

# Chiquita Brooks-LaSure

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## WORK EXPERIENCE

### **Manatt Health Strategies, Manatt, Phelps & Phillips, LLP**

1/16 – confirmation  
date

*Managing Director*

- Providing federal and state policy analysis and strategic advice to states, foundations, consumer advocacy organizations, associations, health plans, and other healthcare clients.
- Co-author of several white papers on strategies to address maternal mortality, network adequacy requirements, and health reform efforts, such as public option and buy-in plans.
- Co-launched and currently manage a subscription service analyzing federal and state policy developments.

### **Independent Consulting**

6/14 – 12/15

- Authored a Commonwealth Fund paper entitled: “Increased Transparency and Consumer Protections for 2016 Marketplace Plans”.
- Senior Advisor with Breakaway Policy (6/14 to 1/15) and CapView Associates (7-12/15), and visiting Scholar at Deakin University, Melbourne, Australia (2015).
- Co-wrote a 9/14 *Morning Consult* blog with Dean Rosen on the insurance commissioners.

### **Centers for Consumer Information and Insurance Oversight (CCIIO), Centers for Medicare & Medicaid Services (CMS), Washington, DC and Bethesda, MD**

*Deputy Center Director and Deputy Director for Policy and Regulation*

12/12 – 5/14

- Led policy development for CCIIO, including managing policy teams to develop and refine proposals as well as making decisions on policy direction. Presented CCIIO policy views to the CMS Administrator, the Department of Health & Human Services (HHS) Secretary, and White House leadership as part of the decision-making policy process.
- Represented the Obama Administration’s policy in testimony before the Senate Small Business Committee (July 2013), in on-the-record press conferences with Secretary Sebelius and other HHS officials, in dozens of public speaking engagements, as well as meetings with stakeholders and press background briefings.
- Co-managed more than 200 employees with the CCIIO Center Director and CCIIO Deputy Director of Operations – overseeing performance reviews, hiring decisions, and addressing personnel concerns.

### **Department of Health & Human Services, Washington, DC**

4/10 – 12/12

**Office of Health Reform, Director of Coverage Policy**

- Developed policy initiatives to reflect Congressional intent, advanced the Administration’s priorities, and ensured timely implementation of Exchanges, private market reforms, and the expansion of Medicaid in the Affordable Care Act.
- Advised senior leadership at the White House and HHS on policy options and decisions.
- Negotiated policy agreements between HHS offices and agencies as well as the White House (WH), Office of Management & Budget (OMB), Treasury, and Labor.
- Maintained relationships with states, plans, consumer groups, and other stakeholders to understand external perspectives and promote the Administration’s policies.
- Spoke on-the-record at public forums, panels, press calls, and stakeholder calls.

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**US House of Representatives, Washington, DC**  
**Ways and Means (W&M) Committee, Majority Professional Staff**

11/07 – 4/10

- Briefed Speaker, House leadership, W&M Chairman and committee members, and Democratic caucus members, to assist them in making policy decisions for the House-passed health care reform legislation and the Affordable Care Act.
- Co-managed the staff teams of the three House authorizing committees to develop the House-passed health care reform legislation.
- Played key role in all aspects of the legislative process: developed policy options, drafted language with legislative counsel, worked with the Congressional Budget Office (CBO) on scoring, met with stakeholder groups to solicit input and support, negotiated policy differences with other House, Senate and White House staff, and prepared members for committee markups and House floor votes.
- Areas of policy focus included: coverage for the uninsured, insurance reforms, employer coverage, Medicare Advantage, and Medicare drug policy under Parts B and D.

**Avalere Health, Washington, DC**

*Director*

10/06-10/07

*Senior Manager/Manager*

9/03-9/06

- Assisted companies, foundations, and advocacy organizations in understanding health care policy implications for states, beneficiary care, and the commercial market.
- Managed key firm accounts, driving client relations and supervising personnel.
- Directed the firm's recruiting and hiring process of junior staff in 2004-5 and 2006-7 and developed the firm's management training curriculum for 2005.
- Presented Avalere-Duke University disease management study in March 2005 interview on National Public Radio with Julie Rovner.

**Office of Management & Budget (OMB), Washington, DC**

*Program Examiner*

7/99-9/03

- Coordinated Medicaid policy development and staff for the Health Financing Branch, as lead Medicaid analyst from Fall 2002 to Fall 2003.
- Evaluated policy options and briefed OMB, White House, and federal agency officials on policy recommendations on the uninsured, Medicaid, state Children's Health Insurance Program (CHIP), and Medicare.

### EDUCATION

**Georgetown University, Washington, DC, Master's Degree in Public Policy, May 1999.**

**Princeton University, Princeton, NJ, Bachelor's Degree in Politics, June 1996.**

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## AFFILIATIONS

Elected to FAIR Health Board, Spring 2018.

Elected to Children's Law Center Board, May 2019.

Appointed by the Governor to the Virginia Health Benefit Exchange Advisory Committee, July 2020 - June 2024.

## SELECTED PUBLICATIONS

Co-author, *The Federal Government's Response to the Coronavirus (COVID-19) Pandemic: Questions & Answers*, Robert Wood Johnson Foundation's State Health and Value Strategies, April 22, 2020.

Co-author, *Medicaid's Crucial Role in Combating the Maternal Mortality and Morbidity Crisis*, Robert Wood Johnson Foundation's State Health and Value Strategies, March 9, 2020

Co-author, *Building On The Gains Of The ACA: Federal Proposals To Improve Coverage And Affordability*, Health Affairs, March 2, 2020.

Co-author, *State Medicaid Buy-Ins: Key Questions to Consider*, Robert Wood Johnson Foundation, April 2019.

Co-author, *The Landscape of Federal and State Healthcare Buy-In Models*, Arnold Ventures, February 2019.

Co-author, *Evaluating Medicaid Buy-in Options for New Mexico*, Laura and John Arnold Foundation, December 7, 2018.

Co-author, *Manatt on Medicaid: 10 Trends to Watch in 2018*, February 2018.

Co-author, *Understanding the Rules: Federal Legal Considerations for State-Based Approaches to Expand Coverage in California*, California Health Care Foundation, February 2018.

Co-Author, *Leveraging Medicaid to Strengthen Marketplace Coverage*, Webinar, State Health & Value Strategies, Robert Wood Johnson Foundation, December 2017.

Author, *Increased Transparency and Consumer Protections for 2016 Marketplace Plans*, The Commonwealth Fund, December 2015.

Co-author, *Chapter Three: Quality of Care, The Health Care Delivery System: A Blueprint for Reform*, Center for American Progress, October 2008.

Co-author, *The Medicare Drug Benefit: How Good Are the Options?* California Health Care Foundation, March 2006.