Blue Cross and Blue Shield of Florida
Jacksonville, Florida

Vice President, Medicare Solutions

Position Specification

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I. OVERVIEW

History

Founded in 1944 as the Florida Hospital Service Corporation, Blue Cross and Blue Shield of Florida (BCBSF) began operations in Jacksonville with a staff of four. In 1946, the Florida Medical Services Corporation was formed, eventually becoming Blue Shield of Florida. The two companies consolidated in 1980 to form Blue Cross and Blue Shield of Florida. As competition increased and population grew, the company has expanded by adding subsidiaries and specialty insurance product offerings to complement its core health plans, thus providing a one-stop employee benefits shop.

Key Milestones

2001 – BCBSF incorporated The Blue Foundation for a Healthy Florida as a charitable non-profit organization to promote better health in the state of Florida.

2001 – Through its subsidiary Navigy, BCBSF partnered with Humana to create Availity – a multi-payer web portal that enables physicians and other health care providers to transact business with BCBSF, Humana and other payers from one web site.

2002 – BCBSF incorporated Incepture as a wholly-owned, for-profit subsidiary to deliver expert resources and innovative solutions to enable businesses and professionals to achieve their goals.

2003 – BCBSF partners with Arkansas Blue Cross and Blue Shield to create Novitas Health, a capability development joint venture.

2004 – The federal government approves the transfer of BCBSF’s Medicare administrator contracts to First Coast Service Options.

2004 – BCBSF launches Generation RN, the company’s signature program in strategic philanthropy, a statewide program of public/private partnerships with Florida-based foundations, community colleges, universities and health care providers. Generation RN is designed to build an expanded, stable and culturally diverse nurse workforce in Florida.

2005 – BCBSF and Arkansas Blue Cross Blue Shield finalize the completion of an alliance to combine their life and specialty business products under a new, jointly-owned holding company, Life and Specialty Ventures, LLC.

2007 – BCBSF opened the Florida Blue retail store in Jacksonville. The store, one of the first of its kind nationally, is a new concept in the health insurance arena and is one additional component of BCBSF’s move to a consumer-empowered retail environment. The second Florida Blue store opened in South Florida early in 2008.

2009 – Florida Health Care Plans, Inc. (FHCP), the oldest federally qualified HMO in Florida, was acquired by BCBSF. This acquisition added more than 50,000 to BCBSF’s membership, expanded their reach into Volusia and Fagler counties and gave the new members access to an expanded statewide and nationwide network of Blue Cross services. FHCP now operates as a community-based, locally-managed, HMO subsidiary of BCBSF.
2010 – BCBSF expands its “Florida Blue” stores, making access to health care coverage easier and in-person. These freestanding centers help people select their health plan, as well as provide member education sessions, care planning and support with a registered nurse, and community health fairs. Florida Blue centers are now open in Jacksonville, Tampa, Miami, Orlando, and Ft. Lauderdale.

Blue Cross and Blue Shield Today

Blue Cross and Blue Shield of Florida is now the state’s largest and oldest health insurance provider. BCBSF and its family of subsidiaries serve more than 7 million people. Its health business alone serves approximately 4 million members, which represents a 30% share of the overall Florida health insurance market. Statewide, the company provides employment for approximately 5,800 individuals in Jacksonville, Miami, Ft. Lauderdale, Orlando, Tampa and Pensacola. BCBSF is the Florida market share leader, operating in one of the most competitive health care markets in the nation, primarily due to the state's population growth.

Stable in both enrollment and financial performance, BCBSF reported 2009 consolidated total revenue of over $8 billion and a consolidated retention rate of 90% among its customer base. Blue Cross and Blue Shield of Florida experienced its 21st consecutive year of positive financial performance in 2009, and is rated A+ by Standard and Poor’s. BCBSF is accredited by the National Committee on Quality Assurance (NCQA), with its Commercial HMO plans earning a rating of “Excellent”. The company is a not-for-profit mutual insurance firm owned by its policyholders. It is an independent Blue Cross and Blue Shield Association licensee.

Products and Services Offered

Through the parent company, its family of subsidiaries and joint ventures, BCBSF offers a broad choice of affordable, health-related products and services. This flexible portfolio of health care products includes traditional health care insurance (BlueOptions), Preferred Provider Organization (PPO) products, Health Maintenance Organization (HMO) products, commercial Medicare products, health savings and related accounts, multiple option products, limited benefit products and ancillary products such as life, disability, dental, workers’ compensation, long term care, vision and wellness programs.

Affiliations and Subsidiaries:

Navigy Holdings, Inc: a wholly-owned, for-profit holding company subsidiary of BCBSF. Navigy works with other BCBSF departments and subsidiaries to explore future business opportunities, new and evolving business models, potential alliances and partnerships and new methods of competing in the health business industry.

Availity: A joint venture created by Navigy, Inc. and HUM-e-FL, Inc. (Humana). Current ownership also includes Health Care Service Corporation (HCSC), SellCore, Inc. (WellPoint), and Blue Cross Blue Shield of Minnesota. It is an all-payer portal for the provider community.

Prime Therapeutics: A joint venture between the Blue plans in Alabama, Florida, HCSC, Minnesota, Montana, Nebraska, North Dakota and Wyoming to provide Pharmacy Benefits Management (PBM).

Life and Specialty Ventures, LLC: A joint venture between the Blues of Arkansas, Florida,
Hawaii, Massachusetts and Tennessee to sell life, dental, disability and critical illness coverage.

**Incepture**: A wholly-owned, for-profit subsidiary of Navigy Inc. to provide temporary staffing, resource augmentation, resource optimization, vendor-managed staffing and recruiting process management.

**OptaComp**: A wholly-owned, for-profit subsidiary Comp Options Insurance Company, Inc., currently doing business as OptaComp, Inc., to provide workers’ compensation products (risk and ASO) and Circana Health Passport, a medical travel business for international visitors.

**B.P. Informatics, LLC**: A joint venture between six Blue organizations: Arkansas, Navigy, Inc. (BCBSF), HCSC, Alliance Ventures, Inc. (Highmark), Massachusetts, and NobeleHealth, Inc. (North Carolina) to make strategic investments in health care informatics companies.

Find further information on Blue Cross and Blue Shield of Florida on their website:

[www.bcbsfl.com](http://www.bcbsfl.com)

**Mission and Vision**

BCBSF is the oldest and largest health plan provider in the state of Florida.

**Vision**: “Committed to helping people and communities achieve better health.”

**Mission**: We believe BCBSF has a unique role in advancing the health and well-being of Florida’s citizens. While all successful companies must focus on meeting customer needs, our corporate beliefs call for a much greater commitment to the public good.

Our purpose requires working for public policy that enables an excellent, efficient health system; affordable products and services; and protection for as many Floridians as possible. It also demands that our programs support the delivery of high-quality care.

Through our products, employee relations, political influence and community involvement, we consistently attempt to make a constructive contribution to the well-being of our customers and all Floridians.

A financially-strong, independent, policyholder-owned parent company is most conducive to pursuing our community-driven, customer-focused mission. This allows us the flexibility to use various structures, as appropriate, for entities under the parent.
II. COMMUNITY DESCRIPTION

Jacksonville, with a population of 800,000, is one of Florida's major industrial, commercial and cultural centers. Jacksonville is located in the First Coast region of Northeast Florida and is centered on the banks of the St. Johns River, about 25 miles south of the Georgia border and about 340 miles north of Miami. The area's economy is balanced among distribution, financial services, biomedical technology, consumer goods, information services, manufacturing, insurance and other industries.

The city offers sun-soaked conditions year-round and plentiful recreational opportunities such as water sports, fishing, golfing, hiking, biking and horseback riding. Jacksonville operates the largest urban park system in the United States, providing more than 80,000 acres of parks and facilities throughout the city. Jacksonville offers a vivid cultural life including numerous theatres and entertainment venues; events such as The Jacksonville Jazz Festival, the second-largest jazz festival in the nation; attractions such as zoos and museums; many sports teams such as the NFL Jacksonville Jaguars as well as being home to the PGA. Jacksonville is home to many colleges and universities like Jacksonville University and the University of North Florida.

The county is home to four of the nation's best high schools: (Stanton College Preparatory School 5th, Paxon School for Advanced Studies 6th, Mandarin High School 151st, and Douglas Anderson School of the Arts 158th,) according to Newsweek Magazine in 2008. There are a number of private secular and non-secular schools.

More information about Jacksonville and the state of Florida can be found at these websites:

www.visitjacksonville.com
www.jacksonville.com
www.visitflorida.com
III. POSITION SUMMARY

Title: Vice President, Medicare Solutions
Reports to: Senior Vice President, Government and Consumer Markets
Location: Jacksonville, Florida

The Vice President, Medicare Solutions will provide strategic and marketing leadership for Blue Cross and Blue Shield of Florida’s Medicare business. A newly created position, this role is responsible for developing and implementing vision, strategy, and programs to service Florida’s substantial Medicare market. The Vice President, Medicare Solutions will strategically position and market Blue Cross Blue Shield of Florida’s Medicare offerings to build BCBSF’s Medicare market share and overall enrollment. The position’s success will be based on growth of the Medicare enrollment and profit/loss of the division.

Of Florida’s total population of 18.5 million, 17.3% are seniors, making Florida the most concentrated senior market in the nation. This is a highly competitive market in which many of the nationwide insurers compete. The focus of this role will be the marketing and sales growth of BCBSF’s Medicare products. At present, BCBSF has an enrollment of approximately 200k members in its Medicare products, including approximately 50k Medicare Advantage members and 150k Medicare Supplement enrollees. This position will be responsible for growing BCBSF’s Medicare business through successful positioning, marketing and sales BCBSF’s Medicare products, so that the organization gains a position in Florida’s Medicare market that is consistent with BCBSF’s overall market leadership in Florida.

This position is of significant importance to BCBSF’s strategic direction. Leveraging BCBSF’s market-leading presence and reputation, the Vice President, Medicare Services will be responsible for building the organization’s Medicare business into a leader in the sizeable Florida Medicare market. This position will manage a staff of 8-10 employees, whose responsibilities include revenue management, product management, strategy & segment performance, Medicare marketing, and business and decision support.

IV. DUTIES AND RESPONSIBILITIES

The Vice President, Medicare Solutions will oversee product development, sales, marketing, and member services for all Blue Cross and Blue Shield of Florida Medicare related activities. This position will ensure compliance with all Medicare-related regulatory, contractual and company requirements, and will be expected to achieve excellence in all Medicare related activities. The Vice President, Medicare Solutions will be responsible for coordination of the management and profit and loss of the Medicare unit.

This position will oversee the effective functioning of the Medicare business unit, including developing a unit scorecard, meeting company and unit objectives, developing and sustaining a high-performing organization, and managing and developing staff. The Vice President, Medicare Solutions will effectively manage risk and build BCBSF’s presence in the Florida Medicare market.

Additional responsibilities include

• Create and develop strategy and objectives to succeed in the Medicare market.
• Set and implement objectives to increase market penetration and customer growth.

• Effectively influence the areas of actuarial, network development and management, pricing, claims and customer service to sufficiently support the Medicare division and its growth efforts.

• Sharing resources within the Government and Consumer Markets division, build and lead teams within Capability Development, Compliance, Brand and Marketing Communications, Retail Operations and Sales to execute Medicare strategy.

• Understand market demands and governmental requirements pertaining to Medicare.

• Comply effectively with legislative and regulatory requirements.

• Build and sustain effective relationships with CMS and other governmental and regulatory bodies as appropriate that will support BCBSF success in the Medicare market.

• Manage the relationship with the Blue Cross Blue Shield Association and other external stakeholders essential to the success of the Medicare unit.

• Build and strengthen the human organization by providing effective recruitment, selection, motivation, development, compensation, and deployment of management and staff.

• Integrate effectively with other areas of the enterprise to leverage opportunities to improve Medicare business unit performance.

V. GOALS AND OBJECTIVES

Over the next three to five years, the Vice President, Medicare Solutions will be tasked with growing BCBSF’s Medicare Advantage enrollment from approximately 50k to 200k and its Medicare Supplement enrollment from 150k to at least 200k. The VP, Medicare Solutions will be expected to achieve this growth while maintaining an operating margin of between 1.5-2.5% in BCBSF’s Medicare segment.

Over the next 18 months the new Vice President, Medicare Solutions will have:

• Built successful marketing and pricing structures for BCBSF’s Medicare products.

• Obtained a strong knowledge and understanding of BCBSF’s delivery system and network.

• Assessed costs, programs, and people supporting BCBSF’s Medicare segment and developed a successful plan for future growth.

• Demonstrated gains in enrollment and market share stemming from successful repositioning of BCBSF Medicare products and services.

• Established credibility with the BCBSF administrative team as well as external stakeholders.

• Evaluated team members’ strengths, positioning the department for effective growth through aligning staff competencies with departmental needs. Will have built a strong team within Medicare Solutions, and supporting staff for the division throughout the organization.

• Successfully developed relationships with the BCBS Association, key constituencies in the healthcare delivery marketplace and key providers within the BCBSF network.

• Fiscally managed all department budgets within resources.
VI.  CANDIDATE QUALIFICATIONS

The successful candidate will have an outstanding record of accomplishment in leading a Medicare business line within a significant healthcare payer organization. He/she will be a growth-oriented, strategic thinker with excellent analytical and critical thinking skills. The Vice President, Medicare Solutions will excel at conceiving a strategy, communicating it through multiple layers of an organization and execution through influential leadership. The successful candidate will be a superb negotiator and communicator, possessing an outstanding ability to build productive relationships horizontally across an organization, effectively communicating goals, needs, and objectives, with the ability to build consensus. The successful candidate will be a team player with a focus on diversity and cultural competence.

Specific selection criteria include

• 10 plus years of leadership experience in a healthcare setting, with at least 5 years experience working with Medicare products and services.
• Demonstrated ability to strategically develop a managed care product line / business segment.
• Broad understanding of Medicare policies, procedures, and strategies. Experience with CMS, OIR, and/or relevant government entities.
• Strong understanding of the network/delivery system that supports a product business unit.
• Ability to successfully execute within a matrix management structure.
• Recognized in the healthcare field for expertise in Medicare.
• Track record of quantifiable results, with a deep, demonstrated commitment to quality.
• Proven ability to hire, train, develop, and lead high performing teams.
• Excellent analytical and financial skills.
• Demonstrated ability to build and maintain relationships.
• Bachelor’s degree required. Masters or professional degree preferred.

Personal Characteristics

• Exceptional communication and negotiation skills, with the ability to achieve results by collaborating and influencing horizontally within the organization.
• An energetic, visionary individual with a strong marketing and growth orientation and the desire to build and develop a vital product segment into a market leader.
• Ability to lead change within an organization.
• Top-tier interpersonal and presentation skills, with the ability to relate well to people at all levels both internal and external to the organization.
• High personal and professional ethical standards.
• Results and service oriented, with a commitment to serving the organization and the State of Florida.