

Daniel Parietti

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EXPERIENCE

Parietti Consulting, LLC. April 2022 – present

President

Offer consulting services to healthcare companies and private equity organizations. Advise newly launched companies that are prospective investment partners and provide front line operating leadership as necessary. Initiatives and healthcare sectors of focus include:

- Private Equity Due Diligence assessments for small and mid-size PE funds.
- Health Care Technology – EMR, Quality Management, Medical Data Capture.
- Optical/Vision Network Services.
- Managed Medicaid Insurance Company Launch.
- Senior Community Population Management.

MoreCare, Inc. April 2019 – April 2022

MoreCare was a Chicago health plan that was wholly owned by Medical Home Network, Inc. and provider-sponsored by Cook County Health System (CCHS), aimed at closing disparities in health in Cook County, IL. MoreCare offered Plans for Medicare Advantage, HIV Special Needs and Institutional Special Needs (ISNP and IESNP for frail seniors).

Chief Executive Officer

Reported to MoreCare Board of Directors. P/L responsibility and oversight of six direct reports and fifty FTEs in Compliance, Finance, Medical Management, Rx, Sales, and Marketing, and oversight of TPA vendors and PBM.

- Filed and launched niche health plan with CMS and excelled in all regulatory/compliance audits.
- Innovative benefit design and Rx offerings attracted members from Traditional Medicare and national Plans.
- Achieved 4-Star rating in 2022.
- Created and led multi-disciplinary Care Transitions Team which managed all episodes of care for Frail seniors through hospitalizations, discharges, skilled nursing, therapy and return-to-home.
- Significantly improved lives of frail members while reducing hospitalizations by over 25%.
- MoreCare Launched in 2019 and served members through 2022, when CCHS sponsorship ended.

Parietti Consulting, LLC. 2016 – 2018

President

- Director – Board of Directors of eCaring -- majority-owned by Ascent Biomedical Ventures which offered a tablet/smart phone system for a.) monitoring frail/elderly seniors in the home, and verification of their services; and b.) post-discharge monitoring to avoid re-admissions. eCaring was sold to RAB. Ventures/Houseworks in 2020.
- Advisor/Consultant for AlignCare - PreScience, a start-up Pharmacy-data system that identifies high-risk members for case management, with demonstrated cost savings for risk-bearing entities.
- Led due-diligence of a multi-state/multi-product health insurance company for the Private Equity firm Strategic Capital Investment Partners and was identified for post transaction leadership.

AlphaCare of New York by Magellan, 2014 – 2016

AlphaCare was a health insurance company offering Medicare and Long Term Care plans in New York City and was acquired in full by Magellan (NYSE:MGLN) in 2015.

Chief Executive Officer

Reported to AlphaCare Board of Directors. P/L responsibility and oversight of eleven direct reports and 75 FTEs in all functional areas including: Operations, Finance, Network, Medical Management, Compliance, Sales & Marketing.

- Led company to \$200 million revenue, profitability and a full sale to MGLN within two years.
- AlphaCare was the fastest growing Long Term Care plan in New York State in 2014 and 2015.
- Products offered include Medicare, Medicaid, Managed Long Term Care (MLTC), Fully Integrated Dual Advantage (FIDA) and Institutional Special Needs Plans (ISNP).

Centene, Inc. 2011 – 2014

Centene (CNC, NYSE) was a national \$12 billion health plan covering 2.5 million beneficiaries in government programs (Medicaid, Medicare, Children's Health, Long Term Care - MLTC, and Foster Care).

Senior Vice President, Health Plan Operations

Reported to Executive Vice President. P/L responsibility for seven states, including IN, IL, KY, KS, OH, MO, and WI with 800,000 members and \$2.7 billion in revenue. Led 10 direct reports and 1,500 FTEs. Highlights include:

- Responsible for Kansas state-wide plan with 135,000 members and \$900 million of revenue for all Medicaid services and Long Term Care services.
- Oversaw Managed Long Term Care contract in Illinois which served 23,000 members.
- Led OH's statewide Medicaid plan for 165,000 members and \$800 million of revenue.

WellCare, Inc. 2002 – 2010

WellCare (NYSE: WCG) was a \$6 billion health plan with 2.4 million members in government health programs (SCHIP, Medicaid, Medicare Advantage, LTSS and Rx-Part D services) in all fifty states.

President, North Division

Reported to CEO. P/L responsibility for seven states (NY, NJ, CT, OH, IL, IN, and MO). Offered Medicare, Medicaid, Child Health Plus, and Long Term Care - MLTC, to 430,000 beneficiaries. Managed ten direct reports with a full staff of 750 FTEs. 2010 revenues exceeded \$1.6 billion.

- New York Medicaid membership grew from 40,000 to 130,000 members in five years, while Medicare grew from 500 members to 30,000. Filed and launched Long Term Care for frail seniors.
- Earned "Quality Health Plan" status and received a 1.5% premium bonus Based on strong member satisfaction (CAHPS) and quality scores (HEDIS).
- Filed and expanded Medicare Advantage to New Jersey, Upstate NY, and Connecticut.
- Presented WellCare to capital markets during IPO road-show and took company public in July 2004.

La Cruz Azul de Puerto Rico, 2001 – 2002

La Cruz Azul was a Blue Cross health insurer that offered Commercial and Medicaid benefits in Puerto Rico until acquired by Triple S, Inc.

Chief Operating Officer

P/L responsibility for 500,000-member Medicaid health plan in Puerto Rico.

- Oversight of Provider Network, Medical Management, Claims, Customer Service, Enrollment, and HR.
- Awarded and enrolled 400,000 Medicaid new members in Southeast and East regions.

HealthNet, Inc. 2000 – 2001

NYSE:HNET National health insurer that offered Commercial and Medicare products eight states.

Vice President, Network and Delivery Systems Management

- Reported to CEO. Matrix responsibility for Contracting staff in all markets.
- Responsible for Health Net's contracting for physician, hospital, ancillary and vendors and overall unit cost.

Humana, Inc., 1993 – 2000

NYSE: HUM, national health insurer offering all commercial, military and government products

Executive Director, Humana Puerto Rico 1998 – 2000

- P/L for Humana's Medicaid program in Puerto Rico covering 440,000 beneficiaries.
- Responsible for Humana's Puerto Rico provider network for all LOB (HMO, PPO, and Medicaid)

The World Bank, 1991-1992

Trade Analyst: Two-year post graduate assignment

Team member of Africa Region and International Trade Division of the World Bank. Assisted West African countries to eliminate customs fraud and capital flight which was committed through illicit international trade activity.

U.S. Army – 3rd Infantry Division, 1985 - 1989

Executive Officer

First Lieutenant, Second in command of a 250-soldier battery in Germany. Army Commendation Medal.

EDUCATION

George Mason University, Fairfax, VA

M.B.A. (Concentration: Finance) 1991

United States Military Academy, West Point, NY

B.S. (Concentration: Computer Science) 1985

ADDITIONAL

Languages: fluent Spanish and conversational German. Military Training: Airborne School, Air Assault School, and Ranger School. West Point – NCAA Div. 1A -- Wrestling Team Captain. Interests: Photography, Videography, and History.

