

RICHARD F. LACY, MHA, CPC, FMC

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SUMMARY OF QUALIFICATIONS:

Managed care contracting and provider relations experience ♦ Reimbursement and contract negotiation ♦ Process improvement ♦ Financial and clinical data analysis ♦ Program development and execution ♦ Knowledge in health care trends and quality reporting

EDUCATION:

Trinity University, San Antonio, Texas. MHA – Master’s, Health Care Administration, 1998

Southern Methodist University, Dallas, Texas. BA Psychology, 1993

PROFESSIONAL ORGANIZATIONS AND CERTIFICATIONS:

AAPC – American Academy of Professional Coders; Certified Professional Coder (CPC)

AFMC – Association of Forensic Medical Coders; Certified Forensic Medical Coder

ACAP – Alliance of Claims Assistance Professionals; Consultant

AMBA – American Medical Billing Association; Member

EMPLOYMENT HISTORY:

Transparency Healthcare, LLC

Consultant and Founder, 3/2012 – current

Independent contractor serving as medical billing expert.

Consultant and subject matter expert on medical payment disputes.

Completed numerous reports related to reasonable value of medical services.

Provided expert testimony in jury trials, Shreck hearings and depositions.

Advocacy work and claims assistance for individuals. Providing resolution of billing errors, claim/authorization denials and rate negotiation.

Health Net Federal Services/Centene

Provider Network Manager for CO & WY, 9/2022 – 3/2023

Managed Tricare provider network in CO, WY and AK to ensure adequacy and access.

Conducted several high-level negotiations and renegotiations of provider contracts.

Resolved numerous claims and billing issues.

Presented reports on provider network data at monthly MTF (Military Treatment Center) Commander meetings.

UnitedHealth Group

Provider Network Contract Manager – Ancillary Contracting, CO, WY & AK, 6/2021 – 12/2021

Responsible for the hospital-based ancillary services network in CO, WY and AK.

Negotiated several agreements for hospital based ancillary services including re-negotiations.

Resolved numerous claims, billing and customer service issues.

Kaiser Permanente, Denver, Colorado

Senior Contract Manager, 3/2013 – 8/2019

Lead managed care contract negotiator for Kaiser Health Plan. Primary focus was facility contracts in Southern Colorado (Hospitals, ASCs, urgent care, imaging centers, physical therapy).

Converted Parkview Medical Center contract from percent of charges to fixed rates (DRG, ER case rates, surgical case rates, other fixed rates and carve-outs). Resulted in 16% cost reduction and greater financial predictability. Recognized and awarded at annual leadership meeting for "Value Based Care" project. Included adding several ASC contracts in Southern Colorado and partnering with resource Stewardship to direct care to lower cost venues.

Recondo Technology, Denver, Colorado

Senior Business Analyst, 4/2009 – 9/2012

Designed and implemented outpatient surgery and inpatient hospital admission functionality for Sure Pay Health product. Including a method to estimate total charges and actual reimbursement to determine patient liability prior to rendering services. Product has been purchased and activated in over 150 hospitals. Reduced clearinghouse costs by 30% by obtaining direct EDI connections with several state Medicaid programs and commercial insurance companies. Managed Software Development team to produce Financial Assistance software.

Delta Dental, Denver, Colorado

Professional Services Manager, 10/2008 - 4/2009

Managed day-to-day department personnel functions related to provider relations and CDT code and systems applications.

Responsible for all aspects of panel participation for all Delta Dental participating dentists and all products.

Coordinated communication strategy related to IT system conversion including conducting numerous webinars.

The Children's Hospital, Denver, Colorado

Senior Contracting Associate/Managed Care Analyst, 4/02 – 10/2008

Lead contract negotiator for a 270-bed pediatric specialty hospital. Responsibilities include establishing business relationships with managed care and insurance organizations, data analysis, pricing, negotiation, project management, conflict resolution, troubleshooting and process improvement.

Responsible for negotiating and managing payer contracts totaling over \$200M.

Examined contract performance by preparing financial reports to analyze hospital costs, market trends, utilization, and payer reimbursement.

Established and served as chair of several operational committees with clinical and administrative departments.

Colorado Access, Denver, Colorado. 5/99 – 10/01

Member Service Representative, Colorado Access

Received 110% Customer Services Award

Provider Relations Representative + Contracting, Access Behavioral Care. 5/99 – 10/01

Responsible for daily operations related to behavioral health network, including network adequacy, provider contracting, claims analysis, conflict resolution, provider and staff training, and database maintenance.

Lead for Web Enhancement Project. Conducted Presentations to partner providers (Denver Health, Mental Health Corp. of Denver, and Colorado Psychiatric Hospital). Performed ongoing web site training.

Stillwater Medical Center, Stillwater, Oklahoma

Administrative Resident, 1/98 – 12/98

Reported directly to the CEO of a 158 bed hospital. Managed projects and completed numerous reports.

Developed a Marketing Plan for an ambulatory infusion center, including local competition, physician referral potential, and payer mix. (facility opened ahead of schedule)

Completed report and break-even analysis on a proposed ambulatory surgery center anticipated to be opened and privately owned by ten surgeons on the medical staff.

Chairman of Fundraising Committee, Child Advocacy Center of Payne County. Raised over \$60,000 for start-up through grant writing and fund raising efforts.

Negotiated "Radiation Oncology Services Agreement" between hospital and Cancer Care Associates.

Wrote, "Patient and Visitor Handbook," which is maintained in each patient room.