

EXECUTIVE PROFILE

Strategic thinker, trusted partner, and leader who can navigate shifting priorities in an ever-changing, multi-layered healthcare landscape.

Accomplished executive with a wide range of leadership experience with a Fortune 6 healthcare company. Background includes national provider network management, finance, and contract negotiation in both employer and government health insurance. Extensive track record of improving revenues and reducing costs.

CORE COMPETENCIES

Strategic Planning • Budget Management • Provider Network Management • Operations Management • Managed Care • Medical Vendor Management • Medicaid • Acquisition Integration • Relationship Building • Contract Negotiation • Project Management • Healthcare Affordability • Medical Economics • Compliance • Team Leader • Recruiting and Training

EXPERIENCE

BHC HEALTHCARE • Minneapolis, MN

A global leader in healthcare benefits, services, and technology. Largest healthcare company in the world by revenue. Fortune 6, \$250B+.

Director, National Medical Vendor Management (5/2017-10/2019)

Provided oversight as national owner of delegated medical subcontractors (vendors) who serviced Medicaid and state health plans. Managed strategy, vendor relations, vendor performance monitoring, new vendor integration, and business development. Supervised a team of six vendor partnership managers. Collaborated with leaders from cross-functional teams in a matrixed organization.

- Led a team of seven in the complex, two-year integration of an acquired medical transportation company. Addressed scalability, operational, and compliance challenges.
 - → **Result:** Migrated five health plans to new affiliate company, enabling a \$90M revenue increase.
- Integrated an acquired vision care company, working in collaboration with the national M&A team. Migrated nine health plans to the new company with minimal interruption of member services.
 - → **Result:** Increased revenue by \$80M and delivered savings of \$1.5M.
- Created a comprehensive, layered, transparent performance oversight model for delegated subcontractors.
 - → **Result:** Mitigated risk of fines and penalties.

Director, Medical Economics—Northeastern U.S. (11/2013-4/2017)

Identified emerging health trends to evaluate impact on the company. Created and implemented affordability initiatives to reduce costs and improve revenues. Managed a team of associate directors and financial analysts who provided analytical research, financial modeling, and reporting on medical costs and outcomes in the Northeastern U.S. Served as internal consultant to leadership teams to support critical decision-making.

- Led a team of medical economic analysts who identified, measured, and projected the financial impact of network optimization in the Northeast.
 - → **Result:** A \$19M savings over two years.

BHC HEALTHCARE Continued

- Piloted multiple initiatives to identify savings opportunities in payment integrity, pharmacy, contracting, disease management, and prior authorizations.
 - → **Result:** A \$48M savings in 2014 and a \$51M savings in 2015.
- Aligned rates for internal behavioral health, dental, and vision partners with actual market utilization.
 - → **Result:** Achieved fair and equitable pricing parity and Medicaid appropriate pricing from affiliate companies. Met annual targeted budget of \$1.5B spend.

Director, National Network Strategy & Partnership Management (7/2006-10/2013)

Managed a national network of Medicaid providers, serving as face of the organization and point person for contracts. Led the strategic development, execution and oversight of medical vendor contracts servicing 21 health plans, with annual spend of \$900M+. Managed enterprise-wide clinical programs. Supervised a team of three.

- Took the helm as national lead for the provider Medicaid network. Led integration of acquired local health plan networks into the system.
 - → **Result:** Established a national Medicaid network management program for this new and rapidly expanding business segment.
- Implemented a national advanced radiology utilization management program for Medicaid. Assisted in rate negotiations and established timelines.
 - → **Result:** Delivered \$9.2M in savings over three years.
- Developed a three-year plan to eliminate fragmented delegated vendor relationships to prepare for Medicaid growth.
 - → **Result:** Created a cohesive and consistent medical subcontractor model that emphasized use of affiliate companies while bringing compliance to all contracts.

Regional Director of Contracting (11/2002-9/2006)

Promoted from Senior Contract Manager

- Developed and managed a stable and competitive multi-state provider network. Negotiated all provider and facility contracts, representing a \$425M+ annual spend.
- Selected as business unit lead for the corporate merger team to provide integration recommendations.

EDUCATION

MICHIGAN STATE UNIVERSITY

Bachelor of Arts

- La Universidad de Extremadura, Student Exchange Program
- Languages: Basic Spanish

TECHNOLOGY

Microsoft Office (Word, Excel, PowerPoint)

COMMUNITY SERVICE

ALR Inc. Board Member (non-profit fundraising for Special Olympics) Race Director – Stoneridge Trail Run (charity fundraiser)