

## **JEFFREY GENE KAPLAN, M.D., M.P.S., C.M.C.M**

(Current: Pediatrics clinical work and teaching for four years)

### **Chief Medical Information Officer/Medical Director Healthwave, Inc.**

Nov., 1999 –2005

A Stage V, (*end-to-end*) medical information solutions company--[www.eHealthwave.com](http://www.eHealthwave.com) founded by Richard Radoccia, the former CEO and President of MDNY. (Please see below). Also, Medical Director of the Coalition for Care (CFC), Paramus, NJ where Healthwave information solution is installed and working.

### **VantagePoint, Inc. data mining and health care process evaluations**

Early 2000

### **3M Health Information Services**

Clinical Risk Groups Project. Engaged, November, 2001—February, 2002

### **CMIO/Medical Director—NewAlliance Health Plan, Inc.**

Retained May 2000 -- October, 2001

Achieved, for the first time in the 5-yr. history of this organization, a durably positive bottom line; this was accomplished through the basics and by acuity-adjusted profiling, confidential feedback and appropriate incentives. Also, attained a full 3-year NCQA accreditation; installed Catalyst software for HEDIS; improved claims processing; began SmartCare with Clinical Risk Groupings by 3M HIS— a very exciting acuity-adjusted profiling tool. Unfortunately, this Health Plan wasn't marketed well. Nevertheless, Medical Management did well, considering the limited growth.

### **Medical Director—MDNY Healthcare, Inc.**

Retained Nov., 1999 – Nov., 2000

The physician community mostly owns MDNY creating an interesting dynamic in incentive realignment. As its only full-time Medical director, I was responsible for UM, RM and QM with oversight of provider profiling, standards, and information development/use by the various IPA and specialty network affiliates. During my tenure, MDNY had become profitable for the first time. Nevertheless, MDNY's future remains unclear. With MDNY's permission, I began working as a retained consultant in Erie, PA in May 2000 in the field of medical informatics.

### **Medical Director/CMIO —Heritage NY Medical Group/Heritage N.E. Medical Systems**

Retained 1997- 1999

An MSO in Long Island and Brooklyn where I reduced commercial hospital days/1000 by over 230, a 65% reduction; similarly, Medicare reductions had been consistently reduced over 40%. It was rare for coverage decisions to be overturned on appeal. Other initiatives included building collaborative CHF, DVT prophylaxis, community-acquired pneumonia, asthma and COPD, diabetes, health risk analysis, and depression.

### **Network Medical Director —WellCare of N.Y., Inc.; (Orange to Westchester Counties)**

1995 - 1997

An integrated health care system that improves the quality and cost-effectiveness of care in the Hudson Valley region of New York. This IPA was the largest in the area and had a reluctant group of doctors. My responsibility was to turn around the attitude by using guideline buy in, advisory panels and a great deal of fieldwork. The turn over of physicians was around 5%, but when I left it was about 0 to 1%.

### **Corporate Medical Director —Blue Cross/Blue Shield of Western NY**

1993 - 1995

Developed managed health care strategies in sundry environment such as IPAs, community health centers, Medicaid, and Medicare (45 counties of NY State, Part B). We documented significant savings with disease state management programs that reduced inappropriate use of H<sub>2</sub> Blockers in ulcer therapy, improved awareness of symptoms and access to timely and appropriate intervention in asthma.

### **VP, Utilization and Med. Management Information—Travelers (CT)**

1992-1993

Accomplishments in Cost Reduction & Informational Product Development (1992-93): developed a practical, comprehensive, yet abbreviated utilization management and quality assessment/improvement method for Travelers' HMOs and TPAs, nationally. Established longitudinal and patient based, severity-adjusted, peer comparisons in three pilot locations -- Denver (point-of-service)/Dallas 10-22% demonstrated savings.

### **Executive Vice President for Medical Affairs—Health Services Medical Corporation**

1975-1991

Sixteen-year position. Responsible for building the medical component of Health Services Association of Central New York, Inc., which evolved into this Corporation; when I left for Travelers in 1991, we had built six health centers within a staff model HMO, two IPAs and a Network model in three cities; the combined membership was just under 100,000 members and a medical loss ratio of about 80%.

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### Related Work

- **Grant-supported Outcomes Research and Pharmacoeconomics** On diabetes management, patient education and adherence, Bayer Diagnostics supported a \$35,000 cohort study that compared lay to professional advocates and disease managers (Melville, NY while MDNY). I obtained a \$30,000 grant from Bayer Pharmaceuticals to improve patient adherence in diabetes management (the Erie County Diabetes Association (Erie, PA). 3M HIS granted \$30,000 on presentation and use of Clinical Risk Groups, work that continues with VantagePoint, Inc., their main vendor in data mining (SmartCare).
- **Author** (averaging three publications per year as well as participating on two editorial boards: *Medicom Intn'l* (Managed Care Interface [peer-reviewed], *AlphaMedica*, and two IPA Newsletters)
- **Faculty advisor** to NY Medical College at Valhalla (WCMC), endorsed to develop and implement a program we were to call "Managed Care Rounds"; other: faculty advising on guidelines, disease state management (e.g., arthritis, thromboembolism, diabetes, heart disease, depression, etc.), outcome measurement, physician productivity and effectiveness.
- **Consultant** in Electronic Data Interchange and the Computerized Patient Record; Profiling (e.g., Oxford Health Plans), front-line, hands-on application of information technology; and, to various health plans and related hospitals, e.g., the Queens Long Island Medical Group and South Shore (Rockaways) IPA
- Co-Chair, Executive Committee, Medical Directors of the National Association of Managed Care Physicians (NAMCP), *Current*
- NY State Medical Society's Committee on Health Care Delivery Systems (former Vice-Chair)
- Member of Pharmacy and Therapeutics and Medical Boards
- Participant in the Emergency Medical Systems Task Force, New York State
- The Consortium for CQI, a Forum on Health Care I.T., has had its sixth meeting

### Education

Master's degree (M.P.S. in Professional Studies in Health Services Administration)	1981 – 1984
The New School for Social Research and Urban Affairs	G.P.A. 4.0
Diplomat—Am. College of Managed Care Medicine (Certified)	1998
Diplomat—American Board of Medical Management	1993
Diplomat—National Board Med. Examiners (#102865)	1970
Fellow—American Academy of Pediatrics	1975
Internship and Residency:	1969 - 1972
Children's Hospital of Philadelphia, Philadelphia, PA	Assist. Chief Resident
M.D. SUNY-Upstate Health Sciences Center, Syracuse, NY	1965 - 1969
Rutgers University, New Brunswick, NJ (A.B.)	1961 - 1965

Licenses (Medicine)	Year	License #
New York	1975 - 2002	#125400 (NY)
Connecticut	1992 - 1993	#032166 (CT)
Pennsylvania	1993 – 2002	#011813E (PA)
Vermont/New Hampshire	1972 – 1976	42-0004-647/Reciprocal
Board Certified in Pediatrics	1974	#16899
Board Re-certification (Pediatrics)	1985, 1989, 1996	#16899 score ~91 (1996)
Board Eligible in Family Practice	1974	

**BLS** issued 2/26/09; recommended renewal date in 2 years

**PALS** issued 4/3/09; recommended renewal date in 2 years

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### Boards of Directors or Advisory Boards

- Erie County Diabetes Association, Board of Directors To Oct. 2001
- IPhysicianNet (a physician education/telecommunications company) 2000 - 2003
- National Association of Managed Care Physicians 1994 - present
- Medicom International, Inc. 1991 - present
- Workgroup--Computerization Patient Record 1992
- Workgroup on Electronic Data Interchange 1991
- Health Systems Agency, Central NY 1988 - 1991
  - Capital Investment Committee 1990 - 1991
- Onondaga County Health Dept.
  - Home Care Services Committee 1985 - 1987
- Temple Adath Yeshurun 1980 - 1982
- President, Brotherhood 1991
- Appointee (clinical) - EDI for BCBS Association 1992
- Chair--NY State HMO Conference (Medical Directors) 1986 - 1987
- Expert-witness & legal case-reviewer 1980 - 1987
- **Health Administration Responsibility Project ([HARP.org](http://HARP.org))** **1999**
- NYS Liability Tort Reform Coalition 1984 - 1988
- Founding Editor, HMO Practice (pub. Lippincott) 1986 - 1987
- Field Editor, Annals of Internal Medicine 1989 - 1991

### Some Presentations

- J. Kaplan and W. Tindall. Pharmacy Leadership Development- How to develop an Effective Relationship with Medical Directors. Phoenix, AZ. November 13, 2001
- Improving the Quality of Life in Diabetes: Blood Glucose Monitoring. The Castle at Tarrytown (NY). November 2, 2001
- Network Approach to Pain Management; Clinical Advisory Panel, Atlanta, GA
- "A Current Look at Arthritis: *Managing the Impact*. San Diego, CA. October 5, 2000.
- Workshop leader, pain management in rheumatology. Ternberry Isle, FL 12.10-12.1999, 1.4.2000, 4.11.01 and 10.24.01. The Curriculum Arthritis Management for The IPA Association of America (TIPPA)
- Speaker on "Contact Capitation." IBC Conferences. Palmer House, Chicago, 5/20/99
- Speaker for the Am. College of Managed Care Medicine "Succeeding With Managed Care: A Primer." 3/14-15, 1997 in Richmond, VA, 4/4-5, 1997 in Woodbridge, NJ; 4/25-26 in Atlanta, GA; 9/26/97 at the Hilton, Newark Airport; 1/17/98 at the Hilton in Islin, NJ; 3/13/98 in St. Petersburg, FL; 4/16/98 at Le Meridian, New Orleans with RPR; 4/25/98 Pittsburgh Airport Marriott; 3/19/99, Hilton, Newark Airport
- Speaker on "Antibiotic Use in an Era of Managed Care." Cliffhouse in Snowbird, Utah, 10/9/98-10/10/98
- Faculty for "Community-acquired Pneumonia." Rhone-Poulenc Rorer. Toronto, Canada, Sept 29, 1997
- Speaker on "Profiling – Promises, Pitfalls and Practices." AvMed Retreat., Ritz-Carlton, Naples, Fl. 5/5-7/97
- Faculty for the "HEDIS Advisory Board." Rhone-Poulenc Rorer. Fisher Island, FL, July 9-10 1997
- Faculty Chair: "Hospital Clinical Pathways." Pfizer Health Systems' team in NYC, 3/14-15/97 and 5/29-31/97 (and under contract for a medical group in Oklahoma on "Ambulatory Guidelines")
- *Others:*
  - Speaker: New Information Technology in Healthcare Data Management, "Improving Quality Continuously with Information Technology." International Business Communications, Philadelphia, March 19, 1993
  - Keynote: "Security - How? and the Matter of Confidentiality" International Information Federation for Information Processing (IFIP) Vancouver, British Columbia, August 19-21, 1992. Published as "Protecting Sensitive Medical Information" in Database Security, VI. Ed. Thuraisingham BM, Landweht CE Amsterdam; 1992: Elsevier Science, IFIP: A-21.

## Some Publications

- Editor the **Managing Managed Care Forum** in [Managed Care Interface](#) (now 4 continuous years)
- J. Kaplan. "Information is the Physician's Ally in Securing Equitable Pay." *American Medical News*. Opinion (Editorials, Letters, Commentary). December 17, 2001;44(47):21-22.  
[http://www.ama-assn.org/sci-pubs/amnews/amn\\_01/edlt1217.htm](http://www.ama-assn.org/sci-pubs/amnews/amn_01/edlt1217.htm)
- J. Kaplan. "Confidence in Confidentiality: The Role of the Privacy Officer" *Managed Care Interface*. October 2001; 4(10):71-75.
- J. Kaplan, R. Radoccia and J. Drohan. "Front and back end Intercourse Through the Intranet" April, 2001 *The NAMCP/ACMCM Newsletter*
- "Say What? Deciphering IT Lingo." *Managed Health Care News*, December 2000
- "**Managed Care Report Cards; Part III: Evaluating those who evaluate physicians.**" *Managed Care Interface*; June, 2000:88-94. Kaplan J, Bauers JC, Tindall WN
- A Physician's Guide to Managed Care Medicine: the Principles. Tindall WN and Williams III WC, Eds.- Editorial Advisory Board, 1998.
- "**Turning the Tables Physician Urges Providers to Use Report Cards to Compare Performance of Health Plans.** *Data Strategies and Benchmarks*. March 1999;2(3):33-48 ("Health systems are devising increasingly sophisticated report cards for physicians that examine a range of indicators. But when it comes to comparing health systems and plans, physicians are practically in the dark. One prominent managed care physician proposes the creation of a standardized report card for providers to rate managed care organizations.")
- "**Report Cards; Part I: A Basis for Decision Making in Health Care**" *Med. Interface* Dec., 1997:61-65;
- "**Report Cards; Part II -- Providers Rating MCOs**" *Med. Interface*, Jan.1998:60-64.
- "Outcomes Research, Measurement and Management: **Getting Income from Outcomes.**" *Managed Care Medicine*. March/April 1996;3(2):16-20.
- "**Implementing Physician Buy-in to Practice Guidelines.**" *Medical Interface*. August 1995;8(7):64-8. Kaplan JG and Lamprey JA
- "What kind of information will be required, if we are to reform health care?" *Physician Executive*. October 1994;20(10):11-14.
- "**Medical Records** (Read Database) May Become Part of a Nationwide Computer Network." *J. Healthcare Benefits*. Nov./Dec. 1994; 4(2):25-29. Kaplan JG and West ME
- "Health Care--**Information Technology**" (Monograph) Pub. *American College Physician Executives*. Tampa, FL--April 1995 (ISBN:0-924674-23-7).
- "**Managed Care Plans: Sheep in Wolves' Clothing**" *Med. Interface*. Vol. 7(2), Feb.1994:61-66,84. Kaplan JG and Sneider JS
- "Interview With Jeffrey G. Kaplan, MD." *Managed Care Update: Medical Interface*. 1994; 24:3-5. (developing / using information in health care)
- "Managed Care is a Continuous Quality Improvement Process, Leading to Managed Health." *Medical Interface--Standpoint*, 1992; 5(12):25-26.
- **Master's Thesis** "A Comparison of Prepaid Health Care and Socialized Medicine in Terms of Patient Satisfaction." (Survey instrument used by 13 HMOs, nationally)
- "Physician **Performance Evaluation**: a Further Definition of Productivity." Kramer, R.S., Kaplan, J.G., GHI, (GHAA Conference and Publication) Minneapolis. June 1986, 248-266.
- "Productivity Can be Econometrically Considered in an HMO Setting: Its Measurement and Implications for an **Incentive** Program." Kaplan and P. O'Connor. GHI, Phila., June 1984.
- "The Manner of **Physician Reimbursement**, Its Relevance to Tax-Exempt Status." Group Health Institute Proceedings, Phila., June 1984.
- "Constitutional Delay of Growth and Development: Effects of Treatment with Androgens" *J. Pediatr.*, 1973; 82:38. (Referenced by R. Richmond, *NEJM*, 1990;D. Wilson, *Pediatr.*. 12/ 1995).
- Commentary on the above topic. *Human Sexuality*. 1974.
- First Prize: Philadelphia Pediatrics Essay Contest. 1972. Subsequently published

**\*Pediatrics Practice – Please see my General Practice resume. I have *always* maintained skill set.**

## **Medical Informatics Issues**

Physicians want fair and equitable payment and they are not happy having their work under-recognized. I believe physicians should insist on the kind of information that can restore fairness, and, therefore, I recommended the following in: "[Information is the physician's ally in securing equitable pay](#)" (Letters to the Editor, American Medical News, Dec. 17, 2001)

- Leave finance to the financial people; leave health care to the clinicians. Any information that is used to judge physicians must be clinically defensible. Medicare, through the use of diagnostic-related groups, has clearly acknowledged the importance of understanding what doctors do.
- When a doctor's performance is judged, it should be on the basis of what is happening (or not happening) clinically, not just the cost or the number of tests. Furthermore, it is vital that physicians protest when statistics are promulgated without regard to case complexity.
- Make use of medical informatics to help physicians. One way is through comparative statistics. Another way is through case finding and forecasting, so patients don't get lost to follow-up, and so that their non-adherence gets recognized as an opportunity to improve care. Medical informatics also allows for reporting that is sensitive to the patient's severity level. In addition, it provides for incentive realignment and an ability to recognize good work like that extra effort physicians make to keep patients out of the hospital.

### **Informatics and Communication Tools**

**Web Site/Blog: [www.ManagingManagedCare.com](http://www.ManagingManagedCare.com) is a *commercial free* and substantial resource for practitioners, advocates and patients (Drupal Content Management System)**

**MDNG.com publishes, weekly, my managed healthcare blog, "Reforming Healthcare & Managed Care" <[http://www.heplive.com/primary-care/blogs/reforming\\_healthcare](http://www.heplive.com/primary-care/blogs/reforming_healthcare)>**

- M.O.M™ *Medicine Optimally Managed* - relational data-base management, it takes disparate data and creates information. It does this (to direct linkages with community of interest and organizational risk assessment) by establishing and helping maintain medical and administrative data bases. It facilitates analysis by linking the cost and clinical trails. This, in turn, improves the quality of care by re-personalizing it at the point of contact (through familiarity with the patient's history and the doctor's plan). It clusters diagnostic information establishing episodes of care. It can also take severity of illness, demographics, patterns and appropriateness tests into account. Finally, it is facile at both cost-clinical-data management, reporting and alerting.
- C.P.I™ *Credentialing, Privileging at the Interface* with quality assessment and risk management - this software method not only expedites credentialing and tracking, but it also makes the critical linkage to quality assessment and medical-legal risk management as mandated by recent legal precedents (*Wilson, Wickline*). (*Fully operational-BCBSWNY 1994-5*)
- FIT 5™ Physiologic testing for *physical fitness and health risk*; produces personalized "wellness" prescription
- L.I.F.E™ *Lifestyle Information, Feedback Efforts* - tracking, monitoring, and providing feedback

Email: <mailto:fitdoc@sprintmail.com>