

annual
report
2016

the
movement
builds



The Voice of Accountable Physician Groups

About CAPG

CAPG is the nation's leading professional and advocacy association for physician organizations practicing capitated, coordinated care. We strongly believe our patient-centered model offers the highest quality, most efficient delivery mechanism—and greatest value for patients.



Our Mission

CAPG's mission is to assist accountable physician organizations in improving the quality and value of healthcare provided to patients. CAPG represents and supports physician groups that assume responsibility for providing clinically integrated, comprehensive, and coordinated healthcare.



President's Message

I'm so proud of the progress CAPG has made in the past year. As a transformative healthcare movement builds across our country, CAPG is in the forefront. We have grown enormously as an organization—in membership, in geographic representation, in value to members, and in our impact on how healthcare in America will be delivered in the future.

In this Annual Report we offer a glimpse at where we have been and where we're headed, while showcasing the remarkable efforts our Board of Directors, Executive Committee, members, staff, and friends have contributed to our success.

Membership and Geographic Representation

CAPG originated in California, but as the use of capitation and risk-based healthcare plans moved nationwide, so did the need for education and information sharing. Today, 40 of our 250-plus member groups are from outside California and 25 of those joined us in the past fiscal year. That kind of growth calls for a close examination of what CAPG is and should be, along with a dedication to serving both existing and new members. Currently, we're looking at ways to combine our California and national members into a single organization led by one board of directors in a way that best supports our total membership.

Member Value and a New Era of Learning

Education has always been a top priority for CAPG, but today we're moving quickly into a critical new era of learning. Everyone engaged in healthcare must understand current medical and technological advances, regulatory issues, changing payment systems, and new practice structures. The movement builds whether we're paying attention or not. As your association, our job is to stay ahead of the movement, providing cutting-edge educational opportunities and other services.



Our Impact on U.S. Healthcare

CAPG, with its experience in alternative payment models, has definitely had an impact on our country's healthcare. Over the last few years, we've extended our advocacy work, including the opening and recent expansion of an active and fruitful office in Washington, DC. Our extended outreach in the nation's capital and our sponsorship there of the CAPG Colloquium, an influential annual healthcare conference, have set the stage for us to engage with legislators and other leaders much more effectively. They now know who we are and come directly to us to discuss relevant issues. Our government affairs office in Sacramento also continues its longtime, proactive advocacy with great success.

Risk-based payment models set us apart as an association. Many of our members are among the nation's largest, best-known physician groups; others are standout smaller groups. Some join us to gain knowledge and make their own mark in the new healthcare landscape. This kind of quality membership also adds to our ability to affect the future.

I hope you find this Annual Report both interesting and informative, and I thank you for your continued association with CAPG.

Sincerely,

A handwritten signature in dark ink, appearing to read "Donald Crane". The signature is fluid and cursive, written over a light-colored background.

Donald Crane, President and CEO





2015–16 Board of Directors

Leadership Team

CAPG is a national organization of medical groups and independent physician associations (IPAs), rather than individuals, and our leadership team reflects the unique nature of CAPG’s membership. Our Board of Directors consists of 33 of our member groups, each represented by both the group’s Chief Medical Officer and CEO.

An Executive Committee is elected from among Board members to implement policy.

CAPG President and CEO Don Crane is responsible for day-to-day operations, with the support of staff members in Los Angeles, Sacramento, and Washington, DC.



Executive Committee

Bart Asner, MD

Chair; Chief Executive Officer, Monarch HealthCare and President, OptumCare Southern California

Kurt Ransohoff, MD

Chair-Elect and Public Policy Committee Chair; Chief Medical Officer and CEO, Sansum Clinic

Jeffrey Burnich, MD

At-Large Member; Senior Vice President, Medical and Market Networks, Sutter Medical Network

John Jenrette, MD

At-Large Member; Executive Vice President, Cedars-Sinai Medical Network

David Joyner

At-Large Member; CEO, Hill Physicians Medical Group, Inc.

Richard Lipeles

At-Large Member; Chief Operating Officer, Heritage Provider Network

James Malone

At-Large Member; Chief Administrative Officer, Southern California Permanente Medical Group

Mark Schafer, MD

At-Large Member; Chief Executive Officer, MemorialCare Medical Group

James M. Slaggert

At-Large Member; Chief Executive Medical Foundation, Providence Health & Services, Southern California



CAPG's Standards of Excellence™...

CAPG launched the 2016 National Standards of Excellence™ (SOE®) on March 14, marking the 10th anniversary of our annual, comprehensive survey of capitated, coordinated care infrastructure for our member accountable physician organizations nationwide.

SOE® is designed to show how well-equipped and structured our physician organizations are in achieving better patient experience, better population health management, and better overall affordability. The survey serves as a roadmap for physician organizations on the journey to greater levels of financial risk and clinical accountability.

As everyone is aware, the nation's healthcare industry is moving to risk-bearing alternative payment models. CAPG's SOE® program measures, publicly reports, and recognizes physician organizations' achievement of the core competencies necessary to succeed and thrive in risk-bearing relationships with payers. Highly relevant to today's policy landscape, the SOE® survey sets out a path for clinical practice improvements and administrative capabilities critical to success in this new environment.

In alignment with CAPG's national expansion, SOE® has become an industry standard in measuring the tools required for sophisticated healthcare systems to deliver accountable and value-based care in the physician practice setting. CAPG's voluntary, critical self-assessment encompasses over 300 physician organizations in 40 states, Puerto Rico, and Washington, DC. We work diligently with the National Committee for Quality Assurance (NCQA)

on the survey's application, analysis, scoring, and review.

Some recent updates to the 2016 SOE® include questions on total cost of care, behavioral health integration, advanced illness management, physician performance measurement and incentivization, and physician payment alignment and earning opportunity for advanced primary care.

In evaluating the survey results, we are mindful of how CAPG physician organizations should meet quality standards, regardless of group infrastructure. The cornerstone of SOE® is built upon the premise that high quality patient-centered care is being delivered by our physicians, practicing in IPAs, medical staff models, and integrated health systems. The survey results reflect our physician organizations' strong commitment to stay ahead of the curve and drive change in care delivery.

We strive to make this survey better every year—more specific, scalable, and responsive to our ever-changing national landscape. These improvements come largely as a result of paying attention to our members' comments and criticisms, as well as actively listening to the voices of our external partners, observers, and regulators. Feedback and correspondence are welcome in our evolution with SOE®.



...A Decade of Tracking Improvements in Care



2015 SOE® Elite Winners

The following rigorous categories represent the 2016 CAPG SOE®, with Domains 1-5 publicly reported:

Domain 1: Care Management Practices

Clinical system supports for quality and efficiency on a population scale.

Domain 2: Information Technology

Funnel for accurate, actionable information to support clinical decisions and coordinate team care.

Domain 3: Accountability and Transparency

Response to the public demand for objective information regarding performance, patient service, and regulatory compliance.

Domain 4: Patient-Centered Care

Critical components of access, convenience, cultural responsiveness, and customized individual care.

Domain 5: Group Support of Advanced Primary Care

to make the patient-centered medical home a system-wide model and to revitalize the discipline of primary care.

Domain 6: Administrative and Financial Capability

to manage complex relationships, diverse revenue streams, innovative payment alignment, and risk. This domain demonstrates how our physician groups are responding to sustainable healthcare reform. (Informational only—no public reporting.)

For more
information on CAPG's
Standards of Excellence™,
please contact
Dr. Amy Nguyen Howell
at anguyen@capg.org
capg.org/soe

Federal Advocacy:

Working for Risk-Bearing Coordinated Care in Washington, DC

CAPG's federal advocacy programs support our member physicians and professionals—and, with your support in turn, we continue to achieve great success in moving federal policy.

Enactment of the Medicare Access and CHIP Reauthorization Act (MACRA) in early 2015 substantially changed the future of Medicare payment to physicians. MACRA presents physicians and physician groups with two options: 1) the merit-based incentive payment system (MIPS), a fee-for-service option with a greater percentage of payment tied to quality and value; and 2) a risk-bearing alternative payment model (APM) path, a bonus for those participating in qualifying APMs.



*Don Crane and
Senator Ron Wyden, D-OR*

CAPG has worked extensively on MACRA. Among other initiatives, we have:

- [Encouraged the Administration and Congress to afford equal credit to Medicare Advantage APMs.](#) Today, a physician organization taking risk in Medicare Advantage (MA) is not eligible for the same incentives as a physician organization taking risk in traditional Medicare. CAPG has developed and continues to advocate for a solution that affords equal credit to physicians taking risk from a health plan in Medicare Advantage.
- [Advanced risk-based APMs in Traditional Medicare.](#) With MACRA's success resting heavily on the Accountable Care Organization (ACO) program, CAPG has continued to actively engage in this model's evolution. This has included recommending changes to the existing Medicare Shared Savings Program, encouraging regulators to increase the program's appeal to existing and potential future participants. CAPG is also pleased that the Centers for Medicare & Medicaid Services (CMS) has announced the Next Generation ACO program. This model represents the next step in Medicare's ACO evolution and includes stronger beneficiary incentives and capitated payment offerings.
- [Developed an alternative APM with more attractive features for CAPG members.](#) We continue to recognize that something more than ACOs is probably necessary for our members. The Third Option, developed by CAPG, includes beneficiary enrollment and closer alignment to Medicare Advantage, among additional features. We will continue to advance the Third Option as MACRA is implemented.



CAPG continues to reinforce our role as a leading physician voice protecting Medicare Advantage, which offers the best available option for physicians to advance risk-based coordinated care delivery models.

CAPG continues to reinforce our role as a leading physician voice protecting Medicare Advantage, which offers the best available option for physicians to advance risk-based coordinated care delivery models. Yet, despite its success, MA has faced cuts and regulatory pressure.

CAPG built a coalition of nearly 300 physician organizations, including member medical groups and independent practice associations. Together, these CAPG coalition members continue to emphasize the physician perspective on the importance of a strong, well-funded MA program.

The physician voice is having an impact, evidenced by these developments:

- More than 400 members of Congress urged CMS to protect Medicare Advantage. This unprecedented, bipartisan support for the program bolsters it for the future. We thank all of the CAPG members who have reached out through meetings with their members of Congress, letter writing campaigns, calls, emails, and tweets to build support for this effort.
- CMS recognized CAPG's messaging in its policy decision-making. As one example, CAPG weighed in opposing a CMS policy that would automatically reduce a plan's MA star rating to 2.5 stars in the case of certain health plan sanctions. Our emphasis: the disproportionate impact on high quality, capitated physician organizations. CMS subsequently referenced CAPG's argument in its decision to suspend the downgrade policy. In another example of successful advocacy, CMS backed off of a proposal to phase in the use of encounter data in Medicare Advantage, citing CAPG's comments in its rationale.



Patrick Conway, MD, CMS, at the CAPG Colloquium 2015



California Legislative Work:

ACA Implementation and Regulatory Initiatives

Further implementation of the Affordable Care Act (ACA) continued at a furious pace in California during 2015. The Legislative session included several measures that aimed to expand coverage to all Californians and to refine the standards for pricing transparency, consumer protection, and smoother functioning of the Covered California marketplace.

CAPG focused on two such bills during the session. SB 137, by State Senator Ed Hernandez, sought to implement increased rules for health plan provider directories. During the opening of the new Covered California exchange in 2014, consumers faced significant problems selecting new doctors from among the larger health plans' provider directories. These roadblocks included inaccuracies in the listings and the need to call a number of offices to find a doctor who was accepting new patients. SB 137 mandated that health plans and insurers produce accurate, up-to-date directories that greatly expanded the types of providers and their information listed. The bill also required compliance by all contracted providers.



Even before the bill's passage in September 2015, CAPG began working on a solution to enable our members to access all of their contracted plan directories and update information through a single portal. The CAPG-sponsored system, called Sanator, was developed by Gain Solutions and will be deployed prior to the first compliance deadline of July 1, 2016.

A second bill, AB 533 (Bonta), aimed at removing patients from the middle of "surprise billing" incidents, when an insured member schedules a procedure at an in-network facility with an in-network physician, then, through no fault of their own, receives a "surprise bill" from a non-contracted anesthesiologist, radiologist, or pathologist. The bill was introduced to prohibit the balance billing of insured patients in such circumstances and hold them harmless from any increased cost share beyond their in-network obligation.



Midway through the session, the bill was amended to include additional dispute resolution provisions that would have incorporated the New York Fair Health Database as the index to determine whether proffered payments to non-contracted physicians were paid at a fair and reasonable rate. CAPG members are



responsible for over 90% of such downstream payments to non-contracted physicians in the California HMO marketplace and, as payers, are mindful that any legislative change could result in significant inflation to the healthcare system.

CAPG retained a noted health economist to analyze the impact of the Fair Health Database on our system, who determined that because it was a cost-based index, it would inflate payments by 200% over the accepted norm. The inflationary impact to the California healthcare system would exceed \$7 billion. We lobbied hard to inform lawmakers about the disastrous impact on affordability and succeeded in having the provision removed. The revised bill is currently up for a vote in the 2016 session.

Upper Payment Limit Pilot and Mega Merger Undertakings

CAPG focused on two significant regulatory initiatives in 2015, including a pilot project to increase Medicaid payments from the current chronically underpaid rates to the upper limit of commercial rates. The pilot continues into 2016 and is nearing completion.

The second initiative involved strong advocacy in the pending “mega mergers” of several health plans within California and nationally. CAPG advocated for “undertakings”—conditions of approval for the mergers by state regulators that would include tens of millions of dollars in funding for the creation of common electronic infrastructure. The purpose: to resolve and improve encounter data reporting, and build a system that would produce an electronic patient deductible accumulator and an online, multi-plan provider directory. Our proposal was adopted in the first and second merger approvals and work continues in 2016 to refine the plan.

CAPG has been working on a solution to enable our members to access all of their contracted plan directories and update information through a single portal, called Sanator.

The Rewards of CAPG Membership

CAPG membership includes many high-value benefits for physician organization leaders, clinicians, and staff. Membership integrates strong national and regional advocacy, promotes collaboration with healthcare stakeholders across all states and sectors, and fosters a strong focus on sustained quality management and improvement—a hallmark of CAPG members.

CAPG offers a wide range of tools and resources to help our members succeed at every level, from team-based care coordination to risk contracting to increasing satisfaction for patients and providers. Our members participate in numerous learning opportunities, access clinical and management resources, and benefit from a members-only purchasing program.

Resources for Success

Our Experienced Members

One of the most valuable benefits of joining CAPG is the opportunity to share experiences and best practices with fellow members. Our physician organizations and their representatives are national leaders who excel in innovation, quality achievement, and operational success in risk-based care models. They are highly experienced in patient-centered programs that enhance health, improve outcomes, increase value, and offer inspiration and knowledge within CAPG and beyond.

CAPG Educational Series 2016

capg.org/riskessentials

Essentials of Risk-based Payment Models: Moving from Volume to Value

This new yearlong series offers two one-day symposiums and quarterly webinars on the fundamentals of delivering value-based coordinated care. Led by physicians and executives with deep experience in alternative payment models, the program aims to offer practical information that participants can operationalize at all levels, wherever their organizations are on the road to risk.

Standards of Excellence™ (SOE®)

capg.org/soe

CAPG's National Standards of Excellence™ is an annual comprehensive survey of physician organization infrastructure in six separate domains, each contributing to the combined quality, efficiency, and patient-centered care demanded by patients, providers, plan partners, and purchasers. CAPG organizational leaders use SOE® as a “roadmap” to prioritize improvement efforts. In 2016, CAPG is celebrating the 10th edition of the survey. (Learn more on pages 6–7.)

Practice Transformation

capg.org/transformation

CAPG's Practice Transformation program is designed to help our physician group members move from volume-based care delivery to coordinated, high-



value, patient-centered services. Transforming clinical and business operations can enable physician groups to improve quality outcomes, cost efficiency, and satisfaction for both patients and providers.

- Practice Redesign. With our trusted partners, CAPG will help your physician organization develop a highly focused, expert-led process of primary care practice transformation.
- Practice Transformation Collaboratives. At the quarterly Collaborative meetings, CAPG members actively dialogue with one another about practice redesign, sharing best practices and lessons learned with their organizations' practice transformation programs.



CAPG Consulting

capg.org/consulting

With the Medicare Access and CHIP Reauthorization Act (MACRA) slated to begin in January 2017, physician organizations are seeking support in moving to risk. Launched in early 2016 to help meet this need, CAPG Consulting is a cadre of highly experienced executives with proven success in value-based care delivery. Our experts have a wealth of knowledge and stand ready to assist physician organizations in making the transition.

Value Based Pay for Performance

iha.org

CAPG members in California have participated wholeheartedly in the Integrated Healthcare Association's (IHA) groundbreaking Pay for Performance (P4P) program since it began in 2003. With a "value" element now integrated into the program, the Value Based P4P (VBP4P) further raises the bar for organizations, requiring achievement in both quality and efficiency in order to merit rewards. Year after year, CAPG physician organizations have topped the list of exemplary performers. For the past two years, IHA's Excellence in Healthcare Award has recognized exceptional performance in clinical quality, patient experience, and total cost of care; of the 33 physician groups recognized to date, the majority have been CAPG members.

California Quality Collaborative

calquality.org

The California Quality Collaborative is an organization dedicated to advancing the quality and efficiency of the healthcare delivery system across all payers. CQC generates scalable and measurable improvement in care delivery in ways that benefit patients, purchasers, providers, and health plans. Housed and managed by the Pacific Business Group on Health, the Collaborative maintains a multi-stakeholder governance structure reflecting its performance improvement mission. CQC programs address topics including total cost of care, chronic care management, hospital readmissions, and improvement on P4P and Centers for Medicare & Medicaid Services (CMS) Stars performance. The group is one of 29 Practice Transformation Networks chosen to take part in the CMS Transforming Clinical Practice Initiative over the next four years.



Alliances

At CAPG, we believe in the strength of alliances and continually seek opportunities to collaborate with other organizations. While CAPG is itself a coalition of physician organizations, we've found that joining forces with other stakeholders further multiplies our influence and reach. In our continual mission to improve healthcare delivery, we team up with a wide range of groups and individuals in advocacy, business, quality improvement, education, and government, as well as health plans, hospitals, and the pharmaceutical industry.



CAPG Committees

capg.org/committees

CAPG's committees are another significant educational resource for members. These groups meet regularly on a range of special interest topics. Members hear presentations on relevant issues, develop reports, and often recommend solutions that benefit CAPG as a whole. Participation is open to staff from all CAPG organizations.

Regional Committees

These groups serve as local forums for sharing information, supporting CAPG advocacy, and identifying opportunities to collaborate in increasing healthcare access, quality, and value. They also enable members to address the unique challenges of specific geographic areas and to meet in person with other members and CAPG staff.

Inland Empire Region – Riverside, CA | Chair: Debbie Church, Riverside Medical Clinic

Northern California Region – Oakland, CA | Chair: Shelley Horwitz, Muir Medical Group

San Diego Region – San Diego, CA | Co-chairs: Wanda Koreski, Children's Physicians Medical Group;
Stacey Hrountas, Sharp Rees-Stealy Medical Group

Colorado Region – Denver, CO | Chair: Ruth Benton, New West Physicians

Northeast Region – Philadelphia, PA | Chair: Evan Polansky, JD, MBA, Bayhealth Physician Alliance

Northwest Region – Seattle, WA | Chair: Adrienne Wagner, The Everett Clinic

Southeast Region – Orlando, FL

Southwest Region – Phoenix, AZ | Chair: Raj Shrestha, Cigna Medical Group of Arizona

Texas Region – San Antonio, TX

APM (Alternative Payment Model) Committee

Chair: Chris Stanley, MD, Catholic Health Initiatives

In response to the federal government's push toward APMs, this committee was created to closely study Medicare's APM options and related policy, and to offer a forum for CAPG member discussion. Participation is encouraged for those interested in federal APM policy, accountable care organizations (ACOs), medical homes, and bundled payments.

Clinical Quality Leadership Committee

Co-chairs: Fiona Wilson, MD, Brown & Toland Medical Group; Donald Rebhun, MD, HealthCare Partners

The CQL leads the cause for quality performance of CAPG members and oversees the Standards of Excellence™ survey. Clinical leaders discuss challenges and issues in healthcare, along with actionable solutions such as practice transformation and physician leadership. The committee serves as a liaison between CAPG members and state and national quality and performance reporting organizations.

Contracts Committee

This group provides education, information, and skill building in managed care contracting to members through contract analysis and evaluation; best practices; review of products, services, and guidelines; and sharing of legally permitted information.

Human Resources Committee

The HR Committee offers a forum for discussing human resource issues affecting physician groups, including compensation, employee benefits, recruitment, employment law, and market trends. The group conducts an annual National Physician Organization Compensation and Workforce Survey, providing a benchmark for risk-taking organizations.

Pharmaceutical Care Committee

Co-chairs: Bahar Davidoff, PharmD, Regal Medical Group; Robert Schoenhaus, PharmD, Sharp Healthcare

This committee comprises pharmacists, physicians, and other clinical leaders responsible for pharmacy management within their organizations. The group serves to educate participants on pharmacy/pharmacy benefit management, as well as on clinical quality measurement programs such as CMS Stars and HEDIS. Members also work with health plans to produce an annual Commercial and Medicare Formulary Grid.

Public Policy Committee

Chair: Kurt Ransohoff, MD, Sansum Clinic; Vice-Chair: John Kirk, Pioneer Medical Group

The Public Policy Committee guides CAPG's legislative activities, providing feedback and direction on new legislation, regulations, and other activities that impact CAPG members at the state and national levels.

Public Relations and Marketing Committee

Co-chairs: Richard Angeloni, Brown & Toland Medical Group; Juanda Calloway, SynerMed

Members meet several times yearly to share healthcare marketing best practices, with the goal of helping CAPG members raise their visibility and promote consistent, positive messages on risk-based care.

State Government Programs Committee

Chair: Kathy Hegstrom, Advanced Medical Management

This committee serves member organizations that contract and care for Medi-Cal, Dual Eligible, and special needs patients. Participants meet regularly to share information, support CAPG advocacy, and identify opportunities to promote quality, cost-effective healthcare in the public sector.

CAPG's Renowned Conferences

CAPG Annual Conference

capg.org/conference

The CAPG Annual Conference is an exceptional learning opportunity, known for outstanding speakers and leading-edge content. The 12th annual Conference in June 2015 brought more than 1,700 physicians, executives, and guests to the Manchester Grand Hyatt in San Diego. Leonard D. Schaeffer, founding Chairman and CEO of WellPoint (now Anthem), gave the keynote address. Other general sessions featured Dr. Brent James, Intermountain Healthcare; Alan Weil; HealthAffairs; a managed care panel with Barry S. Arbuckle, MemorialCare Health System, Leeba Lessin, CareMore Health System, and Bill Gil, Providence Health Network, Southern California; and healthcare entrepreneur and innovator Daniel Kraft, MD.

A preconference, cosponsored with the Patient-Centered Primary Care Collaborative, highlighted the patient-centered medical home and numerous super sessions and breakout sessions studied topics ranging from policy issues to contracting challenges and clinical best practices. More than 100 companies participated in our signature Exhibit Fair and Strolling Dinner.



Don Crane and Leonard D. Schaeffer

CAPG Colloquium

capgcolloquium.com

Held in Washington, DC, the Colloquium offers a closer look at the political and legislative aspects of risk-based care delivery. The second CAPG Colloquium in October 2015 featured thought leaders including Bernard Tyson, Kaiser Foundation Hospitals and Health Plan; Samuel Nussbaum, MD, Anthem; Patrick Conway, MD, CMS; Meena Seshamani, Health & Human Services; and Mark Miller, PhD, Medicare Payment Advisory Commission.

This year's Colloquium, September 28-30, 2016, takes place in a turbulent presidential election year and as implementation of MACRA (the Medicare Access and CHIP Reauthorization Act) draws near. The event will focus on the outlook for healthcare reform, along with practical know-how for succeeding in alternative payment models (APMs). The agenda features Andy Slavitt, CMS; Francis J. Crosson, MD, Medicare Payment Advisory Commission; Robert M. Pepper, DO, St. Petersburg General Hospital; Neera Tanden, the Center for American Progress; and a political panel with Sheila P. Burke, Harvard University and Baker, Donelson; Douglas Holtz-Eakin, American Action Forum; and Len M. Nichols, PhD, Center for Health Policy Research and Ethics and George Mason University.

CAPG Members

Organizational Members

Accountable Health Care IPA

George M. Jayatilaka, MD, CEO
Druvi Jayatilaka, Vice President

Advanced Medical Management, Inc.

Kathy Hegstrom, President

Access Medical Group/Access Santa Monica;
California IPA; Community Care IPA; Future Care
IPA; MediChoice IPA; Premier Care IPA; Seoul
Medical Group

Adventist Health Physicians Network IPA

Arby Nahapetian, MD, CMO
Jim Agronick, VP, IPA Operations

Affinity Medical Group

Richard Sankary, MD, President
Scott Ptacnik, COO

Alameda Health Partners

William Peruzzi, MD, Chairman
David Cox, Treasurer/CFO

AllCare IPA*

Matt Coury, CEO
Randy Winter, MD, President

Allied Physicians of California

Thomas Lam, MD, CEO
Kenneth Sim, MD, CFO

Allina Health System

Rod Christensen, MD, VP of Medical Operations
Brian Rice, MD, VP Network/ACO Integration

AltaMed Health Services Corporation*

Castulo de la Rocha, JD, President and CEO
Martin Serota, MD, CMO

AppleCare Medical Group, Inc.*

Vinod Jivrajka, MD, President/CEO
Trish Baesemann, COO

Austin Regional Clinic

Norman Chenven, MD, CEO and Founder
Kerry Rosker, Executive Administrative
Coordinator

Bakersfield Family Medical Center

Carol L. Sorrell, RN, COO
Ju Hwan Lee, MD, Medical Director

Bayhealth Physician Alliance, LLC

Evan W. Polansky, JD, Executive Director
Joseph M. Parise, DO, Medical Director

Beaver Medical Group*

John Goodman, CEO
Raymond Chan, MD, VP, Medical Administration
and CMO

Brown & Toland Physicians*

Richard Fish, CEO

California Pacific Physicians Medical Group, Inc.

Dien V. Pham, MD, CEO
Carol Houchins, Administrator

CareMore Medical Group

Sachin Jain, CEO
Tom Tancredi, Dir. of Practice Operations

Catholic Health Initiatives*

Don Lovasz, President, Clinically
Integrated Network
Chris Stanley, MD, VP of Care Management

Cedars-Sinai Medical Group*

John Jenrette, MD, Executive VP, Cedars-Sinai
Medical Network
Stephen C. Deutsch, MD, Chief Medical Director

Central Ohio Primary Care Physicians, Inc.

J. William Wulf, MD, CEO
Michael Ashanin, COO

Children's Physicians Medical Group

Leonard Kornreich, MD, President and CEO

Chinese American IPA

George Liu, MD, PhD, President and CEO
Peggy Sheng, COO

Chinese Community Health Care Assn.

John M. Williams, PharmD, CEO
Polly Chen, Director of Operations

Choice Medical Group

Manmohan Nayyar, MD, President
Marie Langley, IPA Administrator

Cigna Medical Group

Edward Kim, President and General Manager
Kevin Ellis, DO, CMO

Citrus Valley Independent Physicians

Gurjeet Kalkat, MD, Executive Medical Director
Martin Kleinbart, DPM, Chief Strategy Officer

Colorado Permanente Medical Group, P.C.

Margaret Ferguson, MD, President and Executive
Medical Director
Dan A. Oberg, CFO and VP Corporate
Development

Conifer Health Solutions

Megan North, CEO
AltaMed Health Services; Exceptional Care
Medical Group; Family Choice Medical Group;
Family Health Alliance; Mid Cities IPA; OmniCare
Medical Group; Premier Care of Northern
California; Saint Agnes Medical Group

Continucare Corporation

Alfredo Ginory, MD, CMO
Gemma Rosello, VP

Davita HealthCare Partners*

Don Rebhun, MD, National Medical Director
Jim Rechten, SVP Corporate Strategy

Desert Oasis Healthcare

Marc Hoffing, MD, Medical Director
Dan Frank, COO

Dignity Health Foundation

Bruce Swartz, SVP, Physician Integration

Edinger Medical Group

Matthew C. Boone, MD, Executive Medical
Director
Denise McCourt, COO

El Paso Integral Care, IPA

Rafael Armendariz, DO, President
Tony Martinez, Administrator

Empire Physicians Medical Group*

Steven Dorfman, MD, President
Yvonne Sonnenberg, Executive Director

Everett Clinic, P.S., The*

Adrienne Wagner, Quality Improvement
Consultant Manager
Shashank Kalokhe, Associate Administrator of
Value-Based Contracting and Coordinated Care

Facey Medical Foundation*

James M. Slaggert, CEO
Erik Davydov, MD, Medical Director

Golden Empire Managed Care, Inc.*

Michael Myers, President and CEO

Good Samaritan Medical Practice Association

Nupar Kumar, MD, Medical Director

Greater Newport Physicians Medical Group, Inc.*

Diane Laird, CEO
Adam Solomon, MD, CMO

Guthrie Medical Group

Joseph A. Scopelliti, MD, President and CEO
Frederick J. Bloom, MD, President

Heritage Provider Network*

Richard Merkin, MD, President
Richard Lipeles, COO

Affiliated Doctors of Orange County; Arizona
Priority Care Plus, AZ; Bakersfield Family Medical
Group; California Coastal Physician Network;
California Desert IPA; Coastal Communities
Physician Network; Desert Oasis Healthcare;
Greater Covina Medical Group; HealthCare
Partners, IPA, AZ & NY; Heritage Physician
Network; Heritage Victor Valley Medical
Group; High Desert Medical Group; Lakeside
Community Healthcare; Lakeside Medical Group;
Regal Medical Group; Sierra Medical Group

High Desert Medical Group

Charles Lim, MD, FACP, Medical Director
Anthony Dulgeroff, MD, Assistant Medical Director

Hill Physicians Medical Group, Inc.*

David Joyner, CEO
Tom Long, MD, CMO

Horizon Medical Group, PC

James Oliver, CEO
Kristen vanDuynhoven

John Muir Physician Network

Lee Huskins, President and CAO
Ravi Hundal, MD, CFO

Lakeside Community Healthcare

Jonathan Gluck, Counsel

Lakeside Medical Group, Inc.

Lakewood IPA

Jean Shahdadpuri, MD, MBA, CMO
Varsha Desai, COO

Alamitos IPA • St. Mary IPA • Brookshire IPA

Leon Medical Centers, Inc.

Rafael Mas, MD, SVP and CMO
Julio G. Rebull, Jr., SVP

Loma Linda University Health Care

J. Todd Martell, MD, Medical Director

Maverick Medical Group

Warren Hosseinion, MD, Chairman
Mark C. Marten, CEO

MED3000

Lynn Stratton Haas, CEO
Gary Proffett, MD, Medical Director
SeaView IPA; Valley Care IPA

MedPoint Management

Kimberly Carey, President
Rick Powell, MD, CMO

Accountable Health Care IPA • Bella Vista Medical Group IPA • Centinela Valley IPA • El Proyecto Del Barrio, Inc. • Global Care Medical Group IPA • HealthCare LA IPA • Jewish Home for the Aging IPA • Pioneer Provider Network, A Medical Group, Inc. • Premier Physicians Network • Prospect Medical Group, Inc. • Redwood Community Health Network • Watts Healthcare Corporation

MemorialCare Medical Group*

Mark Schafer, MD, CEO
Jennifer Jackman, COO

Memorial Hermann Physician Network - MHMD

Christopher Lloyd, Executive VP and CEO
Shawn Griffin, Chief Quality and Informatics Officer

Mercy Health Physicians

Randall Curnow, MD, President
Michele Montague, COO

Meritage Medical Network

Wojtek Nowak, CEO
J. David Andrew, MD, Medical Director

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Physicians Choice Medical Group of Santa Maria

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Providence Medical Management Services

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