



A Position Profile

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Head of Corporate Clinical Operations



Aetna, Inc.

FurstGroup
Defining and refining leadership.

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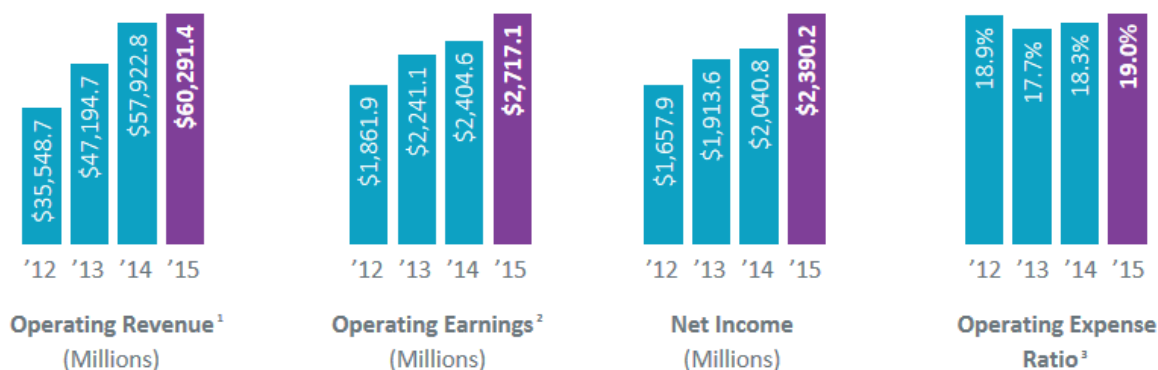
Aetna, Inc.



Founded in 1853, Aetna is one of the nation's leading diversified healthcare benefits companies, serving an estimated 46.5 million people with information and resources to help them make better informed decisions about their healthcare.

Aetna offers a broad range of traditional, voluntary, and consumer-directed health insurance products and related services, including medical, pharmacy, dental, behavioral health, group life and disability plans, and medical management capabilities, as well as Medicaid healthcare management services, worker's compensation administrative services, and health information technology products and services. Aetna's customers include employer groups, individuals, college students, part-time and hourly workers, health plans, healthcare providers, governmental units, government-sponsored plans, labor groups, and expatriates.

Aetna's 2015 annual operating revenues of \$60 billion increased 15 percent from 2014 and operating earnings of approximately \$2.7 billion in 2015 represent an increase of 13 percent over 2014.



Aetna's Mission and Values

At Aetna, our Mission is empowering people to live healthier lives. We achieve that with Integrity, Excellence, Caring, and Inspiration—Core Values that put the people we serve at the center of all we do.

Aetna conducts business using a clear, strongly held set of core beliefs that reflect who it is and what customers can expect from it. Its values carry through the organization's thoughts and actions every day, inspire innovation in products and services, and drive the commitment to excellence in all Aetna does. The core values include:

Integrity – We do the right thing for the right reason.

Inspiration – We inspire each other to explore ideas that can make the world a better place.

Excellence – We strive to deliver the highest quality and value possible through simple, easy, and relevant solutions.

Caring – We listen to and respect our customers and each other so we can act with insight, understanding, and compassion. More than 50,000 employees demonstrate this value every day by meeting the needs of its customers and serving their communities.



Corporate Responsibility

Aetna's mission is to build a healthier world. It is a leading diversified healthcare benefits company, serving an estimated 46.5 million people with information and resources to help them, in consultation with their healthcare professionals, make better informed decisions about their healthcare. In partnership with healthcare providers, Aetna is committed to transforming the healthcare system. The goal: to simplify the healthcare experience and help people enjoy more healthy days.

Aetna is more than 50,000 employees engaging members in their health. They want them to get the right care at the right time, with less hassle. They are building new technologies and approaches to make healthcare easy to use.

Aetna provides access to quality healthcare by offering its customers a broad range of traditional, voluntary, and consumer-directed health insurance products and related services.

These include:

- Medical
- Pharmacy
- Dental
- Behavioral health
- Group life
- Disability plans

Also offered:

- Medical management capabilities
- Medicaid healthcare management services
- Worker's compensation administrative services
- Health information technology products and services

Its commercial business provides health benefits for more than 19.3 million of its 23.5 million medical members. To meet the needs of a changing marketplace, a growing number of self-insured options are offered, particularly for mid-sized businesses. Aetna also offers plans for individuals and small businesses in the new health insurance marketplaces or exchanges, as well as private exchanges.

Aetna offers Medicare Advantage, Medicare prescription drug plan, and Medicaid products. Reflecting the quality and value delivered, the organization has a higher percentage of members in four-star or greater plans in the Medicare star rating program than any of its national peers.

Awards and Recognition

During the past year, Aetna's work was recognized by a wide range of public, private, and non-profit organizations and print publications. The awards and recognition it earned include:

In 2015, Aetna joined the ranks of the top 50 companies on the Fortune 500® list.

In 2015, Aetna was awarded the National Association of Counties (NACo) Award for Corporate Excellence. Aetna was recognized for its work with NACo to develop strategies for managing the health and well-being of county employees and retirees.

In 2015, Aetna received the Corporate Angel Network Award for providing more than 50 flights to men, women, and children in need of cancer treatment to centers across the country.



Aetna's summer internship program was ranked No. 30 out of 50 companies by VAULT® 2016 Top 50 Internships. Aetna was the only healthcare company recognized on the list.

The Human Rights Campaign Foundation named Aetna to its 2016 list of Best Places to Work for lesbian, gay, bisexual, and transgender employees. The list includes all companies that achieved a perfect score on the 2016 Corporate Equality Index.

For the 16th time, Aetna was named by The National Association of Female Executives as one of the 2015 NAFE Top 50 Companies for Executive Women. The list highlights companies whose practices identify and promote successful women.



Aetna was selected as the "Best of the Best" 2016 by *U.S. Veterans Magazine*.

Aetna was named to the Top 100 Military Friendly® Employers list for 2016. The list recognizes companies with leading programs for veterans, members of the military service, and military spouses.

Aetna ranked No. 1 as the most Veteran-Friendly employer in the Veteran Recruiting Virtual Career Fairs in 2015. In addition, Aetna also received Military Friendly® Recognition for 2016.

For the fifth consecutive year in 2015, Aetna received a ClearMark Award from the Center for Plain Language. The award was received for Aetna's Consumer Tumblr Blog.



In 2015, Aetna's security portal received *CSO Magazine's* CSO50 Security Confab Award. The award recognizes innovative use of security in driving business value.

For more information about Aetna, please visit: <https://www.aetna.com>

Position Description



The Head of Corporate Clinical Operations of Aetna is responsible for providing leadership and direction for over 3,500 clinical staff in 13 regional locations to ensure consistent, efficient and impactful delivery of clinical programs for Aetna's commercial and Medicare populations.

This executive will lead the day to day operational functions ensuring timely and accurate clinically based execution of initiatives for markets serving approximately 10 million medical members and 1.7 million Medicare beneficiaries.

This work will be accomplished by an intense focus on the use of analytics to focus on efficiency and value for the member. While rationalizing and simplifying the provider experience and clinical programs, this role will also work closely with consumer care management to ensure the transformation to a modernized population health approach. This approach will leverage Aetna and provider capabilities to more proactively deliver health care management strategies while reducing the need for retrospective or concurrent transactional provider strategies.

Working closely with the Chief Medical Officer (CMO) and the Commercial and Medicare Segment business and clinical leaders, this position will develop and deploy innovative clinical programs, services and methods of care that create more healthy days for our members. By coupling advanced medical policies with the application of innovative analytics to focus on efficiency and value, Aetna will be the leader in patient-centric models that are consumer and provider friendly. This leader will use innovation to drive a transformative change from a traditional health plan to a provider-centric model. Currently, Aetna has 70-plus value-based contract relationships that represent 38 percent of our claims. This is an opportunity to move from traditional Utilization Management to a different type of collaboration using population health.

Reporting Relationship

The Head of Corporate Clinical Operations will report to the Senior Vice President of Network and Clinical Services.

This role will provide leadership and direction to a national operation and direct leadership over the following functions: Concurrent Review, Case Management, Pre-Certification and Prior Authorization, and Critical Case Review and Quality.

Principal Accountabilities

- Direct the day-to-day operations for the national clinical services organization for Aetna to foster a common and more current vision of provider experience and clinical services business goals. This includes providing leadership and direction for the team to ensure that the organization's strategic plan is translated into tactical goals and objectives that guarantee performance objectives are met and/or exceeded.
- Recruit, select, and retain highly qualified professionals. Create a working environment where productivity can be sustained and improved, and where innovation and personal growth are encouraged and realized. Provide the leadership necessary to maintain a motivated, productive, and competent team through open communication and delegation of responsibilities and authority. Ensure people are in place to drive business results. Guide and direct subordinates in their personal and professional development.
- As a key member of the Network and Clinical Services management team, participate in the development of short-term and long-term strategic plans required for Aetna's ongoing growth and success. Collaborate with the team to reach a shared vision regarding clinical service operations and align the development of the function and respective resources with business growth objectives.
- As a key team member, provide thought leadership in the formation of the strategy that moves Aetna's traditional care management from a telephone approach to the top 5 percent of the population to a more community-based model (including in the home) approach that extends beyond the top 5 percent to the other 95 percent via wellness, digital, and other care plans to address the broader needs of the population.
- Develop and foster strong working relationships and communication at all levels of the organization. Foster an environment of collaboration and communication between key functional areas to ensure timely implementation of new strategies and coordinate implementation of corrective strategies to resolve problems or situations that may arise. Problem-solve issues that are barriers to expected operational results.
- Serve as a focal point between corporate and regional/market clinical operations through leadership and collaborative style. Hold each region's management team accountable for their individual region's performance while serving as an advocate for their needs in the corporate office.
- Develop and regularly communicate key operational metrics that systematically measure performance versus plan against medical costs and trends. Develop a communication channel that acknowledges performance improvement in the organization and the respective impact on employees, members, providers, and other stakeholders.
- Ensure the highest standards (top quartile) of efficiency and stakeholder experience for clinical service operations and processes. Regularly assess current state of clinical operations against industry standards for productivity, quality, and cost. Identify service gaps and opportunities for performance improvement.

- Proactively builds and maintains solid relationships with the Payer and Provider community by influencing decision making and ensuring quality and satisfaction standards are met.
- Works closely with Aetna clinical teams to assist in designing policies that support the facilitation of care and minimizes administrative burdens for providers, members and Aetna.
- Develop a comprehensive plan designed to address operational improvement opportunities, including a strategy for market-leading performance. Develop short-and long-term goals/objectives with respective timelines and budgetary recommendations.
- Uses data and analytics to inform decisions about what current strategies are producing value for the member, provider, and Aetna.
- Perform other duties as assigned to meet company objectives.

Experience and Qualifications

The successful candidate will possess a bachelor's degree; a master's degree in business or health administration is highly preferred. This individual will have 15 years progressive, related business management experience in a high-impact role with track record of success leading regional or national operations of managed care and/or healthcare services company. While prior experience overseeing a medical management/clinical services organization is desired, it is not mandatory.

The Head of Corporate Clinical Operations must have a demonstrated leadership capacity to assume oversight and accountability for the operations of a growing business and the ability to lead and motivate people to achieve agreed-upon results. This individual must have an extensive capacity to think strategically, effective communication skills, and a proven track record of building and maintaining multiple successful partnerships.

Specifically, it is important the candidate has experience or thorough knowledge in the following areas:

- Proven ability to effect change and meet business goals, monitor progress, and take corrective actions when necessary.
- Experience working proactively with all stakeholders to identify and meet their needs and requirements.
- Comprehensive knowledge of managed care operations and how they can work to improve quality of care and reduce costs. This would include core operations, network management, provider relations and medical management/care management. A deep understanding of clinical service operation.
- Proven ability to understand business strategies and formulate concise solutions to complex problems. Prior experience of leveraging analytics in business decision.
- Clinical and/or traditional managed care experience with proven track record of creating new strategies that support new consumer care management
- Strong manager of organizational talent. Actively seeks to build, manage, and continuously improve the organizational talent of the company.

- Exceptional written and verbal communication skills. Experience in effectively simplifying and presenting complex information.
- Strong analytical and critical thinking skills. Focus on driving disciplined, fact-based decisions, and executing with discipline and urgency.
- Success in simplifying and rationalizing core case management, UM, clinical assets and technology offerings based on market value and true return on investment.
- Experience in rationalizing a current portfolio and decision making on stop/start/continue initiatives to deliver value.
- Success in moving from current traditional strategies to new, modified approaches.

Personal and Professional Attributes

The successful candidate will understand and have a commitment to the philosophy, mission, values, and vision of Aetna. This key executive will be able to demonstrate these values with his/her leadership practices. This individual will also possess personal and professional integrity, strong communication skills, and an excellent professional appearance and presentation.

Specifically, the following knowledge, skills, and abilities will be required to be successful in this position:

- Honest and a highly ethical team player.
- Highly engaged, energetic, focused, and execution-oriented.
- An extremely organized, disciplined, hands-on, and process-oriented leader who is not afraid of digging into details when necessary.
- Demonstrated experience as a respected and credible leader with success in leading cross-functional and market based teams at various levels.
- Demonstrated proactive management style.
- Strong work ethic, achievement-oriented, and motivated beyond personal interests.
- Strong people management and leadership skills. Highly effective and active communicator who works well with people at all levels.
- Problem solves and approaches work from a “return on investment” perspective.
- Strong business acumen, intelligence, and capacity. Thinks strategically and implements tactically.
- Open leadership style. Actively seeks out and supports collaborative thinking and problem solving with others in the organization.
- Willingness to engage and clearly state any objectives or different views in a cordial and collaborative manner.
- Strategic vision and thinking. Ability to position the organization for the future, looking beyond the present situation to conceptualize key trends and identify changing market demands.
- Knowledgeable of how decisions impact all aspects of the business. Approaches his/her work as an interconnected system.
- Willingness and ability to roll up sleeves and do hands-on work one minute and discuss strategic positioning and the “big picture” the next.
- Proven ability to affect change and manage a regional or national operation through organizational growth and change.

Furst Group



Furst Group is in its fourth decade of providing leadership solutions for the healthcare industry. Our experience in evaluating talent, structure, and culture helps companies align their organizations to execute their strategic initiatives.

Our talent and leadership solutions provide a comprehensive array of retained executive search and integrated talent management services, from individual leadership development to executive team performance to organizational/cultural assessment and succession planning.

Our clients include hospitals and health systems, managed care organizations, medical group practices, healthcare products and services companies, venture capital- or equity-backed firms, insurance companies, integrated delivery systems, and hospice and post-acute care businesses.

Furst Group recognizes partnerships are the cornerstone of our business. In today's competitive talent environment, having a defined process that provides clients and individuals with clarity and feedback throughout the entire job search is paramount to our business model.

We take extra steps to ensure candidates:

- Understand the nuances of a particular position or organization.
- Are prepared for interviews and conversations.
- Have access to interview and travel schedules.
- Are provided timely feedback.
- Remain in our database for future contact.
- Value diversity and the principles and ethics practiced by our client organizations.

We look forward to working with you as a potential candidate for the Head of Corporate Clinical Operations position for Aetna, Inc. in Hartford, Connecticut.

For additional information on Furst Group, please visit our website at www.furstgroup.com. To learn more about this particular position, please call (800) 642-9940 or contact:

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