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REFORMING GOVERNMENT.
EMPOWERING PATIENTS.

2024 Annual Report

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Unpacking The Great Obamacare Enrollment Fraud
How the Exchanges Became the Wild West
Brian Blase
Gabrielle Kalisz
AUGUST 2024

Where Are Provider Shortages?
Reassessing Outdated Methodologies
Bill Finerfrock
APRIL 2024

Healthcare AI Regulation
Guidelines for Maintaining Public Safety and Innovation
Kev Coleman
DECEMBER 2024

HEALTH INSURANCE
CARDHOLDER NAME
TOTAL CARE

What Matters for Health
Insurance is Less Important Than You Think
Dr. Joel M. Zinberg
Liam Sigaud
DECEMBER 2024

Lowering Health Care Costs Through AI
The Possibilities and Barriers
Kev Coleman
JULY 2024

Medicaid Financing
Stopping Discrimination Against the
and Reducing Bias Favoring Wealthy S
Brian Blase, PhD
Drew Gonshorowski

FEBRUARY 2014
Nov. 2023

It's Not Just the Prices
A Plans Have Declined in Quality Over the Past Decade
Greg Fann
SEPTEMBER 2024

Where Are Provider Shortages?
Reassessing Outdated Methodologies
Bill Finerfrock
APRIL 2024

Beyond Box-Checking:
The Case for Dismantling Medicare's Quality Bureaucracy
Joe Albanese
MAY 2024

What Matters for Health
Insurance is Less Important Than You Think
Dr. Joel M. Zinberg
Liam Sigaud
DECEMBER 2024

Unpacking The Great
Obamacare Enrollment Fraud
How the Exchanges Became the Wild West
Brian Blase
Gabrielle Kalisz
AUGUST 2024

Healthcare AI Regula
Guidelines for Maintaining Public Safety
Kev Coleman

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TABLE OF CONTENTS

LETTER FROM THE PRESIDENT

ABOVE: Brian Blase (center) discusses Medicaid and Medicare policy with the members of the GOP Doctors Caucus, September 19, 2024.

For Paragon, winning means achieving meaningful policy change — change that improves the well-being of Americans.

Dear Friend of Paragon:

Although I briefed President Trump in the Oval Office numerous times during his first term, on May 20, 2025, I gave the most pivotal presentation of my career. I was sitting in front of more than 40 Senators for the weekly Wednesday Lunch of the Republican Caucus. I was the sole speaker. I was there to discuss Medicaid reforms that were on the agenda to be included in the One Big Beautiful Bill, which had not yet passed the U.S. House but would likely be under consideration in the Senate soon.

Needless to say, I was nervous. But the invitation to present, my many practice sessions with the Paragon team, and the robust and substantive dialogue that took place in that meeting were the *direct result* of Paragon's planning, preparation, and execution in 2024 and preceding years. In this annual report, we seek to tell you part of this amazing story. Oh, and contrary to expectations, the Senate strengthened the Medicaid reforms that had passed the House — enacting several major policy reforms that were the subject of my lunch remarks.

Since our founding, our mission has never wavered: We want to make a meaningful impact by delivering policy wins. We don't just want to produce research white papers at Paragon. For us, winning means improving the well-being of Americans. This goal requires vision, intellectual integrity, data

rigor, and relentless attention to detail at every stage of policymaking — from research and analysis to outreach and communication. Our unyielding commitment to this approach with every topic and every paper is what distinguishes Paragon in a crowded public policy field. It is also the reason for our successes in 2025.

In the run-up to the 2024 elections, we recognized there were *two* likely outcomes: divided government and unified Republican control in Washington. We knew that if we wanted our reform ideas to be enacted, we had to prepare for both. And that is exactly what we did.

To prepare for the possibility of divided government, Paragon reached across the political spectrum. One of the year's pivotal moments came when I moderated a discussion with two former Health and Human Services (HHS) secretaries, Kathleen Sebelius and Alex Azar. That gathering didn't just elevate Paragon with both Democrats and Republicans — it placed us squarely **on the map of policy relevance**. *The Washington Post* later

wrote: "Now Paragon is at the center of Washington health policy conversations — and potentially for the next four years, as well."

To prepare for the possibility of GOP control of all three branches, we worked to provide critical policy and personnel guidance. I had the honor of serving as the HHS policy transition lead for President Trump — briefing the president's nominees for secretary of HHS and the Centers for Medicare and Medicaid Services. We also helped to set up the administration for success in implementing its agenda. We cultivated deeply productive relationships with administration officials, legislative leaders, and committee staff — strengthening our ability to advance meaningful reforms as policy was discussed and formulated.

My vision for Paragon has always been a place where talent moves fluidly between idea generation and policy execution. Over the past year, that vision came to life. Starting with Drew Keyes departure to the House Speaker's office in 2023, Paragon alumni have

ABOVE: Paragon's Brian Blase addresses an expert crowd at the Johns Hopkins University Symposium on Health Policy, September 11, 2024.

ascended to new positions of influence — Theo Merkel and Dr. Joel Zinberg to the White House, Joe Albanese to CMS, and Drew Gonshorowski to Nebraska Medicaid leadership. Being trusted advisors for key government officials and policymakers remains one of our most effective instruments for shaping policy.

Of course, none of our successes were possible without research excellence. It is the engine that drives Paragon's influence. That's why we work to ensure every study is rigorous, insightful, and relevant to the debates taking place in Congress. In 2024, six major papers showed the impact of these qualities:

ABOVE: Brian Blase pores over his notes one more time on the way to an important presentation

1. *Improving Medicare through Medicare Advantage* — Advocating for increased choice and efficiency within Medicare.

2. *Medicaid Financing Reform* — Proposing fairer formulas and ending biases in federal Medicaid funding.

3. *Follow the Money: How Tax Policy Shapes Health Care* — Analyzing how tax laws affect coverage and markets and offering reforms to empower patients and improve efficiency.

4. *Lowering Health Care Costs Through AI: The Possibilities and Barriers* — Outlining AI's transformative potential to lower costs and elevate care across health systems.

5. *The Great Obamacare Enrollment Fraud* — Exposing surging improper enrollment in ACA exchanges and calling for urgent fixes.

6. *What Matters for Health: Insurance is Less Important Than You Think* — Demonstrating the inefficiencies of public policies overwhelmingly focused on expanding Medicaid.

Each of these publications exemplified our high standards. They challenged assumptions and the status quo. They interrogated data and held government accountable. They translated findings into actionable solutions and real-world reforms.

As you will read in the pages to come, our successes meant that Paragon saw some terrific talent move to new places to advance health care reform. But as in years past, Paragon found new leaders — without losing connection with past colleagues. At the start of 2025, we were privileged to enhance leadership and operational capacity deeply. **Matt Robinson**, now executive vice president, brought impeccable experience from ExxonMobil, Lockheed Martin, and the G.W. Bush White House. **Ryan Long**, our director of congressional relations and senior research fellow, brought deep House and staff relationships along with second-to-none policy expertise — ensuring our insights remain strategically connected to power.

Although this annual report is focused on our planning and research in 2024, it positioned us for our biggest achievement so far as an organization: the landmark One Big Beautiful Bill (OBBB). Signed into law by President Trump on July 4, 2025, the OBBB enshrined more

than 20 Paragon-inspired reforms—including tightening of eligibility reviews for Medicaid and Affordable Care Act, limiting state Medicaid money laundering schemes, expansions of health savings accounts, and imposing community-engagement requirements on able-bodied, working-age adults in Medicaid.

In total, the OBBB stands to reduce federal health care spending by more than $1 trillion over the next decade—and represents the most substantial set of conservative health policy reforms in a generation, if not ever. Thanks to our hard work in 2024, our team was fully embedded in idea development, educating policymakers, and shaping a compelling public narrative that made those reforms a legislative reality.

And yet, **Paragon's journey is just getting started**. Now, our focus turns to execution—working across government to translate Congress's legislative achievements into real-world improvements.

Looking ahead, we are also launching three transformative initiatives designed to advance free markets in three more areas of American health:

1. Our *State Health Reform Initiative* will scale successful free-market ideas in partnership with state leaders and policy organizations with an initial focused on supporting state implementation of OBBB.

2. Our *AI Initiative* will develop thoughtful policy and regulatory frameworks at the federal and state levels to harness artificial intelligence for better and more affordable care.

3. Our *Life Sciences Initiative* will advocate FDA modernization to accelerate patient access to breakthrough treatments.

For me, 2024 will always stand out—learning from brilliant colleagues, seeing our work echo through the halls of power, and witnessing our ideas get put into law. Each time a law or a regulation moves, I remember the quiet moments in our Arlington offices—late nights sharpening analysis, trading numerous versions of reports back and forth with the team, the hum of Zoom calls with Hill staff, and the belief that, if we work harder and smarter, we can help enact policies that empower patients and improve government programs.

We've proven that Paragon can win. With your continued partnership, we'll continue to advance necessary reforms—one idea, one conversation, one breakthrough at a time.

With gratitude and resolute determination,

President,
Paragon Health Institute

PARAGON HEALTH INSTITUTE:

BY THE NUMBERS

IN 2024, PARAGON HAD ITS BEST YEAR YET, AND LAID THE FOUNDATION FOR EXTRAORDINARY SUCCESS IN 2025.

Highlighted outlets that published at least one op-ed by Paragon's experts:
The Wall Street Journal, *City Journal*, *Forbes*, *National Review*, Townhall, *Washington Examiner*, and *The Washington Times*.

Highlighted outlets that quoted Paragon's experts or mentioned our work:
The Wall Street Journal, *The Washington Post*, *The New York Times*, Associated Press, *The Atlantic*, *Axios*, *Bloomberg*, *Breitbart*, CBS News, *Daily Caller*, Fierce Healthcare, *Forbes*, Fox News, *The Hill*, *HuffPost*, Inside Health Policy, Investopedia, *Miami Herald*, NPR, *National Review*, *New York Post*, Newsmax, *Politico*, PolitiFact, RealClearHealth, *Rolling Stone*, STAT, and Thomson Reuters.

Our experts appeared on the following TV and radio programs:
C-SPAN, C-SPAN's *Washington Journal*, Fox News, *Hold These Truths with Dan Crenshaw*, NPR, *The Sean Hannity Show*, and Voice of America.

In 2024, Paragon launched two new products on its website:
The Paragon Pic makes health policy easier to see and understand by demonstrating with images what researchers would normally try to explain with a lecture or text.
The Paragon Prognosis blog offers quick-hitting analyses to help readers stay up to date with the most important issues impacting health care policy reform.

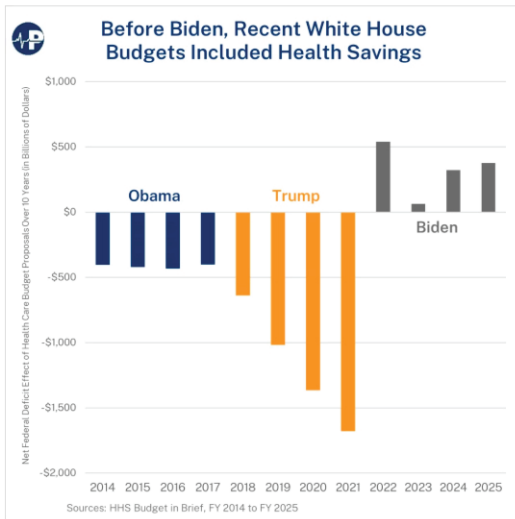|	
MEDIA APPEARANCES ON TV, RADIO, AND PODCASTS	**19**
RESEARCH PAPERS	**16**
POLICY BRIEFS	**5**
OP-EDS	**45**
CONGRESSIONAL TESTIMONIES	**4**
UNIQUE CONGRESSIONAL HEALTH POLICY EDUCATION ATTENDEES	**401**

PARAGON PIC

Before Biden, Recent White House Budgets Included Health Savings

On March 11th, President Biden released the final budget request of his term. These annual White House budgets include a policy wish list that can provide important insight into an administration's

Show More

PARAGON PROGNOSIS

MEDICAID

Nursing Bad Policy

📅 May 13, 2024   ✍ Jackson Hammond

🏷 Long-Term Care (LTC), Nursing Homes, Retirement

On April 22, the Biden administration finalized a rule mandating minimum staffing levels for nursing homes. The controversial new rule is expected to cost the industry, federal and state governments, and patients more than $43 billion over 10 years. Key questions include: Who is paying for all this, and where are facilities going to find staff? Let's explore the rule and the questions it raises.

READ ARTICLE

NEWSLETTER SUBSCRIBERS 3256
GROWTH FROM 2023: 52%

WEBSITE VIEWS 233K
GROWTH FROM 2023: 205%

UNIQUE WEBSITE VISITORS 93K
GROWTH FROM 2023: 237%

MENTIONS OR QUOTES IN EXTERNAL MEDIA OUTLETS 283
GROWTH FROM 2023: 415%

X (TWITTER) FOLLOWERS 869
GROWTH FROM 2023: 66%

LINKEDIN FOLLOWERS 2016
GROWTH FROM 2023: 198%

FROM COFFEE TO CONGRESS: GROWING NEW TALENT THE PARAGON WAY

Anthony Wojtkowiak
Director of Communications and Operations, Paragon Health Institute

The potential of free markets is always the opportunity to change lives for the better, unfettered by top-down rules that dictate who may or may not pursue a new venture.

The first time Mitchell Shedd changed *my* life, he served me a mochanut latte.

Mitch was the barista at a coffee shop close to my office, and a nice person to talk to on breaks. I had been ordering the raspberry mocha latte from the public menu, and I was quite satisfied with the mix of cocoa and berry tartness. But after several wide-ranging *kaffeeklatsch* talks with Mitch — from a full lesson on pour over coffee to the interplay between politics and corporate branding — he let me in on a little secret: There were flavors beyond those posted for consumption by the masses. His favorite, he said, was a combination of coconut and chocolate, a "mochanut" latte, a Mounds in a cup. I tried it. I was hooked.

Every coffee break from that day forward, I got the secret mochanut latte. And through some wide-ranging discussions, I learned more about Mitch while telling him about Paragon's work. He was a fantastic informal student, in no time mastering the difference between Medicare and Medicaid, and then the ins and outs of post-COVID Medicaid redeterminations. Like a caffeinated Will Hunting, not only could he explain in detail how all of the Nuova Simonelli equipment worked, he could sponge up the knowledge of Paragon's policy experts and update Wordpress websites — and I needed more help with Paragon's Wordpress website. So, when he told me that he was going to stop grinding beans and was going to start grinding as a freelancer, I suggested that Paragon should be his first client.

He hit the ground running and was so helpful so quickly that I promptly increased his responsibilities (with the proper guardrails, of course). With my review and approval, I let him write content for Paragon's Twitter account, and as the weeks wore on, I gave him social media objectives so he could fly on his own, checking in with him at a weekly strategy meeting. It wasn't long before Paragon became his *only* client. That was the second time that Mitchell Shedd changed my life.

The best career coaches say that entrepreneurs should "work to learn." I'm not sure if Mitch read that too or if he was born with

ambition, but he took that maxim to heart. In his free time, he would teach himself new skills using the tools Paragon provided. He trained himself to use Adobe Illustrator and Photoshop, making thumbnail images for the Paragon Prognosis blog. He watched YouTube and read forums to make our newsletter look better in both HTML *and* Outlook (which is no small feat for those in the know). He crafted the issue library on the Paragon website and taught *me* new ways of using our page builder plugin.

And to think he was making coffee just a short time before. Consider all of the applicant tracking systems that reject resumes because they aren't *perfect*, with every keyword matching, qualified but not *too* qualified.

Their loss was our gain: Mitch was exactly who Paragon needed, and he only got better with time. Because of him, Paragon became faster, more innovative, and more influential in health policy debates.

And then Mitch Shedd changed my life again. He told me he was going to work on the Hill as a communications director in the House of Representatives. I wasn't surprised — with Mitch's strong work ethic and his growth mindset, I knew he was destined to take on even bigger challenges.

It's tough to lose an amazing employee and friend. The gap they leave is not just what that person *does* — it pulls a root out of the soil of team morale, at least for a little while. But the sadness of loss is soon replaced by the joy of progress. Good companies recognize that they may only get to nurture amazing people for a short time. Yet with each departure comes the hope of developing another budding star.

ABOVE: Great minds think alike! Paragon's Mitchell Shedd (left) and Anthony Wojtkowiak (right) capture an unplanned moment of fashion synergy.

Ultimately, that's the message of free markets: Given opportunity, remarkable people can dare and achieve remarkable things. Hard work is important, but so is good fortune. It's our duty as entrepreneurs to build a culture of opportunity so that people can apply their talents and make the world a better place.

Mitchell Shedd is a living embodiment of the Paragon Approach — hire promising talent, empower them to be entrepreneurial and creative, and give them the tools and support to grow and succeed. Often that means taking a risk on a person with the right attitude and aptitude, providing them with key support and critical feedback, and recognizing that the credentials will come with time, practice, guidance, and gumption. The best part of investing in lifelong learners is that they help reinforce a culture that respects ideas, values innovation, and builds up your team.

So with that I raise a toast — perhaps a warm mochanut latte — to Mitch. Thanks for changing my life, again and again.

OUR INITIATIVES

At the Paragon Health Institute, we have put in place four major initiatives to guide our research and to focus our policy recommendations.

The major initiatives are:

- Medicare Reform;
- Medicaid and Healthy Safety-Net Reform;
- Private Health; and
- Public Health and American Well-Being.

ABOVE: Paragon's Joe Albanese (right) explains his proposals for improving Medicare through Medicare Advantage to (from left to right) US Representatives Michael Burgess, Greg Murphy, and Brad Wenstrup during a meeting of the GOP Doctors Caucus, September 19, 2024.

They cover the largest areas and most important parts of the U.S. health sector — and they all need free market reforms to increase choice, competition, and efficiency.

We purposely put in place directors in each of these areas who have proven themselves as accomplished researchers and experienced government policymakers.

The result is a unique think tank that puts forward evidence-based, actionable solutions with a speed and decisiveness that shapes the policy landscape in real time.

PRIVATE HEALTH REFORM INITIATIVE

ROOTING OUT ACA FRAUD AND EXPANDING CONSUMER-DRIVEN HEALTH CARE OPTIONS

INITIATIVE: The Private Health Reform Initiative focuses on putting patients — not insurers or bureaucracies — at the center of American health care. Federal policy continues to funnel hundreds of billions of taxpayer dollars to big corporate interests with little to show in terms of better health outcomes for Americans. The Affordable Care Act's (ACA's) mandates and complex rules drive increased consolidation and contribute to high and rising hospital prices. Rather than a government-centric approach, policy should empower Americans with greater control over health care financing, expand options for coverage and care, and foster a more transparent and competitive market — while ending perverse incentives that have fueled unprecedented waste and fraud.

Featured Paper: *The Great Obamacare Enrollment Fraud*

AUTHORS: Brian Blase & Drew Gonshorowski

RELEASE DATE: June 19, 2024

KEY TAKEAWAYS: In 2021 and 2022, President Biden signed legislation that significantly increased ACA premium tax credits (PTCs), making exchange plans fully subsidized for enrollees with incomes between 100 and 150 percent of the federal poverty level (FPL). Our empirical analysis revealed how enhanced subsidies led to a surge in fraudulent enrollment. In several states, the number of sign-ups reporting an income between 100 and 150 percent FPL exceeded the total number of residents earning income in that range. Fraudulent exchange enrollment is a significant problem, likely costing federal taxpayers upwards of $20 billion in 2024 alone, while benefiting unscrupulous brokers and health insurers. In this paper, Brian Blase and Drew Gonshorowski explained how broken incentives led to large-scale fraud, quantified the problem, urged Congress to let the enhanced subsidies expire as scheduled after 2025, and shared five additional recommendations to reduce fraudulent enrollment and increase program integrity.

The Great Obamacare Enrollment Fraud
Brian Blase, PhD   Drew Gonshorowski
PARAGON HEALTH INSTITUTE   JUNE 2024
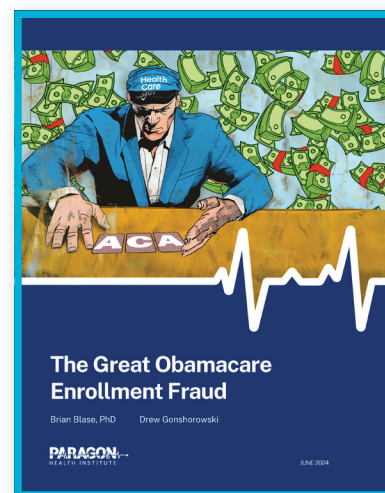
Featured Paper: *Unpacking The Great Obamacare Enrollment Fraud: How the Exchanges Became the Wild West*

AUTHORS: Gabrielle Kalisz & Brian Blase

RELEASE DATE: August 7, 2024

KEY TAKEAWAYS: On the heels of *The Great Obamacare Enrollment Fraud*, several brokers and agents contacted Paragon with additional details regarding fraudulent Obamacare exchange enrollment. With their information, Paragon uncovered systemic flaws that allow unscrupulous brokers to enroll ineligible individuals in heavily subsidized plans — often without the individual's knowledge or consent. The research reveals how weak oversight, lack of income verification, and perverse financial incentives created a policy storm for rampant fraud and waste. To address these concerns, Gabrielle Kalisz and Brian Blase recommend that the Department of Health and Human Services (HHS) implement rules for income verification.

Unpacking The Great Obamacare Enrollment Fraud
How the Exchanges Became the Wild West
Brian Blase   Gabrielle Kalisz
PARAGON HEALTH INSTITUTE   AUGUST 2024

IMPACT: Paragon's papers *The Great Obamacare Enrollment Fraud* and *Unpacking The Great Obamacare Enrollment Fraud* prompted swift, significant, and ongoing action from the Centers for Medicare & Medicaid Services (CMS) and Capitol Hill to tackle fraudulent enrollment and spending in the ACA exchanges. Notably, a March 2025 proposed CMS rule — the genesis of which was developed through Paragon-commissioned work — uses our research papers as a basis for reforms aimed at rooting out improper enrollments in the exchanges. In June 2025, CMS finalized the rule, mentioning Paragon 21 times. This rule is projected to lower ACA premiums by up to 5 percent and reduce improper enrollment by up to two million people.

Featured Events: Follow the Money: How Tax Policy Shapes Health Care

DATES: June 11, 2024 and July 17, 2024

PANELISTS:

- Brian Blase, Paragon Health Institute
- Theo Merkel, Paragon Health Institute
- Alye Mlinar, Mehlman Consulting

ABOVE: During a panel discussion at the Johns Hopkins University Symposium on Health Policy, Paragon's Theo Merkel (left) and US Representative Kevin Hearn (center) listen to remarks from US Senator Bill Cassidy (right), September 11, 2024.

OVERVIEW: Paragon hosted two events — an in-person event on the Hill and a virtual event — focused on how tax policy impacts the quality, affordability, and availability of health care services. The discussion centered on a major Paragon report coauthored by Theo and Brian, *Follow the Money: How Tax Policy Shapes Health Care*. The paper reviewed how tax policy shaped health care over the past 75 years, including an in-depth economic analysis as well as reform recommendations. At the events, the panelists reviewed the significance and history of 10 key health tax provisions and laid out a set of important principles for reform along with specific reforms to PTCs, Health Savings Accounts (HSAs), and Individual Coverage Health Reimbursement Arrangements (ICHRAs).

Team Member Spotlight: Theo Merkel

One of the most creative, principled, and influential health policymakers in the country, Theo was a senior research fellow at Paragon, where he led the Private Health Reform Initiative for two years, until rejoining the White House in January 2025. Theo, who also served President Trump during his first term, now advises the president as a Special Assistant for Domestic Policy at the Domestic Policy Council. In this role, Theo leads the process for health policy development, advising President Trump and senior White House and executive branch officials.

During his time with Paragon, Theo testified before Congress twice, wrote three research papers, authored four op-eds, and presented at five of Paragon's Congressional Health Policy Education Program events. Theo's work at Paragon was consistently referenced by the media, including *The New York Times*, *The Washington Post*, the Associated Press, *Forbes*, *Axios*, and *HuffPost*.

MEDICAID REFORM INITIATIVE

FROM EXPANSION TO EFFICIENCY: RETHINKING MEDICAID'S ROLE AND REACH

INITIATIVE: In 2024, Paragon deepened our focus on Medicaid reform, spotlighting the need to improve program integrity, enhance fiscal accountability, and ensure resources are directed to those who truly need them. Our research has highlighted perverse incentives that drive massive amounts of spending without improving health outcomes for low-income, vulnerable enrollees. In particular, our research exposed the risks and costs of unverified enrollment, showing how millions of ineligible enrollees divert vital funds away from low-income children, pregnant women, seniors, and individuals with disabilities.

Paragon's work illuminates the urgent need for eligibility verification to curb improper payments, which have ballooned to unprecedented levels. We also call for prioritizing Medicaid long-term care for those in genuine need instead of wealthy heirs who know how to game the system. By analyzing funding disparities between wealthy and poor states, as well as the effects of ACA expansion, Paragon has outlined actionable strategies to recalibrate Medicaid spending and better support the truly vulnerable.

Featured Paper: *Medicaid Financing Reform: Stopping Discrimination Against the Most Vulnerable and Reducing Bias Favoring Wealthy States*

AUTHORS: Brian Blase & Drew Gonshorowski

RELEASE DATE: July 24, 2024

KEY TAKEAWAYS: Medicaid's open-ended federal funding has driven unsustainable growth that favors able-bodied, working-age adults over the most vulnerable and advantages wealthier states. As a solution, this paper proposes ending the funding disparity that provides states with seven times more federal funding per dollar spent on able-bodied, working-age adults than on the most vulnerable. Our proposal phases down the 90 percent Federal Medical Assistance Percentage (FMAP) for able-bodied, working-age adults by 2034 and would transition nearly half of Medicaid expansion enrollees into the ACA exchanges with a large premium subsidy. A second proposal would reduce the funding disparity that benefits wealthier states. All told, these reforms would save roughly $600 billion, replace Medicaid with exchange coverage for millions, and encourage states to take more responsibility for Medicaid spending and outcomes, particularly for wealthier states.

IMPACT: Following the 2024 election, this paper was widely cited by major news outlets including *The Wall Street Journal*, *The New York Times*, *The Washington Post*, and *Axios*, in large part because Medicaid reform has become the focus of policymakers looking to target waste, fraud, abuse, and corporate welfare. This paper is the basis for Paragon's oft-repeated messaging that states receive seven times more federal funding for each $1 of state Medicaid spending on able-bodied, working-age adults than they receive for each $1 of state Medicaid spending on the disabled, the elderly, pregnant women, or children. Legislation inspired by Paragon's work was also introduced by nearly 20 members of the House of Representatives and pushed by many more for consideration in the One Big Beautiful Bill. Although the specific FMAP reforms were not included in the final bill, many of the adopted provisions — such as work and community engagement requirements for able-bodied, working-age ACA expansion enrollees; more frequent eligibility reviews for ACA expansion enrollees; and a phasedown of the provider tax gimmick in states that adopted the ACA expansion — address the main problem.
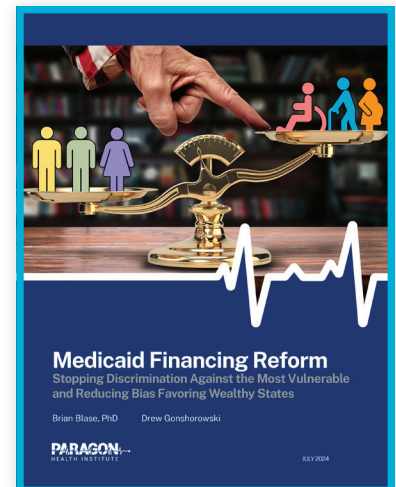
Featured Event: Long-Term Care — The Problem and The Solution

DATE: January 9, 2024

PANELISTS:

- Stephen A. Moses, Paragon Visiting Fellow
- Richard W. Johnson, Urban Institute
- Mark J. Warshawsky, American Enterprise Institute

MODERATORS:

- Ken Dychtwald, Age Wave
- Brian Blase, Paragon Health Institute

OVERVIEW: This online event — Paragon's most widely-attended webinar in 2024 — examined the growing crisis in long-term care. The panelists explored how Medicaid has shaped a dysfunctional system that favors substandard nursing homes and discourages private retirement preparation. The discussion focused on how to remove disincentives for private long-term care planning and how to improve care quality, security, and sustainability for aging Americans.

ABOVE: Paragon's Drew Gonshorowski speaks to the GOP Doctors Caucus about his Medicaid research, September 19, 2024.

Featured Event: The Need to Reform Health Entitlements for a Sustainable Federal Budget

DATE: April 25, 2024

PANELISTS:

- Phillip Swagel, Congressional Budget Office
- Brian Blase, Paragon Health Institute

OVERVIEW: This lunch briefing brought together leading voices in fiscal and health policy to examine major problems facing the federal budget. The discussion emphasized that entitlement reform, particularly in health care, is essential to stabilizing long-term federal debt. The CBO director and Brian both emphasized the urgent need for structural reforms in Medicare and Medicaid. As highlighted in research by Paragon, health entitlements and interest on the national debt are the two largest drivers of deficits. Without meaningful reforms, the federal government risks imminent and severe financial consequences, including potential austerity and debt crises.

Team Member Spotlight: Drew Gonshorowski

The co-creator of the Paragon Pic and once Paragon's leading data analyst, Drew served as a senior research fellow at Paragon Health Institute from September 2022 to December 2024. He co-authored two of 2024's major research papers: *Medicaid Financing Reform: Stopping Discrimination Against the Most Vulnerable and Reducing Bias Favoring Wealthy States* and *The Great Obamacare Enrollment Fraud*. His work helped lay the foundation for policy reforms that protect the truly vulnerable Medicaid enrollees and the hard-working Americans who fund the program.

In December 2024, he was appointed director of the Division of Medicaid and Long-Term Care at the Nebraska Department of Health and Human Services, where he now leads the Cornhusker State's largest welfare program.

MEDICARE REFORM INITIATIVE

MODERNIZING MEDICARE THROUGH CHOICE, COMPETITION, AND FISCAL DISCIPLINE

INITIATIVE: One-size-fits-all policies cannot address each American's unique health care needs. The Medicare Reform Initiative aims to address Medicare's unsustainable fiscal path and deliver a program of greater value to seniors and taxpayers. Our policy proposals would reduce wasteful spending, tackle distortions that lead to consolidation, and support seniors' choice of affordable coverage options in Medicare Advantage. Without reform, Medicare will impose a heavy debt burden on younger generations of Americans. Our policy efforts are focused on bending the cost curve, particularly excessive payments captured by special interests. Given Medicare's outsized role in shaping our health sector, the Initiative also promotes policies that advance price and quality transparency, cut red tape, and empower practitioners to practice at the tops of their licenses.

Featured Paper: *Improving Medicare Through Medicare Advantage*

Improving Medicare Through Medicare Advantage

Joe Albanese

PARAGON HEALTH INSTITUTE   FEBRUARY 2024

AUTHOR: Joe Albanese

RELEASE DATE: February 21, 2024

KEY TAKEAWAYS: Medicare is on an unsustainable fiscal trajectory, with its hospital insurance trust fund expected to be insolvent within the next decade. Retiring baby boomers, rising health care costs, and waste within the program's core structure will increase fiscal pressures. More than 60 million Americans currently rely on Medicare for health care coverage — and over half of them are in Medicare Advantage (MA).

MA offers higher-value care, increased competition, and enhanced patient choice, making it an ideal vehicle for reforming the entire program. Policy changes will help to improve plan competition, beneficiary choice, and program efficiency, allowing MA's continued growth to offer a viable alternative to the flawed fee-for-service program. This paper proposes a path forward for the program by examining the inherent flaws of traditional Medicare, diving into the structure and key issues surrounding MA, and recommending a policy package to build on MA's success and save taxpayers at least $250 billion over a decade.

IMPACT: Shortly after release, *Axios Pro* and *Axios Vitals* featured the paper in their newsletters, publishing a quote from a Brookings Institution scholar who said the recommendations in the paper had "bipartisan appeal." The cross-party potential of the paper was further solidified by a Paragon virtual event featuring experts from Brookings, Manhattan Institute, and Committee for a Responsible Federal Budget (CRFB). Paragon engaged policymakers in the discussion with a Congressional Health Policy Education Program event covering the paper's proposals for MA reform. Additionally, Joe published an op-ed in the *Washington Examiner* that further emphasized the urgency of reform, writing, "the program's rising costs and expected insolvency within the next five to 10 years will demand attention in the next presidential term."

Featured Event: Medicare Site-Neutral Payments: A Commonsense, Bipartisan Reform

DATE: July 29, 2024

FIRST PANEL:

- Alex Azar, Former HHS Secretary under President Trump
- Kathleen Sebelius, Former HHS Secretary under President Obama

MODERATOR:

- Brian Blase, Paragon Health Institute

SECOND PANEL:

- Joe Albanese, Paragon Health Institute
- Loren Adler, Brookings Institution
- Ben Ippolito, American Enterprise Institute
- Andrea Ducas, Center for American Progress

MODERATOR:

- Rachel Cohrs Zhang, STAT

ABOVE: Paragon's Joe Albanese addresses the GOP Doctors Caucus, September 19, 2024.

OVERVIEW: Paragon welcomed former HHS Secretaries of different political parties — Sebelius and Azar — to headline an event and demonstrate strong bipartisan support for site-neutral payments in Medicare. Brian moderated a compelling discussion between the two secretaries, where they discussed why Medicare should not pay more for a treatment delivered at a hospital outpatient department than the same treatment delivered in a doctor's office. During a second panel, experts from across the political spectrum agreed that designating equal payments for equivalent health care services, regardless of setting, is a crucial step to reducing health care costs for patients and taxpayers.

Following the event, the press took note of Paragon's ascendance in the health care policy space, with Dan Diamond of *The Washington Post* remarking, "Paragon is at the center of Washington health policy conversations – and potentially for the next four years, as well."

Team Member Spotlight: Joe Albanese

Joe served as a senior policy analyst at Paragon Health Institute from the summer of 2022 through early 2025. During his time at Paragon, Joe developed into one of the nation's most prolific health policy experts, where he critically examined Medicare policies and developed thoughtful Medicare reforms. In addition to *Improving Medicare Through Medicare Advantage*, Joe produced several research papers in 2024, including *Reducing Government Subsidies for Wealthier Medicare Enrollees* and *Beyond Box-Checking: The Case for Dismantling Medicare's Quality Bureaucracy*. Joe testified before Congress twice and wrote a total of seven research papers during his 20 months at Paragon, establishing a legacy of excellence that carried him into a new role where he could have an even greater impact serving his country.

In February 2025, Joe joined the Centers for Medicare and Medicaid Services, as policy advisor. As of this writing, Joe has already been promoted to director of policy at the Center for Medicare at CMS.

PUBLIC HEALTH AND AMERICAN WELL-BEING INITIATIVE

RESTORING TRUST, REFOCUSING INSTITUTIONS, AND RECLAIMING MEDICAL FREEDOM

INITIATIVE: Paragon's Public Health and American Well-Being Initiative focuses on advancing public policies that improve the holistic well-being of individuals and families. The Initiative has done significant work to examine how public health agencies failed during the Biden administration: becoming politicized, sharing misleading and biased information during the pandemic, and damaging trust in public health agencies. We produced several papers in 2024 on strategies to refocus the Centers for Disease Control and Prevention (CDC) to combat infectious diseases. We also developed and published a paper in 2025 to address systemic problems at the National Institutes for Health (NIH). More broadly, the Initiative aims to improve American health through policies that unleash U.S. medical innovation by removing counterproductive government regulations; empower choice with transparent information for patients; and promote competition by streamlining approval pathways for drugs and devices.

Featured Paper: *What Matters for Health: Insurance is Less Important Than You Think*

AUTHORS: Dr. Joel Zinberg and Liam Sigaud

RELEASE DATE: December 3, 2024

KEY TAKEAWAYS: For decades, health policy in the United States has prioritized expanding health insurance coverage through public programs, at enormous cost to hard-working American taxpayers. Policymakers assumed that coverage would increase access to care, which would in turn improve health. In fact, there is little evidence that expanded government health insurance programs lead to better health outcomes. Multiple studies, including randomized experiments, have shown that public insurance expansions increase the amount of health care used, but fail to show that increases in medical care consumption, like going to the doctor more frequently, *cause* improved physical health or decreased mortality. Instead of continuing to pursue costly expansions of public health insurance and subsidies to insurers, policymakers should focus on factors that have a demonstrably beneficial effect on morbidity and mortality, such as promoting healthy behaviors and increasing medical innovation.

IMPACT: *What Matters for Health* was cited by *The New York Times* as an influential study that helped inform the landmark health reforms in the One Big Beautiful Bill. The paper was also referenced in a *Wall Street Journal* story that notes that "Americans aren't healthier" despite the U.S. "spending $2 trillion more on healthcare than in 2010." Finally, the paper was mentioned in an article by *Axios*, which noted "chronic disease" is a priority for President Trump in his second term.
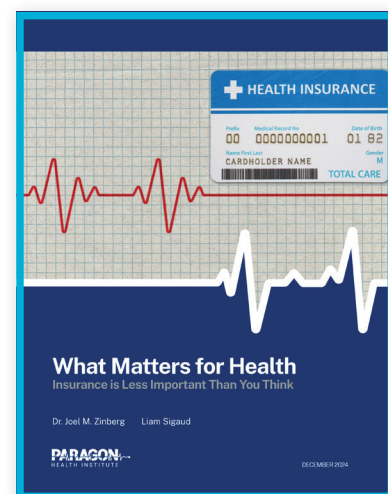
Featured Event: Blind Spots: When Medicine Gets It Wrong, and What It Means for Our Health

DATE: October 1, 2024

PANELISTS:

- Dr. Marty Makary, Paragon Public Advisor
- Brian Blase, Paragon Health Institute

OVERVIEW:

Dr. Marty Makary, former Paragon Public Advisor and current head of the Food & Drug Administration (FDA), discussed his new book, *Blind Spots,* with Brian Blase at a lunch briefing on Capitol Hill.

When modern medicine issues recommendations based on good scientific studies, it shines. Conversely, when interpreted through the harsh lens of opinion and edict, medicine can mold beliefs that harm patients and stunt research for decades. The discussion on Blind Spots showcased examples of times when medical consensus was wrong but domineering, how medical recommendations can be warped by politics and dogma, and how reformers can harness sound science to advance public health.

ABOVE: Paragon's Joel Zinberg takes questions from an audience of Hill staffers, July 24, 2023.

Team Member Spotlight: Dr. Joel Zinberg

Joel was one of Paragon's founding policy experts. He previously led Paragon's Public Health and American Well-Being Initiative, where his prolific writing frequently landed in major media outlets including *The Wall Street Journal*, *National Review*, and *City Journal*. Additionally, Joel authored several of Paragon's most important research papers, and he provided valuable guidance on strategies to restore public trust in federal programs.

In January 2025, Joel was appointed as a Special Assistant to the President for Economic Policy at the White House's National Economic Council, where he is responsible for advising President Trump and helping to coordinate health policy across the executive branch.

ABOVE: Dr. Joel M. Zinberg and Dr. Marty Makary address the audience at Paragon's Health Policy Bootcamp, February 23, 2023.

ARTIFICIAL INTELLIGENCE

HARNESSING INNOVATION TO LOWER COSTS AND IMPROVE CARE

INITIATIVE: In 2024, Paragon began publishing work detailing how artificial intelligence (AI) can lower health care costs, reduce waste, and improve the quality of health services. With the unsustainable trajectory of health care spending and abundance of low value or counterproductive care, AI holds the potential to bring greater efficiency and better outcomes. Paragon's work highlights where AI can drive productivity, expand access, and support autonomous care. Through research and public testimony, Paragon is helping shape a policy environment that promotes the cutting–edge of innovation.

Featured Paper: *Lowering Health Care Costs Through AI: The Possibilities and Barriers*

AUTHOR: Kev Coleman

RELEASE DATE: July 10, 2024

KEY TAKEAWAYS: This paper examines the growing role of AI in health care and evaluates its true potential to lower medical costs. As U.S. health spending continues to rise at an unsustainable rate, AI is often promoted as a solution. Kev cuts through the hype to identify three key areas where AI can drive savings: administrative productivity, improved clinical outcomes, and autonomous self-service care. However, challenges such as rigid network payment systems and regulatory overreach could prevent savings from reaching patients. To preserve AI's ability to lower costs, the paper offers specific policy recommendations, including creating a regulatory framework that allows autonomous AI to operate independently when proven safe and effective. It also means shaping intellectual property rules to support innovation while limiting abusive patent practices. This paper urges policymakers to make affordability a central goal in the governance of AI in health care.

IMPACT: Following the release of his paper, Kev testified before the Texas House Committee on Insurance on the role of artificial intelligence in health care. His testimony helped inform state-level discussions on how emerging technologies could reduce costs and improve quality of care.
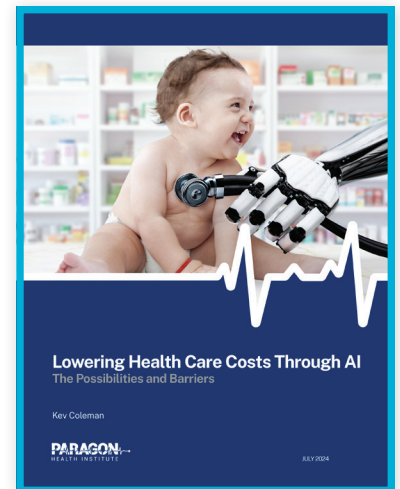
Featured Event: Lowering Health Care Costs Through AI

DATE: July 31, 2024

PANELISTS:

- Kev Coleman, Paragon Health Institute
- Joel Zinberg, Paragon Health Institute
- Adrian Aoun, Forward
- Mark Sendak, Duke Institute for Health Innovation

OVERVIEW: This virtual event explored findings from Paragon's paper, *Lowering Health Care Costs Through AI: The Possibilities and Barriers.* The panel examined how artificial intelligence could help reduce costs while improving quality. Entrepreneurs shared real-world AI applications and debated its limitations in modern care delivery.

Team Member Spotlight: Kev Coleman

Kev Coleman, a veteran of multiple technology companies, directs Paragon Health Institute's work on artificial intelligence policy. In 2024, he wrote two research papers about AI in health policy, including *Healthcare AI Regulation: Guidelines for Maintaining Public Safety and Innovation*. These papers were featured in industry publications including *Inside Health Policy* and Fierce Healthcare. Kev is also an expert on health insurance and has authored several publications for Paragon on the benefits of association health plans. A technical maven and search engine optimization (SEO) expert, Kev helped transform Paragon's website to make it more useful for policymakers and the public.

ABOVE: Paragon's Kev Coleman discusses AI at *Politico*'s 2025 Health Care Summit, April 2, 2025.

Figure 2: An Artificial Neural Network Diagram
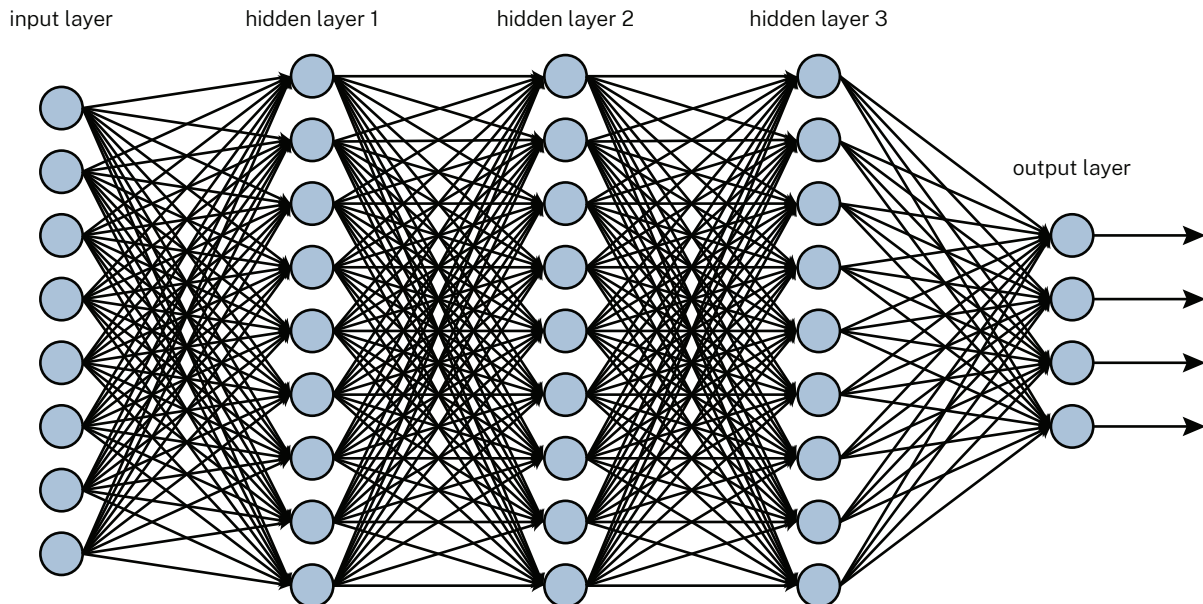
SOURCE: National Energy Research Scientific Computing Center document Peter Harrington and Steven Farrell, "Scientific Deep Learning on Perlmutter," National Energy Research Scientific Computing Center, January 7, 2022, p. 3, https://www.nersc.gov/assets/Uploads/Deep-Learning-on-Perlmutter.pdf.

NOTE: Adapted from the original by National Energy Research Scientific Computing Center.

ABOVE: A diagram of an artificial neural network as featured in Paragon's research paper *Lowering Health Care Costs Through AI: The Possibilities and Barriers*.

PARAGON HEALTH INSTITUTE:
FINANCIALS

At Paragon, we are deeply grateful to our supporters, who have trusted us to take their generosity and convert it into real-world results that make our nation stronger. Every day, we work to honor the confidence placed in us by producing high-integrity research, high-quality communications, and high-impact policies. And thanks to our charitable partners, we are continually thinking bigger, working faster, and pushing harder to deliver on our commitment to reform government and empower patients.

MANAGEMENT & GENERAL
$204,350
7%

FUNDRAISING
$85,697
3%

TOTAL EXPENSES

PROGRAM SERVICES
$2,532,488
90%

PARAGON ANNUAL EXPENDITURES	2021	2022	2023	2024
Program Services	$131,167	$1,047,970	$1,945,053	$2,532,488
Management and General	$69,230	$491,585	$351,605	$204,350
Fundraising	$4,290	$84,512	$91,148	$85,697
Total Expenses	**$204,687**	**$1,624,067**	**$2,387,806**	**$2,822,535**

CONGRESSIONAL HEALTH POLICY EDUCATION PROGRAM

Now a hallmark of Paragon's work, the widely popular Congressional Health Policy Education Program (CHPEP) continues to inform hundreds of key congressional staffers who shape our nation's policies. In 2024 alone, the CHPEP's events and panels offered 401 unique attendees the opportunity to learn from top-notch thought leaders as they shared key health policy insights and simplified complex health care realities. Led by Paragon's experts as they dialogued with previous HHS Secretaries, the current Commissioner of the FDA, current and former Senior Policy Advisers for three different Speakers of the House, and several other giants within the world of health policy, CHPEP events emboldened and equipped attendees to begin work on a broken, inefficient health care system — one in desperate need of reform.

By supporting key congressional staff as they seek to incorporate Paragon principles into their policymaking process, CHPEP is actively working to educate and build up the next generation of national health policy leaders. Offering a venue for staffers to grapple with the deep complexities of government health programs, to ask their most pressing questions, and to leave with real solutions, CHPEP events make health policy approachable. To this end, in 2024 CHPEP hosted several in-depth discussions highlighting the future of health policy, strategies to strengthen Medicare through Medicare Advantage, and the urgent need to reform health entitlements to ensure a sustainable federal budget — equipping policymakers with actionable solutions for the challenges ahead.

PARAGON IN PICTURES

ABOVE: Paragon's Brian Blase is joined by former Health and Human Services Secretaries Kathleen Sebelius and Alex Azar to discuss site-neutral payments in Medicare, July 29, 2024.

ABOVE: Brian Blase listens to CBO Director Phill Swagel during Paragon's event about reforming health entitlements, April 25, 2024.

ABOVE: Paragon's Brian Blase tees up a question for former Health and Human Services Secretaries Kathleen Sebelius and Alex Azar, July 29, 2024.

ABOVE: Paragon's Brian Blase delivers his opening remarks during his event about the need to reform health entitlements, April 25, 2024.

ABOVE: Dr. Marty Makary signs a copy of his book *Blind Spots* for a fan, October 1, 2024.

ABOVE: Brian Blase presents his research about the Affordable Care Act at the American Enterprise Institute, March 1, 2024.

ABOVE: STAT's Rachel Cohrs Zhang (left) introduces an all-star panel featuring (from left to right) Ben Ippolito of the American Enterprise Institute, Loren Adler of the Brookings Institution, Andrea Ducas of the Center for American Progress, and Paragon's own Joe Albanese, July 29, 2024.

ABOVE: (From left to right) Brian Blase, Theo Merkel, and Alye Mlinar deliver a presentation about Paragon's paper *Follow the Money: How Tax Policy Shapes Health Care,* June 11, 2024.

LOOKING AHEAD

Thanks to our hard work in 2024, Paragon has achieved unparalleled policy successes.

Our incisive research, talented staff, and strong alumni network enabled us to be fully embedded in health care policy development. We educated policymakers, provided policy options, and shaped compelling public narratives so our reforms could become legislative realities in 2025.

But even with these extraordinary achievements, we believe Paragon is **just getting started**.

We plan to build on our proven approach to advance free market policies that further empower patients and reform government.

As we look ahead, our focus in 2025 and 2026 will be to protect the health provisions in the One Big Beautiful Bill (OBBB). We will help policymakers with implementation and execution — working across government to translate Congress's historic legislation into real-world improvements for the American people. We will provide draft rules and recommendations. We will equip policymakers with game-changing research and the most powerful messages, so they can stand firm and defend the reforms already in motion.

To this end, we created a special initiative that debunks the myths of the OBBB and provides succinct explanations of the bill — all

at the speed of relevance. We have held educational sessions with staff and met with policymakers at every level in Congress and in the administration to get these substantive, rapid-response materials into wide circulation. We are also driving thought leadership on these issues in podcasts, in print media, and on social media.

Paragon has also identified the next priorities for advancing free markets and enhancing program integrity.

These efforts include ending the Biden COVID Credits which created zero-dollar Obamacare plans that incentivize billions in waste, fraud, and corporate welfare. Our priorities also include pressing for expansions of health savings accounts and other reforms that were supported in the House or Senate but did not make it into the first reconciliation bill. Finally, we will continue to seek to end the destructive FMAP differential that leads the federal government to give states $9 for each state dollar spent on able-bodied, working-aged adults and only $1.33 for each dollar states spend on the disabled, elderly, pregnant women, and children.

In the months ahead, Paragon is also launching three more transformative initiatives, designed to advance free markets in key areas of American health:

1. **Our State Health Reform Initiative** will scale successful free-market ideas in partnership with state leaders and policy organizations with an initial focus on supporting state implementation of OBBB. This will include sharing policy guidance, model language, and best practices from across the states. With so many federal programs intertwined with state implementation, this is a vital tool for success.

2. **Our AI Initiative** will develop thoughtful policy and regulatory frameworks at the federal and state levels to harness artificial intelligence for better and more affordable care. Asking the right questions about AI will ensure this promising new frontier can develop in a way that helps focus health care on patients, enhances quality, and reduces costs.

3. **Our Life Sciences Initiative** will advocate FDA modernization to accelerate patient access to breakthrough treatments. Reducing the development and approval times of new drugs can help get life-saving medicines into the hands of patients and lower drug prices while creating an environment that fosters long-term U.S. innovation and leadership.

At Paragon, we are optimistic about the years ahead. We are confident we will continue to provide bold ideas and actionable solutions that focus government programs on the truly needy, empower health consumers, and put America on a more sustainable fiscal path — so that every American has the opportunity to thrive and flourish in the 21st century.

ABOVE: The sun rises over the Washington Monument.

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Theo Merkel
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Mitchell Shedd
Liam Sigaud
Eric Sun
Jennifer Tringale
Anthony Wojtkowiak
Dr. Joel M. Zinberg

*   Paul Mango passed away January 16, 2025.
** Grace-Marie Turner passed away May 29, 2025.

BOLD IDEAS & COMMONSENSE SOLUTIONS

"[A panel discussion uniting former HHS Secretaries Alex Azar and Kathleen Sebelius was] a moment that marked the ascendance of Paragon Health Institute, the small policy shop founded by [Brian] Blase in November 2021, which had organized the day's event. Now Paragon is at the center of Washington health policy conversations — and potentially for the next four years, as well.

—DAN DIAMOND, *THE WASHINGTON POST*
DECEMBER 20, 2024

"A think tank called Paragon Health Institute, founded by an adviser under Trump's first administration, may be influencing health policy behind the scenes.

—YUKI NOGUCHI, NPR
NOVEMBER 26, 2024

"The U.S. is spending $2 trillion more on healthcare than in 2010. Yet Americans aren't healthier, as a new paper by the Paragon Health Institute observes.

—ALLYSIA FINLEY, *THE WALL STREET JOURNAL*
DECEMBER 8, 2024

"Brian Blase, a former senior official in the Trump administration... said the top priority for Mr. Trump in reforming the Affordable Care Act should be preventing a fraudulent practice of brokers enrolling Americans in plans without their knowledge...

—NOAH WEILAND, *THE NEW YORK TIMES*
NOVEMBER 7, 2024

"Theo Merkel, a fellow at the Paragon Health Institute..., [said] that rather than extending the [ACA] enhanced premium credit, a better option is to 'actually take a look at what is driving the low quality of the underlying plans.'

—MAUREEN LEDDY, THOMSON REUTERS
OCTOBER 18, 2024

"The [Paragon] paper frames [Medicare Advantage] as a positive free-market alternative to traditional Medicare and suggests proposals for addressing flaws in the program's financing.

—TINA REED AND MAYA GOLDMAN, *AXIOS*
FEBRUARY 22, 2024

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