

EXPERIENCE

UFHealth Shands, Gainesville, FL

**Senior Vice President/Chief Financial Officer
& CFO UF Health Science Center**

1998 – 2014

2009 – 2014

Major Accomplishments:

UFHealth Shands has undergone a transformation realigning functions and focus to concentrate resources and management effort on our core mission. The following is a recap of this activity/transformation:

- Established the financing structure for two new bed towers: a 192-bed clinical tower with a new Emergency Services component (a \$390M project) and a 210-bed clinical tower for Cardiac and Neuroscience programs (a \$460M project).
- Modeled the financial implications of closing a 200+ bed community hospital operating with 1.5 miles of our main campus and consolidated the operations and staffing into the main campus
- Assisted in the packaging and ultimate sale of selected assets from three community hospitals that were habitually losing money into a Joint Venture “JV” with a for-profit chain. Shands maintained a 40% interest in the JV. This provided approx. \$20.9M in cash and eliminated the cash out-flow to support the operations and ongoing capital needs.
- Coordinated the financial planning and creditor discussions necessary to turnaround and recapitalize two financially distressed hospitals in Jacksonville. The turnaround plan required an equity infusion from the City of Jacksonville, State of Florida, the University of Florida and UFHealth Shands to fund the workout; creditor concessions, including credit enhancement and relaxed covenants; and an effective operational plan that would stabilize the underlying organization and create the building blocks for a sustainable turnaround.

After three years of profitable operations the balance sheet reflected an improvement of \$180+M in net assets, \$65+M in cash and investments, and a \$90M reduction in long-term debt outstanding.

Ultimately, UFHealth Jacksonville Medical Center was permitted to operate independently as an affiliate versus a subsidiary of UFHealth Shands. Shared services are provided through a contractual relationship.

- Instituted a system-wide risk assessment used for the annual internal audit and compliance work plans.
- Managed the development of the system's strategic financial plan, creating a 10-year capital model, long range financial forecast integrating the System's capacity with the System's defined needs/objectives. Outcome is a dynamic model that focuses on building the balance sheet placing an emphasis on growing the organization's board designated funds.
- Enhanced cash flow through the establishment of a revenue cycle team with broad organization representations. This group has been effective in reducing days outstanding and improving cash collections over expected net revenues by over \$5M per year for the past several years.
- Restructured/refinanced virtually all of the outstanding debt resulting in significant reductions in the annual debt service. The restructuring included straight financings, the issuance of synthetic-

fixed and synthetic-variable debt, the use of grantor trusts and tenders-in-lieu of redemption (to preserve bond insurance), and strategically timed debt reductions to improve the credit structure.

- Restructured our insured auction rate securities to more stable variable rate demand obligations and recently developed a debt redemption program reducing long-term-debt through three separate transactions by \$45M and generating a capital gain of approximately \$25M.
- Closed on a Total Return Trust Structure acquiring \$75M of our debt at 69.875% of par, creating an opportunity to reduce debt by approx. \$23M at Shands option.
- Coordinated the restructuring of Shands' Home Care operation resulting in the closure of units operating below established margins, selling selected assets/offices to a for-profit Home Care Corporation while downsizing and restructuring the remaining components to eliminate operating losses of approximately \$10M per year.
- Developed three unique models defining the health system's commitment to the College of Medicine in support of their educational, clinical and research missions.
- Revamped the operating and capital budgeting involvement of the clinical and management leaders of Shands HealthCare.

Beth Israel Deaconess Medical Center, Boston, MA
Senior Vice President/Chief Financial Officer

1996 – 1998

Beth Israel Deaconess Medical Center (BIDMC) - the academic medical center formed by the merger of Deaconess and the Beth Israel Hospitals.

The immediate concern post-merger was the conversion of all major information systems, the consolidation of clinical programs including the rationalization of services among the merging institutions, the integration of academic facility group practice plans, development of a single institutional operating budget, and resolution of the wage and benefit parity issues.

- During the first year of operations, finance converted all major financial systems, consolidated the financial staffs of the predecessor corporations, developed a single integrated budget, rationalized the charge structure for the consolidated enterprise, developed a long range forecast identifying capital needs and available funds, and developed a conceptual approach of realigning investments to create funds reflective of the Board commitments.

Pathway Health Network, Boston, MA
Senior Vice President/Chief Financial Officer

1988 – 1996

For the first six years (1988-1994) held three predominant roles simultaneously: the Chief Financial Officer of the system's parent corporation, Pathway; the Chief Financial Officer of the Deaconess Hospital, a 400+ bed tertiary care facility with formal academic ties to Harvard; and the Chief Financial Officer of the Deaconess Professional Practice Group, a 200+ physician academic faculty practice plan.

Major Accomplishments:

- Developed a budget model linked to the decision support system. This allowed for the rapid development of the budget and focused management's attention on targets of opportunity. The model and process lead to the reduction of \$27M in expenses for the Deaconess Hospital in fiscal 1995.
- Negotiated the sale of selected assets of the Deaconess Home Healthcare Corporation; the Deaconess' general partnership interest in the New England Surgicenter; and the Shields Warren Research Laboratory Building. Income recognized approximated \$28M.

- Negotiated the financial terms for the acquisition of the Nashoba Community Hospital, the Glover Hospital, the Waltham Weston Hospital and the New England Baptist Hospital. The new subsidiaries represented an increase in net assets in excess of \$110M and an increase in cash and investments of approximately \$50M.
- Developed a predictable and stable income stream to support research through the establishment of a family of restricted and unrestricted funds. This approach eliminated the need to support the programmatic shortfall of research from clinical activities.
- Completed three debt issues, creating access to \$160M for the hospital's overall expansion plans. Worked with the rating agencies to maintain the hospitals A rating.
- Created a corporate accounting group to augment the activities of the various hospital finance departments.

Valley Regional Health System, Methuen, MA
Senior Vice President/Chief Financial Officer

1985 – 1988

Major Accomplishments:

- Activities included involvement in the development and enactment of Healthcare Legislation for underfinanced hospitals resulting in forty Massachusetts Hospitals receiving an additional \$100M in revenues per year.

Leonard Morse Hospital, Natick, MA
Vice President for Finance - CFO

1982 – 1985

Memorial Hospital, Worcester, MA
Controller

1974 - 1982

EDUCATION

Nichols College
Northeastern University

M.B.A. 1980
B.S.B.A. 1974