

Michael Nugent, MBA, CHFP

Michael Nugent
Managing Director

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Professional History

- Navigant Consulting/Tiber Group
- Hewitt Associates
- St. Elizabeth Hospital internship

Education

- M.B.A, Finance, Management & Strategy, Kellogg School of Management, Northwestern University
- B.A., Mathematics & Economics, Lawrence University

Professional Associations

- CHFP, Healthcare Financial Management Association with Accounting and Finance emphasis
- Member, Association for Health Services Research
- Associate, American College of Healthcare Executives
- Reviewer, American Journal of Managed Care

Mr. Nugent is Managing Director with Navigant's healthcare provider and payer practice. He leads the firm's Payment Transformation Team where he works with managed care companies, commercial payers, hospitals, physician practices on a variety of strategic and technical matters related to payment. He has nearly 20 years of experience within all segments of the health care industry. He is a frequent speaker, writer and advisor to health system and payer executives on topics including payment reform and strategy, contract negotiations, technical reimbursement methodologies, managed care contract language, revenue management, new product and service development, and strategic capital planning.

Payer & Provider Payment Reform, Contracting & ACO Advisory

- » Nationally recognized writer, speaker and advisor in the area of payment reform, risk sharing arrangements, managed care contracting strategy and negotiations – including a forthcoming book on Accountable Care Organization Economics and Payment Reform.
- » Led million dollar plus engagements with major health plans to re-design their contracting and medical management functions and fee schedules. Included APR-DRG, RBRBVS, EAPG, and related value based reimbursement topics.
- » Led design and implementation of various hospital-physician bundling methods, money back guarantees, shared savings arrangements and case rates on behalf of both private/public payers and providers, resulting in intended savings and performance improvements.
- » Leads team that repriced over \$40B in gross revenue associated with hospital services, supplies, drugs, physician services, and procedures over the past ~12 months, including setting up new charge masters and fee schedules for some of the nation's largest providers across the United States.

Enterprise Wide and Service Line Strategy & Capital Planning

- » Key advisor for “fork-in-the-road” decisions for payers, providers (e.g., 5 year “bend the trend” strategic plan for a BCBS plan; over a dozen M&A projects for hospitals, physicians and health plans)
- » Lead or co-lead on over 50 comprehensive enterprise wide and service line strategic capital plans, which include financing plans, governance models, operational models, contractual and ownership arrangements and detailed execution plans. Included work for top 3 academic medical centers, etc.
- » Assisted with the development of multiple turnaround plans for both payers and providers. Assessment and implementation activities covered a myriad of functions, including provider supply chain standardization, revenue cycle and hospital, physician and payer operations, throughput.
- » Consistent track record of merit-based promotions, add-on consulting engagements and internal practice leadership roles, including multi-million dollar track record in annual sales.

New Product and Service Development and Implementation

- » Assisted multiple managed care organizations with the creation and launch of their managed care product suites, consumer directed product suites and disease management programs. Hands-on responsibilities included market selection, network development, marketing plan, regulatory filings and product pricing.
- » Multiple engagements with major pharmaceutical manufacturers regarding cost effectiveness and clinical outcomes research of top grossing products for purposes of direct to consumer advertising and formulary inclusion.
- » Advised largest national health information society with the product definition, funding and market positioning of its online Health Information Toolkit aimed at allowing healthcare executives select and purchase IT solutions more efficiently. Activities included interviews, user group facilitation, strategic partnership negotiation, board presentations and creation of final business plan, including financial pro forma, functional requirements and database and website design.
- » Led team of 10 consultants in the strategic planning, construction and launch of financial reporting software product used by Fortune 500 HR & Finance departments to track and forecast HR finances. Contributed approximately \$6 million in additional sales to firm’s industry-leading HR outsourcing solution.

Recent Articles/Publications

- » Multiple presentations, workshops and webcasts for organizations including HFMA, World Research Group, ACI, CFO Roundtable, MCOL, AMGA, VHA and Health Management Academy
- » “Payment Reform, ACOs and Risk” *Healthcare Financial Management*, October 2010.
- » “Managed Care Contracting and Payment Reform” *Healthcare Financial Management*, July 2010.
- » “Beyond the Pay Me More Strategy” *Healthcare Financial Management*, June 2009.
- » “Seamless Service Line Management” *Healthcare Financial Management*, May 2008.
- » “Pricing: Investing in a New Core Competency” *Healthcare Financial Management*, October, 2006.
- » “HFMA Pricing Roundtable” *Healthcare Financial Management*, May, 2005.
- » “The Price is Right?,” *Healthcare Financial Management*, December, 2004



» "Capital Ideas" series with Tiber Group/Citigroup, 2004 – current.