for Ambulatory Surgery Center Services and Vision Services, AcademyHealth Annual Research Meeting, June 2018

Honors, Recognitions, and Awards

Phi Beta Kappa – Colorado State University

Phi Kappa Phi – Colorado State University

Omicron Delta Epsilon – Colorado State University

Professional Organization Memberships

Member AcademyHealth

Committee and Service Responsibilities

University of Colorado Faculty Council Budget Committee (2014-present)

Colorado Health Institute, Safety Net Advisory Committee and participant on the sub-committee for the Access to Care Dashboard Project (2014 – 2017)

Center For Improving Value In Health Care, Data and Transparency Advisory Committee (2014 – 2017)

Colorado Governor's Office, Colorado State Innovation Model Steering Committee (2015 – present)

Colorado Governor's Office, Colorado State Innovation Model Co-Chair of the Evaluation Workgroup (2015 – present)

Colorado Department of Health Care Policy and Financing, Colorado Health Evaluation Collaborative, Co-convener and Moderator (2016 – present)

Patents and Inventions

United States Patent 8,116,985 *Real time sampling, monitoring and exposure control of test animals*, issued February 14, 2012, Johnson; Jerry D., Graves; Steven W., Hong; Seongwon, Bresler; Herbert S., Brooker; Michael J., Gritz; R. Mark

United States Patent 9,885,085 B2 Apparatus, compositions, and methods for assessment of chronic obstructive pulmonary disease progression among rapid and slow decline conditions, issued February 6, 2018, Hoidal; John, Scholand; Mary Beth, Leppert; Mark F., Paul; Michael S., Gritz; Robert Mark, Pounds; Joel Gardner, Smith; Richard Dale

Clearances

United States Department of Defense, Secret - inactive