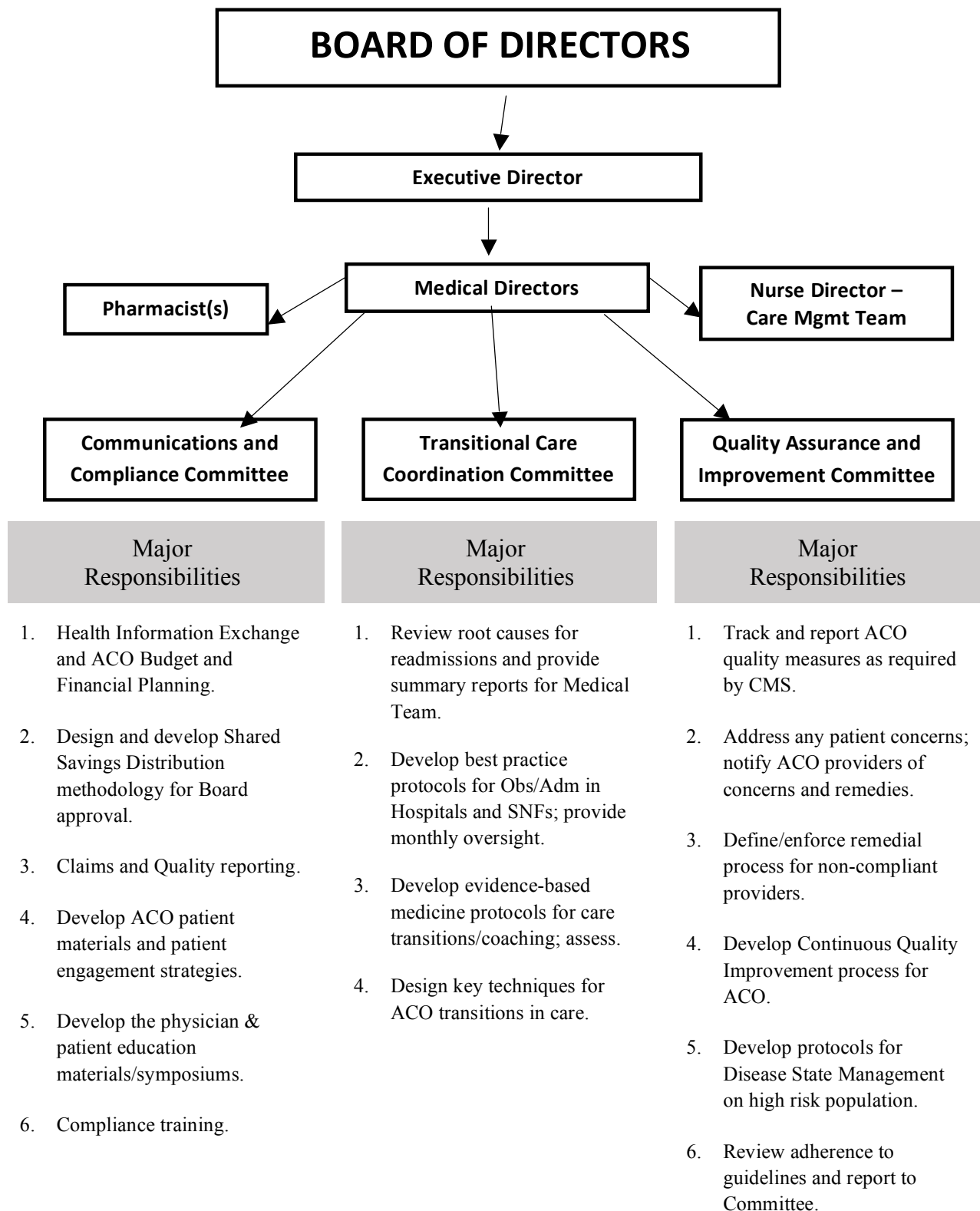


Organizational Chart and Leadership Positions

Organizational Chart



Organizational Chart and Leadership Positions

Executive Director

Barbara A. Newton

EDUCATION

University of Louisville, Louisville, KY
B.S. in Accounting

EXPERIENCE

2001- Present

Precision Healthcare Delivery, LLC

Chief Executive Officer

Providing Management for 3 Independent Physician Organizations in Kentucky and Quality Independent Physicians ACO

1998-2001

Physician Weblink of Kentucky

Vice President of Operations

1997-1998

Anthem Blue Cross and Blue Shield

Executive Director, Lexington Health Service Area

1995-1997

Director, Medical Management Information

1992-1995

Metricor, Inc.

Director, Health Information Services

1991-1992

Humana Inc.

Director, Quality and Resource Management Systems

1988- 1991

Director, Systems Planning – End User Systems

1985- 1988

Manager, Medical Affairs

1983-1985

Blue Cross Blue Shield of Kentucky

Manager of Cost Containment and Utilization Review

1982-1983

Market Research Coordinator

1973-1982

Senior Accountant, Medicare Reimbursement

SPEAKING AND CONSULTING ENGAGEMENTS

- Speaker at National Blue Cross Association Conferences
- Consultant to Kuwait Ministry of Health on Implementing Quality and Utilization Management Programs
- Speaker at National Health Information Management Systems Society (HIMS) Meeting
- Speaker at The Independent Physician Association of America national meetings

Organizational Chart and Leadership Positions

CFO/CIO/CCO

Key Personnel – Chairman of the Board QIP

Lawrence M. Jones, MD

EDUCATION Vanderbilt University; Nashville, TN
Pediatrics - Internship and Residency
University of Louisville School of Medicine; Louisville, KY
Doctor of Medicine
Duke University; Durham, NC
Bachelors of Arts in History; Magna Cum Laude

EXPERIENCE

1983- Present Pediatrician; President - East Louisville Pediatrics; Louisville, KY
1993 – 1995 Medical Director; Home of the Innocents; Louisville, KY
1982 Staff Physician; Khao-I-Dang Refugee Camp; Thailand

1985 – Present *Board Certified, American Board of Pediatrics*
Re-certified in 2014

DIRECTORATES:

Community Coordinated Child Care
Council for Intellectually Disabled Citizens
Bingham Child Guidance Clinic
Association of Primary Care Physicians – President
Baptist Hospital East Women and Children Patient Care Committee Chair

PROFESSIONAL MEMBERSHIPS & ACTIVITIES

American Academy of Pediatrics
Kentucky Pediatric Society

Organizational Chart and Leadership Positions

CFO/CIO/CCO

NAME

Thomas O. Samuels, CPA, MBA

EDUCATION

University of Texas at Arlington, Arlington, TX
Masters in Business Administration, concentration in Finance
University of Kentucky, Lexington, KY
Bachelor of Science in Accounting and Finance

EXPERIENCE

2001-Present

Sterling Medical Consultants/Precision Healthcare Delivery

Founding Member/ CFO

Established company, with 17 associates, to provide extensive physician practice management services.

Participated in the practice startup of three successful physician groups.

Established IPA level Health Information Exchange for two IPAs. Designed and maintained multiple computer network and servers for company, including firewall and virus guard systems

Managed the HIPAA and OIG compliance and training for company.

Managed budgets, finances and information technology for Quality

Independent Physicians ACO

1998-2001

Physician Weblink of Kentucky

Vice President of Finance

Created and managed all financial operations of finance department, including Accounts Receivable, Accounts Payable, Payroll, Financial Reports and Tax Preparation.

Prepared and presented financial forecast to venture capitalist groups resulting in raising \$45 million of funding.

Developed operating budgets and assisted in the strategic planning for the organization.

Participated in demonstration electronic medical records project.

1994-1998

Humana, Inc.

Manager, Pharmacy Financial Operations

Developed system to calculate, forecast and manage over \$40 million of pharmaceutical rebate income.

Established and monitored pharmaceutical rebate income. Assisted in contract negotiations resulting in an increase in rebate income and pharmaceutical cost savings totaling over \$15 million.

Organizational Chart and Leadership Positions

Key Personnel – Medical Director

Gregory A. Hood, MD FACQ

EDUCATION Scripps - Mercy Hospital and Medical Center; San Diego, CA
Chief Medical Resident/ Internal Medicine Residency
University of Louisville School of Medicine; Louisville, KY
Doctor of Medicine
Johns Hopkins University; Baltimore, MD
BS Psychology

EXPERIENCE

2001- Present Internist, Drs. Borders & Associates, PSC; Lexington, KY
2007- Present The Physicians Network, Medical Director
1998 – 2001 Internist, Southern California Permanente Medical Group
1996 - 1998 Solo Practice Nursing Home Physician and Hospitalist
1996– 2017 *Board Certified*, American Board of Internal Medicine

HONOURS & AWARDS

Fellow, American College of Physicians - American Society of Internal Medicine
Member, Triple Nine Society
Distinguished Service Recipient, MD News Central and Southeastern Kentucky
American Medical Association Foundation Leadership Award
ACP-ASIM Community Based Teaching Award

PROFESSIONAL MEMBERSHIPS & ACTIVITIES

American College of Physicians - American Society of Internal Medicine
Parliamentarian Select 2011 - 2012
Legislative Key Contact

Organizational Chart and Leadership Positions

Key Personnel – Medical Director

Michael C. Harper, MD

EDUCATION

University of Louisville; Louisville, KY
Internal Medicine/ Pediatrics

Internship and Residency

University of Louisville School of Medicine; Louisville, KY

Doctor of Medicine – Magna Cum Laude

San Jose State University; San Jose, California

Masters Psychology

Georgetown University; Washington DC

BS Psychology

EXPERIENCE

1999- Present Internist and Pediatrician,
Sellersburg Internal Medicine and Pediatrics; Sellersburg, IN

1998 – 1999 Internist/ Pediatrician
Alliant Immediate Care Center; Louisville

2006 – 2008 Chief of Internal Medicine – Clark Memorial Hospital;
2012- 2014 Clarksville, IN

2014- Present President Elect of Medical Staff – Clark Memorial Hospital

1999 – 2020 *Board Certified*, American Board of Internal Medicine

1999 – 2019 *Board Certified*, American Board of Pediatrics

2001- Present Assistant Clinical Professor, University of Louisville; Department
Internal Medicine

HONOURS & AWARDS

Alpha Omega Alpha

PROFESSIONAL MEMBERSHIPS & ACTIVITIES

American College Of Physicians - American Society Of Internal Medicine

American Academy of Pediatrics

Association of Primary Care Physicians – Board of Directors

Organizational Chart and Leadership Positions

Quality Independent Physicians - Board of Directors

Chaired by Lawrence Jones, MD - Dr. Jones chairs the Board of Directors as the only non-participant PCP on the ACO Board. Dr. Jones is a pediatrician and the Chairman of the Association of Primary Care Physicians in Louisville. As a non-participant in our Medicare ACO product, he will objectively oversee decision making and the running of Quality Independent Physicians ACO. Dr. Jones has 25 years of managed care experience with the Physician Organization.

Members of the Board

Lawrence M. Jones, MD – Chairman - Pediatrician

Brian Smith, MD – Vice-Chairperson – PCP

Gregory Hood, MD – Medical Director– PCP

Molloy Veal, MD – PCP – East Louisville

Jeffrey Omer, MD –Secretary/Treasurer - PCP

Michael Harper, MD – Medical Director- PCP

P. Keerthi Kemparajurs, MD – Oldham County – PCP

Eugene Giles, MD – PCP- West Louisville

Rupinder Gill, MD – PCP- Southern Indiana

John Arnett, MD – PCP - West Louisville

Bernie Tamme, Medicare Beneficiary

Kathleen Exeline- Community Stakeholder, Norton Healthcare – Acute Care

Summary of Oversight Responsibility:

Barbara Newton, Executive Director reports to the Board of Directors

Frequency of Meetings: Four – six times per year:

Summary of Board of Directors Duties and Responsibilities

1. Board review, disseminate, and ensure compliance with regulatory requirements by ACO that are promulgated by Centers for Medicare & Medicaid Services (CMS)
2. Responsible for the overall operation of the organization, including but not limited to:
 - a. Financial management of QIP
 - b. Approval of shared savings distribution models
 - c. Approval of compliance and training requirements
 - d. Approval of Provider and Patient communication material
 - e. Review of all Survey results
 - f. Approval of remedial process for aberrant providers
 - g. Review of Patient complaints or concerns
 - h. Review adherence to Evidence Based Medical Guidelines
 - i. Develop action plans for any compliance deficiencies that may arise within the QIP operations.
3. Establish the strategic plan for QIP to comply with the regulations concerning the operation of the ACO, and the health, safety and welfare of the beneficiaries supported QIP.

Organizational Chart and Leadership Positions

4. Ongoing Responsibilities -

- a. Appoint and annually review the performance of the Executive Director;
- b. Delegate the authority and responsibility for the management of the agency in keeping with written policy;
- c. Meet at least four to six times a year and maintain records of the discharge of its duties;
- d. Orient new participants of the board and ACO ;
- e. Review QIP budgets and projections;
- f. Provide strategic planning;
- g. Develop a network of information resources;
- h. Review of all Compliance reports and provide oversight in quality improvement efforts; and approve committee proposals and implementations;
- i. Evaluate Board effectiveness.
- j. Elect Chairman of Board on an annual basis.

Organizational Chart and Leadership Positions

C. –Governance/Leadership:

Committees

Quality Assurance and Improvement Committee

Chaired by Dr. Greg Hood, Medical Director

Committee Members

M. Dathan Chesnut, MD – PCP – East Louisville
Cyrus Joshi, MD – PCP – Southern Indiana
John Arnett, MD – PCP – West Louisville
Rupinder Gill, MD – PCP – Southern Indiana
Jennifer Walden-Fain, MD – PCP- East Louisville

Reports to Board of Directors

Frequency of Meetings: Four times per year:

Summary of Committee Duties and Responsibilities:

1. Track compliance and reporting of 33 ACO quality measures and cost of care – determine that all participants have a method for capturing and reporting on the quality measures, review quarterly reports on measures reporting and develop improvement or corrective plans for participants failing to perform to measures; review the cost of care metrics for QIP and compliance with protocols/treatment guidelines, determine need for modifications. Determine major cost drivers in current costs and compare to baseline.
2. Address any reports of patient concerns and level of engagement – Establish methods of reporting patient concerns on the QIP participants from the participating provider offices or directly from patients; establish complaint tracking and resolution process; determine effectiveness of patient engagement programs, monitor trends and report to Board, Compliance and Patient/Provider Relations committees.
3. Provide remedial process for aberrant providers – establish and monitor the ongoing corrective actions needed for providers failing to meet agreed upon QIP guidelines; define sanctions and monitor application of sanctions, corrective actions and continuous improvement.
4. Develop CQI process for QIP – establish annual program in at least 3 key areas that need monitoring and improvement for ACO participants.
5. Monitor adherence to protocols for Disease Management on high risk patients- management of COPD, Coronary Artery Disease, Diabetes and Congestive Heart Failure.
6. Review population health data, practice patterns in treatment of atrial fibrillation and pulmonary embolism risk. This committee will develop the best tools to utilize within the primary care setting to influence and motivate the patients to improve health behaviors.
7. Review the reports from the HIE on measures and adherence to protocols. Determine root causes for non-compliance, needed revisions, and counsel aberrant physicians for remediation.

Organizational Chart and Leadership Positions

Transitional Care Coordination Committee

Chaired by Dr. Greg Hood, Medical Director

Committee Members

John Borders, MD – PCP - Lexington
Harry Renco, MD – PCP – East Louisville
Sal Ciliberti, MD – PCP – East Louisville
Ivan Ljubic, MD – PCP – East Louisville
Warren Kemper, MD – PCP- South Louisville
David White, MD – PCP- Southern Indiana
Kumar Nigam, MD- PCP South Louisville
Care Coordination Managers

Reports to Medical Director

Frequency of Meetings: Four times per year:

Summary of Committee Duties and Responsibilities:

1. Review root cause for all readmissions – Review discharge information from readmission reports and look for root causes; discuss the current hospital and SNF statistics and limitations and strengths of the existing programs in place in each community. Develop corrective action plan to reduce readmission rates identified in root cause analysis. All readmissions of QIP patients will be reviewed for avoid ability and quality improvement opportunities.
2. Update protocols for Observation versus Admission in Hospitals – develop guidelines for physicians and Emergency Departments on conditions that should be observed versus admitted.
3. Develop EBM protocols for care transitions – current use of Eric Coleman model will be reviewed based on past outcomes and most effective methods. Process improvements will be recommended and incorporated.
4. Design key communications techniques for transitions - develop effective communication linkages for patients, care coordination manager teams, hospital case managers, and Emergency Departments through QIP HIE. Work with Compliance committee to implement process changes.
5. Assess the effectiveness of provider and patient communications in transitions of care.
6. Analyze specialist referral patterns and outcomes of the top volume procedures and establish agreement on care and transition protocols.

Organizational Chart and Leadership Positions

Compliance and Communication Committee

Chaired by Dr. Michael Harper, Medical Director

Committee Members:

Jim Bosler, MD – PCP- East Louisville

Jeff Omer, MD – PCP- Downtown Louisville

Brian Smith, MD – PCP - Lexington

Anthony Remson, MD – PCP – Central Louisville

Tom Samuels, CPA – CFO/CIO/CCO

Molloy Veal, MD – PCP – East Louisville

Priya Balakrishna, MD – PCP – Downtown Louisville

William C. Thornbury, MD – PCP – Glasgow, KY

Care Coordination Managers

Reports to the Board of Directors

Frequency of Meetings: Four times per year:

Summary of Committee Duties and Responsibilities

1. Develop the physician & patient education materials – Review the sources of best patient educational materials on the key needs determined by the ACO. Make sure the linkages are provided to that material from the PCP's practice system and available via the QIP HIE on the personal health records. Determine the needed educational/coaching/motivational materials and training for the PCP offices.
2. Develop/refine surveys for QIP - Design some specific questionnaires for patients to determine current level of knowledge and engagement on their disease treatment and determine the level of educational materials and approach that needs to be taken to accommodate QIP unique population needs.
3. Develop and manage provider education symposiums.
4. Develop provider benchmarking criteria.
5. Monitor providers to ensure that no conflicts of interest arise.
6. Recommend actions to the Board of Directors on any remediation for providers that fail to comply with the conflict of interest policy.
7. Health Information Exchange connections – arrange the connectivity of QIP HIE to Kentucky HIE.
8. Shared Savings Distribution methodology- establish the methodology for how the shared savings will be distributed, by establishing the criteria for earning bonus savings.
9. Claims expense and quality measure analyses and reporting – design the reports for distribution to QIP participants that will help providers monitor their results and track their performance in meeting bonus criteria.
10. Compliance training and establish complaint reporting methods and monitoring – Responsible for making the necessary Compliance training accessible and reportable via the QIP information exchange; design the Personal Health Record to allow for anonymous reporting of compliance complaints with accessibility to this committee and the Board of Directors. Monitor efficacy of methods for beneficiary to report concerns and complaints to ACO in an anonymous manner if desired.

Organizational Chart and Leadership Positions

11. Review, monitor and approve QIP financial annual budget and performance.