

Josh Rising, M.D., M.P.H.

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Physician with extensive leadership and experience in health policy, public health, and health services research. Led projects with a staff of 24 people and budgets of over \$6 million annually. Significant emphasis on project management and developing and executing long-term change strategies. Work has focused on health care delivery and financing issues along with public health priorities, including: opioids, tobacco, oral health, health information technology, medical devices and end-of-life care. Published over twenty peer-reviewed publications and numerous blog posts, testified before Congress and successfully brought in external funding for projects.

Employment

• **Principal, Rising Health Strategies – 2020 –**

- Developed [principles](#) for states and localities to use when determining how to spend moneys obtained as a result of legal actions against opioid manufacturers, distributors and pharmacies. Worked with other key stakeholder groups to refine principles; over 50 external groups have endorsed so far.
- Worked with overnight camps to develop COVID-19 plans to prepare for the summer 2021 session.
- Wrote a Health Affairs [blog](#) with staff from Nemours on priorities to cement reductions in child poverty.

• **Director, Health Care Programs, The Pew Charitable Trusts – 2014 - 2020**

Led numerous multi-disciplinary teams that have successfully advocated for the implementation of evidence-based approaches to improve health outcomes. Under my direction, projects developed and executed diverse strategies including the passage of legislation at the state and federal levels, and promulgation of regulations by executive branch agencies (in particular the Centers for Medicare & Medicaid Services, the Food and Drug Administration, and the Office of the National Coordinator for Health Information Technology). As part of the work, projects have developed private sector coalitions, and conducted novel research.

- Oversaw Pew's projects on substance use prevention and treatment, health information technology, end-of-life care, and oral health.
- Provided strategic guidance, supervise staff and manage budgets, edit and approve publications, and ensure the projects are on track to meet their board deliverables.
- Built and maintained relationships with external funders such that the substance use team received two significant external grants that allowed the expansion of the work.
- Developed the new health information technology project and stewarded it through board approval and renewal.

• **Director, Medical Devices, The Pew Charitable Trusts – 2012 - 2014**

Ran Pew's work to improve medical device safety and innovation.

- Developed and implemented a successful strategic plan to achieve the project's board deliverables, which included:
 - Lobbying Congress to include project priorities in legislation.
 - Advocating for federal agencies—including the Food and Drug Administration, the Office of the National Coordinator for Health Information Technology, and the Centers for Medicare & Medicaid Services—to issue regulations
- As a result of this work, it is easier to detect medical devices with safety risks, and innovative devices can reach patients more quickly.

- **Medical Officer, Office of Policy, Center for Tobacco Products – 2010 - 2012**

I developed and implemented initial plans for engagement between the Center for Tobacco Products (CTP) and state, local and territorial tobacco control programs. I also developed and implemented plans for building relationships with other federal agencies with tobacco control responsibilities, including CDC's Office of Smoking and Health and SAMHSA. I served as a liaison between CTP and the international community, including as the lead within CTP for the trade dispute before the World Trade Organization over clove cigarettes.

- **Health Policy Analyst, Connecticut Senate Democrats – 2008 - 2010**

I conducted analyses and provided recommendations for the Connecticut Senate president pro tempore on key health and human services issues facing the state. Example areas of analysis include: structural and payment reforms in the state's Medicaid program, reforms in the individual and group health insurance markets, nursing home staffing and funding, and health information technology.

- **Robert Wood Johnson Clinical Scholars Program (RWJCSP), Yale University – 2007 - 2008** My areas of research included resilience in children at-risk for chronic disease and interactions between physicians and industry. The coursework in the RWJCSP included biostatistics, clinical and health services research methods, principles and processes of community-based research, and principles of health policy and management.

- **Legislative Affairs Director, American Medical Student Association (AMSA) – 2000 - 2001**

Education and Training

- **Board certification – Pediatrics – 2006.**
- **Pediatric Intern and Resident, Pediatric Leadership for the Underserved Track (PLUS), University of California at San Francisco – 2003-2006.**
- **Boston University, Boston, MA. M.D., M.P.H.**
- **Carleton College, Northfield, MN. BA in History, Cum Laude.**

Selected Testimony and Presentations

- Testified at the Heroin and Synthetic Drug Abuse Hearing held by the House Bipartisan Heroin Task Force on February 6, 2017.
- Plenary lunch presentation at AdvaMed's national conference. October 7, 2014.
- Testified before the Committee on Energy & Commerce, Subcommittee on Health, United States House of Representatives on July 22, 2014

Appendix: Peer-Reviewed Publications

- Banerjee S, Campbell B, Rising J, Coukell A, Sedrakyan A. Long-term active surveillance of implantable medical devices: an analysis of factors determining whether current registries are adequate to expose safety and efficacy problems. *BMJ Surgery, Interventions & Health Technologies*. 2019;1.
- Grannis SJ, Xu H, Vest JR, Kasthurirathne S, Bo N, Moscovitch B, Torkadeh R, Rising J. Evaluating the effect of data standardization and validation on patient matching accuracy. *J Am Med Infor Assoc*. 2019 May 1;26(5): 447-456.
- Ratwani RM, Savage E, Will A, Fong A, Karavite D, Muthu N, Ribera AJ, Gibson C, Asmonga D, Moscovitch B, Grundmeier R and Rising J. Identifying Electronic Health Record Usability and Safety Challenges in Pediatric Settings. *Health Affairs*. Nov 2018;37(11).
- Ratwani RM, Moscovitch B, Rising JP. Improving Pediatric Electronic Health Record Usability and Safety Through Certification: Seize the Day. *JAMA Pediatr*. 2018;172(11):1007-8.
- Moscovitch B, Rising JP. Medical Device Identification in Claims Data. *JAMA*. 2017;318(10):1936-7.
- Wimmer NJ, Robbins S, Ssemaganda H, Yang E, Normand SL, Matheny ME, Herz N, Rising J, Resnic FS. Assessing the cost burden of United States FDA-mandated post-approval studies for medical devices. *J Health Care Finance*. 2016 Summer (Spec Features).
- Rising JP, Moscovitch B. Characteristics of pivotal trials and FDA review of innovative devices. *PLoS One*. 2015;10(2).
- Rising J, Moscovitch B. The Food and Drug Administration's unique device identification system: better postmarket data on the safety and effectiveness of medical devices. *JAMA Inter Med*. 2014 Nov;174(11):1719-1720.
- Reynolds IS, Rising JP, Coukell AJ, Paulson KH, Redberg RF. Assessing the safety and effectiveness of devices after US Food and Drug Administration approval: FDA-mandated postapproval studies. *JAMA IM*. 2014;74(11):1773-9.
- Rising JP, Reynolds IS, Sedrakyan M. Delays and Difficulties in Assessing Metal-on-Metal Hip Implants. *NEJM*. June 20 2012.
- Rising J, Wasson-Blader K. Menthol and the initiation of cigarette smoking. *Tob Induc Dis*. 2011;9(Suppl 1:S4)
- Rising J, Alexander L. Marketing of menthol cigarettes and consumer perceptions. *Tob Induc Dis*. 2011;9(Suppl 1:S2)
- Newacheck PW, Kim SE, Blumberg SJ, Rising JP. Who is at risk for special health care needs: findings from the National Survey of Children's Health. *Pediatrics*. 2008;122(2):347-359.
- Rising JP, Colon-Hopkins C, Neumann A, Kaiser E, Lange D, Thaw R, Katz MH, Fuentes-Afflick E. Healthy Young Adults: description and use of an innovative health insurance program. *J Adolesc Health*. 2007;41(4):350-6.
- Schaefer BM, Rising J, Grande D, Silver-Isenstadt J, National Physicians Alliance Task Force of Prescription Privacy. Why States should ban the sale of physician prescribing data. *J Ambul Care Manage*. 2007;30(3):206-8.

Thyne S, Rising JP, Legion V, Love MB. The Yes We Can Urban Asthma Partnership: A Medical/Social Model for Childhood Asthma Management. *Journal of Asthma*. 2006; 43(9): 667-73.

Newacheck PW, Rising JP, Kim SE. Children at Risk for Special Health Care Needs. *Pediatrics*. 2006; 118: 334- 42.

Agrawal J, Rising JP. Resident Education and Patient Safety. *American Family Physician*. 2002 October 15: 1569-75.

Srinivas SK, Rising JP. The ACGME is Unable to Address Residents' Overwork. *Academic Medicine*. 2001; 76(5): 397.

McClintock TS, Rising JP, Lerner MR. Melanophore pigment dispersion responses to agonists show two patterns of sensitivity to inhibitors of cAMP-dependent protein kinase and protein kinase C. *Journal of Cellular Physiology*. 1996; 167:1-7.

Selected Other Publications

Health Affairs Blog—Creating an Agenda For Children's Resiliency and Health. Kara Odom Walker, Josh Rising, Daniella Gratale. April 21, 2021.

Health Affairs Blog—Methadone Barriers Persist, Despite Decades of Evidence. Alaina McBournie, Alexandra Duncan, Elizabeth Connolly, Josh Rising. September 23, 2019.

Health Affairs Blog—Building Additional Serious Illness Measures Into Medicare Programs. Janet Corrigan, Josh Rising, Tom Valuck. May 25, 2017.

Health Affairs Blog—Time to Fix the Black Hole in Medicare Data. Ben Moscovitch, Josh Rising, Gregory Daniel, Joseph Drozda. June 29, 2016

Other Activities

- **National Quality Forum, Patient Safety Standing Committee – 2014– 2016**
- **National Physicians Alliance (NPA), Board of Directors – March 2007– 2010** The NPA is a membership organization of physicians committed to advancing the core goals of the profession: service, integrity and advocacy.