

TABLE OF CONTENTS

Letter from Nashville Health Care Council President
About Council Fellows
Fellows in Conversation6-22
2024 Council Fellows Faculty
Council Fellows Advisory Board
Council Fellows Partner Organizations
Class of 202424-25





As we reflect on the year behind us, one word encapsulates the essence of the healtcare industry: change. As our nation's healthcare industry evolves, the Nashville Health Care Council offers curated opportunities to catalyze positive change through collaboration, connection and unique programming for healthcare leaders of every level. The Nashville Health Care Council Fellows program empowers senior leaders to engage and learn with peers and guest executives to propel the industry forward.

The Nashville Health Care Council is incredibly proud that the Council Fellows program continues to attract top-level leaders from across healthcare. The Council Fellows program expands the Council's nationwide network of healthcare leaders committed to addressing the industry's greatest challenges and creates purposeful space for inspiring healthcare conversations. We know that the cohort of leaders from the 2024 class will continue to inspire collaboration and innovation that will move our industry forward.

This year's curriculum was designed to provide Council Fellows with depth and breadth of issues, insights and opportunities within the key domains of healthcare. These are all foundational elements for change and improvement rooted in and supported by our Council community.

True leadership requires adaptability and a willingness to embrace change. Council Fellows are equipped with the knowledge, skills, and network necessary to navigate the ever-changing healthcare landscape with confidence and purpose.

Apryl Childs-Potter

President Nashville Health Care Council

Homel Childs Potter

Council Fellows Program as a Catalyst for Change

The Nashville Health Care Council strengthens and elevates Nashville as the Healthcare City, serving as the common ground for the city's dynamic ecosystem of more than 900 healthcare companies. With a \$68 billion economic impact and 333,000 jobs locally, Nashville's healthcare cluster is a world-class hub. The Council offers collaborative opportunities for members, including the Council Fellows Program, where the industry's most influential executives come together to exchange ideas, share solutions, build businesses and grow as industry leaders. Now in its 11th year, Council Fellows was founded to establish a national network of emerging healthcare leaders who share both a common language and a commitment to improve care delivery and increase value for U.S. healthcare consumers. Already, the program boasts more than 300 alumni—the majority of whom are serving in executive leadership roles at healthcare organizations across the country.

This year's program garnered a record number of applicants. The 32 Fellows selected represent not just public and private sectors, but 13 distinct industry segments, including payors, investors, health system executives, clinicians, entrepreneurs, higher education and government officials. In total, this year's cohort comprised executive-level stakeholders from 31 different organizations—four of which have newly joined the Council as a result of having a Fellow in the program.

We look forward to engaging the Council's newest Fellows alumni in the vital work of:

- Growing and attracting businesses to Nashville
- Building strong talent pipelines
- Telling the Nashville healthcare story



"We've enjoyed watching our Fellows' enthusiasm, passion and investment in driving change blossom throughout this year's program. Our hope is that this experience has both enhanced their perspective and challenged them to be the change they wish to see."

Michael Burcham

Council Fellows Chair, Chief of Strategy and Talent Development, Shore Capital Partners

Stay connected on LinkedIn: @CouncilFellows

Learn More: healthcarecouncil.com/Council-Fellows

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Fellows in Conversation

Over the course of five months, Council Fellows engage in retreats and experiential learning sessions facilitated by some of the industry's leading experts, exploring topics ranging from cost of care and innovation to health equity, market segmenting and workforce development.

The program also forges connections among current Council Fellows, program alums and the greater Council community, fostering a growing network of conscientious leaders working toward a common goal.

Experience the Council Fellows program through the lens of cohort participants in the following recaps from conversations led by our 2024 Fellows Faculty.



"One of my professional goals is to make positive change at scale, and the Nashville Health Care Council Fellows Program enables the connections and discussions that make that possible. Our cohort's incredibly diverse set of experiences and backgrounds positions us to talk holistically about solutions to some of the biggest challenges facing healthcare, using both a business and a public policy lens. The only way we can effect change systemwide is through thoughtful, transparent dialogue and creative, collaborative solutioning. The Council Fellows Program affords us an opportunity to do exactly that."

2024 Fellow Meryl Holt
Head of Legal and Chief Compliance Officer, Cadence



"The Nashville healthcare market is different from anywhere else I've worked in the country. As an outsider, it's interesting to experience this culture where you may work for one organization today and be at another company tomorrow, but everyone still wants to find ways to work together toward the common goal of improving care. I travel to major healthcare markets and tech hubs all over the U.S., and there's something very unique about the community here in Nashville."

2024 Fellow <u>Greg Aaron</u> Global Vice President of Client Relationships, Oracle Health

Where Financial Viability Meets Moral Responsibility

The U.S. has been a world outlier in healthcare spending for more than half a century, with few signs the tide will turn. The rising cost of healthcare remains a top concern for Americans, and healthcare affordability looms large as a hot-button issue in the 2024 election cycle.

Council Fellows discussed the sobering reality that while the U.S. spends twice as much on healthcare per capita as comparable nations—fully 17.3% of the GDP—U.S. life expectancy has seen a steady decline since 1980, now significantly lagging behind the G7 nations and ranking 53rd overall among surveyed countries.

Speakers engaged cohort participants on the leadership challenges faced in the ongoing effort to balance quality, access and affordability. Council Fellows also discussed the difficult imperative to maintain financial stability while fulfilling moral duty, as an industry rooted in caring.

"How can we help move the industry toward reasonable financial expectations that may not be the most profitable for each interest but still allow each interest to remain financially viable and also make the morally right decision?" asked Ascension St. Thomas President and CEO Fahad Tahir.

A Council Fellows alum, Tahir is embodying the Council's "change through collaboration"

mindset in his efforts to help rebuild both workforce and consumer trust as head of Nashville's largest nonprofit community hospital. Asserting that a leader's role is "to make a big organization feel small," Tahir uplifted Ascension's threefold objective to grow revenue, grow income and provide more charity care.

Council Fellows also explored issues surrounding wage growth, inflation and physician economics with TeamHealth CEO Leif Murphy and, in conversation with Darin Gordon—former director of TennCare, Tennessee's \$12B+ Medicaid program—learned about care delivery innovations driving the Medicaid service model, as well as the model's constraints.

"Public service was the best job I've ever had—and, in some cases, also the most frustrating job I've ever had," said Gordon. "Imagine having a nonstop board meeting about your budget for four to five months of the year while simultaneously managing your responsibilities. That pressure forces creativity."



Nearly half (47%) of U.S. adults say that it is very or somewhat difficult for them to afford their healthcare costs.

Source: KFF



"I don't want anyone to think that quality isn't a conversation. Quality is always the conversation. I spend a lot of time working with states, and the discussion has never been, 'How can we do things more poorly?' The question is, 'What is the role that government can play beyond those problems currently being solved for? What are we doing well, and where are our opportunities?'"

Darin Gordon
Operating Partner, Cressey & Company



"I don't believe that hospital-based physicians are overpaid. I would make the argument that they are underpaid—especially after these past 10 years, where they've seen no increase in base pay and extreme pressure on productivity."

Leif Murphy CEO, TeamHealth

Health vs. Healthcare in America's Social Contract

Healthcare spend, and the driving question of who's left footing the bill, was a focal point for the cohort's health equity immersion.

<u>Dr. Tony Iton</u>, Senior Vice President of Healthy Communities for The California Endowment, delineated the many social determinants of health (SDOH) that impede healthy living and decrease life expectancy for at-risk and underserved Americans, cautioning Fellows not to conflate health and healthcare.

"Healthcare is only responsible for about 10% of our health status," said Iton. "The other 90% has to do with opportunity."

Renowned for his research identifying ZIP codes as a more powerful predictor of life expectancy than genetic codes, Iton advised Fellows that "stories, not data, drive most of the policy in this country ... and policy creates the conditions people have to navigate in order to be healthy."

By extension, Iton illustrated that while the U.S. may lead the world in healthcare spend, when looking at total health investment per capita—inclusive of elements in the social contract—the U.S. is not the big spender. In nations home to the world's best health, for every \$1 spent on healthcare, \$2 is spent on social services. By contrast, the U.S. spends just \$0.55 on social services for every \$1 spent on healthcare.

Through an on-site immersion at Faith Family Medical Center, a nonprofit primary care clinic serving uninsured/underinsured individuals in Middle Tennessee, Council Fellows explored the center's artful integration of social services into its provision of affordable, quality care. Fellows also leveraged their expertise and professional insights to problem-solve real strategic challenges posed by FFMC leadership.

Speaker Leslie Meehan, Special Projects
Director for the Tennessee Department of
Health (TDOH), also homed in on health
disparities by ZIP code, presenting TDOH's
plan to "flip the script on health" through
grants for public access spaces and housing
partnerships with Habitat for Humanity, legal
aid services and the state's primary landowning organizations.

"In healthcare's current model, we treat disease and injury, educate patients on risk behaviors and wonder why public health isn't improving," said Meehan. "The approach we're promoting through TDOH is to recognize environmental inequities, realize that social determinants are major factors impacting health and rescope our business models accordingly to address these determinants."





"At the macro level, health is less a technocratic enterprise—bringing technical skills into an encounter—and more a democratic enterprise, which means our country's approach to healthcare is completely wrong. We don't understand how our politics shape our health, and it's costing us."

Dr. Tony Iton
Senior Vice President of Healthy
Communities, The California Endowment



"Without a roof over our head, good health is impossible."

Leslie Meehan Special Projects Director, Tennessee Department of Health 100%

1+ SDOH

4+ SDOH

14.3%

56.9%

56.9% of Tennessee adults report at least one SDOH—and 14.3% have four or more.

Source: TDOH

A Rallying Cry for Public Health to Transcend Politics

Fellows explored the ever-evolving landscape of public health policy, from local health codes to federal mandates, examining the laws, regulations, actions and judicial decisions governing the U.S. healthcare system.

In conversations with Ford Koles, Advisory Board VP and National Spokesperson, and Nancy-Ann DeParle, Former Deputy Chief of Staff for Policy to President Barack Obama, Council Fellows zeroed in on five health trends likely to become legislative priorities. Specifically, the cohort discussed Medicare Advantage, GLP-1 and gene therapy drugs, site-neutral payments for hospitals, the role of private equity in healthcare, and artificial intelligence (AI) as current focal points for legislators and healthcare leaders alike.

A healthcare economist, Koles challenged Fellows to consider the role of AI within the reimagined workforce social contract, particularly as a means to help reduce workforce burnout and position caregivers to work at the top of their license.

"The first question is never, 'What is my AI strategy?'" said Koles. "The first question is, 'Why do all my nurse managers quit?' The second question is, 'Is their task mix appropriate to their accrediting and license?'

Question three is, 'Can I take any busywork off their plate?' And then the final question: 'Could a robot do that busywork?'"

Leveraging her extensive background as a health policy expert and Affordable Care Act architect, DeParle shared her projections for probable policy shifts pending the outcome of the 2024 presidential election. As managing partner of a healthcare-focused equity firm, she also spoke transparently about concerns regarding current legislative scrutiny on private equity in healthcare.

"When you start from the proposition that none of this work should be for profit, that's a difficult position," said DeParle, who joined the private equity space to support capital access for healthcare entrepreneurs and innovators. "Nashville has a very unique opportunity to help people better understand that having a margin enables you to have a mission."





"Public health transcends politics. At some point in our lives, we will all interact with one or more healthcare services or systems in some way. The Fellows program is an inflection point—a nonpolitical space, for nonpartisan collaboration with others—dedicated to the prospect that regardless of affiliations, every person's well-being matters."

2024 Fellow <u>Dr. Ralph Alvarado</u> Commissioner, Tennessee Department of Health More than 22.7 million Medicaid enrollees have been disenrolled as of June 4, 2024.

Source: KFF



"The hallmark of policy these days is promoting greater transparency."

Nancy-Ann DeParle Managing Partner and Co-Founder, Consonance Capital Partners

12

Innovation as the Pathway to Value-Based Care

Recognizing that innovations in healthcare tend to be slow in both stakeholder adoption and market diffusion, Council Fellows discussed best practices for concept creation, development, execution and distribution with some of the industry's leading-edge innovators.

Todd Park, former U.S. Chief Technology
Officer and Co-Founder and Executive
Chairman of Devoted Health, walked Council
Fellows through some critical steps to create
and sustain innovation, beginning with the
imperative to define their mission correctly
and without ambiguity.

"Define a mission that's meaningful and will actually be helpful to people in some material way," said Park. "If you can't clearly answer the questions of who you are serving and how you're making their lives better, then start again."

Council Fellows alumni and Winnow Al co-founders Ray Guzman and Paul Vernich shared key insights and entrepreneurial lessons learned along their journey building a startup, citing the Fellows program as the source of their inspiration to innovate a technological physician recruitment fix—as well as the springboard that made Winnow's eventual founding possible.

Fellows also engaged in an innovation-centric immersion at Meharry Medical College, meeting with School of Medicine Dean <u>Dr.</u>
Sonja Harris-Haywood to discuss the

The U.S. could see an estimated shortage of up to 124,000 physicians by 2034.

Source: AAMC

"The probability that the initial idea you drew up on a white board is the optimal solution is essentially zero. Your job is to learn, as quickly as possible, which of your underlying assumptions is wrong."

Todd Park
Co-Founder and Executive Chairman,
Devoted Health



mounting physician recruitment crisis. Dr. Harris-Haywood spoke to the challenge of increasing medical class size against the conundrum of residency cap limitations, emphasizing the critical importance of partnering with academic medical centers to protect access to care for our most vulnerable populations.

"Meharry is focusing on diseases more likely to affect the community we've committed ourselves to serve," said Harris-Haywood. "Alongside our partners at Vanderbilt, we are the advocates for the Nashville community—especially those who are uninsured or underinsured. For many populations, we are the beacon of hope."

To illustrate the potential for clinical simulations to bridge the residency gap as class sizes increase, Harris-Haywood had

Fellows complete four simulations in the Meharry Medical College Simulation & Clinical Skills Center, assuming clinical provider roles to navigate scenarios ranging from acute trauma response and social needs assessment to delivery of difficult news to a patient.

"The Fellows network actually has the potential to do what it was created to do, which is position healthcare leaders to talk about issues, figure out what to do about them, build solutions together, partner to take new ideas to market and actually change healthcare at scale."

Ray Guzman
Founder and CEO, SwitchPoint Ventures

Zeroing In on Rapidly Changing Consumer Preference

With consumers employing increasingly different approaches to determine when and where to seek care, which health plan to choose, and the perceived value of medication, Fellows explored the power of data-driven market segmentation as a tool to better understand and engage with consumer audiences when bringing new innovations to the marketplace.

"One of the interesting misconceptions of market segmenting is that it's static, or that it's only utilized to figure out how to reach the audiences to whom you're communicating," said Shannon Hooper, President of Unlock Health. "In actuality, market segmenting should in many ways be informing how you're thinking about what you bring to market with each new iteration."

A healthcare analytics expert, Hooper offered Fellows valuable insights into using segmentation to not only define and unlock consumer nuances, but identify meaningful operational pain points, redefine services and promote better patient data flow.

The notion of tailoring services to individual consumer needs, or nuance, was also raised by Marcus Osborne, CEO of RightMove and former Senior Vice President of Health Transformation at Walmart.

Drawing heavily on his experiences facilitating the launch and expansion of Walmart Health, Marcus shared both success stories and failed attempts in terms of meeting the healthcare consumer where they are, encouraging Council Fellows to put patients' needs first and ask thoughtful questions of their market for the best chance at building transformative, scalable solutions.

"Scale matters because when you start to do things in a repeatable way, the focus isn't just on quality and consistency—it's on affordability," said Osborne. "At the same time, and as one of the great advantages of digital assets, you can introduce components to the experience that enable the individual you're engaging to feel like they're special and unique, and that this experience has been specifically crafted for them."

In conversation with Health Here Chief Strategy Officer Michael Zucker, co-founder of one of the nation's first on-demand urgent care models, Fellows also discussed three evolving dynamics accelerating consumerism in healthcare, examining the far-reaching impact of smartphones, high deductible health plans and tailwinds from other consumer-driven industries.





"When it comes to our care, we essentially all want the same things: convenience, transparency and speed of access.

Consumer expectations around value and quality are pretty universal."

Michael Zucker Chief Strategy Officer, Health Here



"Instead of building services around what you think people need, ask them what they're actually interested in, listen to what they tell you they need and build your services around that."

Marcus Osborne CEO, RightMove

Population segmentation tools play an integral role in enabling the creation and refinement of integrated care systems.

Source: PMC

Nashville Health Care Council Goes to Washington D.C.

Council Fellows traveled to our nation's capital for the inaugural Council-wide D.C. Delegation, joining more than 90 Nashville Health Care Council stakeholders to facilitate conversations and forge connections vital to the future of healthcare in this country.

Alongside <u>Council board members</u> and board members from the Council's <u>Leadership Health</u> <u>Care</u> program, Fellows spent three days engaging elected representatives and other government officials on the critical topics of workforce, behavioral health, cybersecurity, and data and Al.

Panel discussions highlighted healthcare's workforce crisis both in broad brushstrokes and in specialized fields like behavioral health, where more than 50% of Americans currently live in markets where these providers are in severely short supply. Council Fellow April Hansen, MSN, RN, who serves as Group President of Workforce Solutions for Aya Healthcare, spoke to the labor challenges at hand in an opening night level-set for delegation members.

"We don't have enough healthcare workers in this country, and we don't have them in the right places, so demand for services is outstripping the supply, and that gap is only expected to widen in the next 10 years," said Hansen. "But the problem is greater than a simple supply and demand issue, because we also have a distribution disturbance—namely, families in rural areas having to travel unconscionable distances to access the basic, and critical, care they need."

Panelist and Council Fellow Greg Aaron, Global Vice President of Client Relationships for Oracle Health, spoke to the importance of discoverable algorithms, the avoidance of discrimination and bias, and the prioritization of personal data protection, as cloud platforms are now housing "data at a scale that's unbelievable." In accord with other speakers, Aaron also discussed the roles AI might play within the reimagined workforce social contract, operating as a conduit to reduce the administrative burden currently driving provider burnout across all sectors and specialties.

Digital solutions as a gateway to workforce relief and burnout prevention were the focus of a Fellows-only industry immersion at the MedStar Institute for Innovation as well as a delegation-wide panel discussion on "Getting Al Right in Healthcare."



"While we see huge potential for AI on the administrative support side, on the care delivery side, healthcare will likely continue to be a space where humans are more intimately involved than in other industries. Large language models notwithstanding, we have to find ways to keep the human at the center."

Colleen Nguyen

Senior Health Policy Advisor, Office of Sen. Mark Warner (D-VA) "The lowest paid providers in our system are also the ones providing the highest level of uncompensated care, because they are committed to providing the care that's needed regardless of coverage."

Shawn Coughlin

President and CEO,
National Association for
Behavioral Healthcare

The global AI healthcare market, valued at \$20.9B in 2024, is estimated to reach a valuation of \$148.4B by 2029.

Source: Markets and Markets

Envisioning and Planning for Healthcare's Future Direction

Evaluating both the challenges surrounding legacy healthcare models and the potential inherent to innovations, Council Fellows leveraged collective insights and market trend analytics to speculate on the industry's future direction.

Biotech entrepreneur and investor Julie Yoo, General Partner at a16z, shared her take on healthcare's greatest unrealized areas of potential, from gradual erosion of the "incumbent advantage" to the new Alpowered industrial revolution. Emphasizing the eternal question of whether the startup will get distribution before the incumbent gets innovation, Yoo praised Al's massive potential while also encouraging Council Fellows not to overthink technology.

"One of our most successful businesses uses text messaging to engage its customers," said Yoo. "Innovation doesn't necessarily require fancy tools or AI ... it just takes a thoughtful approach and the right packaging to reach the end consumer."

Rob Allen, President and CEO of Intermountain Health, one of the nation's

strongest examples of value-based care in practice, also spoke to simple perspective shifts that might help Council Fellows arrive at and effectively integrate more value-based solutions.

"Too often, we think our competitors are other healthcare organizations, and we set our strategies around how we're competing with those entities," said Allen. "But in healthcare, our true competitor is actually disease. And if disease is our competition, then success takes on a different form and positions us to bring other players to the table."

In breakout groups, many Council Fellows emphasized the challenges they face when seeking to emulate Intermountain's mission-based care model against the backdrop of America's capitalist economy. When asked how they envision the industry's future,

Agree O Unsure

69% of U.S. adults agree the healthcare system "is fundamentally flawed and needs major change," versus only 7% who disagree and 24% who are unsure.

Source: The Keckley Report



"What's clear about healthcare in the U.S. is that we've embraced capitalism and we embrace a private system that's going to continue to grow, though in different directions and in different ways."

Paul Keckley
Principal, The Keckley Group

Council Fellows ultimately aimed for a middle ground between abject cynicism and unbridled idealism, acknowledging reality while delineating actions that might yield lasting positive change.

"Our group's primary takeaway is that as healthcare leaders, we have a responsibility to spend at least some portion of our time thinking about the future of care in this industry, and we also need to be capable of thinking about the next practical steps," reported Council Fellow Mike McAlevey, Chief Legal and Administrative Officer of HCA Healthcare. "Essentially, we each need to simultaneously be futurists and incremental improvers, or we're not doing our jobs."



"If we can't create alignment from the care delivery side to the patient that finds value along the way—improved economies, improved care, improved outcomes—then the value-based care model probably won't survive, because too many key stakeholders aren't realizing any value in it."

Rob Allen
President and CEO, Intermountain Health

20 21

2024 COUNCIL FELLOWS FACULTY

Top healthcare leaders from across the country engage with Council Fellows throughout the program, serving as distinguished speakers, faculty members and immersion hosts. We extend our sincere thanks to the internationally renowned experts, innovators, public servants and system executives who shared their time, talents and invaluable insights with the Class of 2024.

Rob Allen

President and CEO. Intermountain Health

Michael Burcham

Chief of Strategy and Talent Development, **Shore Capital Partners**

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Founder and CEO, c3/ consulting

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Managing Partner and Co-Founder, Consonance Capital Partner

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Vice President of Integrated Health, Humana

Darin Gordon

Operating Partner, Cressey & Company

Ray Guzman

Founder and CEO. SwitchPoint Ventures

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Dean, Meharry Medical College School of Medicine

Shannon Hooper

President, Unlock Health

Tony Iton, MD

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Michael Zucker

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Our Fellows Advisory Board Members serve as Council representatives and spokespeople at the national level, and we are deeply grateful for their investment of energy and resources to further the Council Fellows program.

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22 23

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