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## Senior Governance, Operations, and Compliance Healthcare Executive

- **Proactive, visionary leader** focused on process optimization that aligns risk tolerance to organizational goals.
  - **Nationally recognized for developing governance, GRC systems, fraud identification, and process optimization methodologies** as demonstrated in roles, publications and awards.
  - **History of repeated success in evaluation of managed care and clinical operations** – recognized by executives, board members, and business clients for supporting their needs, driving improved accountability, and fostering a collaborative, creative approach to independent assessment and objective actionable recommendations.
  - **Results driven senior executive** with more than 20 years of business success and a proven track record of exceeding goals and objectives. Proven ability to take a situation or program and redesign or enhance it to outperform expectations and advance organizational objectives in a prudent, compliant, risk balanced manner.
  - **Respected leader, coach and mentor helping professionals succeed in their careers.**
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## SUMMARY OF QUALIFICATIONS

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| • Proactive Assessment and Support of Executive Team Goals and Enterprise Strategy | • Enterprise GRC System Design and Execution   |
| • Strategic Leadership & Vision  | • Industry and Professional Speaking Experience  |
| • Program Development & Implementation   | • Licensed Certified Public Accountant   |
| • Recruitment, Development & Management of High Performance Business Consultants   | • Certifications: Internal Audit / Systems Security / Risk Management / Managed Healthcare / CPA |
| • Budget Reduction with Enhanced Effectiveness                                     | • Development & Implementation of Complex Compliance, ERM, and Governance Processes              |
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## CAREER PROGRESSION

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### Aperture – Louisville, KY / U.S.

*National healthcare provider credentialing organization, backed by private equity funds.*

#### **Chief Financial Officer** – November 2016 to Present

Responsible for financial operations, investment decisions, human resources, program management office, operations, client services and strategy development. Serves as operating officer driving product and IT strategy.

### Navigant Healthcare – Louisville, KY / U.S.

*Specialized, global expert services firm focused on critical business risks. Deep industry knowledge in Healthcare Strategy and Compliance. Technical expertise in Disputes & Investigations, Compliance, Finance, and Management Consulting.*

#### **Director and Payer Service Sector Leader** – August 2014 to January 2017

Member of firm's Healthcare and Life Sciences Disputes, Investigations and Compliance Practice. Oversee client relationships, service offerings and engagements. Accountable for sector service offering strategic roadmap.

#### **Key Accomplishments:**

- Thought leadership speaker for firm at multiple events including: Health Care Compliance Association Enforcement Conference, American Health Lawyers Association Payer In-House Counsel Institute, Association of Healthcare Internal Auditors Annual Conference, American Hospital Association Chief Compliance Officer Roundtable.
- Engagement manager for over \$1.5 million of projects in first 18 months to include national, regional, multi-state, and integrated health plans and systems. Engagements included program management, data governance, risk adjustment data validation and analysis, policy development, and claims adjudication / service operations strategy assessment. Multiple clients have engaged Navigant for additional services based on initial project successes.
- Developed and led practice development offerings including: CMS Healthcare Fraud Prevention Partnership (HFPP) Participation, Risk Adjustment Coding Oversight, GRC Implementation, CMS Mock Audits, Root Cause Analysis, Data Governance, Policy Management, and Enterprise Risk Management.

## **Humana – Louisville, KY**

*Fortune 100 health and wellness company: 2013 revenue of \$39 billion, \$1.2 billion in net income. Operates top five PBM, top two MA and PDP plans, mail order pharmacies, state of the art data centers, physician practices, home care practices, disease management programs.*

### **Vice President and Chief Audit Officer – August 2011 to January 2014**

Board elected officer responsible for Chief Audit Executive duties as well as Humana's Enterprise Risk Management (ERM) Program. Leadership of 80+ professionals with diversified backgrounds in finance, audit, IT, nursing, actuarial, law, investigations, pharmacy, and operations. Our success required an ability to analyze large-scale complex program design as well as methodologies in change management, root cause analysis, healthcare strategy, compliance & operations.

Established shared services teams which provided enterprise investigations support, external regulatory audit facilitation, enterprise GRC system thought leadership and implementation, data governance, and process documentation support.

#### **Key Accomplishments:**

- Facilitated all of the CEO's executive staff meetings (1.5 years) and COO's Operating Committee (6+ years) including sessions on enterprise strategy, managed care and clinical strategy, and strategic initiatives review. Supported strategy alignment, agenda development, presenter coordination, master annual C-Suite calendar and action item follow up. Incorporated strategic insights into assurance and consulting group engagement plan.
- Represented private sector payers (Humana, America's Health Insurance Plans) within the Healthcare Fraud Prevention Partnership. Served as founding co-chair of Data Analysis and Review Committee with Deputy Director of the CMS Center for Program Integrity. Drove development of fraud studies and partnership formation. Presented regularly to CMS Administrator, Deputy Secretary of HHS, HHS Inspector General, and representatives from FBI, Justice, and national fraud prevention associations at HHS Headquarters.
- Led enterprise risk management (ERM) program including reporting to C-Suite and Board on enterprise top risks from a qualitative and quantitative perspective. Incorporated ORSA DOI requirements into program.
- Led effort to reposition role and responsibilities of the Chief Actuary of the company. Oversaw review of Medicare Advantage bid submissions – including independent actuarial, compliance and financial reviews.
- Accountable for strategic leadership of enterprise GRC system development effort. Enterprise governance, risk and compliance application consolidated all internal and external audit and regulatory recommendations and follow-up, housed universe of Company process documentation and process owners, tracked Medicare and Medicaid regulatory requirements, 1200+ related metrics, and provided workflow and customized applications for process owners. Over 3000 unique users in the system monthly. Won several national awards for GRC system development and excellence. Used extensively in presentations with CMS staff and on-site regulatory auditors.
- Managed \$11.7 million budget well below benchmark median while maintaining exceptional talent and value added consulting. Incorporated off-shore, outsourced talent into group. Personal and team accomplishments cited in academic research publication "CAE Strategic Relationships" and various IIA practice guides.

### **Corporate Director, Internal Audit – February 1999 – August 2011**

Chief Audit Executive responsibilities for Humana covering all aspects of health and wellness operations including insurance, pharmacy benefit management (PBM), mail order pharmacy, disease management, direct patient clinical operations, corporate functions, application development, privacy, data governance, and IT security.

#### **Key Accomplishments:**

- Proactively identified the need and created the vision for a data governance program. Data stewards in the program identified error root causes, restructured data sets and programming, and instructed end users on data set usage to improve customer analysis and transaction quality. Program now resides within Corporate IT.
- Proactively identified and elevated the risk profile over Medicare Risk Adjustment coding. Directed assurance and consulting teams that focused on top to bottom recommendations on policies, processes, controls, and investigations. Participated in several investigations and assessments of provider practices. Managed and supported external legal counsel, independent coder, and accounting firm activities.
- Provided comprehensive risk, root cause, and process improvement analysis to executives and board members regarding strategic, operational, financial reporting, and compliance matters. Examples: mock CMS/FAR/DFAR audits, implementation reviews of outsourced financial operations, nurse consultant evaluation of medical protocols, STARS improvement, acquisition due diligence, Medicaid/Medicare process flow, and bid compliance.
- Without external consultants or support, developed Sarbanes-Oxley, COSO and Enterprise Risk Management programs. Optimized coordination of SOX and SSAE-16 work with external auditors to minimize costs.

- Oversaw methodology development for risk workshops and process maturity model engagements which cut assessment time and costs. Effort supported (for example) model sales office assessment and market/product line/segment strategy development. Methodology cited in AICPA Journal of Accountancy article.
- Developed IT audit team that assessed data center operations, cyber security, and systems implementation. Drove joint security assessments. Proactively provided advice on restructuring of information security department.
- Developed model recruiting and on-boarding program which rotated high quality talent into the organization.

### **Auditor of Public Accounts – Commonwealth of Kentucky – Frankfort, KY**

*State government agency accountable for review of public spending efficiency and effectiveness in the Commonwealth.*

**Director of Performance Audits** – April 1997 to February 1999

#### ***Key Accomplishments:***

- Created Commonwealth's first Performance Audit Division that continues to exist today. Recruited and trained first staff to conduct operational reviews. Instituted procedures covering research methods, benchmarking, performance measurement, process reengineering, survey instruments and focus groups – modeled on GAO.
- Led efficiency, effectiveness, and business process improvement reviews across various state programs including Medicaid, information technology, environmental protection, labor laws, and Guardians Ad Litem.
- Testified before legislative panels on outcomes of engagements. Presented to the Chief Justice of the Kentucky Supreme Court on children's legal services improvement needs.
- Developed recommendations for annual savings of over \$8 million; addressed revenue management practices, accounts receivable billing and collection, cash management, capital construction, medical services usage, and medical laboratory services. Introduced use of ACL and CAAT's methodologies.

**Director of Financial Audits** – April 1996 to April 1997

#### ***Key Accomplishments:***

- Supervised division of 50 professional staff in the engagement of over 700 financial statement audits across 200 local government entities covering \$1 billion of receipts and corresponding disbursements.
- Eliminated 32,000 hour backlog of work while reducing 7 professional and administrative positions. Supervised forensic accounting investigations with case files used to support investigations and prosecutions by Kentucky State Police, Revenue Cabinet, Federal Bureau of Investigation, and U.S. Attorney's Office.
- Directed transition from paper audit environment to nearly paperless audit environment.
- Supervised external public accounting firm contract work; Administered contract provisions.

### **Foreign Service Officer – U.S. Agency for International Development**

Washington, D.C., Budapest, Hungary and Bonn, Germany – January 1992 – April 1996

*United States Government's foreign assistance agency providing economic development and humanitarian assistance to end extreme poverty and promote resilient, democratic societies.*

Evaluated economic development and privatization programs in Russia, Central Europe, and Central Asia including stock exchange development, voucher and shareholder privatization programs, housing distribution, trucking and warehouse distribution privatization, as well as, country mission project management.

#### ***Key Accomplishments:***

- Developed strategy documents for global assurance and evaluation program.
- Led complex multi-country assessments of program effectiveness and efficiency.
- Assessed economic development and privatization programs in emerging economies.
- Exceeded goals while operating in a multi-lingual, multi-cultural, economically depressed environment.

### **U.S. House of Representatives and U.S. Senate – Washington, D.C.**

*District and Washington D.C. offices of Kentucky Representative and Senator.*

**Congressional Aide** – Summer Programs - May to August of 1986, 1987 and 1989

#### ***Key Accomplishments:***

- Researched appropriation and regulatory legislation. Drafted talking points and statewide newsletters.

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## ***EDUCATION***

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### **Executive Programs in Corporate Strategy**

- Health Care Leaders 2020 – Year Long Humana Executive Program led by Harvard and Dartmouth Professors
- Stanford University – Executive Program in Strategic Decisions: Decision Quality, Enterprise Risk Management
- The University of Chicago Booth School of Business – Executive Program in Corporate Strategy
- Six Sigma Black Belt Training

### **Patterson School of Diplomacy and International Commerce**

Master of Arts in Diplomacy and International Commerce – May 1991

International Marketing Studies – Wirtschaftsuniversitat, Vienna

### **University of Kentucky**

Bachelor of Science in Accounting – May 1989

President of the Student Body, Student Member of the Board of Trustees

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## ***PROFESSIONAL ACCOLADES***

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| <ul style="list-style-type: none"><li>• Former Audit Committee Chair, United Nations World Food Programme - \$5 billion global humanitarian organization</li><li>• Past speaker at Compliance Week, IIA General Audit Management and International Conferences, Numerous Global IIA Webcasts, American Hospital Association Compliance Officer Roundtable</li><li>• Institute of Internal Auditors Committees: Professional Ethics and Responsibility; Former Vice-Chair – Global Professional Development Committee, Led global competency development effort; Former Vice-Chair – Professional Issues Committee – Led review of 2013 COSO Update</li></ul> | <ul style="list-style-type: none"><li>• Strategic Risk Management Council, The Conference Board – 2005 to 2012</li><li>• Business Leaders for Education – Greater Louisville Inc.; Policy Committee Member</li><li>• Publications – Selecting, Using and Creating Maturity Models; Auditing the Control Environment; Global Competencies of the Internal Audit Profession</li><li>• Guest lecturer – undergraduate and graduate governance and audit courses – University of Kentucky, LSU, Bellarmine, UT Dallas</li><li>• UK School of Accountancy – Advisory Board</li><li>• 2011 Open Ethics and Compliance Group's GRC Achievement Award</li></ul> |
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