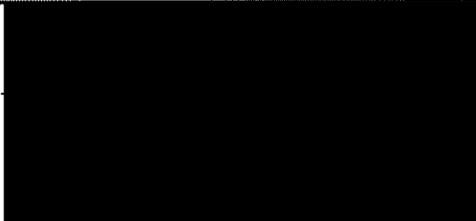


Committee on Energy and Commerce
U.S. House of Representatives
 Witness Disclosure Requirement - "Truth in Testimony"
 Required by House Rule XI, Clause 2(g)

1. Your Name: BRUCE NASH		
2. Are you testifying on behalf of the Federal, or a State or local government entity?	Yes	No <input checked="" type="checkbox"/>
3. Are you testifying on behalf of an entity that is not a government entity?	<input checked="" type="checkbox"/>	Yes No
4. Other than yourself, please list which entity or entities you are representing: ① CAPITAL DISTRICT PHYSICIANS' HEALTH PLAN ② ALLIANCE FOR COMMUNITY HEALTH PLANS		
5. Please list any Federal grants or contracts (including subgrants or subcontracts) that you or the entity you represent have received on or after October 1, 2009: CPCI INITIATIVE WITH CMMI MAY 2012		
6. If your answer to the question in item 3 in this form is "yes," please describe your position or representational capacity with the entity or entities you are representing: ① CHIEF MEDICAL OFFICER ② CHAIR MEDICAL DIRECTORS' COUNCIL		
7. If your answer to the question in item 3 is "yes," do any of the entities disclosed in item 4 have parent organizations, subsidiaries, or partnerships that you are not representing in your testimony?	Yes	No <input checked="" type="checkbox"/>
8. If the answer to the question in item 3 is "yes," please list any Federal grants or contracts (including subgrants or subcontracts) that were received by the entities listed under the question in item 4 on or after October 1, 2009, that exceed 10 percent of the revenue of the entities in the year received, including the source and amount of each grant or contract to be listed: NONE		
9. Please attach your curriculum vitae to your completed disclosure form. ATTACHED		

Signature:



Date:

9/16/12

BRUCE NASH, MD, MBA

PROFILE

Board certified, physician executive offering more than 20 years of healthcare management and clinical practice experience in ambulatory, hospital, and managed care settings. A proven healthcare leader with exceptional business acumen and interpersonal skills, a collaborative leadership style, and an ability to move an organization forward.

Demonstrated expertise in:

- Strategic planning
- Operations
- Finance
- Utilization/Resource Management
- Quality Improvement
- Disease Management
- Community and Media Relations
- Contract Negotiation
- Physician Recruitment/Retention

EXPERIENCE

CAPITAL DISTRICT PHYSICIANS' HEALTH PLAN, Albany, NY 2007 - Present
Senior Vice President / Chief Medical Officer

Executive leader for the Medical Affairs Division of a 350,000 member regional health plan.

Responsibilities included quality management, utilization management, network contracting, and provider services.

- Restructured Medical Affairs Division to incorporate contracting of hospitals and providers (directly responsible for the management of approximately \$1B in medical services) leading to more favorable negotiated outcomes.
- Designed and piloted a novel payment model and medical home project for primary care physicians which received national recognition.
- Provided the leadership for a \$1M initiative for the implementation of electronic medical records and an interoperability strategy among small practices.
- Led a gainsharing initiative with a large medical group which resulted in a 6% shift in generic prescribing practices within 90 days.

THE BARD GROUP, Newton, MA 2005 - 2007
Consultant

A Physician led healthcare consulting firm focusing on medical staff/hospital relationships, clinical performance improvement, and service line development.

- Provided strategic guidance to a 300,000 member HMO regarding implementation of medical management services in new market. Assessment indicated high-risk return and potential loss avoided.
- Led a comprehensive assessment of the leadership of a major New England medical center and provided restructuring recommendations directly to the Chairman of the Board.
- Developed a plan and supported the implementation of leadership restructuring and process improvement initiatives for a large Mid-West Medical Group. As a consequence, achieved measurable increase in provider and patient satisfaction within the next nine months.
- Mentored a new physician executive for a mid-Atlantic health system and developed a market differentiation strategy for their employed multi-specialty group.
- Managed a comprehensive assessment for one of the largest inpatient facilities in the U.S. and devised a plan to improve its physician relationships.
- Facilitated a Voluntary Hospital Association statewide conference on hospital-physician relationships.

NORTH ADAMS REGIONAL HOSPITAL, North Adams, MA
President

2002 – 2005

Executive leader for a JCAHO accredited, acute care general hospital, licensed at 120 beds. Bottom line accountability for a \$52M budget. Concurrently served as VPMA for the hospital and the Northern Berkshire Health System.

- Provided leadership to be selected as one of three Massachusetts communities to share in \$50M of grant money to create a community wide electronic medical record.
- Led the implementation of an automated medication administration system (Baxter Point of Service Medication Delivery System, alpha site). One of three installations nationally. Medication errors decreased significantly within three months
- Collaborated with Finance in the issuance of \$27M of bonds for the financing of new construction, renovation of hospital, and the retirement of old debt. Managed planning, contracting, and construction of a \$21.4 M construction project involving new ED, Maternity, Surgical Service, and ICU.
- Instituted state of the art program for the treatment of acute stroke with an interactive, audio/video real- time linkage with the Massachusetts General Hospital. Received designation as a primary stroke treatment center by the Commonwealth of Massachusetts.
- Represented the hospital in development activities in support of a capital campaign, which resulted in raising \$12M.
- Created and implemented a hospital owned MRI project resulting in \$500,000 in new, net revenues in first year of operation.
- Managed the expansion of the Endoscopy Center, which resulted in doubling volumes within three months of completion.
- Successfully negotiated MNA and SEIU contracts, administered the grievance/arbitration process, and settled a claim with the NLRB while demonstrating improved employee satisfaction scores.

NORTHERN BERKSHIRE HEALTH SYSTEM, North Adams, MA
Vice President of Medical Affairs

2000 – 2005

Executive Medical Director for system comprised of a Regional Hospital (120 Licensed Beds), Visiting Nurse Association (80 EE's), Nursing Home (180 beds), and Senior Living Facilities. Led clinical quality improvement, and managed health system clinical affairs, employed physicians, and relationships with medical staff, while continuing to maintain a clinical practice on a limited basis.

- Created the initial Corporate Compliance Program for NBHS, which resulted in effective internal audits being able to identify and correct potential problems.
- Led the restructuring of Quality Management, the Clinical Practice Committee and Medical Staff Bylaws, which increased the overall effectiveness of those areas.
- Worked with medical staff to reduce length of stay by 20% with significant cost savings.
- Created Medical Staff Development Plan and Recruitment Policy and Procedures, which provided a framework for the recruitment process.
- Recruited over twenty new physicians to the area, including five full-time hospitalists, to begin the first hospitalist program in the history of the organization.

KAISER PERMANENTE, Latham, NY/Oakland, CA

1996 – 1999

Vice President for Clinical Affairs, Latham, NY 1996-1999

Associate Executive Medical Director – Northeast Permanente Medical Group

Mixed model HMO resulting from Kaiser Foundation's acquisition of Community Health Plan. Integrated 120,000 enrollees into Community Health Plan's 400,000 enrollees. Managed quality and resource management, pharmacy, lab, behavioral health, and network operations.

- Eliminated the paper referral process, streamlining operations, saving \$2M in first year.
- Led the development of a novel reimbursement system for affiliated providers based upon a performance profile, which positively influenced both patient satisfaction and the cost of care.
- Directed intensive inpatient utilization management program that resulted in a 20 percent decrease in hospital days in two years.

Vice President for Medical Group Operations Improvement, Oakland, CA 1997-1998

Appointed as the first clinical leader for the Permanente Company, a newly formed entity representing the medical groups of Kaiser Permanente. Directed consulting services nationally for the twelve Permanente medical groups (representing 10,000 physicians). Served concurrently as the Vice President for Clinical Affairs for the Northeast Region of Kaiser Permanente.

- Led a team of consultants in performance improvement initiatives and leadership restructuring in the Texas, North Carolina, and Ohio medical groups.

COMMUNITY HEALTH PLAN, Latham, NY

1986 – 1996

Vice President for Medical Affairs 1992 – 1996

Mixed model HMO with more than 400,000 enrollees, 41 staff model health centers, and a network of over 7000 providers in upstate New York, Vermont, and Western Massachusetts. Directed personnel management of 500 health care providers.

- Established a network of 1,400 affiliated providers in less than four months to service a large self-insured employer contract.
- Implemented a performance based incentive compensation system in a group of staff model centers that resulted in a 30 percent increase in provider productivity in six months.
- Created and developed departments for provider relations, credentialing, utilization management, quality management, dental, and mental health.

Vermont Regional Medical Director 1986 – 1992

- Established Vermont's first HMO and led its growth to become the second largest insurer in the state.
- Contracted with several hundred physicians statewide to form Vermont's first network of providers.
- Created seven staff model health centers; recruited and managed 85 providers and clinical operations.

FACULTY APPOINTMENT

ALBANY MEDICAL COLLEGE, Albany, NY
Clinical Assistant Professor

EDUCATION

RENSSELAER POLYTECHNIC INSTITUTE, Troy, NY
Bachelor of Science, Biology, cum laude

ALBANY MEDICAL COLLEGE, Albany, NY
Medical Degree

DUKE UNIVERSITY, Durham, NC
Residency: Family Practice

DUKE UNIVERSITY, The Fuqua School of Business, Durham, NC
*Master of Business Administration with a concentration in
Health Sector Management (HSM), November 2007*

Recognized as a Fuqua Scholar, as well as a HSM Scholar, for outstanding academic achievement

CERTIFICATION/LICENSURE

American Board of Family Practice : Re-certified 2006 - 2013
Fellow, American Academy of Family Practice
Certified Healthcare Executive (CHE) 2005
Drug Enforcement Administration

Licensure: Active -New York Inactive - Vermont, Massachusetts, North Carolina

PROFESSIONAL / CIVIC AFFILIATIONS

Board member for the Health Information Exchange of NY (2007 - 2010)
Board member, and member of the Executive Committee, for the Alliance of Community Health Plans
Chair of the Medical Directors' Council for the Alliance of Community Health Plans
Member of the National Advisory Committee for Comparative Effectiveness of Primary Care
Transformation by Two Insurers
Aircraft Owners and Pilots Association - Instrument rated, private pilot