

*A SOLID FOUNDATION, A BRIGHT FUTURE*



**Regional  
HealthPlus**

2019  
Annual  
Report



EXECUTIVE LETTER.....	02
VALUE-BASED HEALTHCARE .....	03
• <i>Physician Engagement</i> .....	04
• <i>Patient Engagement</i> .....	09
• <i>Technical Infrastructure</i> .....	12
BUSINESS SERVICES .....	13
• <i>Managed Care Contracts</i> .....	14
• <i>The Network</i> .....	18
• <i>Financial</i> .....	19
2019 FINANCIALS .....	20
COMMITTEES .....	21
STAFF .....	23

Twenty-five years ago, Regional HealthPlus was founded as a financially and clinically integrated network of providers with the mission to collaborate with payers in risk arrangements. Things did not materialize as expected, so we adapted. We developed programs to make providers' work easier and more focused on patient care. That paid off. Today, we are closer to the risk arrangements than ever before, and we must continue to adapt.

As the leader in value-based healthcare, Regional HealthPlus has sought to be a steady hand in an ever-changing environment—an innovative and transformative force that enables and assists our physicians in caring for their patients in the most efficient and effective ways.

Our goal has been to make the transition to value-driven healthcare as seamless as possible. Our team of dedicated professionals works to engage both providers and patients to close care gaps, improve quality of life, and quantify the results. This is much easier said than done, but we applaud their hard work, their tireless quest to reach the next level of patient care and the great strides made in improving our performance scores.

2019 began with Spartanburg Regional Healthcare System's acquisition of the Mary Black Health System, which added two hospital campuses—one in Spartanburg and one in Gaffney—under the SRHS umbrella. That acquisition saw our network grow immediately by more than 40 physicians, which allows us to serve our community even better than before.

We rounded out our first 25 years with growth beyond our expectations. And we're ready for the challenge of the next 25.

After a quarter century, we are proud of our **solid foundation**, and look forward to a **bright future**—one we will build together!



**CHRIS A. SKINNER**  
EXECUTIVE DIRECTOR

**DEAN DAVIS, MD**  
EXECUTIVE COMMITTEE CHAIRMAN



*Though Regional HealthPlus continues to grow financially, its true value to the hospital system, our independent physicians and the community is immeasurable. With so many things competing for our providers' precious time, the work Regional HealthPlus does behind the scenes so that physicians can maximize the time they spend with their patients and deliver the best care that's in line with payers' performance-driven indicators strengthens our regional healthcare system and the populations we serve."*

**Nalin K. Srivastava, MD**

*Physician, Cardiology Consultants*





## One thing that hasn't changed in the past 25 years is the pressure on our primary care physicians to do everything right.

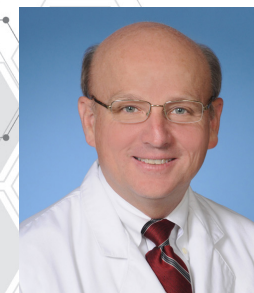
**A**gainst the backdrop of the changing healthcare landscape toward value-based healthcare and a population health management environment—two concepts that go hand-in-hand and heavily rely on data collection, collaboration, constant monitoring, and efficient processes—Regional HealthPlus has worked tirelessly to ease that transition.

Value-based healthcare sets the parameters for the quality and financial models for managing the healthcare of a given population. From here, the population can be identified, baseline data analyzed, and clinical actions can be determined to improve the health of that population. Population health management can then be quantified by improvements in cost, quality, and service for the patients.

With value-based healthcare gaining traction, risk-based contracts are on the horizon. The Regional HealthPlus team is preparing our providers for the future, building the processes and infrastructure necessary for success.

*Regional HealthPlus really upped its game this past year with physician engagement, adding a bevy of new educational modules through RHP Insight and video blogs about timely topics via RHP Connect. We are particularly proud of the success garnered in the Get2Goal quality improvement initiative that played a part in us exceeding state and national quality benchmarks with our largest managed population—a first-time accomplishment for us. Initiatives like this pave the way for a bright future as we meet the challenges of population health management.”*

**Nick Ulmer, MD, CPC, FAAFP**  
Chief Medical Officer,  
Regional HealthPlus







## Physician Engagement

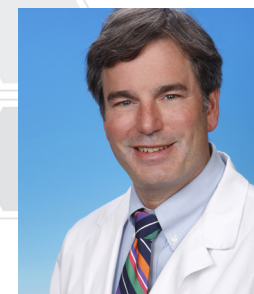
Through targeted physician engagement, office staff training and mid-level provider training, the Regional HealthPlus Engagement and Performance Team continued its aggressive push to move forward with established quality improvement initiatives and launch new ones. The success of these initiatives gives steady footing to physicians who find themselves more and more traversing the value-based healthcare landscape.

Much of the team's efforts build on the foundation of the CarePlus care coordination model—whether that means removing obstacles to improve provider workflow, targeting specific performance indicators for improvement or focusing on medication adherence in an effort to better manage patients' chronic diseases.

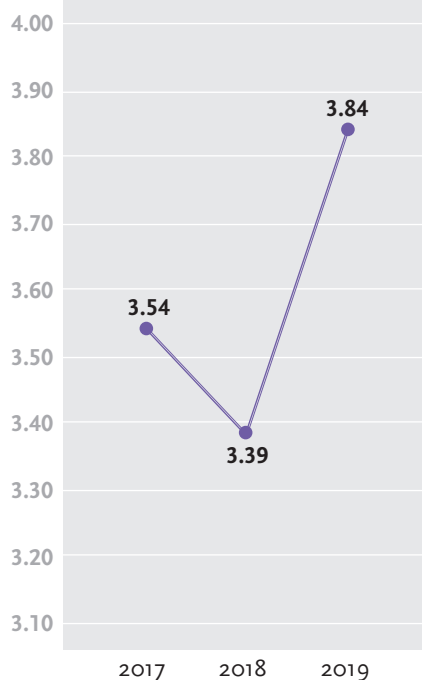
*In addition to providing exceptional care to patients, we as providers are also asked to focus on quality measures, improvement activities and patient satisfaction. In 2019, my office worked closely with the RHP Engagement and Performance team to ensure that we could be successful in all of these areas. The Engagement and Performance team attended on-site meetings and provided quality measure education. We worked closely with them on the Get2Goal initiative to focus on controlling blood pressure, lowering A1c results in diabetic patients and appropriate statin use in patients with cardiovascular disease. Through this collaboration and a strong team, we were able to gain significant improvements across many quality measures. We look forward to even greater achievements in 2020."*

**H. James Evans, MD**

Engagement and  
Performance Committee



### HUMANA OVERALL AVERAGE SCORES BY YEAR



Star scores improved year-over-year from 3.39 in 2018 to 3.84 in 2019. The scorecards are based on 18 quality measures that cover preventative care, chronic care management and medication adherence.

Regional HealthPlus improved on the performance rate for 12 measures and maintained the same rate year-over-year for two of the measures.

MEASURE NAME	2019	2018
Adult BMI Assessment	98%	97%
Breast Cancer Screening	77%	77%
Care for Older Adults: Functional Status Assessment	96%	90%
Care for Older Adults: Medication Review	89%	86%
Care for Older Adults: Pain Screening	98%	98%
Colorectal Cancer Screening	80%	77%
Comprehensive Diabetes Care: Eye Exam	75%	72%
Comprehensive Diabetes Care: HbA1c Poor Control	77%	79%
Comprehensive Diabetes Care: Medical Attention for Nephropathy	95%	96%
Disease Modifying Anti-Rheumatic Drug Therapy in Rheumatoid Arthritis	76%	74%
Medication Reconciliation Post-Discharge	50%	44%
Osteoporosis Management in Women Who Had a Fracture	44%	55%
Osteoporosis Management in Women Who Had a Fracture (New Year)	31%	9%
Plan All-Cause Readmissions	7%	8%
Statin Therapy for Patients with Cardiovascular Disease: Received Statin Therapy	81%	82%
Medication Adherence for Cholesterol (Statins): Statins	83%	81%
Medication Adherence for Diabetes Medications: Diabetes Medications	85%	82%
Medication Adherence for Hypertension (ACE or ARB): ACE	84%	82%
Statin Use in Persons with Diabetes	83%	79%

Source: Humana 2018 vs. 2019



### Physician Engagement Score

We had an overall Physician Engagement Score (PES) of 94.91 for all physicians in Regional HealthPlus.

The Engagement and Performance Team developed PES grids based on MIPS (Merit-based Incentive Payment System) criteria and specialty-specific components. The criteria includes metrics such as online education, improvement activities, patient satisfaction and the tracking of CMS quality metrics.

HIGH  
**100%**

---

AVERAGE  
**94.91%**

### Provider Engagement Meetings

In 2019, the Regional HealthPlus Engagement and Performance Team conducted 72 site visits between February and June. The visits included 133 physicians, 102 staff members, and 31 NP/PAs. The team provided steerage on Star reports, quality dashboards, quality improvement initiatives, coding updates, transitional care management processes, education opportunities, HCC coding, and medication adherence reports. In addition to the site visits, the Engagement and Performance team conducted 68 virtual meetings between August and November with providers as part of the Get2Goal initiative.

### Performance Incentive Pool (PIP)

2019 was the second year that Regional HealthPlus offered a performance incentive pool for physicians. Physician improvement results in more payout. The anticipated payout for 2019 more than doubled that of the prior year. The Humana average Part C and Part D scores both increased in 2019 over the previous year.

	2018 SCORE	2018 SCORE
<b>Humana Part C</b>	<b>3.79</b>	<b>3.83</b>
<b>Humana Part D</b>	<b>3.26</b>	<b>3.62</b>

*As an original member, I have been privileged to witness Regional HealthPlus shower value on the doctors, on the nurses, and on the healthcare system our organization serves. To be sure, the lives of us physicians have been made easier by RHP's educational and quality improvement initiatives and by our recent Performance Incentive Pool. 'Rewarding' is the best word to describe the physician relationship with Regional HealthPlus."*

**William F. James Jr., MD**

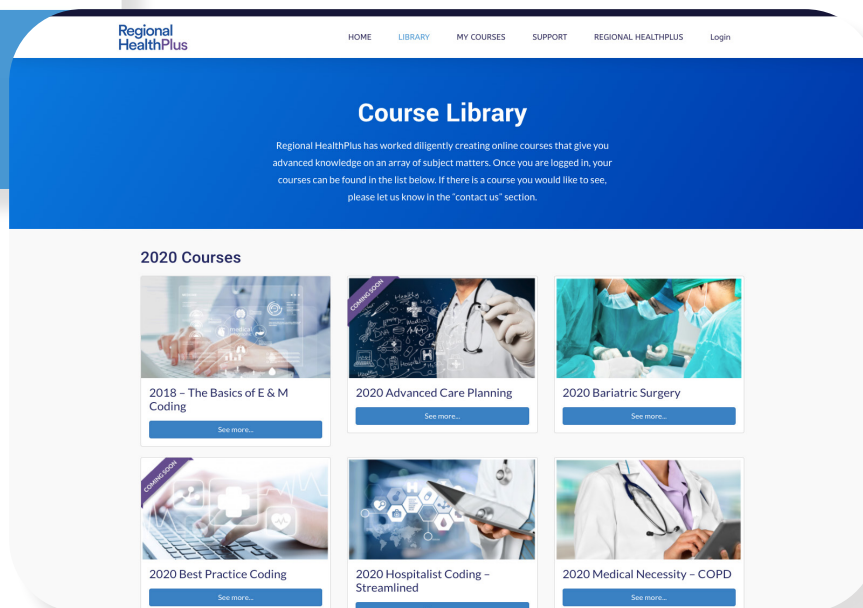




## Online Education Platform: RHP Insight

We launched our online provider education platform, RHP Insight, in 2018 and added 15 new training courses last year. Providers access RHP Insight educational sessions and training materials anytime and anywhere.

The RHP Insight platform was built to strategically align education modules with current healthcare trends and organizational goals.



## COURSES LAUNCHED IN 2019:

**1,695**  
COURSES COMPLETED BY  
PHYSICIANS IN 2019

- Medicare Wellness Visits
- Transitional Care Management
- Population Health Management
- Hierarchical Condition Category
- Consultation Services
- Evaluation and Management Coding
- Total Knee Arthroplasty
- Medical Necessity Heart Failure
- Get2Goal: Diabetes
- Get2Goal: Hypertension
- Get2Goal: Statin Use in the Prevention and Treatment of CV Disease and Statin Use in Diabetes
- Coding: Hospitalist History
- Coding: Hospitalist Exam
- Coding: Hospitalist Medical Decision-Making
- Coding: Hospitalist Streamlined



### Patient Satisfaction

Regional HealthPlus launched a new patient satisfaction tool in 2018 for its members. This tool expanded our real-time data collection capabilities and allows patients to respond through emails and text messages.

SURVEYS SENT TO PATIENTS IN 2019

331,527

SURVEYS RETURNED IN 2019

74,472

## Get2Goal Initiative

In 2019, we launched the quality improvement initiative Get2Goal to focus on three specific areas. We worked very closely with participating physicians to track the results of these measures: Hemoglobin A1c < 9, Blood Pressure < 140/90 and Statin Use in Patients with Cardiovascular Disease.

As part of the initiative, providers were required to participate in check-in calls with the Engagement and Performance team to discuss data trends and report any barriers or questions. Along with the check-in calls, physicians completed three online education modules and clinical staff were evaluated for blood pressure competencies.

In all, 118 providers completed all of the Get2Goal criteria and received Continuing Medical Education (CME) credit hours and credit for a quality improvement project.

### RESULTS WERE AS FOLLOWS:

MEASURE	BASELINE	FINAL RESULTS	% CHANGE
BP Control	61.55%	66.55%	6.33%
A1c <9*	34.41%	23.53%	10.88%
STATIN	70.22%	74.10%	3.88%

\* Inverse measure

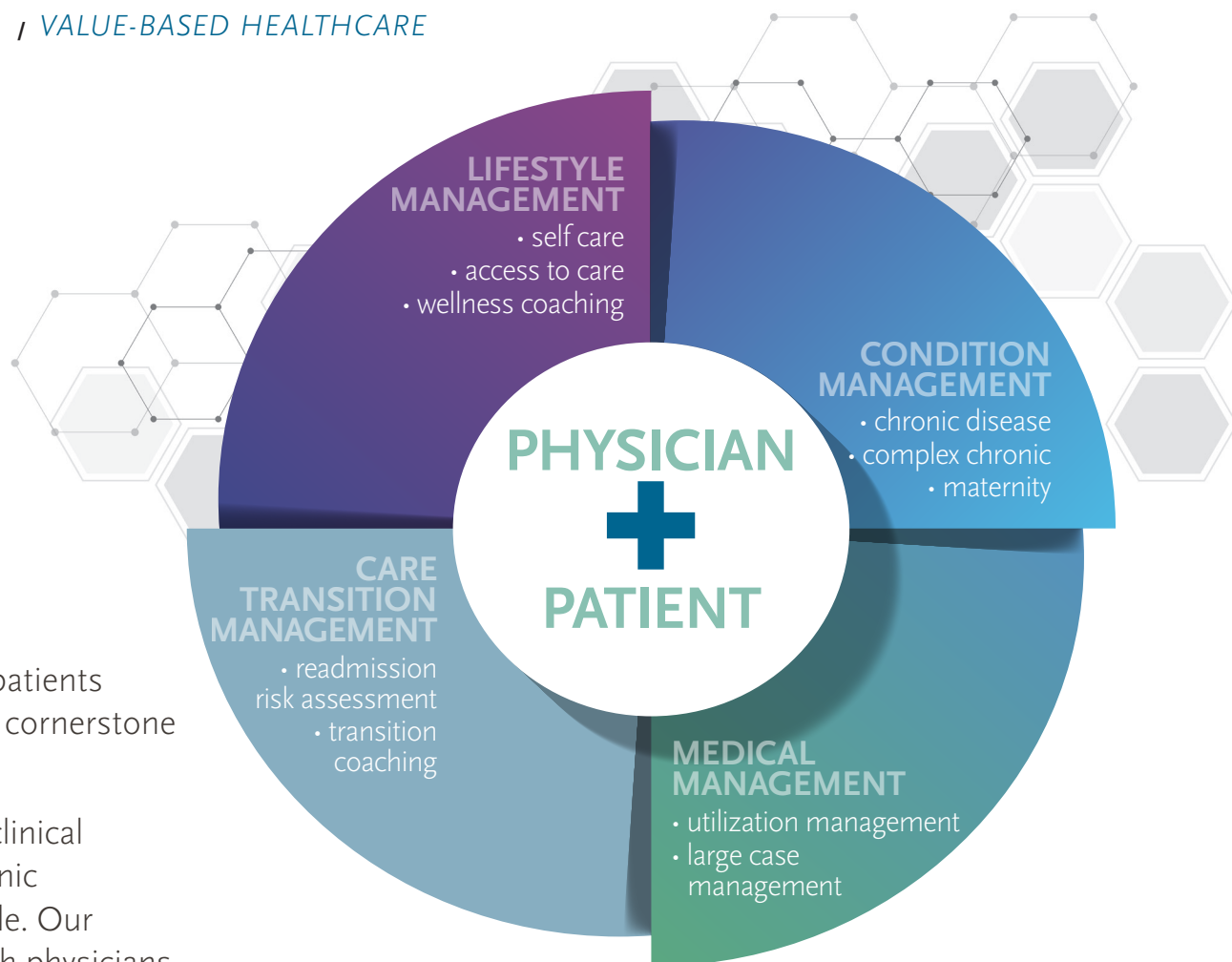


## Patient Engagement

Patient-centered care means we engage our patients before and after they see their doctor. It's the cornerstone of population health management.

This focus on whole-person support, not just clinical support, helps patients to better manage chronic conditions and strive toward a healthier lifestyle. Our CarePlus team makes calls in coordination with physicians to get a more thorough account of a patient's health profile, taking into account any existing conditions and social determinants that may affect their health.

This team-based care allows doctors and supporting staff to practice at the top of their training, making the most of their talents and experience rather than getting bogged down by unnecessary details. And it works.



### CarePlus Care Coordination Model

We've spent years honing our CarePlus model, which has at its heart the patient's relationship with their physician.



23,752

RISK ASSESSMENTS  
PERFORMED IN 2019

12,318

RISK ASSESSMENTS  
PERFORMED IN 2018

Regional HealthPlus made big strides last year, nearly doubling the number of risk assessments conducted over 2018, the first year they were performed.

### Complex Case Management

Nurse navigators, case managers and healthcare coaches present the most complex of the cases identified in these assessments to the RHP Complex Case Review Team. This team of physicians, pharmacists, social workers and nurses—led by the Chief Medical Officer—holds roundtable discussions on these cases, and the plan of care that emerges is then coordinated with the patient's physician.

The Complex Case Review Team reviewed 66 cases in 2019.

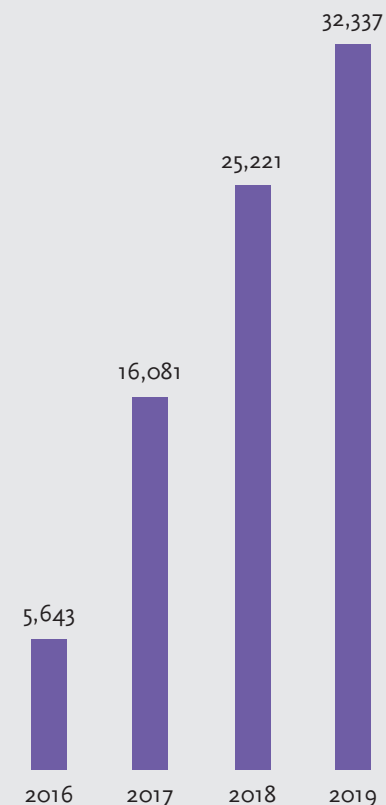
### Medicare Wellness Visits

Time is precious. And we're saving more of it for our patients and providers, creating an even more efficient system and making it easier for physicians to deliver higher quality care.

Our care coordinators call patients to conduct health-risk assessments, making it easier for physicians to better flag risk factors and identify preventive care for each person they serve. This saves time when patients come in for their appointments—an average of 20 minutes per visit—and facilitates more accurate coding.

These calls set up annual Medicare Wellness Visits, which remove much of the clerical burden from our providers and allow them to close more care gaps. We have seen the number of Medicare Wellness Visits completed increase steadily over the last four years. This high rate of completion correlates with improved quality scores and better coding opportunities.

Medicare Wellness Visits  
Number Completed



3,576

TRANSITIONAL CARE  
HOME VISITS

3,218

PATIENTS COMPLETED  
TRANSITIONAL CARE  
PROGRAM WITHOUT  
READMISSION

459

HIGH-RISK PATIENTS  
IN CARE MANAGEMENT

## UTILIZATION REVIEW

Total authorizations.....	3,387
Medical Director reviews.....	459
Inpatient reviews .....	804
Appeals .....	9
Complex care coordination ...	28

## Transitional Care Management

Our CarePlus team continues working to reduce hospital readmission rates, close care gaps and utilize Medicare's 30-day care code.

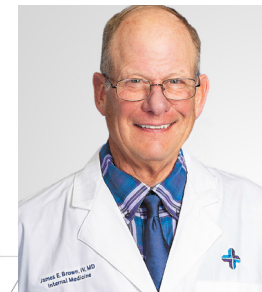
The team meets the patient while they are still in the hospital and reaches out to them within 48 hours of discharge. This crucial step helps with medication reconciliation, scheduling follow-up doctor appointments, identifies gaps in care, and connects patients with community services if they are needed. Patients with the highest risk factors are assigned a nurse navigator for up to six months.

Overall, we're seeing a 10 percent readmission rate for those who complete the 30-day program. The high number of patients who complete the transitional care program without readmission correlates to improved post-discharge quality scores.



*As a founder and 20-year chairman, I've been fortunate to watch Regional HealthPlus succeed where others have failed. A patient who is more engaged with their care team is healthier and happier. As our staff builds relationships with patients, we see them start to take initiative for improving their own health. And witnessing that improvement is simply wonderful."*

**Dr. James E. Brown, IV, MD**





## Technical Infrastructure

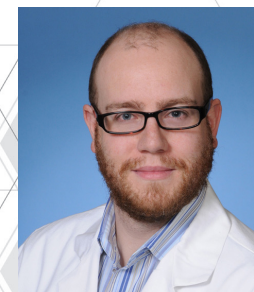
Data-driven healthcare is easier said than done, with payer data and patient data necessary for success—data that needs to be streamlined, standardized and actionable.

Regional HealthPlus continued working in 2019 to create platforms to better collect, analyze and publicize this information across our network. We invested in a new claims data analysis platform and we are developing predictive modeling software.

The rapid evolution of technology presents its own challenges—in terms of both costs and operations—but we are working diligently to stay ahead of the curve to deliver the best data to our providers.

*Value-based healthcare is data-driven, evidence-based healthcare. Thanks to timely access to accurate, trustworthy data, the CarePlus team is more efficiently providing data to payers. This allows CarePlus to more effectively provide care coordination, increasing patient engagement and improving outcomes, giving our providers a much needed leg up in a rapidly changing marketplace.”*

**Vince Slater, DO, MSHI**  
Information Technology  
Committee







## Together, we succeed.

**R**egional HealthPlus provides subject-matter experts to help practices of all sizes compete in the healthcare market. Whether we're negotiating contracts with insurance companies on behalf of our providers, recovering dollars through our escalated claims review, or providing on-site assistance, our goal is to help providers successfully navigate the rapidly changing marketplace.

We are growing the contracts we have in place. We are growing our network of physicians. We are growing financially.

We share in the success that's indicative of that growth. And when we succeed, healthcare becomes more affordable and accessible for the patients in our markets.

*Our partnership with Regional HealthPlus is invaluable. As a practice that serves Upstate South Carolina, we rely on the expertise and behind-the-scenes work RHP does to help make our organization a leader in the rapidly changing healthcare market. We value our relationship with Regional HealthPlus and the work we do together."*

**Melissa Twombly, MBA, CPC**  
Chief Executive Officer,  
Urology Center of Spartanburg

### NETWORK MANAGEMENT

- Office visits: **191**
- Staff professional education classes: **6**

Successful Insurance Processing

Effective Denial Management and Rejection Prevention

Management and Leadership for the Medical Office

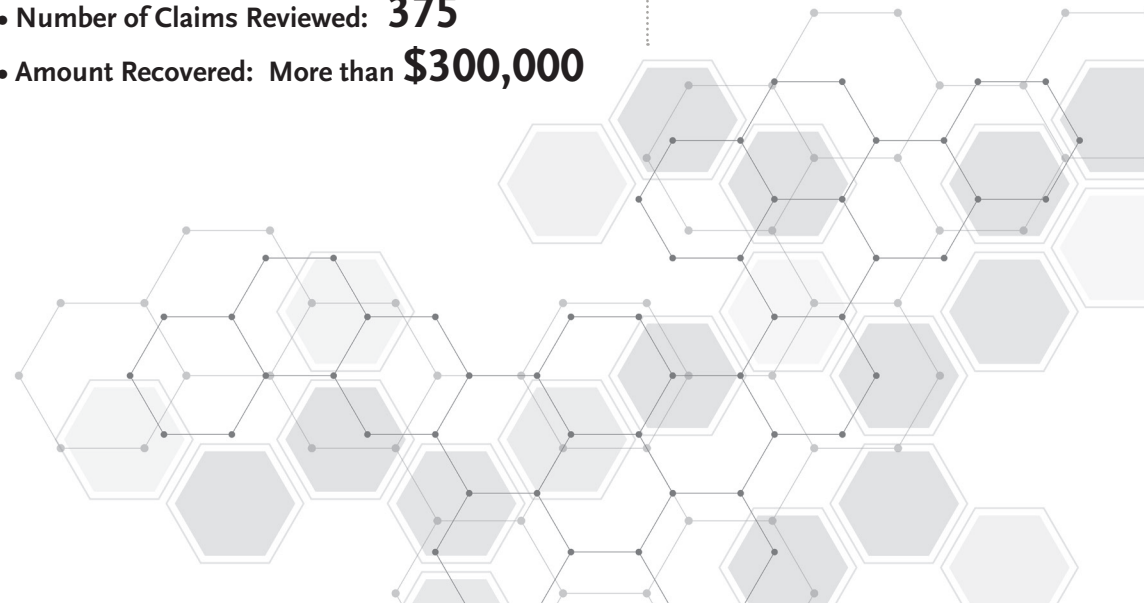
Using Modifiers to Improve Claim Accuracy

Medicare and Compliance Changes 2020

CPT Code Update 2020

### ESCALATED CLAIMS RESOLUTION

- Number of Claims Reviewed: **375**
- Amount Recovered: More than **\$300,000**





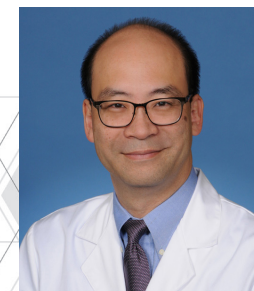
## Managed Care Contracts

Quality over quantity. Value over volume. These are some of the forces that drive the Regional HealthPlus contracting team as it develops new payer engagement strategies and evaluates existing contractual models. And we do this with increasing emphasis on value-based components as we move toward an environment with more downside risk.

2019 brought another year of growth in our current contracts and associated claims resolution issues—taking us another step toward **a bright future**.

*The world of healthcare contracting certainly is dynamic. We approach and evaluate our payer engagement strategy with the end goal of developing worthwhile ways of renegotiating or adding new contracts. The process continues to grow and evolve in this challenging environment."*

**Bang Giep, MD**  
Chair, Contracting Committee



### *Payer Contracts*

#### CURRENT CONTRACTS

Commercial: 17  
Medicare Advantage: 10  
Medicaid Managed Care: 4  
Governmental: 1  
Behavioral Health: 6  
Workers Compensation: 2

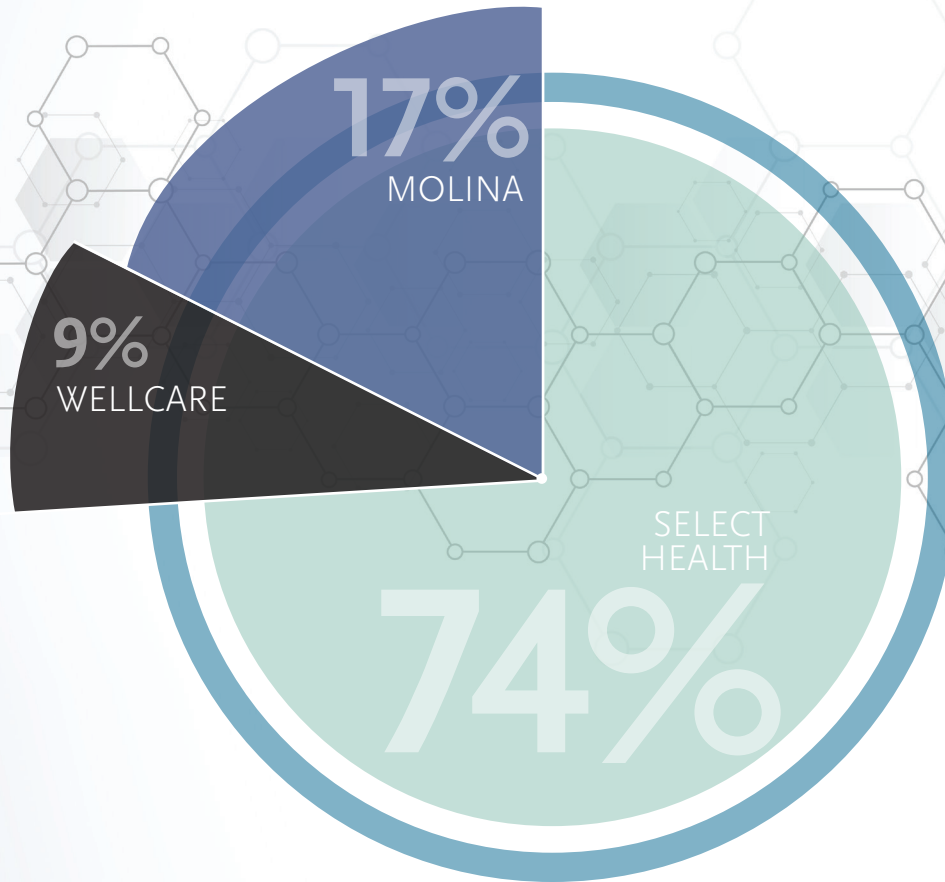
#### NEGOTIATED NEW CONTRACTS

Absolute Total Care  
Bright Health

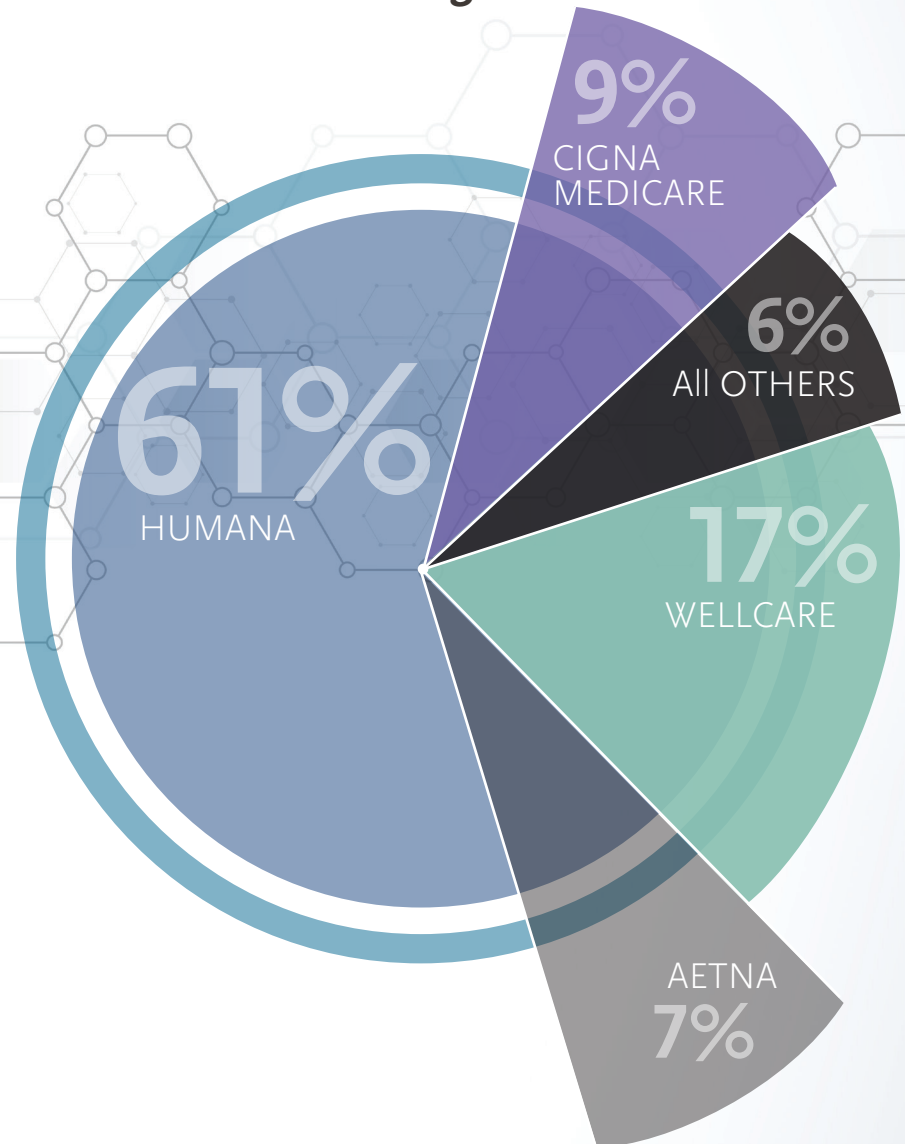
#### RENEGOTIATED CONTRACTS

Molina Healthcare Dual Options

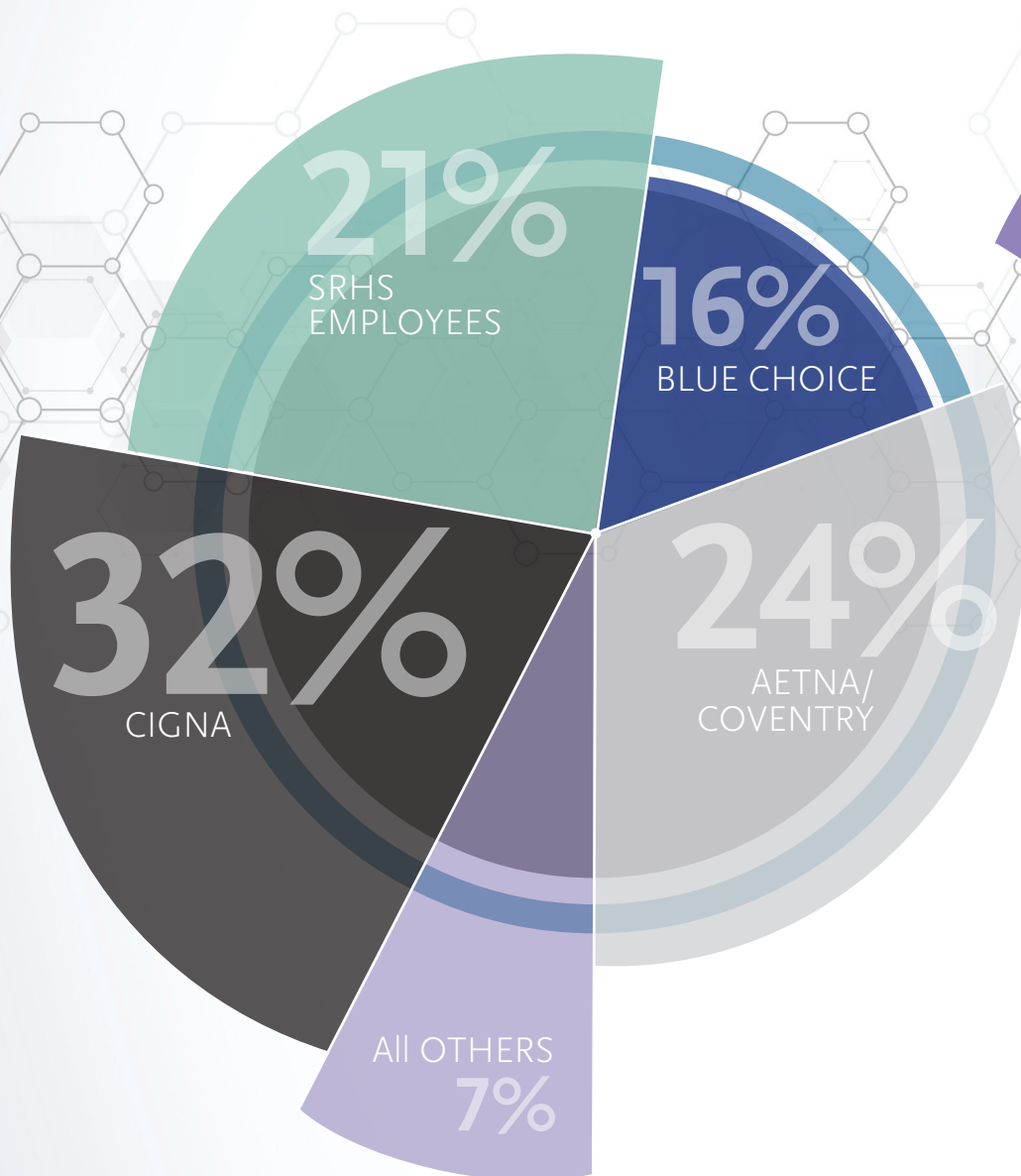
## Managed Medicaid Claims 2019



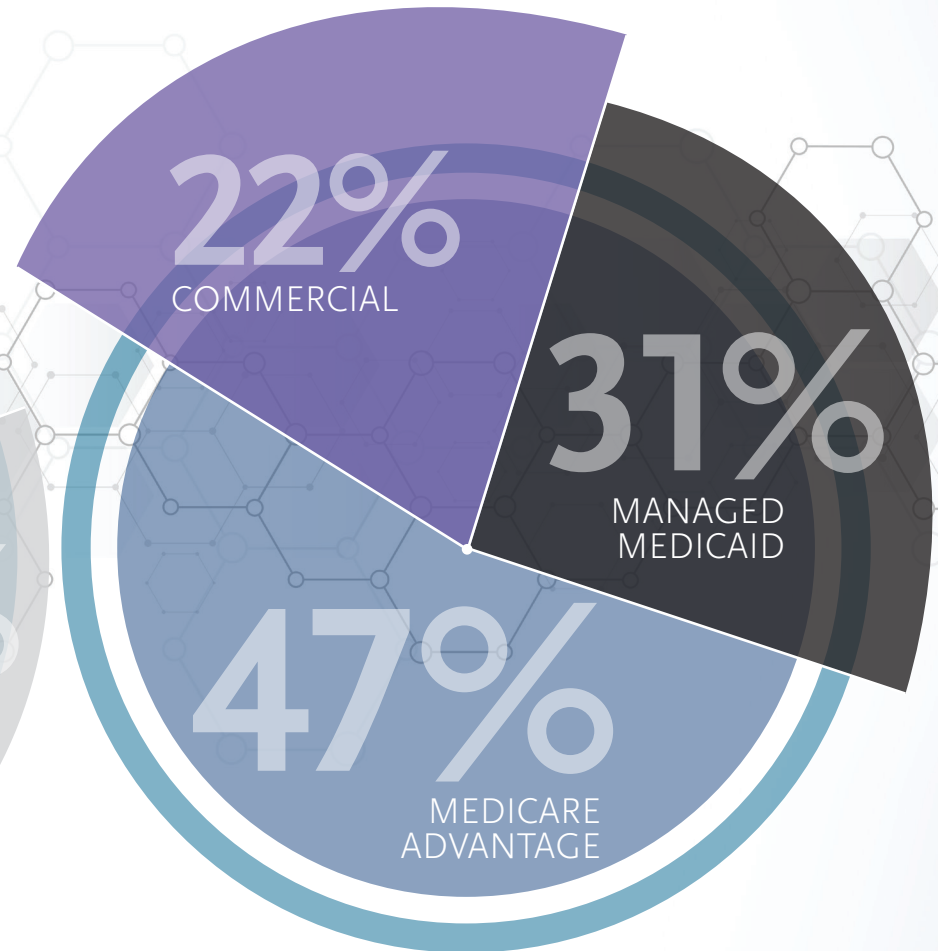
## Medicare Advantage Claims 2019



Commercial Claims 2019



Total Claims 2019



## 2019 CONTRACTS

### Commercial

- Aetna PPO/POS/EPO
- Beech Street
- BlueChoice
- Choice Care PPO (Humana)
- Cigna
- Coventry Health Care Carolinas
- Employers Health Network
- Evolutions Healthcare
- First Health PPO
- Integrated Health Plan
- MedCost/MedCost Ultra
- MultiPlan and Private Healthcare Systems
- NovaNet, Inc.
- Provider Select
- Spartanburg Regional/Apella Employee Health Plan
- Three Rivers Provider Network
- USA Managed Care Organization

### Medicare Advantage

- Absolute Total Care (Healthy Connections Prime)
- Aetna Medicare Advantage
- allwell
- America's First Choice
- BlueCross BlueShield of SC – Total PPO
- Bright Health
- Cigna Medicare
- First Choice VIP Care PLUS (Healthy Connections Prime)
- Humana
- Molina Healthcare
- Wellcare

### Medicaid Managed Care

- Absolute Total Care
- First Choice (Select Health)
- Molina Healthcare
- Wellcare

### Governmental

- TRICARE

### Behavioral Health

- American Mental Health Network
- Beacon/PsychCare
- Companion Benefit Alternatives
- Comprehensive Behavioral Care, Inc.
- Magellan Behavioral Care, Inc.
- Magellan Behavioral Health
- Value Options (Commercial)

### Workers' Compensation

- Corvel
- Key Risk







## The Regional HealthPlus Network

With Spartanburg Regional's acquisition of Mary Black Health System on Jan. 1, 2019, more than 40 providers immediately became a part of our network. And our overall number of credentialed physicians remains on an upward trajectory, with 1,226 providers now part of Regional HealthPlus. The Regional HealthPlus Membership and Participation Committee continues to diligently evaluate our network of providers and develop plans to further expand it. Our growing network allows us even more opportunities to better manage the health of growing patient populations.

*Spartanburg Regional's acquisition of the Mary Black Health System was a milestone in the local healthcare market. By adding the Mary Black campuses in Spartanburg and Cherokee counties to its portfolio, Regional was able to realize cost and staffing efficiencies and better quality of care for our patients in both counties. The result positions Spartanburg Regional as one of the leading healthcare systems in the Upstate."*

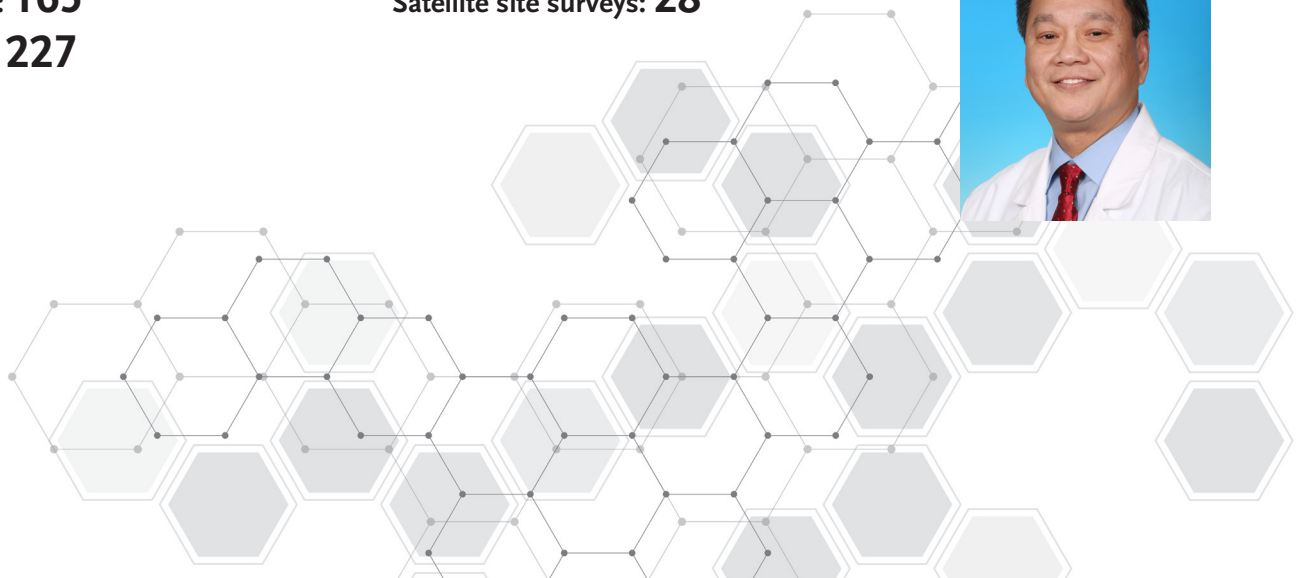
**Robin Go, MD**  
Chair, Membership and Participation Committee

### MEMBERSHIP AND CREDENTIALING

New physician members: **134**  
New affiliates credentialed: **165**  
Physician reappointments: **227**  
Delegated audits: **14**  
Average score: **99.58%**

### SITE SURVEY

Primary practice site surveys: **66**  
Satellite site surveys: **28**





## Financial

2019 proved to be another strong year for Regional HealthPlus, our fourth consecutive year of net revenue and net income growth.

Our approach is working. By engaging patients outside of clinical settings and giving physicians the freedom to practice at the top of their licenses, we are able to deliver higher quality care and achieve higher quality scores. Through targeted physician engagement and specific quality improvement initiatives like Get2Goal, our providers are seeing improvements across numerous quality measures. By investing in our technical infrastructure, standardizing and streamlining data collection and sharing, our providers are able to put more reliable information in the hands of payers more quickly than ever before.

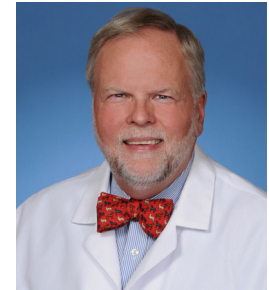
In a world of value-driven healthcare, we are providing that value. And it shows.

### NET REVENUE AND NET INCOME

YEAR	NET REVENUE	NET INCOME
2019	\$ 7,852,624	\$ 4,217,757
2018	\$ 7,282,415	\$ 3,937,625
2017	\$ 6,436,098	\$ 2,129,399
2016	\$ 5,201,388	\$ 1,916,432

*Change is never easy, but it's a fact of life—especially in healthcare. Thanks to Regional HealthPlus, particularly the training offered to providers and office staff, we have been able to smooth the transition to a value-driven environment. And we are navigating this disruption in a way that improves patient care while yielding tangible financial results."*

**Rob McDonald, MD**  
Finance Committee



**BALANCE SHEET**

Year ended December 31	2019	2018
<b>ASSETS</b>		
Cash and cash equivalents	\$ 10,642,515	\$ 13,612,338
Due from Spartanburg Regional Health Services District, Inc.	2,725,828	1,024,240
Due from member physicians	1,310,671	1,466,458
Prepaid expenses	5,585	5,131
<b>Total assets</b>	<b>\$ 14,684,599</b>	<b>\$ 16,108,167</b>
<b>LIABILITIES, REDEEMABLE MEMBERSHIP UNITS, AND MEMBERS' CAPITAL</b>		
Accounts payable	\$ 144,113	\$ 62,080
Due to Spartanburg Regional Health Services District, Inc.	386,864	371,109
Withholdings payable	3,780,152	6,874,255
Other liabilities	1,053,445	—
Physician incentive payable	743,283	834,008
<b>Total liabilities</b>	<b>6,107,857</b>	<b>8,141,452</b>
<b>REDEEMABLE MEMBERSHIP UNITS</b>		
Class A Units	1,808,018	1,523,080
<b>MEMBERS' CAPITAL</b>		
Class B units	316,500	316,500
Retained earnings	6,452,224	6,127,135
<b>Total members' capital</b>	<b>6,768,724</b>	<b>6,443,635</b>
<b>Total liabilities, redeemable membership units, and members' capital</b>	<b>\$ 14,684,599</b>	<b>\$ 16,108,167</b>

## STATEMENTS OF OPERATIONS AND RETAINED EARNINGS

Year ended December 31	2019	2018
Revenue	\$ 7,852,624	\$ 7,282,415
Operating expenses:		
Salaries and wages	2,493,941	2,424,666
Purchased services	494,032	339,923
General and other	646,894	580,201
Total operating expenses	<u>3,634,867</u>	<u>3,344,790</u>
Net income	4,217,757	3,937,625
Change in redemption value of membership units	(284,938)	64,640
Distributions	(3,470,204)	(2,127,509)
Stock redemption	<u>(137,526)</u>	<u>(64,640)</u>
Increase (decrease) in retained earnings	325,089	1,810,116
Retained earnings at beginning of year	6,127,135	4,317,019
Retained earnings at end of year	<u>\$ 6,452,224</u>	<u>\$ 6,127,135</u>



**Executive Committee**

Dean Davis, MD – *Chair*  
 Marc Bingham, MD  
 Robert Britanisky, MD  
 James Brown, MD – *Emeritus*  
 Christopher Cutshall, MD  
 Samuel Gacha, MD  
 Bang Giep, MD  
 Robin Go, MD  
 Pranay Patel, MD  
 J. Paul Ross III, MD  
 Mark Aycock  
 Paul Butler  
 Kenneth Meinke, CPA  
 Nick Ulmer, MD - CMO  
 Deborah Yarborough  
 Chris Skinner

**Finance Committee**

Kenneth Meinke, CPA – *Chair*  
 Bogdan Gheorghiu, MD  
 Bang Giep, MD  
 Robert McDonald Jr., MD  
 J. Paul Ross III, MD  
 Amanda Herin, CPA  
 Anne Key, CPA  
 Travis Crocker  
 Chris Skinner

**Contracting Committee**

Bang Giep, MD – *Chair*  
 Shawn Birchenough, MD  
 Preston Bishop, MD

Christopher Cutshall, MD  
 Dean Davis, MD  
 Joseph Mobley, MD  
 Pranay Patel, MD  
 Janessa Perez-Motlis, MD  
 Kenneth Meinke, CPA  
 Paul Butler  
 Travis Crocker  
 Deborah Yarborough  
 Chris Skinner

**Membership & Participation Committee**

Robin Go, MD – *Chair*  
 Brian Baghdady, MD  
 Rowena DesAilly-Chanson, MD  
 Robert Goodlett, MD  
 Richard Weir, MD  
 Leslie Kennedy, NP  
 Anthony Raynor, PA  
 May-Yin Suen, PA  
 Becky Williams, NP  
 Tammie Culbreth  
 Taylor Eubanks  
 Alison Rosenberger  
 Chris Skinner

**Collaborative Care Committee**

Nick Ulmer, MD – *Chair*  
 Kelan Brown, MD  
 Alfred Campbell, MD  
 Jack Cleland, MD  
 Samuel Gacha, MD

Bang Giep, MD  
 E. Bert Knight III, MD  
 Robert MacDonald, MD  
 J. Paul Ross III, MD  
 Mayte Sandrin, MD  
 Henry Shugart, MD  
 Vincent Slater, DO  
 Amber Wallace, MD  
 Karla Lamb, RN  
 Angie Roberson, RN  
 Holly Becker  
 Chris Skinner

**Population Health Management Committee**

Pranay Patel, MD – *Chair*  
 Marc Bingham, MD  
 Frances Kunda, MD  
 Christopher Lombardozi, MD  
 Bang Giep, MD  
 James Harber, MD  
 Mark Aycock  
 Paul Butler  
 Phil Feisal  
 Phillip Humphrey, PharmD  
 Tony Kouskolekas  
 Karla Lamb, RN  
 Kenneth Meinke, CPA  
 Paul Newhouse  
 Angie Roberson, RN  
 Holly Becker  
 Nick Ulmer, MD - CMO  
 Kim Walker

Deborah Yarborough  
 Chris Skinner

**Engagement & Performance Committee**

Robert Britanisky, MD – *Chair*  
 Kelan Brown, MD  
 Henry Butehorn III, MD  
 Dean Davis, MD  
 H. James Evans, MD  
 Gregory Gibson, MD  
 Donna Smith, MD  
 Nick Ulmer, MD - CMO  
 Didi Lawter  
 Gina Louis  
 Kim Walker  
 Stephanie Wall  
 Chris Skinner

**Information Technology Committee**

Marc Bingham, MD – *Chair*  
 Nivedita Bijoor, MD  
 Douglas Rieth, MD  
 Vincent Slater, DO  
 Nick Ulmer, MD - CMO  
 Scott Broome  
 Steve Hester  
 Harold Moore  
 Holly Becker  
 Travis Crocker  
 Kim Walker  
 Chris Skinner



**Administration**

Chris Skinner – *Executive Director*  
 Nick Ulmer, MD – *Chief Medical Officer*

**CarePlus**

Holly Becker – *Director of Patient Engagement/Care Coordination*  
 Vicki Blalock, RN – *Manager of Patient Engagement*  
 Brittney Frazer – *Manager of Care Coordination*  
 Joyce Allen, LPN – *Senior Care Coordinator*  
 James Curry, CMA – *Senior Care Coordinator*  
 Savannah Davis, RMA – *Senior Care Coordinator*  
 Deena Hampton, RMA, CPC – *Senior Care Coordinator*  
 Brenda Kelley, LPN – *Senior Care Coordinator*  
 Cindy Konieczny, CMA, CMOM, CMIS – *Senior Care Coordinator*  
 Kay Mullins, RMA – *Senior Care Coordinator*  
 Matt Trammell – *Senior Care Coordinator*  
 Beverly Varner – *Senior Care Coordinator*  
 Kala Wilder – *Senior Care Coordinator*  
 Hannah Dewart – *Care Coordinator*  
 Shameka Durrah – *Care Coordinator*  
 Traci Hurt – *Care Coordinator*  
 Kalee Jefferies – *Care Coordinator*  
 Elaine Jones – *Care Coordinator*  
 Latoya Martin – *Care Coordinator*  
 Jada Neuse – *Care Coordinator*  
 Cynthia Rose – *Care Coordinator*  
 Jennifer Walls – *Care Coordinator*  
 Sharon Bacchus, RN – *Care Manager II*  
 Jeff Ciscell, LMSW – *Care Manager II*  
 Catherine Creager, RN – *Care Manager II*  
 Susan Ford, RN – *Care Manager II*  
 Lisa Kirby, RN – *Care Manager II*  
 Lori McHugh, RN – *Care Manager II*

Margaret Jones, CHWC – *CFM Community Health Worker*  
 Erin Humphreys, MHA – *Health & Wellness Coach*  
 Beth Simmons, RN – *Medical Management Coordinator*  
 Donna Aarnink, RN – *Medical Management Coordinator*  
 Kelly Betenbaugh – *Care Transitions Coach*  
 Ronnie Roberson – *Care Transitions Coach*  
 Ashley Murphy – *Care Transitions Coach*

**Network Operations**

Alison Rosenberger – *Manager of Network Operations*  
 Tina Camp – *Payor Credentialing Specialist*  
 Taylor Eubanks – *Membership & Credentialing Coordinator*  
 Mellisa Rice – *Payor Credentialing Specialist*

**Operations & Finance**

Travis Crocker – *Director of Financial Operations & Data Analytics*  
 Tammie Culbreth – *Director of Operations*  
 Angela Foster – *Data & Analysis Coordinator*  
 Sedale Jones – *Operational Analyst*  
 Deborah Yarborough – *Operations Specialist*

**Performance Management**

Kim Walker – *Director of Provider Engagement & Performance*  
 Gina Louis – *Manager of Provider Engagement & Performance*  
 Didi Lawter – *Provider Engagement & Performance Specialist*  
 Stephanie Wall – *Provider Engagement & Performance Specialist*

**Network Relations**

Barbara Gipson – *Manager of Provider Relations*