

DENNIS E. COLEMAN

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SENIOR HEALTH CARE EXECUTIVE

Over 46 Years of Expertise in Health Care Delivery and Senior Operations Management

Accomplished, highly respected health care management executive possessing extensive industry experience and broad knowledge as senior executive providing expertise in quality control, cost containment, organizational leadership, and other critical needs areas in health care delivery. Exceptional negotiation, communication, liaison, and leadership abilities; hands-on involvement working with attorneys in general health care business law, professional liability, labor laws, medical staff credentialing, litigation preparation, and testimony. Delivered the strategies that generated million-dollar revenue and profit gains.

Core competencies include:

- Strategic Partnerships & Alliances
- Vendor & Partner Negotiations
- Revenue & Profit Enhancement
- Strategic Vision & Mission
- Organizational Leadership
- Program Development
- Litigation & Legal Issues
- Managed Care Contracts
- Cost Reduction & Avoidance
- Team Building & Mentoring
- Regulatory Compliance
- Staff Development/Retention

Professional Experience

DENNIS E. COLEMAN & ASSOCIATES, Ventura, CA

Sole Proprietor

1990-present

Providing healthcare management services to various healthcare provider clients in a variety of areas, including, but not limited to, strategic planning, business development, operations management, sales and marketing, policy/procedure development, human resources management.

Selected Contributions:

- *Assisted the CEO of a network of industrial and urgent care clinics in the review of human resource policies and procedures to ensure regulatory compliance.
- *Provided guidance to the senior management of a durable medical equipment firm with respect to strategic direction in view of major changes in Federal reimbursement regulations.
- Established and directed forensic consulting practice, consulting with healthcare and professional liability attorneys to provide hospital administration and healthcare management case review, expert witness, and strategic litigation preparation services.

Selected contributions:

To date have consulted on over 235 cases covering a number of the above areas, with a significant

concentration in the following areas:

- *Medical staff credentialing process –Negligent credentialing, negligent supervision, Negligent retention, Elam
- *Provider-based physician contracting negotiation and contract administration

- *Hospital-physician relations - Mejia and ostensible agency issues
 - *Medical staff bylaws, rules and regulations
 - *Administration policies and procedures
 - *Joint Commission Accreditation, Healthcare Facility Licensing and Regulatory Compliance
 - *Community standard of administrative practice
 - *Constructive Discharge/Whistleblower issues

Provided healthcare management services directly to clients as well as through affiliations with the firms listed below:

STRATEGIC HEALTHCARE ASSOCIATES , Northridge, CA	1994-1995
Senior Health Care Consultant	
MEDICAL REALTY GROUP , Northridge, CA	1992-1994
Senior Medical Practice Consultant	
STEVEN HIRSCH & ASSOCIATES , Huntington Beach, CA	1992-1993
Senior Associate	
ARTHUR S. SHORR & ASSOCIATES , Woodland Hills, CA	1990-1992
Senior Consultant	

Built impressive track record as senior consultant and associate providing expertise across a broad range of business and health care disciplines, including managed care strategic planning, mergers and acquisitions, professional practice management, sales and marketing, recruitment and training, accreditation preparedness, policy/procedure development, and regulatory compliance issues. ***Selected Contributions:***

- Assisted large ethnic medical society (100 members) in the development and implementation of business development strategies that allowed member access to managed care delivery systems.
 - Provided business management services and business growth strategies for **two-site physical therapy and rehabilitation client**, resulting in expense reductions and better access to managed care contracts.
 - Participated in and alternately performed **over 25** medical practice/health care business assessments, along with **over 200** medical practice evaluations in connection with various engagements.
 - Developed hospital-wide policies and procedures, as well as standardized policy and procedure manual format for large “for-profit” hospital client owning **12** hospitals in four states.
 - Worked jointly with large tertiary hospital in expansion of its primary care physician base that enhanced organization’s participation in hospital-sponsored managed care delivery system.

COMMUNITY AND MISSION HOSPITAL OF HUNTINGTON PARK, Huntington Park, CA

Chief Executive Officer/Administrator **2007-2009**

Providing the highest level of health care services possible to patients in the hospital's service area subject to available financial resources as well as legal and regulatory requirements and policies enacted by the governing board.

*Since September, 2008, have successfully provided day-to-day operations management of hospital in Chapter 11 reorganization situation where hospital has thus far realized a profit on a post-petition basis.

*Successfully consolidated hospital operations from a two-campus to a one-campus model which provided short-term financial stability for the hospital.

*Successfully completed the transition from Joint Commission accreditation to American Osteopathic Association (Healthcare Facilities Accreditation Program) accreditation with no interruption in Medicare or Medi-Cal Reimbursement for the hospital.

*Coordinated the process of securing new accreditation for the hospital's clinical laboratory on an emergency, expedited basis after lab's accreditation was revoked.

GRANADA HILLS COMMUNITY HOSPITAL, Granada Hills, CA

1995 – 2002

Executive Vice President / Chief Operating Officer (1998 – 2002)

President / Chief Executive Officer (1995 – 1998)

Distinguished as organization's first-ever Executive VP/COO, holding shared responsibility with President/CEO within "Office of the President"; plan and direct all internal and external functions within this \$37 million organization comprised of 199 licensed beds and 400 FTEs. Negotiate, renegotiate, and administer facility's managed care contracts; served as hospital liaison to Medical Executive Committee, Medical Staff Committees, and clinical departments. Challenged to introduce revenue enhancement initiatives and implement cost-saving measures without sacrificing quality of patient care. **Selected Accomplishments:**

- Teamed with senior management and department directors to achieve ~\$380,000 in monthly cost savings and terminate/renegotiate favorable terms for large majority of **65** managed care contracts.
- Reduced operating costs per adjusted patient day **8.1%** between 1998 and 1999 and **1.2%** between 1995 and 1998; decreased total worked FTEs per occupied bed **18.4%** between 1998 and 2000.
- Between 1995 and 1996, increased total surgical procedures **16.1%**, deliveries **34.2%**, and outpatient visits **9.4%** while lowering total expenses **3.3%** in same period.
- Played key role in hospital receiving three-year accreditation and achieving score of **96** (out of 100) on JCAHO and CALS surveys.
- Developed **LLC arrangement** with health care diagnostic imaging corporation that resulted in joint development and operation of free-standing, open MRI imaging service.
- In partner effort with IPA, forged provider relationship with large medical group (with over one million capitated lives in Southern California) that facilitated IPA's access to ~**20** new HMO contracts.
- Established and expanded hospital provider arrangements with **several major medical groups**, resulting in increased use of inpatient and outpatient hospital services by patients from each group.

1986 – 1990

GRANADA HILLS COMMUNITY HOSPITAL, Granada Hills, CA

Chief Executive Officer

Recruited to lead all strategic planning, operating, and P&L initiatives for internal/external affairs within \$33.8 million organization employing staff of 540. Reported to Board of Directors; tasked with recruiting top health care talent, strengthening facility's image as a leader in health care service delivery, and optimize revenue and profit performance. **Selected Accomplishments:**

- Established physician recruitment/retention that brought on board five new primary physicians who generated **\$2.4 million** in additional gross revenues (1989).
- Planned and developed sub-acute/skilled nursing program that boosted patients-per-day totals by **17** and added **\$4.4 million** in gross revenues during 1989.
- Reduced number of paid FTEs **30.2%** over four-year period (615 to 430) and renegotiated provider-based physician contracts for **63%** fee reduction compared with prior year (\$659,136 vs. \$1,820,820)

- Spearheaded development of IPA that established 77-physician network and negotiation of eight new HMO/PPO contracts.
 - Hired new co-directors for radiology services and director of anesthesiology services, significantly improving physician and patient satisfaction.
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ROBERT F. KENNEDY MEDICAL CENTER, Hawthorne, CA

1977 – 1986

Executive Vice President / Administrator (1983-1986)
Associate Administrator (1977-1983)

Senior Operating Executive with full P&L responsibility for planning, staffing, and directing daily activities for \$41 million facility with 700 employees. Reported to CEO and Chairman of the Board of Directors; as Acting Administrator, managed all phases of hospital operations. **Selected Accomplishments:**

- Led operations to increases of **5475%** in revenue vs. expenses, **20.7%** in surgeries, and **8.2%** in admissions; expanded capability to provide intensive care services **85%** by coordinating planning and construction of new 12-bed medical intensive care unit.
 - Reduced payroll costs **8.2%** by restructuring health insurance and pension programs, suspending general and merit increase programs, and modifying work schedules. Implemented recruitment program that introduced several new primary care physicians with substantial patient bases.
 - Negotiated agreement with major HMO, resulting in **\$1.8 million** in additional gross revenues.
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CENTURY CITY HOSPITAL, Los Angeles, CA

1972-1977

Assistant Administrator

Share responsibility for day to day operations of all hospital departments with hospital administrator.

Represented Hospital Administration on all medical staff committees. Acted as Hospital liaison with Hospital professional liability insurance carrier.

CEDARS-SINAI MEDICAL CENTER, Los Angeles, CA

1969-1971

Administrative Resident (1969-1970)
Administrative Assistant (1970-1971)

Education & Credentials

Juris Doctor – School of Law
Southwestern University, Los Angeles, CA

Master of Public Health in Hospital Administration
University of California, Los Angeles, CA

Pre-Medical Studies
University of Southern California, Los Angeles, CA

Bachelor of Arts in Political Science
University of California, Los Angeles, CA

Professional Affiliations:

- Board of Directors, Hospital Council of Southern California
- Board of Hospital Administration Alumni Association, University of California
- Member, President's Associates, California State University
- Member, Health Care Administration Advisory Committee, California State University
- Member, Student Health Center Advisory Committee, California State University

Instructional Experience:

- **University of Phoenix, College of Health Sciences and Nursing, Part-Time Faculty(2006-2008)**
- **California State University, LA, College of Business & Economics, Part-Time Faculty(2004)**
- **California State University, Northridge, Department of Health Science, Part-Time Faculty (1999 – 2012)**

Community Service:

- **St. John's Regional Medical Center, Oxnard, CA Auxiliary (A Dignity Health Member)**
- **New Life Community Church Food Pantry, Oxnard, CA**
- **Oxnard Rescue Mission, Oxnard, CA**
- **Providence Holy Cross Foundation Board of Trustees**
- **Santa Clarita Valley Special Olympics**
- **Saugus High School and West Ranch High School Baseball Volunteer Coach**