Boston, Massachusetts

Position Specification

Chief Medical Officer

CONFIDENTIAL

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This Position Specification is intended to provide information about BMC HealthNet Plan and the position of Chief Medical Officer. It is designed to assist qualified individuals in assessing their interest.
Opportunity and Summary of Position

Summary of Position

The Chief Medical Officer (CMO) will be responsible for the direction and leadership of the Office of Clinical Affairs, which includes the following departments and functions:

- Credentialing/Provider Enrollment
- Pharmacy
- Medical Policy
- Care Management/Acute Care Coordination
- Behavioral Health Services (Managed by Vendor – Beacon Health Strategies)
- Provider Relations/Prior Authorization/Provider Audit/Third Party Liability/Other Party Liability
- Quality

Reporting to the President, the CMO will oversee all medical and behavioral health management and clinical quality related activities of the plan. The Chief Medical Officer will have six direct reports including:

- Senior Medical Director (2)
- Director of Provider Relations
- Senior Director of Clinical and Quality Management
- Senior Director of PA Audit and OPL
- Director of Pharmacy Services

The Chief Medical Officer supervises diverse functional groups which include approximately 150 staff and will provide leadership on cost containment savings initiatives, disease protocols, staff guidance in the development and interpretation of medical policy and technology assessment. This person will chair and/or serve on various corporate and cross department committees as well as be responsible for providing strategic guidance and support for all clinical initiatives serving the Plan contracts.

As a member of the Executive Team, the Chief Medical Officer will be a collaborative team player who actively participates in the development and execution of the strategic goals, objectives and plans of the organization. The successful candidate will be an experienced physician with a proven track record of relationship building and a demonstrated ability to lead multi-disciplined teams in setting and attaining quantifiable goals.
Key Functions/Responsibilities

- Oversees the development, implementation and monitoring of medical policies and procedures (including case/disease management, utilization management and clinical programs) as they relate to the overall delivery of health care to members.

- Develops, implements and oversees the health plan's medical expense cost savings initiatives.

- Analyzes and interprets trend data relative to utilization management and clinical programs to ensure processes are in place to meet and exceed organizational goals.

- Develops and implements strategic plans specific to trends and changes in medical care and medical management, patient safety, and clinical quality; ensures that appropriate metrics are designed and implemented for comprehensive program(s) assessment. Monitors and ensures the achievement of desired outcomes.

- In relation to the following programs, develops and oversees quality improvement initiatives and oversight of the program to ensure stated goals are met or exceeded:
  - State Mandated Quality Goals
  - External Quality Review and Organization Review

- Provides oversight for NCQA related and other regulatory quality improvement, and clinical state and federal compliance activities.

- Ensures that action plans are developed, implemented and monitored to achieve the Plan’s goals and objectives.

- Guides organizational efforts to build expertise and ensure corporate-wide commitment to and adherence of continuous quality improvement goals and initiatives.

- Ensures contract and regulatory compliance and establishes, monitors, and controls corporate Medical and BH Health Quality Standards.

- Assists in the development and oversight of system-wide data and studies of clinical practices to identify best practices associated with improved health outcomes.

- Develops, implements and manages clinical and wellness programs to address the needs of high-risk members.

- Provides oversight for the development and implementation of provider relations processes and strategies.

- Comprehensively understands and applies local, state and national trends in health care delivery and managed care to positively influence members/customers.
- Directs the supervision of the Office of Clinical Affairs staff to include hiring, work allocation, scheduling, training and professional development, problem resolution, performance evaluation and related supervisory activities. Maintains budgetary responsibility and vendor management oversight for the department.

- Works collaboratively with the clinical leadership at Boston Medical Center to improve care for members.

- Chairs the Quality and Clinical Management committee.

- Provides broad direction and oversight of large, complex, and high impact projects including coordination of multiple internal and external teams.

- Participates in the following committees:
  - Medical Policy & New Technology
  - Utilization Management
  - Pharmacy & Therapeutics (P&T)
  - Quality Improvement
Goals and Objectives – Measures of Success

During the first 12 to 18 months, the Chief Medical Officer will be expected to make substantial progress in the following areas (not listed in any particular order of priority):

- Establish a credible and confident working relationship with the new President and other members of the management team.

- Be viewed as a competent, strategic physician leader by the physicians and management teams of participating health care providers in BMCHP network and outside of Boston Medical Center, key relationships include Baystate Health and Southcoast Health System.

- Lead negotiations with carve-out vendors in Pharmacy, Behavioral Health and DME, as well as holding vendors accountable for the delivery of service and benefits to BMCHP’s members.

- Partner with Boston Medical Center and its affiliated health centers to develop strategies to redirect care to Boston Medical Center when appropriate.

- Prioritize the key utilization and cost drivers to continue the plan’s history of positive operating margins, as well as helping to drive membership growth in its core businesses.

- Work with senior leadership in shaping the organization’s growth strategies which could be significant under health reform and, in particular, the Commonwealth of Massachusetts’ push for more managed lives under Medicaid.

- Establish a strong focus on the bottom line with the medical and care management staff, and work to foster an attention to the health care economics that influence cost competitiveness and operating margins, such as utilization management and severity of case and care management.

- Implement and lead new process improvement programs that will focus on quality, safety and efficiency as the desired outcome; and be an agent for change through innovation and inspiration by working through others to achieve productive enhancements in the plan’s care management services;

- Establish a high level of leadership and professionalism; set a tone that creates a culture that is proactive, collaborative, people oriented and results driven.

- As the chief medical spokesperson, inform and educate the marketplace and the client on healthcare policies, strategies and programs. Stay abreast of changing healthcare trends in medicine and participate in designing programs and benefits.
Candidate Qualifications

- Seven (7) years direct clinical experience in a clinical practice area.
- Five (5) years of progressively responsible experience as a Medical Director and/or Chief Medical Officer in a managed care setting.
- Experience with Medicaid or other Government funded products is strongly preferred.
- Board certification in the area of clinical practice.
- Current unrestricted licensure as an M.D. in the Commonwealth of Massachusetts or the ability to obtain an unrestricted licensure within a reasonable period of time.
- Demonstrated excellent clinical skills.
- Proficient in the design and use of information systems and analytics to generate and drive data analysis that quantify and improve the quality and efficiency of care delivered by providers.
- Comprehensive knowledge of accrediting organizations such as NCQA.
- Comprehensive knowledge of InterQual protocols, HEDIS, and other quality measures.
- Knowledge of Federal Medicaid regulations, guidelines, and standards.
- Proven negotiation skills, relationship building skills and knowledge of risk concepts.
- Familiarity with Facets and CCMS databases is desired.

Education

- Graduate as a Medical Doctor from an accredited college of medicine.
- Masters Business Administration or Masters Public Health, or related post-graduate degree is preferred.

Personal Characteristics

- *Understands the Business*:  Knows the business and the mission-critical technical and functional skills needed to do the job; understands various types of business propositions and understands how businesses operate in general; learns new methods and technologies easily.
- **Makes Complex Decisions:** Can solve even the toughest and most complex of problems; great at gleaning meaning from whatever data is available; is a quick study of the new and different; adds personal wisdom and experience to come to the best conclusion and solution given the situation; uses multiple problem-solving tools and techniques.

- **Is Organizationally Savvy:** Maneuvers well to get things done; maze bright; knows where to go to get what he/she needs; politically aware and agile; knows what the right thing to do is; presents views and arguments well.

- **Keeps on Point:** Can quickly separate the mission-critical from the nice-to-dos and the trivial; quickly senses what's the next most useful thing to work on; focuses on the critical few tasks that really add value and puts aside or delays the rest.

- **Focuses on the Bottom Line:** Attacks everything with drive and energy with an eye on the bottom line; not afraid to initiate action before all the facts are known; drives to finish everything he/she starts.

- **Gets Work Done Through Others:** Manages people well; gets the most and best out of the people he/she has; sets and communicates guiding goals; measures accomplishments, holds people accountable, and gives useful feedback; delegates and develops; keeps people informed; provides coaching for today and for the future.

- **Communicates Effectively:** Has excellent written and verbal skills; writes and presents effectively; adjusts to fit the audience and the message; strongly gets a message across.
Mission and Overview of Boston Medical Center HealthNet Plan

Mission

To serve Boston Medical Center and to assist and support BMC's mission in providing and enhancing access to effective, efficient, medical care among low income, underserved, disabled, elderly, and other vulnerable populations.

Organization and History

Boston Medical Center Health Plan, Inc. (d/b/a Boston Medical Center HealthNet Plan) (BMCHP) was established by Boston Medical Center (BMC) in 1997 as a 501(c) (3) not for profit organization. It was organized specifically to support the mission of BMC, and to participate in the Massachusetts state Medicaid program known as MassHealth. BMC pursued the formation of a managed care organization (MCO) to help fulfill and expand its mission to serve the uninsured, to retain its large patient base, and to better serve patients through a managed care system.

BMCHP is one of five MCOs participating in the MassHealth program. The other participating organizations include Fallon Health Plan (FHP), Neighborhood Health Plan (NHP), Network Health (Network), and Health New England (HNE). HNE joined the program in 2010. Each participates in MassHealth pursuant to a five year contract (June 1, 2010 - September 30, 2015). At this time, none of the "big three" Massachusetts commercial insurers, Blue Cross Blue Shield of Massachusetts, Harvard Pilgrim and Tufts Health Plan, participates in MassHealth. BMCHP's MassHealth membership has generally grown since 1997, and BMCHP currently is the largest MassHealth MCO with approximately 40% of the market.

The introduction of the Commonwealth Care program presented an opportunity for BMCHP to expand and grow. It also provided many MassHealth members the ability to retain their relationship with BMCHP and with our provider network when and if they no longer qualified for MassHealth.

In 2009, BMCHP achieved 'Excellent Accreditation' from the National Committee for Quality Assurance (NCQA) and has continued to earn that status for each subsequent review period. NCQA has ranked BMCHP as one of the top five Medicaid plans in the country for two years running. This recognition of BMCHP's commitment to quality is a reflection of BMCHP's partnerships with providers and members in achieving such high levels of compliance with the NCQA quality measures. BMCHP will undergo another full accreditation review in late April 2012.

For additional information on Boston Medical Center HealthNet Plan, please visit their website at www.bmchp.org.
Financial Information

BMCHP has experienced considerable growth increasing its membership from 159,000 at the end of FY 06 to a projected level of 236,000 at the end of FY 11. Capitation revenue has grown from $692 million in FY 06 to a projected $1.3 billion for FY 11, for an increase of 88%. BMCHP achieved profitability in each of the years from 2006 through 2011 with the exception of FY 09, adding some $189 million to its surplus during this period resulting in a surplus position of $268 million at the end of FY 11. Its net income ratio averaged 3.2% over this same period of time.

Beginning in FY 09 and extending into the present time, BMCHP has made significant reductions in its medical costs as the result of an extensive re-contracting effort with its providers and its pharmacy benefits manager (PBM), and through refinements in its utilization management programs. In addition, BMCHP reduced its administrative expense ratio to 5.6% as of March 31, 2011 through staff reductions and the implementation of operational efficiencies. This ratio is presently one of the lowest in the nation. As a result of these actions, BMCHP was able to generate significant net income in FY 10 and FY 11.

BMCHP’s balance sheet as of March 31, 2011 is in a strong position with $320 million in cash and investments and surplus of $242 million. There is no goodwill or other intangible assets on its balance sheet nor does it have any debt. Its Risk Based Capital (RBC) ratio as of March 31, 2011 was approximately 538%, which is within the range of 350% to 550% which is prudent but not excessive.
| Founded and entered MassHealth Program | 1997 |
| Entered Commonwealth Care Program | 2006 |
| Became HMO Licensed | 2008 |
| Achieved "Excellent" NCQA Accredited | 2008 |
| Entering Commercial Market and Commonwealth Choice Program | 2012 |
| Current Enrollment | MassHealth - 191,000  
Commonwealth Care - 41,000 |
| Geographic Coverage | MassHealth - 5 of 5 regions  
Commonwealth Care ~ Statewide, except Martha's Vineyard and Nantucket Islands |
| Network | 16,000 providers |
| Major Vendors and Partners (excluding participating providers) | Beacon Health Strategies (Behavioral Health), Dental Service of Massachusetts, informedRx (Pharmacy Benefits Manager), Health Solutions (Nurse Advice Line), MedSolutions (Radiology Services), Northwood (DME Services), SironaHealth (Call Center Services) |
| Plan Revenues | $1.3 Billion |
| Employees | 400 FTEs |
| Offices | Boston, New Bedford, Springfield |
| Major Relationships and Regulators | EOHHS (MassHealth contract), Commonwealth Health Insurance Connector Authority (Commonwealth Care and Commonwealth contracts) Division of Insurance, Division of Health Care Finance and Policy, Office of Patient Protection, Office of the Attorney General |
The Community

The Greater Boston area can be best described as a welcome contradiction: Hip alongside historic. Skyscrapers surround parks. Gourmet meets pizza. Just as the city pays homage to every period of America’s timeline, it also serves as all things to all people. The Greater Boston Convention and Visitors Bureau is available to help you experience Boston like a local. Check out Boston Insider to get the local perspective on the best experiences for Foodies, Traveling Families, History Lovers and others who want to indulge in their particular passion while in Boston.

For more ideas, one can explore Boston by Season, which helps you discover the top experiences for the time of year. After all, Boston changes dramatically with each page of the calendar. There is also Boston Everyday, which suggests what to do, where to stay, where to eat and where to shop on all 365 days.

Boston, first incorporated as a town in 1630 and as a city in 1822, and is one of America's oldest cities with a rich economic and social history. What began as a homesteading community eventually evolved into a center for social and political change. Boston has since become the economic and cultural hub of New England.

As the region's hub, Boston is home to over 617,000 residents, many institutions of higher education, some of the world's finest inpatient hospitals, and numerous cultural and professional sports organizations. Boston-based jobs, primarily within the finance, health care, educational and service areas, numbered nearly 660,000 in 2002. Millions of people visit Boston to take in its historic neighborhoods, attend cultural or sporting events, and conduct business.

Whether your interests lie in history, art, or culture, Boston has a museum for you. From the Museum of Fine Arts (MFA) and The Isabella Stewart Gardner Museum, to the John F. Kennedy Presidential Library & Museum and Boston Fire Museum, there is something for everyone. Boston also is home to the Museum of Science and the Boston Children's Museum.

The City of Boston has wonderful parks and recreational areas. Boston provides residents and visitors with clean, green, safe, and accessible open space in more than 2,200 acres of park land throughout the city.

Due to its size, Boston is a very accessible city, but it may be that its reputation as a walking city relies on the creation of one of America's first historic walking tours, The Freedom Trail. The Freedom Trail Foundation continues to work to preserve this perfect introduction to Colonial Revolutionary Boston. The Trail takes the visitor to 16 historical sites in the course of
two or three hours, and covers two and a half centuries of America's most significant past. A red brick or painted line connects the sites on the Trail and serves as a guide.

For additional information on Boston, please visit the following websites:

http://www.cityofboston.gov
www.bostonusa.com
http://en.wikipedia.org/wiki/Boston
www.boston.com/travel/boston
Procedure for Candidacy

Nominations, expressions of interest, and applications (including a cover letter and resume) should be submitted via e-mail to BMCHP_CMO@wittkieffer.com.

Material that cannot be e-mailed may be sent to the Boston Medical Center HealthNet Plan Chief Medical Officer search team members at:

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