

Meeting Program and Attendee Guide



NAHDO 2026 **40th Anniversary In-Person** **Meetings and Networking Sessions**

40 Years of Data Connecting With Policy

May 6-7, 2026
DoubleTree By Hilton Grand Hotel Biscayne Bay
Miami, Florida

TABLE OF CONTENTS

Meeting Program and Attendee Guide	1
40 Years of Data Connecting With Policy	1
TABLE OF CONTENTS	2
ABOUT NAHDO	4
TRAVELER INFORMATION	5
Airport Ground Transportation	5
Getting Around in Miami	5
Hotel Information	6
Staying Safe in Miami	7
WHAT TO EXPECT	8
2026 NAHDO EVENT SPONSORS	10
MEAL MENUS	11
Wednesday, May 6, 2026	11
Thursday, May 7, 2026	12
AGENDA	13
Tuesday, May 5, 2026	13
Wednesday, May 6, 2026	13
Thursday, May 7, 2026	15
PARTICIPANT GUIDES FOR EACH SESSION	16
Hospital Data Forum	16
1A: Using Data to Inform Policy and Improve Care	18
1B: America's Next Top Data Model	20
2: Effective Data Visualizations	21
3A: Analytics and Use Cases Relating to Cost and Quality of Care	23
3B: Data Quality and Validation	25
4: Data Integration	27
5: Behavioral Health, Mental Health, and Substance Use Disorder (SUD) Data	29
6: Using Data to Transform Rural Health in Your State	31
7: Artificial Intelligence (AI) Adoption and Use	32
PROGRAM LEADERSHIP	34
NAHDO SUBJECT MATTER EXPERTS	35
LIST OF CONFERENCE ATTENDEES (As of 4/14/26)	36
NAHDO MEMBERS, April 2026	38
NAHDO BOARD OF DIRECTORS, 2026	41
BECOME A NAHDO MEMBER OR PARTNER	42

ABOUT NAHDO

The National Association of Health Data Organizations (NAHDO) is a not-for-profit national membership organization. We are dedicated to improving health care through the collection, analysis, dissemination, public availability, and use of health data. NAHDO serves the interests of health data organizations, academic institutions, policymakers, healthcare systems, payers, and many others with a common interest in the availability of high-quality and timely health data to inform questions of cost, quality, and access to care. NAHDO was created in the spring of 1985 by the Washington Business Group on Health (WBGH) and the Intergovernmental Health Policy Project at George Washington University. It was designed to assist state health data organizations, state agencies, and the public by creating, exchanging, and providing information and resources that promote effective healthcare data collection, analysis, and dissemination.

Today, the membership includes state agencies, federal agencies, health care vendors, associations, consulting groups, and others interested in the collection and use of health data.

What is the APCD Council?

The All-Payer Claims Database (APCD) Council is a program of NAHDO. The [APCD Council](#) convenes an expanding group of government, private, nonprofit, and academic organizations interested in the development and deployment of state or regional APCDs. Membership and partnership revenue also supports the APCD Council.

The APCD Council:

- Serves in an information-sharing capacity for those states who have developed, or are developing, all-payer claims databases.
- Provides technical assistance to states and entities interested in developing APCDs.
- Catalyzes efforts to achieve mutual goals.

[Learn more](#)
www.nahdo.org

www.apcdouncil.org

TRAVELER INFORMATION

Airport Ground Transportation

Most guests will arrive at either Miami International Airport (MIA) or Fort Lauderdale-Hollywood International Airport (FLL). Please follow the specific instructions below for your arrival hub.

Miami International Airport (MIA)

MIA is a large, horseshoe-shaped terminal. Once you have collected your luggage from Baggage Claim, head to the Arrivals Level (Level 1).

- Taxis: Exit the terminal on the Arrivals Level. Taxis are located at the outer curb outside of every baggage claim area. A uniformed airport taxi coordinator will assist you. Fares to the hotel typically range from \$30 to \$40.
- Uber and Lyft: Exit the terminal on the Arrivals Level (Level 1). Follow the signs for "Ride App Pickup." You will meet your driver at the middle median directly outside your specific terminal/door.

Fort Lauderdale-Hollywood International Airport (FLL)

FLL is organized into four terminals. Most ground transportation is consolidated at the Rental Car Center (RCC), which is a short walk from Terminals 1 and 2, or a quick shuttle ride from Terminals 3 and 4.

- Taxis: Taxis are located on the Lower Level (Arrivals), curbside outside each terminal's baggage claim area. Look for the "Taxi" signs. Fares to the hotel can range from \$60 to \$70 depending on traffic. Larger vehicles have a surcharge.
- Uber and Lyft: Follow the signs to the Rental Car Center. Meet your driver at the designated "Ride App" zone on Level 2 of the RCC.

Getting Around in Miami

Rental Car: If you are renting a car, keep in mind that tolls are digital. Most Miami expressways are 100% electronic. There are no cash booths. To avoid surprises, ensure your rental includes a SunPass or is enrolled in "Toll-By-Plate."

The Metromover: Miami's automated train system has a station (Adrienne Arsht Center) just a block from the hotel. It's the easiest way to get around Downtown and Brickell **for free.**

Hotel Information

Hotel Lobby

Please note that there may be construction at the hotel entrance during our event. Make sure to **follow the signage** and take the elevator to the 2nd floor (RG Level) to the DoubleTree check-in desk. This is the same floor where our meetings will be held.

Meeting Locations

The meetings will take place in the Grand Ballroom and Key Biscayne-Key West Rooms on the 2nd Floor of the hotel. Lunch is currently planned to be on the Biscayne Bay Terrace next to the Grand Ballroom both days.

Facilities

The hotel is located within *The Grand*, a unique complex that combines hotel accommodations, residential condos, and retail spaces. The lobby is connected to a retail mall where you'll find a variety of options, including a full-service grocery store, deli, and several dining venues.

Hotel guests have access to the rooftop pool (10th floor) and fitness center (2nd floor). Spa services may also be available.

Check In/Out Time

The Hotel's check-in time is 4:00 PM, and check-out time is 12:00 PM (subject to change without notice). All guests arriving before check-in time will be accommodated as rooms become available. The Hotel can arrange to check baggage for those arriving early when rooms are unavailable and for guests attending functions on departure day.

Housekeeping

Like many hotels, housekeeping services are provided every three days. However, daily service is available upon request. Please inform the front desk at check-in if you would like more frequent service.

Parking

- Overnight guest parking: \$25.01 per night
- Valet parking (local attendees): \$15.00 per vehicle (discounted rate)

Please make sure you communicate that you have a vehicle with the front desk.

In-House Restaurant Options

The hotel offers several dining options within the complex:

- Primo's – Full-service restaurant (open for dinner)
- Caffè & Bottega (Italian Café)
- Pecorino's Market (bakery/deli)
- Starbucks
- Tanka (East Asian cuisine)

Room service is available daily from 8:00 AM – 9:30 PM, (extended until 10:30 PM Thursday–Saturday)

Staying Safe in Miami

Our top priority is the safety and well-being of our guests. Miami is a world-class, vibrant city with much to explore and is generally considered safe for visitors. As with any major international hub, it is important to stay alert. Here are some safety tips to ensure an enjoyable stay:

- **Travel in groups** and avoid walking alone at night.
- **Do not leave personal belongings unattended**, especially in public spaces.
- **Keep valuables secured** and out of sight; be mindful of pickpockets in crowded tourist areas.
- **Ensure your hotel room door is fully locked**; on-site security is available at the DoubleTree.
- **Remove your convention badge** when leaving the hotel or meeting venue.
- **When using a rideshare** app (Uber, Lyft), always confirm the driver's identity and license plate before entering.
- **Trust your gut instincts**; if a situation seems suspicious, leave immediately. For Miami-Dade Sheriff's Office contact 305-SHERIFF (305-743-7433). For emergencies, dial 911.
- **Stay hydrated and sun-protected** by drinking plenty of water and wearing sunscreen.

WHAT TO EXPECT

Every attendee should meet every other attendee - Norm Thurston

Goals and Objectives: NAHDO is hosting our Annual Meeting and Networking Sessions with topic-driven sessions designed to identify solutions to some of the current challenges facing health data organizations.

Attendees will:

- Make connections with other attendees who have similar interests, face similar challenges, or can provide solutions to issues
- Understand how others view the topics discussed in the workshop
- Share knowledge and experience from your program
- Identify new opportunities and solutions to challenges or issues

This will be different from a typical seminar or conference:

- No screen-based presentations
- Attendees will participate in small group discussions
- **Everyone will listen, share, and learn**
- Ample opportunity to work on issues and challenges in small groups

Format: Sessions are designed to maximize individual participation. Attendees will connect with other participants with similar interests. During most time slots, attendees can choose from two concurrent sessions.

Invited Attendees: Everyone working with administrative healthcare data is invited, including program directors and managers, data and policy analysts, consultants and advisers, researchers, and database administrators. We have a great list of committed participants who are excited to network and share ideas:

- Several state health data organizations plan to attend, including executives and technical experts in APCD, hospital discharge, and other administrative data.
- Leaders from NAHDO, APCD Council,, and NAHDO Members

Dress Code

- **The Vibe:** Professional but Tropical / Smart Casual. Clean, casual, and comfortable with a Miami flair, such as polos, blouses, khakis, chinos, or capris. Comfortable shoes ranging from loafers to fashion-forward sneakers.
- Conference rooms can be chilly, so you might want a light jacket or sweater.

2026 NAHDO EVENT SPONSORS

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 **Hospital Data Forum Sponsor**



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 **Featured Partner**



MEAL MENUS

*Content Restrictions are Not Guaranteed.
If you have questions please consult the banquet staff.*

Vegetarian and Gluten Free meals must be preordered and will be plated separately.

Wednesday, May 6, 2026

Breakfast Buffet

Served: 8:00 AM to 9:05 AM

- Florida fresh orange juice
- Cranberry juice
- Regular and decaffeinated coffee
- Selection of fine teas
- Sliced seasonal fresh fruits and berries
- Fruit-flavored yogurts
- Assorted freshly baked Danish, muffins, and croissants with preserves, cream cheese, and butter.
- Fluffy scrambled eggs
- Crisp hickory smoked bacon
- Sausage patties
- Roasted potatoes
- Thick French toast with maple syrup
- Individual cereal portions served with whole and skim milk

Lunch Buffet

Served: 11:55 AM to 12:55 PM

- Tossed garden salad with organic sherry vinaigrette
- Dinner rolls with butter
- Pulled pork with onions and mojo
- Grilled churrasco with chimichurri sauce.
- Vegetarian Option: Plant-based picadillo with rice and beans. **(Must preorder)**
- Moros (black beans and white rice combined)
- Platanos fritos (fried sweet plantains)
- Fried yuca with cilantro lime dipping sauce
- Flan and Arroz Con Leche (rice pudding)
- Freshly brewed regular and decaffeinated coffee and iced tea.

Thursday, May 7, 2026

Breakfast Buffet

Serve Time: 7:30 AM to 9:00 AM

- Florida fresh orange juice
- Cranberry juice
- Regular and decaffeinated coffee
- Selection of fine teas
- Sliced seasonal fresh fruits and berries
- "Make your own" parfait station
- Cuban pastries
- Oatmeal bar featuring brown sugar, cinnamon, almond butter, berries, and coconut
- Fluffy scrambled eggs
- Canadian bacon
- Sausage patties
- Hash browns
- Pancakes with maple syrup

Lunch Buffet

Serve Time: 11:55 AM to 12:55 PM

- Spinach salad (baby spinach, tomatoes, red onion, and feta cheese with homemade balsamic vinaigrette)
- Rolls with butter
- Chicken Marsala with mushrooms (sauteed in Marsala wine sauce)
- Grilled Mahi Mahi with a lemon beurre blanc sauce
- **Vegetarian Option:** Portobello mushroom torta (**Must preorder**)
- Regular mashed potatoes
- Choice of zucchini and butternut squash with eggplant or lemon garlic asparagus
- Chocolate cake, Cheesecake and Carrot cake
- Freshly brewed regular and decaffeinated coffee and iced tea

AGENDA

Tuesday, May 5, 2026

3:00-6:30 p.m. NAHDO Board Meeting, Key West-Key Biscayne

7:00-8:30 p.m. NAHDO Board Meeting Dinner, Off-Site TBD

Wednesday, May 6, 2026

8:00-8:30 a.m. *Networking Breakfast, Sponsored by Comagine Health* - Grand Ballroom & Terrace

8:30-9:05 a.m. *Welcome and Presentation of NAHDO Awards* - Grand Ballroom

- Welcome, **Dylan Dunlap & Chris Krawczyk**, NAHDO Board Chair
- Recognition of Board Members, Facilitators, and Sponsors, **Norm Thurston**
- Presentation of NAHDO Awards
 - NAHDO Rising Stars, sponsored by **Freedman HealthCare**, presented by Janice Bourgault
 - Data Pioneer, sponsored by **Commence.ai**, presented by Kenley Money
 - Innovation in Data Dissemination, presented by TBD
 - Elliot M. Stone Award, presented by TBD

9:15-10:25 a.m. Networking Sessions

- *Using Data to Inform Policy and Improve Care, Sponsored by hMetrix* - Grand Ballroom
Kyle Russell & Katie Martin
- *Data Models for Analytics, Sponsored by Mathematica* - Key West-Key Biscayne
Angela Taylor & KeriAnn LaSpina

10:25-10:45 a.m. Networking Break

10:45-11:55 a.m. Networking Sessions

- *Effective Data Visualizations, Sponsored by System13* - Grand Ballroom
Victoria Razin, Alexa Medlin & Monique Cote
- *APCD CEO Roundtable (INVITATION ONLY)* - Key West-Key Biscayne
Lee Spangler, Roundtable Chair

11:55-1:10 p.m. *Networking Lunch, Sponsored by Onpoint Health Data* - Grand Ballroom & Terrace

1:00-1:20 p.m. *Being Healthy at Work - Office Yoga* - Key West-Key Biscayne
Angela Taylor

1:10-2:30 p.m. Networking Sessions

- ***Analytics and Use Cases Relating to Cost and Quality of Care, Sponsored by Milliman MedInsight* - Grand Ballroom**
Laurie Paxson & Sara Hallvik
- ***Data Quality and Validation, Sponsored by hMetrix* - Key West-Key Biscayne**
Kenley Money & Gina Robertson

2:30-2:50 p.m. Networking Break

2:50-4:00 p.m. Networking Sessions

- ***Data Integration, Sponsored by System13* - Grand Ballroom**
Generosa Kakoti & Leanne Candura
- ***Hospital Data Forum, Sponsored by hMetrix & System13* - Key West-Key Biscayne**
Claudine Williams & Josie Bechara

4:10-5:20 p.m. *NAHDO Member Meeting* - Grand Ballroom

Chris Krawczyk, NAHDO Board Chair, & Norm Thurston, NAHDO Executive Director

5:30-6:30 p.m. *Beer and Wine Reception Celebrating HSRI's 50th Anniversary, Sponsored by HSRI* - Terrace

Hosted by Leanne Candura

6:30-8:30 p.m. *Networking Dinner Groups* - Off-site TBD

Please [Sign up](#) as soon as possible but by Wednesday noon at the absolute latest

Thursday, May 7, 2026

8:00-9:05 a.m. Networking Breakfast, **Sponsored by CareQuest Institute for Oral Health**
- **Grand Ballroom & Terrace**

9:15-10:25 a.m. Networking Sessions

- *Behavioral Health, Mental Health, and Substance Use Disorder (SUD) Data, Sponsored by System13* - **Grand Ballroom**
Kathy Hines & Mary Jo Condon
- *APCD Council Learning Network, Sponsored by Onpoint Health Data* - **Key West-Key Biscayne**
Maureen Mustard & Jonathan Mathieu

10:25-10:45 a.m. Networking Break

10:45-11:55 a.m. Networking Sessions

- *Using Data to Transform Rural Health in Your State, Sponsored by hMetrix* - **Grand Ballroom**
Jessica Iben & Craig Schneider
- *NED Talks, Sponsored by Commence.ai* - **Key West-Key Biscayne**
Kyra Morgan & Megan Denham
(1) Cyber Security & Privacy Frontiers
(2) Data Comms - How to Tell a Story
(3) Disparities - Rural and other populations

11:55-1:15 p.m. *Networking Lunch, Sponsored by CareQuest Institute for Oral Health* -
Grand Ballroom & Terrace

1:05-2:20 p.m. Networking Session

- *Artificial Intelligence (AI) Adoption and Use, Sponsored by Milliman MedInsight* -
Grand Ballroom
Maggie Mueller & Kevin McAvey

2:20-3:05 p.m. NAHDO Board Meeting Re-cap - **Key West-Key Biscayne**
Chris Krawczyk, NAHDO Board Chair, & Norm Thurston, NAHDO Executive Director

PARTICIPANT GUIDES FOR EACH SESSION

NED Talks

Kyra Morgan and Megan Denham

May 6, 2026 at 10:45 AM

Session Sponsors: System13

Session Description:

Six speakers. Eight minutes each. No slides.

Inspired by TED Talks and The Moth, NED Talks trade the familiar conference format — bullet points, dashboards, panel Q&A — for something rarer in our field: a person at a microphone, telling a true story about the work they do. Each speaker has eight uninterrupted minutes to take us inside a moment that taught them something the rest of us need to hear.

This year's lineup gathers around three themes shaping the future of health data:

- Cyber Security & Privacy Frontiers — **Jonathan Mathieu** (Freedman HealthCare) and **Robert MacLean** (CHIA) on the threats, decisions, and dilemmas that don't make it into the policy memo. Robert will talk specifically about how privacy is not a wall. It's a maze. There is a path through, and you can find it.
- Data Comms — How to Tell a Story — **Jenn Toms** (Innsena) and **Cain Farnam** (ACHI) on what it actually takes to move a number from a database into a decision.
- Disparities — Rural and Other Populations — **Sara Hallvik** (Comagine Health) and **Christopher Whiteside** (New Mexico Department of Health) on the communities that may not be included, and what it looks like when we don't.

Come for the stories. Leave with something you'll be thinking about on the flight home.

Hospital Data Forum

Claudine Williams and Josie Bechara

May 6, 2026 at 2:50 PM

Session Sponsors: hMetrix and System13

Session Description:

The goal of the Hospital Data Forum is to provide a dedicated space for those working with hospital data to ask questions of their colleagues and share "real-world" best practices. This year, we move beyond program sustainability to focus on the operational foundations of data collection: managing sensitive data, improving standardization, and measuring the real progress of health equity initiatives.

This interactive session will explore critical challenges and opportunities facing hospital data programs. Through facilitated discussions and peer sharing in small groups, participants will examine innovative approaches to program sustainability, methods for demonstrating value to stakeholders, and opportunities for expanding data utility while managing costs. Attendees will gain practical insights from peers and contribute to developing solutions for common challenges in hospital data program administration.

Time Structure:

- 10 Minutes: Sponsor Recognition (hMetrix and System13) and Overview
- 5 Minutes: Introduction to the Hospital Data Initiative
- 20 Minutes: Facilitated Group Discussion: Collecting and Using Sensitive Data
- 25 Minutes: Small Group "Deep Dive" Breakout Sessions
- 10 Minutes: Recap and Feedback

1. Facilitated Group Discussion

Topic: Collecting and Using Sensitive Data

As data utility expands, so does the complexity of managing sensitive elements. This session explores:

- **Navigating Barriers:** Addressing the legal, ethical, and political hurdles in collecting and using sensitive data. Dealing with pushback from data owners and consumers.
- **Data Sourcing:** Where is the data available? What needs to happen to get that data into the system?

2. Small Group "Deep Dive" Breakouts

Participants will select one table for focused peer-to-peer troubleshooting.

Table Topic	Focus Area
A) Disparities & SDOH	Status Update: Are we making real progress? Sharing successes and roadblocks in SOGI and SDOH collection.
B) Multistate Work	Collaborating across state lines: Challenges in data sharing and regional analysis.
C) Cost & Price Analysis	Transparency in Action: Using hospital data to analyze pricing trends and cost-to-charge ratios. Overcoming data limitations.
D) The Missing Foundation	Standardization: A deep dive into Race/Ethnicity (R/E), e-codes, POA (Present on Admission), and increased numbers of diagnosis fields.
E) Wild Card Table	Bring Your Own Topic: Open floor for immediate problem-solving and identifying future forum themes.

Question Prompts for Facilitated Discussion

- What is the biggest barrier to your program collecting "sensitive" data?
- If your state has seen an increase in SDOH or SOGI reporting, what was the primary driver (e.g., mandate, incentive, or workflow change)?
- What policies or statutes currently restrict your collection activities, and are there successful workarounds?

Recap & Future Planning

- What is the most helpful insight you learned during today's session?
- Which specific issue requires a dedicated deep-dive during our next Forum meeting?
- What should be the primary goal for the HDI in the coming year?

1A: Using Data to Inform Policy and Improve Care

Kyle Russell and Katie Martin

May 6, 2026 at 9:15 AM

Session Sponsor: hMetrix

Format: Competition

Session Description:

This interactive breakout session at the NAHDO Annual Meeting will engage participants in a simulated policy analysis competition designed to demonstrate how data can inform real-world decision making and improve care. Attendees will be organized into small teams and tasked with responding to a mock Request for Proposals (RFP) issued by the fictional “Agency for Health Policy Analysis,” focused on quantifying disparities and outcome drivers in areas including maternal and rural health. Each team will develop a concise proposal that outlines their analytic approach, data sources, policy recommendations, and budget, then present their bid to a panel of judges acting as a review committee.

Time Structure (70 minutes):

- 5 min: Welcome and Framing
- 25 min: Team working session
- 25 min: Presentations (9x 2 minutes each), 3 teams per topical area
- 10 min: Judging and scoring, Awards
- 5 min: Debrief

Discussion Guide

The Agency for Health Policy Analysis (AHPA) is soliciting proposals in the following topical areas- maternal health, rural health and 3rd category that will be identified live during the session. Proposals will seek to:

- Quantify relevant outcomes, disparities and opportunities across geographic areas (state, multi-state, or national)
- Identify key drivers of outcomes (e.g., access, workforce, cost, outcomes)
- Recommend 2–3 actionable policy interventions that are feasible within existing regulatory or funding environments
- Demonstrate how data will be used to measure impact over time

Each proposal should balance:

- Analytical rigor
- Data availability
- Policy relevance
- Cost feasibility

Pretend that this is a competitive grant where real funding is on the line. Work as a group to identify a solid proposal for turning data into policy.

Proposal Details

Your proposal should address as many of the following areas as possible:

- Team Identity
 - Name + (optional) tagline
- Analysis Plan
 - Geographic scope (state, region, national)
 - Key question(s) being answered
 - Data sources (must be specific)
 - Analytic approach - Descriptive, predictive, geospatial, etc.
 - Expected outputs
 - Dashboard, report, policy brief
- Budget (Constraint-Based)
 - Staffing (analysts, PM, etc.)
 - Data acquisition costs (if applicable)
 - Deliverables

1B: America's Next Top Data Model

Angela Taylor and KeriAnn LaSpina

May 6, 2026 at 9:15 AM

Session Sponsor: Mathematica

Format: World Cafe

Session Description:

We plan to explore various data model concepts, including APCD, dashboard, public data, and provider data. Our goals are for participants to share lessons and ideas about how to structure data models for different data types and initiatives.

Time Structure:

- 3 min: Mathematica sponsor remarks
- 10 min: Angela introduces session and format
- 30 min: World Cafe Discussions
 - 5 tables each with a different prompt.
 - Solicit a volunteer from each table to notetake and report out (they won't move tables).
 - Other participants move tables every 10 minutes, for max of 3 tables
- 25 min: Report out

Table Topics

1. APCD Data Models. What principles guide your APCD Model if you use the CDL? If you don't use CDL?
2. Public Use Data Models: What are some best practices for data models when data are available to the public, e.g. Limited Data Sets, Public Use Files
3. Dashboards: What principles guide you data models for dashboards?
4. Provider Data: What principles guide data models for provider data, e.g. Hospital Discharge Data, HIE Data, EHR data, or custom data exports from providers (such as for initiatives like RHTP)?
5. Wild Card: What questions do you have about data models? What insights can you offer about data models?

2: Effective Data Visualizations

Victoria Razin, Alexa Medlin, Sam Chick, and Monique Cote
May 6, 2026 at 10:45 AM

Session Sponsor: System13

Format: Experiential Learning

Session Description:

This interactive networking session creates an experiential learning environment focused on effective data visualization in health data. Participants will review real-world visualization examples, discuss what makes them effective (or not), and collaboratively apply design principles in a hands-on design lab. The session emphasizes peer-to-peer learning, practical application, and active discussion, enabling attendees to walk away with actionable visualization strategies they can immediately apply in their own organizations.

Time Structure:

- 8 min: Opening
 - Brief framing of core data visualization principles
 - Explanation of session flow and expectations
- 10 min: Visualization Gallery Review
 - Participants review multiple example visualizations at their tables and identify strengths, weaknesses, and adherence to best practices
- 20 min: Design Lab
 - Short report-out from select tables on visualization reactions
 - Attendees rotate tables to encourage new connections and perspectives
 - Small groups apply visualization principles to sketch their own data visualization concepts using provided prompts and flip-chart paper
- 20 min: Group Presentations
 - Groups present their draft visualizations
- 5 min: Wrap-Up
 - Facilitators synthesize common themes, tradeoffs, and best practices
 - Key takeaways and follow-up resources are shared with attendees

Question Prompts for Discussion

- What makes this visualization easy or difficult to interpret?
- What story is the data trying to tell, and is that story clear?
- Who is the intended audience, and does the design meet their needs?
- What design elements enhance clarity or create confusion?
- How could this visualization be improved with small design changes?
- What tradeoffs did your group consider when sketching your own visualization?

Table Topics

1. Translating complex health data into actionable insights
2. Choosing the right visualization for the question being asked
3. Common data visualization pitfalls in health analytics
4. Balancing accuracy, clarity, and visual appeal
5. Adapting visualizations for different audiences (policy, executive, public)
6. Applying visualization best practices with limited tools or resources

3A: Analytics and Use Cases Relating to Cost and Quality of Care

Laurie Paxson and Sara Hallvik

May 6, 2026 at 1:10 PM

Session Sponsor: Milliman MedInsight

Format: Problem Solvers, Long Format

Session Description:

Objective: For everyone to understand the best practices for calculating cost and quality of service. We want everyone to have the option to participate and we want people to talk about challenges associated with creating cost and quality reporting and data limitations. We will present 8 scenarios related to developing best practices when creating this kind of reporting.

Time Structure:

- 10 min: Introductory remarks. Kentucky's measurement in the maternal health space, Laurie Paxson
- 5 min: Transition & explanation of the activity
- 30 min: Table Discussions
- 25 min: Reporting out

Ground Rules

- Each table's job is to draft best practices around their assigned topic to be distributed as recommendations for adoption by other NAHDO member organizations.
- Tables will discuss amongst themselves. Moderators will rotate through the room. Each table will identify a reporter to share out at the end of the session.
- Each table's reporter shares key best practices related to their topic.

Question Prompts for Discussion

- *These questions should guide the group to documenting actionable best practices that they would recommend other NAHDO member organizations adopt.*
- What are you currently doing with regard to this topic?
- Do you have any practices, or have you seen others' work that you would call "best" or would recommend others adopt?
- Do you have any practices or past experience that you would NOT recommend others adopt?

Table Topics

1. Telling the cost and quality story (how to make complexity clear)

2. Audience considerations, and how to tailor reporting (e.g. reporting to practices vs legislators)
3. Applying groupers – best practices and lessons learned
4. Working with and around data limitations (timeliness, completeness, accuracy)
5. Integration of claims and alternative payment file data

3B: Data Quality and Validation

Kenley Money and Gina Robertson

May 6, 2026 at 1:10 PM

Session Sponsor: hMetrix

Format: World Cafe, Long Format

Session Description:

This session will take a deep dive into data quality and validation practices across a range of APCD data topics. Participants will have the opportunity to share and learn from one another's approaches to validating incoming data, ensuring completeness, and addressing gaps or poor data quality. Through structured World Cafe discussions, attendees will explore practical strategies, benchmarking resources, and evolving methodologies across key areas including exchange population, claims adjudication, provider rosters, standard code sets, and more.

Time Structure:

- 3 min: Sponsor statement
- 7 min: Introductory remarks by Katie McGraves-Lloyd
- 5 min: Introduce and set ground rules for session format
- 3 min: Allow group to name specific topics they want covered at the tables
- 40 min: Rotations (up to three)
- 20 min: Reporting back

Ground Rules for Discussion

- You should be learning at or contributing to the topic of your table; if you're not engaged, switch to a different table.
- Topics will be assigned to specific topics, and allow participants to start at the table of their choosing.
- The following questions will be listed at each table to answer:
 - How do you validate incoming data related to your topic? Be as specific as possible
 - How do you know the data you've received is complete?
 - Are there resources available for benchmarking or informing validations and their expected thresholds for your topic?
 - When the data quality of your topic is poor or missing, are there alternatives or external resources to help supplement or remediate the topic's quality?
 - Has your approach to validating this topic changed in the past few years? If so, what prompted that change?"

- We will keep time and provide participants the opportunity to switch tables after 15 minutes, however, participants are not required to switch if they're still engaged in the table's topic.
- At the end of the rotations, each table will report out a summary of their topic (2 minutes each) and turn in their question form with notes, so that we can summarize findings in the NAHDO Session notes for all.

Suggested Table Topics

1. Exchange Population
2. Identifying duplicative PBM data
3. Claims adjudication
4. Non-claims payments, including pharmacy rebates
5. Standard billing/coding code sets (e.g., ICDs, CPTs, CDTs, etc.)
6. Provider rosters and attribution

4: Data Integration

Generosa Kakoti and Leanne Candura

May 6, 2026 at 2:50 PM

Session Sponsor: System13

Format: Modified World Cafe

Session Description:

This session explores external data sources that complement APCD and hospital discharge data, the opportunities that come from integrating them, and the practical challenges (technical, legal, organizational) involved in doing so. Participants with different data backgrounds will work together at tables organized around specific data source categories to surface possibilities, opportunities, and challenges. We especially encourage participants who work with clinical data, vital records, registries, federal data, or price transparency files to attend.

The room will be set in rounds of 8 to 10. To encourage a mix of perspectives, participants will receive a color-coded role identifier at the door (e.g., analyst, policy/governance, program management, IT/data engineering). We encourage you to sit with people outside your usual circle.

Table discussions and report-outs will be recorded for later distribution to attendees. Recordings will not be made public, and no comments will be attributed to individuals. Table scribes are encouraged to capture key points as well.

Time Structure:

- 10 minutes: Intro and Orientation
 - Welcome, level-setting on terminology (linkage vs. integration vs. aggregation; technical vs. governance dimensions), audience poll via Slido to gauge backgrounds and interests, and explanation of format.
- 15 minutes: First Iteration
 - Participants choose a data source table and discuss a standard set of questions. A volunteer scribe captures key points.
- 15 minutes: Second Iteration
 - Participants rotate to a second table. A remaining participant recaps Round 1 before the group continues with the same questions.
- Report Out (25 min)
 - Tables sharing the same topic report together (≈5 min per topic). The second table adds new points rather than repeating.
- Wrap-Up (5 min)

Table Topics (Ten Tables, 2 Each for Five Topics)

- Hospital Price Transparency and Transparency in Coverage Data
- Clinical, EHR, and Health Information Exchange (HIE) Data
- Vital Records and Public Health Registries (e.g., birth/death records, cancer registries, immunization systems, disease surveillance)
- Federal Government Data Resources (Census/ACS, CDC sources, geographic and environmental data)
- Workforce data

Discussion Questions

- What would you build or answer by integrating this source with APCD or hospital data? What gaps would it fill?
- Has anyone at the table worked with this source or attempted integration? What worked and what didn't?
- How is this data accessed? What agreements, permissions, or legal considerations apply?
- What are the main technical challenges in linking or combining this source with claims or hospital data?
- Are there recent developments, including disruption of federal data sources, that affect this data's availability or usefulness?

5: Behavioral Health, Mental Health, and Substance Use Disorder (SUD) Data

Kathy Hines, Emma Harrigan, and Mary Jo Condon
May 7, 2026 at 9:15 AM

Session Sponsor: System13

Format: Problem Solvers

Session Description:

This is a Problem Solvers session focused on finding and sharing solutions to real world problems related to behavioral health, mental health, and substance use disorder data.

Sessions will begin with identifying particular problems that need to be understood and solved. Attendees will break into groups to find solutions for specific problems (or aspects of problems). Each group will report their progress in solving the problems to the whole group.

Time Structure:

- 10 min Introductions
- 35 min Table Discussions
- 25 min Reporting Back

Ground Rules

- **The "5-Minute Hook":** Define the problem quickly. If you can't define it in 5-7 minutes, pivot to solving a smaller piece of it. No "admiring the problem" allowed.
- **The "All-In" Rule:** Everyone is an active contributor. If you're stuck, ask a "How Might We" question. If you're inspired, propose a solution. Silence is the only thing not on the menu.
- **Headline First, Details Later:** Every solution must start as a single, punchy sentence.
- **Reality Check:** For every solution, identify at least one "real-world" barrier (e.g., data silos, consent management, or interoperability).
- **Data with Dignity:** Remember that every data point represents a person. Solutions should prioritize both the utility of the data and the privacy/dignity of the individual.

Table Topics

- Problem 1: Defining what information can information can be legally shared, coming to a common understanding among stakeholders of the legal constraints, and communicating this guidance in a way that results in comparable data across submitters.
- Problem 2: Determining how to use diagnosis as a way to define behavioral health services and how to balance the tradeoffs of diagnosis versus provider focused

definitions. For example, does the diagnosis need to be in the primary position for accurate reporting? And, how should states handle the lack of specificity in BH diagnosis coding?

- Problem 3: Deciding whether to include certain diagnoses that span medical and behavioral health as diagnoses. For example, should dementia and intellectual disabilities be included in or excluded?
- Problem 4: Calculating utilization and spending outside payer/provider transactions – self-pay, state allocations
- Problem 5: What data do we need and how can we use it to assist providers in solving the problem of ED Boarding and BH Bed availability? How can we assist providers and state policy makers in measuring demand for high intensity services (volumes, wait times) and the effectiveness of alternative programs (BH urgent care and diversion programs, community support services)?
- Problem 6: Interpreting behavioral health trends in the context of the COVID-19 pandemic, particularly when trying to distinguish true changes from pandemic-related increases in care.
- Problem 7: Assessing whether telehealth visits are as effective as in-person care for behavioral and mental health treatment.
 - Problem 8: How are organizations approaching measurement and reporting for substance use disorder (SUD) when privacy protections and PHI limitations restrict data collection and sharing? How do we determine what data can be collected or used masked/unmasked? How can we ensure we aren't over-masking?

6: Using Data to Transform Rural Health in Your State

Jessica Iben and Craig Schneider

May 7, 2026 at 10:45 AM

Session Sponsor: hMetrix

Format: Facilitated Deep Dive

Session Description:

“Using Data to Transform Rural Health in Your State” will be a facilitated deep dive into how health data organizations can support the Rural Health Transformation Programs (RHTP) in their state. Whether or not you have been involved in your state’s plans from the beginning or are just learning about it now, this session will explore HDOs’ role in aspects of RHTP including AI and technology, data linkage, data sharing and interoperability, value-based care, workforce, and influencing your state’s policies and programs.

Time Structure:

- 3 min: Sponsor Remarks
- 5 min: Introduction to topic and format
- 40 min: Table Deep Dives
- 22 min: Reporting Back of Key Learning

Table Topics

1. AI/technology – Jenn Toms
2. HIE/data sharing/interoperability – Matt Enright
3. Value-based payment – Craig Schneider
4. Influencing policy and programs – Julie Sonier
5. Workforce – Tanya Bernstein
6. Data linkage and connecting to HRSNs/CBOs - Angela Taylor
7. Mobile and remote/virtual health services - TBD
8. Special population needs (e.g., BH) - TBD
9. Sustainability and ensuring continued funding - TBD

7: Artificial Intelligence (AI) Adoption and Use

Maggie Mueller and Kevin McAvey

May 7, 2026 at 1:05 PM

Session Sponsor: Milliman MedInsight

Format: Experiential Learning

Session Description:

This session will provide a foundation for state health data organizations to evaluate their readiness for AI adoption and implementation across three core areas:

- *Establishing shared language and common definitions of AI tools and large language models (LLMs);*
- *Identifying opportunities and early-adoption use cases for AI/LLM implementation within state health data organizations;*
- *Identifying, assessing, and addressing risks that should be considered prior to adoption.*

Time Structure:

Intro and Framing (15 min)

- Sponsor Introduction (hMetrix, 2 min.)
- Welcome and Issue Framing (Kevin, 10 min.)
 - Goals of session
 - Setting common definitions and terminology
 - Establishing a framework for AI/LLM adoption and use
- Exercise Overview (Maggie, 3 min.)
 - Review three stages of exercise and expected output

Exercise #1: Early AI Adoption (25 min.)

- Instructions and Facilitation (Maggie, 15 min.)
 - Individual tables should:
 - Identify where they have seen early AI use cases – or promising opportunities for AI use – in organizations' use of health data
 - Develop consensus around the top two use cases
- Report-Outs (Kevin, 10 min.)
 - Individual tables should:
 - Share their top two use case recommendations
 - Facilitator will offer refinements for consideration in next round

Exercise #2: Early AI Adoption – Barriers + Solution Strategies (15 min.)

- Instructions and Facilitation (Maggie, 10 min.)
 - Individual tables should:
 - Identify potential barriers or risks to adoption of identified “top two” use cases that organizations should consider prior to adoption
 - Develop consensus around the top barriers for each use case
- Report Outs (Maggie/Helen[KCM1] , 5 min.)
 - Individual tables should:
 - Share their top two barriers for AI adoption and use
 - Facilitator will note common themes in barriers among groups

Exercise #3: Early AI Adoption – Barriers + Potential Solution Strategies (15 min.)

- Instructions and Facilitation (Maggie, 10 min.)
 - Individual tables should:
 - Pick two barriers to solve for, and identify what potential legal, regulatory, contractual, operational, or technical resolution or risk mitigation strategies might comprise
 - Develop consensus around the top two risk mitigation and solution strategies (i.e., what are the important determinants in facilitating secure AI adoption and use within health data organizations?)
- Report Outs (Maggie/Helen, 5 min.)
 - Individual tables should:
 - Share their top two risk mitigation and solution strategies for their selected barriers
 - Facilitator will identify common themes in risk mitigation and solution strategies

Close Out (5 min)

- Reflections (Maggie, 5 min.)
 - Summary of identified promising use cases, risks or barriers in adoption, and potential mitigation strategies (high-level)
 - Call to action and (appropriate) adoption!

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Craig Schneider, HMA

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for Health Data

Kyra Morgan, Nevada Dept of Health
and Human Services

Gina Robertson, Onpoint

Jenn Toms, Innsena

Krishna Vasireddy, DHIN

Claudine Williams, Maryland HSCRC

NAHDO SUBJECT MATTER EXPERTS

NAHDO will have subject matter experts on hand at the event to help guide the discussion and answer questions.

Norm Thurston, Executive Director, NAHDO & Chair, APCD Council

- APCD and Hospital Discharge Databases
- Project Management
- Procurement
- Public Relations, Politics, and Stakeholder Engagement
- Data Stewardship

Charles Hawley, Director of Projects, NAHDO

- Data Standards
- APCD and Hospital Discharge Databases
- Project Management
- Analytics and Data Management

Maureen Mustard, Senior Advisor for Strategic Initiatives, APCD Council

- Analytics and Data Management
- Program Administration
- APCD Development
- Project Management
- Advocacy and Education

LIST OF CONFERENCE ATTENDEES (As of 5/1/26)

Alice Aguirre	Data Quality and Intake Manager, CIVHC	Cecilia Ganduglia Cazaban	Director, CHCD & Associate
Lauren Almquist	Associate Director, Health Informatics & Reporting, Center for Health Information and Analysis (CHIA)		Professor, UTHealth Houston School of Public Health
Olga Armah	Manager of Research and Planning, CT Office of Health Strategy	Rik Ganguly	Senior Data Science Consultant, Freedman HealthCare
Amy Ashcraft	Senior Research Analyst, Commence.ai	Dominic Gayton	Data Analytics Manager, Onpoint Health Data
Josiane Bechara	Senior Research Methodologist, NORC at the University of Chicago	Allison Genco Herzik	Deputy Director, Chief of Staff, Nevada Health Authority
Tanya Bernstein	President, Freedman HealthCare	Lorie Geryk	Project Manager II, Freedman HealthCare
Shivani Bhatt	Team Lead, hMetrix	Stefan Gildemeister	State Health Economist, Minnesota Department of Health
Pragya Bhattarai	Manger IV, Texas Department of State Health Services	Tim Ginader	Data Innovation Hub Manager, CIVHC
Sherly Binu	CMS Practice Lead, Commence.ai	Meredith Goodwin	Principal Research Data Scientist, FAIR Health
Alissa Bolz	MN APCD Operations Supervisor, Minnesota Department of Health	Lynn Goyne	VP, System13, Inc.
Louisa Bonds	Executive Director, Data Resources & Analytics, FAIR Health	Ryan Hall	Support Team, NAHDO
Srimoyee Bose	Director of Research, One Utah Health Collaborative	Sara Hallvik	Vice President, Analytics, Comagine Health
Janice Bourgault	Principal Consultant, Freedman HealthCare	Jonathan Handsborough	Executive Director, Indiana All Payer Claims
Leanne Candura	Vice President, HSRI	John Hargraves	Managing Director of Data Strategy & Analytics, Health Care Cost Institute
Valeria Carlson	President and CEO, Clyde Consulting, LLC	Emma Harrigan	Senior Consultant, Freedman HealthCare
Ryan Carroll	Chief Commercial Officer, Simple Healthcare	James Harrison	President/CEO, Onpoint Health Data
Sam Chick	Data Analytics Manager, Onpoint Health Data	Nerissa Harvey	Assistant Manager, Tennessee Hospital Discharge Data System
Nancy Chiles Shaffer	Associate Director Healthcare Data Management, Maryland Health Services Cost Review Commission	Adrienne Henderson	Program Administrator, Florida Agency for Health Care Administration
Mary Jo Condon	Vice President and Director of Policy and Programs, Freedman HealthCare	William Hendon	Project Manager II, Freedman HealthCare
Carolyn Conrad	Director of Client Services, Onpoint Health Data	Kathy Hines	Senior Health Care Data Advisor, Center for Health Information and Analysis (CHIA)
Monique Cote	Director of Business Development, Onpoint Health Data	Devon Holgate	Chief Technology Officer, Onpoint Health Data
Chrissy Crowley	Business Process Analyst 2, Nevada Health Authority	Catherine Houston	Associate Director, Hospital Data Intake and Compliance, Center for Health Information and Analysis (CHIA)
Megan Denham	Principal IT Program Manager, Mathematica	Jeremy Howard	Senior Database Manager, Kansas Dept. of Health and Environment
Bryan Dorsey	VP of Business Development, Commence.ai	Jessica Iben	Director External Affairs, Delaware Health Information Network
Joanna Duncan	COO, Onpoint Health Data	David Jims	Senior Data Science Consultant, Freedman HealthCare
Dylan Dunlap	Bureau Chief, Florida Agency for Health Care Administration	Taylor Johnson	Health Care Data Analyst, HSRI
Matt Enright	Director of Data Analytics, Delaware Health Information Network	Shaun Jones	Account Executive, Milliman MedInsight
Cain Farnam	Assistant Director of Data Visualization, Arkansas Center for Health Improvement	Generosa Kakoti	Director Office of Healthcare Statistics, Tennessee Department of Health
Karl Fernstrom	Health Care Data Service Center Manager, Minnesota Department of Health	Amy Kinner	Senior Director of Health Analytics, Onpoint Health Data
Helen Figge	CSO, MedicaSoft	Emmet Kordell	Data & Reporting Coordinator, Green Mountain Care Board
Charles Foldyna-Hawley	Director, Projects, NAHDO	Patricia Kraft	Business Intelligence Interim Supervisor, State of Minnesota/OSP/MMCAP
John Freedman	Chief Executive Officer, Freedman HealthCare	Chris Krawczyk	Chief Analytics Officer, PhD., California Department of Health Care Access and Information
Caitlyn Fuss	Special Assistant to the President, FAIR Health	Daniel Kurowski	Senior Advisor, Health Care Cost Institute

Sue Hyun Kwon	APCD Epidemiologist, New Mexico Department of Health	Victoria Razin	Senior Research Engineer, Georgia Tech Research Institute
KeriAnn LaSpina	Senior Health Researcher, Mathematica	Robert Richards	Director, Data and Analytics, Milliman MedInsight
Michael Lawson	Healthcare Data Administrator, Kentucky Cabinet for Health and Family Services	Dana Richardson	Chief Executive Officer, Wisconsin Health Information Organization
Jeffrey Leintz	Senior Vice President, NORC at the University of Chicago	Jillian Rider	Data Systems Manager, Virginia Health Information
Jessica Little	Chief Operating and Programs Officer, Civitas Networks for Health	Mel Riffe	Sr Analyst, System13, Inc.
Madison Lopey	Chief Biostatistician, Nevada Health Authority	Gina Robertson	Senior Data Analytics Manager, Onpoint Health Data
Robert MacLean	General Counsel, Center for Health Information and Analysis (CHIA)	Jamie Rocke	Director, Business Dev & RM, Delaware Health Information Network
Andrielle Madison	Project Manager II, Freedman HealthCare	Kevin Rogers	Director of Technical Services, HSRI
Maria Manavalan	Director, Data Management, hMetrix	Kyle Russell	CEO, Virginia Health Information
Katie Martin	President and CEO, Health Care Cost Institute	Craig Schneider	Principal, HMA
Jonathan Mathieu	Senior Consultant, Freedman HealthCare	Sarah Shaffer	Data Engineer II, Freedman HealthCare
Kevin McAvey	managing director, Manatt Health	Doug Shannon	Partner, Mercer
Paul McCormick	Chief Technology Officer, CIVHC	Ashley Sigler	Sr. Business Systems Developer, Arkansas Center for Health Improvement
Cindi McElhaney	Manager, Analytics M&R, Comagine Health	Susan Slappey	Unit Manager / Administrator Data Collections, Florida Agency for Health Care Administration
Katie McGraves-Lloyd	Senior Data Analytics Manager, Onpoint Health Data	Marissa Smith	Project Manager II, Freedman HealthCare
Alexa Medlin	Project/Program Manager, Georgia Tech Research Institute	Nancy Smith-Purdy	Director, Business and Development, Fearless Solutions
Pam Mink	Health Services Research Unit Supervisor, Minnesota Department of Health	Julie Sonier	Senior Fellow, Mathematica
Alexander Mizenko	Senior Director, Product and Data Analytics, FAIR Health	Donald Sowell	Senior Analytics Engineer Corporate - R&D, Commence.ai
Mark Moffett	Senior Health Economist, Commence.ai	Lee Spangler	Executive Director, TX APCD & Associate Professor, UTHealth Houston School of Public Health
Kenley Money	Director of Information Systems, Arkansas Center for Health Improvement	Audrey Speter	Vice President, Healthcare Policy, hMetrix
Steve Moore	Lead Analyst, Virginia Health Information	Kristof Stremikis	Director, Market Analysis and Insight, CHCF
Kyra Morgan	Medical Epidemiologist, Nevada Division of Child & Family Services	Andrea Strong	Chief, Financial Data Administration and Rates, State of Maryland - HSCRC
Preston Morris Jr	President, System13, Inc.	Vani Tadakala	Data Quality Analyst, HSRI
Mika Morton	Statistical Analyst, Green Mountain Care Board	Sophia Tannir	Data Scientist, Kentucky Cabinet for Health and Family Services
Maggie Mueller	Director of Data Operations, CIVHC	Angela Taylor	Data Architect, Kentucky Cabinet for Health and Family Services
Maureen Mustard	Senior Advisor for Strategic Initiatives, APCD Council	Norm Thurston	Executive Director, NAHDO
Patrice Nicholes	Project/Assistant Bureau Director, Utah Department of Health and Human Services	Margaret Tiedemann	Consultant, Freedman HealthCare
William Olesiuk	Director, Strategic Partnerships, NORC at the University of Chicago	Jenn Toms	Managing Director, Innsena
Laura Parajon	Director for the Center for Health Protection, New Mexico Department of Health	Huong Trieu	Senior Director, Center for Health Information and Analysis (CHIA)
Shaune Parker	Director of Data, Analytics, and Research, Kansas Dept. of Health and Environment	Sharon Ulery	Research Associate, HSRI
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Kristin Paulson	Chief Executive Officer, CIVHC	Kezia Wafula	Data Quality Analyst, HSRI
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- Maryland Health Care Commission, Public, Government
- Massachusetts Center for Health Information and Analysis, Public, Government
- Midwest Health Initiative, General, Non-Profit
- Minnesota Department of Health, Public, Government
- Mississippi State Department of Health, Public, Government
- Nevada Department of Health and Human Services, Public, Government
- New Hampshire APCD (Formerly Bureau of Health Statistics), Public, Government
- New Jersey Institute for Innovation, Public, Government
- New Mexico Department of Health, Public, Government
- New York State Department of Health - Bureau of Health Informatics, Public, Government
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- Oklahoma State Department of Health, Public, Government
- Oregon Health Authority - Health Policy & Analytics Division, Public, Government
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- Utah Department of Health and Human Services, Public, Government
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- Washington State Department of Health, Public, Government
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Public Members - Public members include state agencies and other health data organizations created by legislative or other governmental act, or official representatives for the state reporting system, to collect and analyze health care data on a statewide or other jurisdictional basis.

Health Care Associations - Association members consist of health care associations that represent providers that deliver health care services or collect, analyze and distribute health care data to inform providers of health care, who are not otherwise eligible as Public or Data Supplier members.

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NAHDO believes in the power of partnerships and collaborative efforts. Along with sustaining membership, strategic partnerships advance NAHDO's mission and priorities, and are essential for health data organizations that need data tools and services to be responsive to their key stakeholders.

Please view our 2026 [strategic partnership opportunities here](#).

NAHDO, including the APCD Council, welcomes the opportunity to discuss what will work best for your organization. Please email us at info@nahdo.org for more information about becoming a Corporate Partner.