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Executive Summary

SEASONED EXECUTIVE WITH EXPERTISE IN HEALTH CARE FINANCING AND DELIVERY SYSTEM TRANSFORMATION, STRATEGIC PLANNING AND BUSINESS DEVELOPMENT, FINANCIAL FORECASTING AND POLICY ANALYSIS, AND STRATEGIC RELATIONSHIP MANAGEMENT AND CONTRACT NEGOTIATION:

- Deep understanding of the health care system and key cost drivers, with experience working with payers and providers to develop and execute quality improvement and cost reduction strategies
- Demonstrated success negotiating multi-million dollar contracts focused on value-based care and strategic partnerships
- Track record of engaging with executive peers to develop strategic objectives, with experience working in matrixed organizations to implement and monitor business development plans that align with and support those objectives
- Expertise in financial and policy analysis honed through the creation of medical revenue and expense forecasts, and the evaluation of public policy changes affecting the health care industry

Professional Experience

VICE PRESIDENT, STRATEGY AND PUBLIC PROGRAMS — 2024-PRESENT

OPTUM MASSACHUSETTS — WORCESTER, MA

- Leads the planning and development of business strategies to facilitate growth and advancement of Optum's Medicare and Medicaid business lines in Massachusetts
- Develops service lines and external relationships to support Optum's public programs strategy by identifying, evaluating, and implementing innovative services and programs that achieve exceptional quality, service, and financial results
- Leads the development and execution of Optum's growth strategy in Massachusetts through identification, assessment, negotiation, and execution of potential mergers, acquisitions, investments, and joint ventures
- Oversees strategic and financial relationships with government health care programs, leading the successful implementation of value-based payment models and maintaining expertise in Medicare and Medicaid innovation
- Identifies and advances strategic priorities for legislative and regulatory advocacy by tracking and analyzing legislative and regulatory proposals and facilitating relationships with key stakeholders in the public policy realm
- Directs credentialing and provider enrollment functions, overseeing the implementation of technology solutions and process improvements to enhance efficiency, promote provider satisfaction, and ensure patient safety

VICE PRESIDENT, PAYER CONTRACTING AND NETWORK STRATEGY — 2017-2024

RELIANT MEDICAL GROUP — WORCESTER, MA

- Led the development, negotiation, and management of financial and clinical relationships with key payer, provider, and service organization partners
- Directed provider network development efforts through the analysis of future provider/service partnerships based upon access, quality, and financial efficiency
- Performed comprehensive assessments of payer and provider performance, developing revenue and expense forecasts and monitoring performance relative to expectations
- Served as the executive leader of the organization's Accountable Care Organizations, including a MassHealth Medicaid ACO and a Medicare Realizing Equity, Access, and Community Health (REACH) ACO
- Provided leadership for strategic initiatives aimed at business development, revenue growth, and medical cost reduction, including service line development, behavioral health care transformation, and risk adjustment enhancement
- Facilitated the development of the organization's long-term business strategies, leading project work to support key initiatives and monitoring success in achieving corporate and operational goals

VICE PRESIDENT OF NETWORK CONTRACTING, SENIOR PRODUCTS — 2014-2017
DIRECTOR, MEDICARE PREFERRED AND ALLIED HEALTH CONTRACTING — 2012-2014
TUFTS HEALTH PLAN — WATERTOWN, MA

- Developed and executed provider negotiation strategies for the organization's Medicare Advantage products, including a fully integrated dual eligible Special Needs Plan and new out-of-state markets
- Led efforts to expand the provider network for Tufts Health Plan's Medicare Advantage products, negotiating new risk-based arrangements and executing strategies to transition provider organizations to progressively increasing risk
- Directed the organization's efforts to consult with providers to improve performance in value-based arrangements, with interventions focused on physician incentive programs and practice transformation initiatives
- Oversaw settlement reporting and financial analytics for value-based contracts, and collaborated with finance and actuarial leadership to develop forecast models projecting future performance to inform organizational business plans
- Assessed the impact of key regulatory and CMS programmatic changes on our business model and network relationships, including the implementation of MACRA and the development of CMS Accountable Care Organizations

DIRECTOR, COMMERCIAL PROVIDER ENGAGEMENT — 2011-2012
TUFTS HEALTH PLAN — WATERTOWN, MA

- Oversaw a team responsible for managing relationships with network providers and assuring the accurate implementation and interpretation of contractual terms
- Led the creation of payment mechanisms that balanced the needs of network providers with the organization's ability to administer complex reimbursement arrangements
- Developed improved processes to facilitate the implementation of provider contracts, including provider claims audits, fee schedule loads, provider unit set-ups, and reporting processes for value-based reimbursement models
- Managed large enterprise-wide contracting projects, including the development of commercial insurance products with tiered and limited network configurations

SENIOR MANAGER, PROVIDER ENGAGEMENT — 2010-2011
TUFTS HEALTH PLAN — WATERTOWN, MA

- Led a cross-functional effort to create and implement Tufts Health Plan's Provider Engagement initiative, a program of enhanced analytic support and clinical consultation for provider organizations with risk contracts
- Coordinated the deployment of Provider Engagement services to selected organizations, and developed relationships with these organizations to cooperatively implement strategies to improve contract performance
- Managed commercial contract negotiations with provider organizations seeking to transition from fee-for-service payment to risk-based reimbursement models

SENIOR MANAGER, BUSINESS PERFORMANCE — 2009-2010
MANAGER, CORPORATE STRATEGY — 2006-2009

TUFTS HEALTH PLAN — WATERTOWN, MA

- Supported senior management in the development, execution, and communication of Tufts Health Plan's long-term corporate strategy and new business initiatives
- Facilitated the development of Tufts Health Plan's business and operational priorities, assuring that priorities were consistent with corporate strategy, and identifying metrics to assess performance on a real-time basis
- Enhanced communication of the organization's performance on key business priorities to senior management through the development of a monthly management scorecard
- Managed the collection and analysis of competitive intelligence, including local market data, national insurance industry trends, and local and national health care policy initiatives
- Developed the business plan that led to Tufts Health Plan's entry into the Rhode Island commercial insurance market
- Led a multi-disciplinary project team to design and file Tufts Health Plan's Commonwealth Choice products, including the creation of a limited provider network and alternative pharmacy benefits

ASSOCIATE DIRECTOR, UNIVERSITY PLANNED GIVING — 2001-2004

ASSISTANT DIRECTOR, UNIVERSITY PLANNED GIVING — 2000-2001

COORDINATOR, UNIVERSITY PLANNED GIVING — 1999-2000

HARVARD UNIVERSITY — CAMBRIDGE, MA

- Managed the solicitation and stewardship of a list of top-rated fundraising prospects
- Worked with donors, professional advisors, and University colleagues to negotiate new planned gifts and bequest intentions, closing over \$5 million in gifts in fiscal year 2004
- Designed and implemented planned giving prospecting and marketing strategies
- Developed procedures for processing planned gifts and trained other staff members in these areas

Education

HARVARD UNIVERSITY JOHN F. KENNEDY SCHOOL OF GOVERNMENT — CAMBRIDGE, MA

- Master in Public Policy, June 2006
- Concentrations in Health Care Policy, and Political Advocacy and Leadership

TUFTS UNIVERSITY — MEDFORD, MA

- Bachelor of Arts, May 1999
- Graduated summa cum laude with a concentration in Political Science

Community Leadership

TOWN COUNCILOR — 2019-PRESENT

TOWN OF WAKEFIELD — WAKEFIELD, MA

- Serve as an elected member of the Town of Wakefield's executive governing board, with responsibilities including policy development, appointments and performance management, licensing, and budget approval
- Led Wakefield's Vision 2030 initiative, a comprehensive effort to engage community stakeholders in the development of a vision and values statement for Wakefield, and spearheaded efforts to secure approval for a new high school facility
- Appointed to the Massachusetts Municipal Association Fiscal Policy Committee in 2022, and selected as Fiscal Policy Committee Chair in 2024

FINANCE COMMITTEE MEMBER — 2018-2019

TOWN OF WAKEFIELD — WAKEFIELD, MA

- Evaluated operating and capital budget proposals put forward by the Town Administrator and provided recommendations to Town Meeting
- Developed and analyzed long-term projections for town revenues and pension obligations

TREASURER — 2020-2022

VERGE INCLUSIVE ATHLETICS, INC. — PRINCETON, MA

- Designed and managed the accounting processes, regulatory reporting, and financial controls for a 501(c)(3) organization dedicated to providing inclusive running programs to youth with and without special needs
- Led budget development activities, long-term financial planning, and identification of grant funding opportunities
- Represented the organization with fundraising prospects, potential board members, and other community stakeholders

CHAIR — 2002-2004

MASSACHUSETTS DEMOCRATIC FUTURE/YOUNG DEMOCRATS OF MASSACHUSETTS — CAMBRIDGE, MA

- Planned and directed the activities of a statewide volunteer organization with over 2,000 members
- Facilitated the work of a twenty-member Board of Directors and built future leadership capacity
- Created and implemented outreach plans that increased membership by 30%