

# KEITH B. BROWN

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## SUMMARY

Results-oriented Professional with extensive Operations, Quality Control, Project Management, and Financial Analysis experience in the Insurance and Nursing Home Industries. Holds license as Nursing Home Administrator. Core competencies include:

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|--------------------|-----------------|----------------|
| • Internal Audit   | • Planning/     | • Process      |
| • Customer         | Budgeting       | Improvement    |
| Service            | • Leading Teams | • Performance  |
| • Operations/Sales | • Compliance    | Reporting      |
| • Sarbanes-Oxley   | • Data Analysis | • Vendor Mgmt. |

## KEY ACCOMPLISHMENTS

- Increased regulatory compliance and consolidated reporting cycle by two days through more efficient processes.
- Built Access databases to improve the control environment and enhance data integrity.
- Improved control environments through implementation of new tools.
- Increased reporting clarity by restructuring report data and exhibits.

## PROFESSIONAL EXPERIENCE

### **ELLSWORTH MEDICAL, LLC, Windsor, CT**

2011

#### ***Product Manager***

- Providing in-service training on Safe Patient Handling products to Physical Therapists, CNAs, and Nursing staffs at Skilled Nursing Facilities
- Meets home accessibility needs through sales of floor and ceiling patient lift systems.
- Works with physician offices to streamline script process to provide Title XIX incontinence products for their patients.

### **MASONICARE, INC., Wallingford, CT and Newtown, CT**

2010 - 2011

#### ***Administrator in Training***

- Focused on all aspects of Skilled Nursing Care Administration
- Worked effectively with Director of Nursing and Medical Director to increase efficiency of ancillary services for long-term residents and short-term rehabilitation patients
- Assisted Social Services in obtaining customer feedback
- Worked with dining services and nutritionists to handle food ordering, storage needs, and delivery
- Assisted with vendor setup for housekeeping and plant operations

### **CONNECTICARE, INC., Farmington, CT**

2008 – 2009

#### ***Manager, Operational Quality Analysis***

- Coordinated and reported Guarantee measures for employee benefit plan sponsors
- Delivered monthly results audit meetings for multiple departments within the Operations Division.
- Coordinated third-party audits from employer groups and Connecticut Department of Insurance.
- Assured payment compliance to authorizations and contractual obligations.
- Consolidated reporting cycle by two days through new, more efficient processes.
- Built Access databases to improve the control environment and enhance data integrity.
- Achieved customer satisfaction through customer focused HSA & HRA coordinated audits.

### **THE TRAVELERS COMPANIES, Hartford, CT**

2007 – 2008

#### ***Director, Design & Process Improvement, Construction Operations***

- Managed analysis and reporting of monthly General Liability and Workers' Compensation results.
- Developed and maintain multiple Microsoft Access databases to analyze and disseminate data.

PROFESSIONAL EXPERIENCE (Continued)

- Led Sarbanes-Oxley testing, documentation, and reporting for 20 construction field offices and approximately 150 operations control processes nationwide.
- Consolidated the reporting cycle by two days through new more efficient processes.
- Increased reporting clarity by restructuring report data and exhibits.
- Improved the control environment through implementation of new tools.

**AETNA INC., Middletown, CT**

2004 – 2006

***Operational Accounting Manager, National Customer Operations***

- Provided leadership to ensure full corporate and subsidiary compliance with the New York Health Care Reform Act (NYHCRA) through timely and accurate NY Pool payments averaging over \$13 million per month.
- Performed trending analysis in support of reasonability auditing for state and federal claim surcharges.
- Streamlined reporting processes and increased regulatory compliance while providing management support and approval for numerous AIS projects and service requests.
- Drove a recalculation of claim payments for 2,500 customers over three years for Aetna's self-funded business to ensure state surcharge and Graduate Medical Education tax accuracy.
- Steered the tax reporting team responsible for preparation of 500,000 1099MISC forms for the Indemnity/PPO book of business and 80,000 W2 forms for Third Party Sick Pay customers.
- Worked closely with account management to fulfill case set-up needs for NYHCRA and Tax Reporting, generating a dramatic reduction in W2 reporting issues.

**OXFORD HEALTH PLANS, INC., Trumbull, CT**

2002 – 2004

***Project Manager, Cost Containment & Recoveries (2003-2004)***

- Drove audit and recovery teams of 22 employees reviewing \$165 million in inpatient implantable and high-cost drug claims with responsibility for staffing and implementation.
- Coordinated the Request for Proposal (RFP) process and managed relationship with OmniClaim, Inc. and Med Recovery Management, Inc.
- Tracked and reported hospital audit findings to executives at monthly contract governance meetings.
- Increased savings by 50% through highly cost-conscious vendor management.
- Designed and administered process to select 15,000 claims for submission for consideration under N.Y. Reg. 146, 4th Amendment (NY Individual and Small Group Risk Sharing Pools).
- Forged relationships with hospital contractors to develop claim analysis for contracting leverage.

***Project Manager, Claims Quality Management (2002-2003)***

- Led an eight-person team while managing annual claim audits initiated by state regulatory agencies, hospitals, and employer groups through third-party administrators.
- Administered audits for delegated risk arrangements.
- Developed and implemented comprehensive audit program for hospital contract mapping.

**GENT FINANCIAL GROUP, West Hartford, CT**

2001 – 2002

***Sales Representative***

- Promoted and sold Life and Health policies

**CIGNA HEALTHCARE, INC., Bloomfield, CT**

1998 – 2001

***Manager, Financial Analysis (2000-2001)***

- Directed monthly updates and quarterly reporting for the Indemnity book of business across the Midwest and Southeast Regions, representing approximately 1,500 employer groups.
- Generated case profitability reports to regional underwriting.
- Analyzed and identified profit trends and escalated loss leading cases to underwriting.

***Sr. Auditor, CIGNA Internal Audit (1998-2000)***

- Performed risk assessments and audits of various healthcare functions such as claim threshold audits, HIPAA readiness, pharmacy benefit management, and hospital facility management.
- Presented reports and analysis of audit results to all levels of the CIGNA management team.

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PROFESSIONAL EXPERIENCE (Continued)

**EDUCATION & LICENSES**

ITHACA COLLEGE, Ithaca, NY

***B.S., Business Management, 1992***

UNIV. OF HARTFORD, West Hartford, CT

***MBA., 2000***

UNIV. OF CONNECTICUT, Storrs, CT

***Long Term Care Administration, 2010***

LICENSED NURSING HOME ADMIN.

***CT License # 001914***