

# CLIFTON R. GAUS, MHA, ScD

Bradenton, FL

## EDUCATION

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1967 - 1969 Johns Hopkins University, Baltimore, MD  
*Doctor of Science, Health Services Management, ScD*

1965 - 1967 University of Michigan Ann Arbor, MI  
*Master of Hospital Administration, MHA*

1964 - 1965 Jefferson Medical College, Philadelphia, PA

1960 - 1964 Allegheny College, Meadville, PA  
*Bachelor of Science, BS*

## SCOPE OF EXPERIENCE

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Dr. Gaus has a diversified background in Health Care Management and Policy, Health Services Research, academia and private business. In 2012, he led the founding of the National Association of ACOs (NAACOS) and was the President and CEO until January 2025. NAACOS is an ACO member-led and member-owned nonprofit organization that works on behalf of ACOs across the nation to improve the quality of care, population health and outcomes, and health care cost efficiency. He served on the Board of Directors of the Packard Children's Hospital, Stanford University and as Chairman of the Board IT Committee from 2002-2010.

Dr. Gaus previously was the Executive Vice President and Chief Administrative Officer of WellPoint Health Networks Inc.; one of the nation's largest publicly traded health care companies. In this position, Dr. Gaus was responsible for all of WellPoint's physician and hospital networks, medical policy and care management programs, public affairs, human resources, marketing and branding. Prior to that he was Senior Vice President for Research and Development for the Kaiser Permanente national program offices in Oakland, California.

Before that he was a Presidential Appointee in the first Clinton term working on Health Reform and serving as Administrator of the Agency of Health Care Policy and Research (AHCPR) for three years. Reporting directly to the Secretary of HHS, AHCPR (now the Agency for Healthcare Research and

Quality, AHRQ) is the lead federal Agency in studying health care quality, management, and financing. Under his leadership, AHCPR's strategy and operations were transformed from an isolated "R&D" organization to a strong information partner with the nation's leading health care delivery and financing organizations, helping those organizations to lower costs and improve quality. Accomplishments included the development of the CAHPS survey, Evidence-Based Practice Centers, and the National Health Information Infrastructure. During 1995-96 he played a major role in the formulation and passage of the Health Insurance Portability and Accountability Act (HIPAA).

He also worked in Health Research and Policy for the federal government during the Nixon, Ford and Carter administrations. His academic associations have been with John Hopkins University and Georgetown University. In addition, he directed the Center for Health Policy at Georgetown University, spent ten years as a health consultant and business leader, and was responsible for establishing the Association for Health Services Research, now Academy Health.

## **DETAILED BACKGROUND**

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### **2012- 2024 President and CEO NATIONAL ASSOCIATION OF ACOs (NAACOS)**

As co-founder and CEO, Clif led the only national association of Accountable Care Organizations owned and governed by ACOs. NAACOS is a 501 (c) 6 nonprofit organization that allows ACOs to work together to increase quality of care, lower costs and improve the health of the communities. With over 500 ACOs and Business Partners, NAACOS is the national voice on important legislative and regulatory issues affecting millions of Medicare and private payer patients.

### **2007- 2012 Consultant HOSPITALS, HEALTH PLANS, AND RESEARCH ORGANIZATIONS**

Clif advises hospitals and health plans on development of strategic plans, patient care redesign, and new organizational and financial models such as ACO's and bundled payment. In 2010-11 he consulted for the Administrator, CMS working on the ACO regulations and starting up the Center for Medicare and Medicaid Innovation (CMMI).

**2001 –  
2012**

**President  
HEALTH PROFESSOR, INC**

Health Professor, Inc. ([www.medelearn.org](http://www.medelearn.org)) is an e-learning company with offices in Thousand Oaks, CA and Bradenton, FL providing industry leading online training and web-based technology to employees of hospitals, health plans and large medical groups. Medelearn delivers a wide range of computer-based training in areas like HIPAA, JCAHO, OSHA, Patient Safety, and Nursing Education allowing clients to improve Federal and State compliance and patient safety.

**2002-2010**

**Board Member and Chair of IT Committee.  
STANFORD PACKARD CHILDREN’S HOSPITAL**

While serving on the Board of Directors he guided the hospital transformation to a totally paperless electronic health record, placing it in the top 5% of IT-centric hospitals in the US and has served as a policy advisors and liaison on Health Reform to Congressional Committees and the National Association of Children’s Hospitals (NACH).

**1999 -  
2000**

**Executive Vice President and Chief Administrative Officer  
WELLPOINT HEALTH NETWORKS INC.**

Dr. Gaus was the Executive Vice President and Chief Administrative Officer of WellPoint Health Networks Inc., one of the nation’s largest publicly traded health insurance companies. Reporting to the CEO, he managed a staff of over 3000 employees responsible for all of WellPoint’s physician and hospital networks, medical policy, public affairs, human resources, market research and product branding. He also participated in the organizational restructuring of WellPoint and as part of the Office of Chairman, he participated in the development of corporate-wide planning and budgeting and the corporate strategy for mergers and acquisitions. He also led the development of the company’s e-business and internet strategy.

**1998 –  
1999**

**Senior Vice President, Research & Development  
KAISER PERMANENTE**

He was responsible for national oversight of the clinical and health services research programs, development of long range business plans, and designing and implementing improvements to the health care

delivery system, member's services and national management processes. He reported directly to the CEO of the Health Plan and the Executive Director of the twelve Permanente medical groups. During this time, Clif also co-directed the staff for the Kaiser Hospitals and Health Plan and the Medical Groups that supported the executive leadership as they negotiated and agreed to a turnaround plan to fix a \$400 million unplanned deficit in the finances and a five year plan to financial strength.

**1994 -  
1997**

**Administrator**

**AGENCY FOR HEALTH CARE POLICY AND RESEARCH (AHCPR),  
HHS**

Reporting directly to the Secretary of HHS, AHCPR (now AHRQ) is the lead federal Agency in studying health care organizations, financing, quality and technology. During Clif's tenure, he successfully fought efforts of the 1994 Congress to abolish the Agency by developing a bipartisan advocacy in the Congress and organizing a powerful lobbying consortium of Health Plans, Hospitals (AHA), Physicians (AMA), Professional Associations and academic institutions. He is credited by many as having "saved" the Agency. Clif led the transformation of the Clinical Practice Guideline Program to the federal grant program for Evidence-Based Practice Centers in 1995. This program has evolved into now what is a billion dollar plus federal program of comparative effectiveness. He also established with the AMA and AAHP (AHIP) the National Clinical Practice Guideline Clearinghouse for health plans and professional societies to share their evidence-based guidelines with practitioners and consumers.

Another major priority was improving the voice of consumers in the marketplace. He developed and funded with the managed care industry the CAHPS survey of consumer satisfaction. This quality survey became part of the HEDIS measures and the CAHPS for hospitals (CAHPS-H) is considered one of the most valuable quality indicators of hospital care and is part of CMS's quality management program for Medicare. Expanding IT in healthcare was another priority and he supported numerous initiatives to develop IT standards, clearinghouses, and the plans for a National Health Information Infrastructure. These became the foundation for today's Electronic Health Record (EHR) program. During his tenure, AHCPR also developed new national surveys and public databases in insurance coverage, benefits, expenditures and access which are used by the CBO and private models that estimate the costs of health reform plans.

**1992 -  
1994**      **Senior Advisor, Office of Assistant Secretary for Health  
DEPARTMENT OF HEALTH AND HUMAN SERVICES**

Was responsible for the development of health legislation in the Public Health Service, including the Information Systems, Privacy and Confidentiality, Quality of Care, and Public Health sections of the Administration's Health Reform Plan. Was principle liaison for the Public Health Service with the White House and Congressional Committees and Members.

**1982 -  
1992**      **Health Care Consultant and Business Entrepreneur**

Co-founder and President of the Association for Health Services Research, and Board member for nine years. Senior Consultant and Board member of Corporate Cost Management, Inc., a health insurance computer software firm. President/Chief Executive Officer – Private retail and wholesale companies in the horticultural industry.

**1979 -  
1982**      **Director, Center for Health Policy Studies  
GEORGETOWN UNIVERSITY**

Founded and directed the research and analytical studies of the Center, including studies in HMO Enrollment Selectivity, Medicaid and Philanthropy in Health. Also, while Center Director, taught courses in the Georgetown Medical School and School of Nursing. Lead the formulation and development of the Association for Health Services Research.

**1977 -  
1979**      **Associate Administrator for Policy, Planning and Research  
Health Care Financing Administration (HCFA),  
DEPARTMENT OF HEALTH, EDUCATION AND WELFARE**

In the 1970's, he worked for the Social Security Administration and became the first Associate Administrator for Policy, Planning and Research for the Health Care Financing Administration (HCFA) when it was created in 1977. HCFA was created by the Carter Administration in 1977 based on a proposal that Clif co-authored to the Carter Transition Team advocating the new Secretary of HEW (Joe Califano) create the combined Medicare and Medicaid Agency in the first 100 days of the Administration. His responsibilities included development of policies and legislative plans for the Medicare, Medicaid, PSRO and other

quality programs of HCFA. Examples of legislative and policy areas included – the first Fraud and Abuse Act, Chronic Renal Disease Amendments, Rural Health Clinics and HMO Reimbursement, Primary Care Residency and Section 227 Teaching Hospital Regulations, Hospital Cost Containment, and Medicaid Reform. He was also directly responsible for the research and statistical programs of HCFA, and for the Office of the Actuary.

**1975 – Division of Health Insurance Studies, Social Security  
1977 Administration (SSA), Director of Division,  
and Assistant Director, Division of Health Insurance Studies,  
1973 – Social Security Administration (SSA)  
1975 DEPARTMENT OF HEALTH, EDUCATION AND WELFARE**

Clif is probably best known for his leadership in a broad range of innovations in health care financing and delivery, including the DRG hospital payment system, RBRVS physician payment system, Medicare Hospice Programs and Medicare payment of Physician Assistants. From 1974 to 1979 Clif managed all of the Section 222 Medicare Experiments and Demonstrations and waivers of Medicare program rules. When HCFA was formed, this added the Medicaid demonstration authorities and Section 1115 waivers. The innovative projects that were initiated during this time included statewide prospective hospital payment systems including the Maryland Hospital Cost Commission and the New Jersey DRG based system payment system. He was the architect for making the first Medicare claims data available publically (MEDPAR) and created the rules and processes for accessing the data from outside government. His efforts to release publically individual physician payment data was thwarted by a court injunction in 1979 that lasted for 35 years. This fundamental shift in government policy to share the Medicare data later enabled a huge cadre of population-based health services and clinical research including the Dartmouth Atlas and the Research Data Assistance Center (ResDAC). During the late 1970's his HCFA organization developed a strong in-house analytic capacity to create the DRG payment system for Medicare. By 1980, the HCFA researchers were producing analysis by hospital, community and State of the impact of a DRG payment model but it took two more years for Congress to enact the authority. Other

innovations that were started during his HCFA leadership were the Medicare and Medicaid managed care demonstrations leading up to the Medicare Advantage Program; the development in 1975 of the Medicare Economic Index (MEI) to limit annual increases in physician fees; the analysis and design of the RBRVS physician payment system; demonstration programs and waivers at 26 Hospices across the country to assess the cost effectiveness of hospice care, leading up to legislation in 1982; experimental Medicare reimbursement for Physician Assistants and Nurse Practitioners; and coverage of Clinical Psychology benefits in the Medicare Program.

**1972 - Office of Policy Analysis and Research, Assistant Secretary**  
**1973 DEPARTMENT OF HEALTH, EDUCATION AND WELFARE**

Deputy Director – Principal health policy and planning office in HEW; responsible for manpower, research, health planning, community health centers, etc.

**1971 - President's Science Advisory Council, Health Services**  
**1972 Research Panel**  
**EXECUTIVE OFFICE OF THE PRESIDENT**

On the staff of this Presidential Committee that studied the field of health services management and research and made recommendations regarding future priorities, funding mechanisms and needs for graduate training.

**1969 - Assistant Professor, School of Hygiene & Public Health**  
**1972 JOHNS HOPKINS UNIVERSITY**

Assistant Professor, Department of Medical Care and Hospitals – Director, Research and Development, Columbia Medical Plan. Taught courses in health care administration; advised doctoral students, directed the research, planning and development of the Columbia Medical Plan, an HMO affiliate of Johns Hopkins University in Columbia, Maryland.