



RUDISH HEALTH

Leadership Profile

Vice President of Reimbursement



**Mount
Sinai**

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| Position | Vice President, Reimbursement |
| Organization | Mount Sinai Health System |
| Location | New York, NY |
| Website | www.mountsinai.org |

Opportunity

Mount Sinai Health System, a premier academic health system serving New York City with a projected operating revenue of \$13B this year, is seeking a hands-on finance leader as its next Vice President of Reimbursement.

Reporting directly to MSHS's Chief Accounting Officer with strategic exposure to the enterprise Chief Financial Officer, this significant leadership role oversees the financial cost reporting associated with governmental reimbursements (majority of MSHS's net patient revenue) and required compliance. Mount Sinai Health System boasts the largest graduate medication education program in the country and one of the nation's largest transplant operations. With a major finance transformation underway, key priorities include (1) supervising a seasoned team of eight to drive operational and financial effectiveness for all aspects of cost reports and compliance with CMS, federal, and New York State regulations; (2) partnering with managed care, revenue cycle, clinical leaders, and government affairs on reimbursement analysis and trends; and (3) strategically developing long range models for emerging governmental reimbursement impacts.

The successful candidate comes from an academic health system, ideally has Medicare cost reporting and New York State reimbursement experience, with a preference for Epic in their toolkit to coordinate timely reporting, documentation, and development of insights to ensure accurate reimbursement. The Vice President of Reimbursement will make a lasting impact at this ideally sized and highly collaborative health system, with its extensive care network and commitment to innovation.

Mount Sinai Health System

Mount Sinai is an integrated health system providing exceptional medical care to local and global communities. Encompassing the Icahn School of Medicine at Mount Sinai and eight hospital campuses in the New York metropolitan area, as well as a large regional ambulatory footprint, Mount Sinai is internationally acclaimed for its excellence in research, patient care, and education across a range of specialties.



The Mount Sinai Hospital
New York, NY

Formed in 2013 with the merging of Mount Sinai Medical Center and Continuum Health Partners, the Health System is designed to increase efficiencies and economies of scale; improve quality and outcomes; and expand access to advanced primary, specialty, and ambulatory care services throughout a wide clinical network. It consists of more than 9,000 physicians, including general practitioners and specialists, providing care across a robust and continually expanding network of multispecialty services of more than 400 ambulatory practice locations throughout the five boroughs of New York City, Westchester, and Long Island. With an extraordinary array of resources for the provision of compassionate, state-of-the-art care, Mount Sinai Health System is poised to identify and respond to the health-related needs of the diverse populations they serve.

Hospitals

- Mount Sinai-Behavioral Health Center (115 Beds)
- Mount Sinai Brooklyn (212 Beds)
- The Mount Sinai Hospital (1,139 Beds)
- Mount Sinai Queens (228 Beds)
- Mount Sinai Morningside (489 Beds)
- Mount Sinai West (514 Beds)
- New York Eye and Ear Infirmary of Mount Sinai (69 Beds)
- Mount Sinai South Nassau (455 Beds)

Other Assets

- 10 free-standing joint venture centers in endoscopy, ambulatory surgery, and urgent care
- Over 400 outpatient practice locations
- 39 multidisciplinary research, educational, and clinical institutes including the Icahn School of Medicine and Phillips School of Nursing

Key Statistics

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| <i>Operating Revenue: \$13B (proj. 2026)</i> | <i>Employees: 48,000</i> |
| <i>Inpatient Discharges: 147,597</i> | <i>Nurses: 8,350</i> |
| <i>ED Visits: 476,027</i> | <i>Total Physicians: 9,000+</i> |
| <i>Outpatient Visits: 5,657,561</i> | <i>Residents and Fellows: 2,700</i> |
| <i>System Beds: 3,760 at 8 hospitals</i> | <i>Operating Rooms: 144</i> |

1. Source: MSHS Finance and <https://www.mountsinai.org/about/facts>

Mission, Vision, and Values

Mission

To provide compassionate patient care with seamless coordination and to advance medicine through unrivaled education, research, and outreach in the many diverse communities we serve.

Vision

To continue to grow and challenge convention through our pioneering spirit, scientific advancements, forward-thinking leadership, and collaborative approach to providing exceptional patient care in the many unique communities we serve.

Core Values

Safety: We protect our patients and our colleagues from harm.

Equity: We create a diverse and inclusive environment for our patients, students, and colleagues, free from bias, racism, and favoritism, to foster optimal care and just opportunities based on one's individual needs and abilities.

Agility: We are flexible and quick to adapt to changes.

Creativity: We identify and develop forward-thinking approaches to challenge conventions, solve problems, and push the boundaries of medicine.

Empathy: We demonstrate a deep understanding of our colleagues, our patients, and their loved ones through inclusion, compassion, respect, and caring.

Teamwork: We are better together by including the diverse perspectives of each team member to achieve outcomes far superior to those any individual could achieve alone.

Awards and Recognitions

Mount Sinai Health System hospitals and physicians are recipients of numerous quality awards and other types of recognition, including the illustrative awards and designations below.



Reporting Structure

The Vice President of Reimbursement will report to the Senior Vice President, Chief Accounting Officer of Mount Sinai Health System with strategic exposure to the system Chief Financial Officer.

William (Bill) Purnell

Senior Vice President of Finance and Chief Accounting Officer

In his current role, Bill Purnell leads the turnaround and integration of MSHS's finance function, moving from legacy siloed processes across hospitals, medical groups, and the Icahn School of Medicine to one unified centralized enterprise function.

Mr. Purnell joined Mount Sinai in November 2025 after retiring as lead Audit Partner with KPMG, where he spent 25 years guiding audit, consulting, and financial transformation engagements for health system clients. He served in senior firm roles over the past decade including Leader of the Healthcare Industry Practice for the Mid-Atlantic region and member of the National Healthcare Industry Leadership team. Prior to 2000, Bill's early career foundation was in public accounting.

Mr. Purnell earned his Bachelor of Science with a focus in Business and Mathematics from Salisbury University. He has been a CPA since 1993. Alongside serving on charity boards, Bill most recently led the Treasury function for the Catholic Community Foundation Archdiocese of Baltimore.

Vincent Tamaro

Executive Vice President, Chief Financial Officer

As system CFO, Vincent Tamaro plays a key role in planning and directing the financial oversight of the Mount Sinai Health System. He assists the Mount Sinai leadership team in defining the five-year strategic direction for the Health System, and executes the financial aspects of that strategy. His major areas of responsibility include general accounting, financial reporting, audit, treasury, accounts payable, payroll, insurance, investments, grants, endowments, funds flow, capital and operating budget, decision support, financial planning and analysis, business intelligence, M&A and joint venture partnerships, purchasing, supply chain, revenue cycle, and payor strategies.

Mr. Tamaro brings 30 years of experience in hospital and health care financial management to his role. Previously, he served as Chief Financial Officer of The

Ohio State University Wexner Medical Center in Columbus, Ohio. In addition to leading the medical center's finance, treasury, IT, data analytics, revenue cycle, supply chain, managed care, and related areas, he developed a triad model in which finance leaders forged partnerships with clinical and operational leaders to plan and execute service line strategies throughout the Wexner system. He also oversaw the transformation of payer innovation strategy, including a heightened emphasis on value-based arrangements and alternative payment models with insurers and direct-to-employer strategies.

Before joining Wexner, Mr. Tammaro spent 20 years in increasingly responsible roles at Yale-New Haven Health, including serving as CFO and Treasurer from 2016 to 2022. He is a Board Member of the Ambulatory Services Corporation and York Enterprises and an activity organizer for St. Gregory the Great Catholic Church.

Supervisory Role

This leader will be responsible for oversight of a team of eight who live in New York City and currently work in a hybrid model, meeting in person on occasion. This position will collaborate closely with the corporate finance and accounting team who works in-office three days a week. The senior finance leadership team is in-office four days a week. The Mount Sinai Health System corporate headquarters are at 150 East 42nd Street next to Grand Central Station.

Position Summary

This position is a significant leadership role within the Mount Sinai Health System to drive operational and financial effectiveness within the governmental reimbursement functions of a complex health system. The Vice President, Reimbursement oversees all aspects of the reimbursement function for the Mount Sinai Health System including The Mount Sinai Hospital, Mount Sinai – Queens, Mount Sinai – Beth Israel, Mount Sinai – St. Luke’s Roosevelt, New York Eye and Ear Infirmary, and all network facilities.

This executive will work closely with hospital operations, clinical departments, and the finance team to oversee the financial reporting associated with government reimbursements and required cost reporting compliance including New York State DOH, Disproportionate Share Hospital (DSH), Graduate Medical Education (GME), Hospital Financial Survey (HFS), and Indigent Care Trust Fund Survey (ICTF), or potential future funding opportunities.

Primary Duties and Responsibilities

- Monitor Federal and State regulatory changes to provider reimbursement and ensure compliance with Federal and State regulations as they relate to the cost reporting function;
- Oversee detailed research and analysis of potential impact on the System of proposed or regulated changes to reimbursement and report to senior management on a timely basis;
- Supervise the analysis and preparation of Medicare and New York State cost reports for all entities to ensure their timely completion and submission;
- Review cost report settlements for each facility to ensure accuracy and reasonableness;
- Ensure compliance processes are followed to enable the accuracy and reasonableness of cost report submissions;
- Seek opportunities to appeal reimbursement issues included in initial settlements for all entities;
- Review reimbursement data to assist in the identification of trends and revenue cycle opportunities for all providers;
- Meet with the OIG or other regulators as necessary to resolve issues that may arise;
- Manage the periodic audits of costs reports, including the timing of the audit, preparation of necessary schedules, and limiting the Hospitals’ exposure for critical audit areas;
- Review all rates for each provider to ensure accuracy and consistency with expectations;

- Identify opportunities for rate appeals to ensure that each provider receives proper reimbursement;
- Review and/or prepare all necessary reimbursement rate filings including all rate appeals for all system facilities;
- Responsible for Medicare Administrative Contractor (MAC) correspondence and interim rate setting to ensure accurate reimbursement and compliance with regulations;
- Review the annual revenue budget for each entity and ensure consistency with expected reimbursement rate changes;
- Review the monthly revenue calculation for the Hospitals and related facilities to ensure accuracy and reasonableness in reporting and timely revenue recognition;
- Review and update Medicare merged rate calculations for the Hospitals to determine the annual benefit of the merged rate and monitor changes throughout the year;
- Review the annual GME and Bad Debt and Charity Care pool calculations for each entity to ensure accuracy;
- Ensure the accuracy of resident/fellow reporting, investigate residency overlaps and address GME issues as they arise through interaction with the Medical/House Staff Office;
- Oversee consultants engaged to address specific reimbursement issues so as to maximize the Hospital's net benefit from these arrangements; and
- Provide assistance and recommendations for managed care contracting process to maximize reimbursement.

Candidate Qualifications

Education and Experience

- Bachelor's Degree in Accounting or Finance required
- Master's Degree in Accounting or Finance preferred
- 10 or more years of experience in hospital reimbursement or similar field

Knowledge, Skills and Abilities

- Strong understanding of Medicare/Medicaid regulations, including extensive experience in both NYS and Medicare cost report preparation, NYS rate setting mechanisms and the appeals process
- Ability to perform duties and responsibilities promptly and consistently with little direct supervision in planning and organizing his/her work
- Strong supervisory/management skills, especially in financial operations

- Ability to objectively appraise and analyze the qualifications and performance of others as well as the ability to plan and performance of others as well as the ability to plan and direct their activities
- Strong knowledge of hospital finance and reimbursement
- Strong knowledge of economic and accounting principles and practices
- Excellent verbal and written communication skills
- Excellent interpersonal skills
- Advanced knowledge of MS Office and cost report software

Compensation

An attractive compensation, benefits, and relocation package in the \$300,000s range will be offered commensurate with the candidate's experience.

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