



STROUDWATER

PROPOSAL FOR

Akerman, LLP

on behalf of

LOWER FLORIDA KEYS

HOSPITAL DISTRICT

DECEMBER 29, 2025

December 29, 2025

Ms. Felicia Laborgne Nowels
Partner
Akerman, LLP
201 E. Park Avenue, Suite 300
Tallahassee, FL 32301

Dear Ms. Nowels:

Stroudwater Associates is pleased to provide Akerman, LLP (“Akerman”) with this proposal to assist Akerman in advising the Lower Florida Keys Hospital District (“District”) on its partnership options for Lower Keys Medical Center (“LKMC”) and executing on a preferred partnering option. The proposed engagement includes the following components:

- Reviewing Affiliation Options and Objectives
- Advising on the Affiliation Process, including negotiation of terms with multiple prospective partners
- Selection of a Preferred Partner
- Negotiation of a Letter of Intent (“LOI”)
- Assistance with crafting Definitive Agreements and managing Due Diligence processes
- Assistance with Regulatory Reviews and Closing

Stroudwater’s experience advising more than 120 rural hospitals on strategic and affiliation options provides unique expertise. In any given year, we work in 40 or more states and with 150 rural health systems on a variety of operational and strategic issues, including advising clients on partnerships. We are uniquely qualified to assist in this endeavor due to the following:

- We have extensive national experience working with District-owned rural hospitals on key strategic issues, including negotiating partnership options.
- We are familiar with both the challenges and opportunities facing LFKHD and LKMC through our work with hundreds of hospitals and advising dozens of strategic options processes. We understand the needs, constraints, and opportunities of hospitals serving communities like Key West and Monroe County.
- We are skilled facilitators and educators, crafting and delivering custom affiliation objectives and strategies.
- We bring a multidisciplinary perspective to all our engagements and an understanding of the operational, financial, clinical, and strategic implications of various options that may be under consideration.

Sincerely,




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OUR UNDERSTANDING OF THE SITUATION

The Lower Florida Keys Hospital District ("District") is an independent special district, created in 1967. The District has engaged Akerman LLP to advise it on the conduct of a process whereby the District seeks proposals from qualified healthcare management organizations to operate and manage the Lower Keys Medical Center ("LKMC") and health care related facilities and services in the Lower Florida Keys Hospital District. Akerman has sought a proposal from Stroudwater Associates to assist with this process.

LKMC is currently operated by Community Health Systems, and the operating lease agreement is set to expire on April 30, 2029. The District has a unique opportunity to implement an innovative healthcare model designed specifically for its District, with a focused investment in general acute care hospital services with programs for the diagnosis, treatment, and care of sick and injured persons that meet documented community need.

From the inception of the District through April 30, 1989, the District operated the Hospital, then known as Florida Keys Memorial Hospital ("FKMH"). Additionally, a for-profit hospital, known as dePoo Hospital, owned by Kennedy Drive Investors, Ltd, ("Kennedy Drive"), a general/limited partnership, was constructed and operated within the same service area as FKMh. The District and Kennedy Drive commenced discussions in the late 1980's on how to accomplish a combination, which resulted, in May 1989, of the formation of the Lower Florida Keys Health System ("Health System"), a non-profit Florida corporation. Each of the District and Kennedy Drive entered into thirty (30) year leases with Health System pursuant to which they leased their land, buildings and equipment, and the two facilities applied to AHCA and received licensure as a singular hospital system, with one set of Bylaws, a combined medical staff, and a singular administrative and employed staff. As a result of this combination, Health System achieved rural health designation from CMS, resulting in a higher reimbursement rate from Medicare as a sole community provider. This combination allowed for the elimination of the redundancy of services and equipment, and initially, the elimination of the millage levy by the District.

During the late 1990's, the combination of increased capital needs, the rise of managed care, increased competition, a growing uninsured population contributed to a decline in Health System operating results. As a result, the District reimposed taxes at the maximum rate upon the residents to address these adverse trends. FKMh and Kennedy Drive agreed to separately undertake a process to ascertain the level of interest of potential lessees/operators of the Health System facilities. After the issuance of a Solicitation of Interest for proposals and review of responses, each of the District and Kennedy Drive determined that Health Management Associates ("HMA") (who subsequently was acquired by Community Health Systems ("CHS"), the current operator) was the preferred operator/lessee of choice. The existing lease ends on April 30, 2029.

If selected, Stroudwater will advise Akerman throughout the partnership solicitation and implementation process with the objective of having an operator contracted who will satisfactorily address the needs, constraints and objectives of the District and the community. If at the conclusion of the current lease and the failure of the District and Kennedy Drive to either renew their leases with the current operator or enter into leases with a subsequent operator, Health System, which exists legally but is currently non-operative, would again become the operator of the two facilities.

STROUDWATER'S APPROACH AND FEE PROPOSAL

Phase I: Community Priorities and Needs (optional)

- Analysis of community demographics, healthcare service needs, and comprehensive market analysis including estimates and projections of service area healthcare service utilization by service
 - All payer market share data will be most cost-effectively obtained via LFKHD request. Stroudwater can assist Akerman with crafting this request so that it will assist in analyzing outmigration and referral patterns by diagnostic category
 - Duration: 45 days from receipt of data (approximately half of this process could run concurrently with the affiliation process)
- **Professional fees:** \$27,500-\$32,500 (note: excludes cost of all-payer market share data)

Phase II: Strategic/Affiliation Objectives, Confidential Descriptive Memorandum and RFP

- Review and approve strategic/affiliation objectives
 - Utilize affiliation objectives as foundational component of communications strategy
 - Review common fact base
 - Develop and review list of prospective partners
 - Craft descriptive memorandum
 - Review request for proposals
 - Review of initial proposals
 - Communications with interested parties seeking clarification of initial proposals
 - Decision Point: Proceed with the partnership process or choose to conclude the process
 - Duration: TBD (included in affiliation process timeline)
- **Professional fees:** \$125,000-\$135,000 Note: additional professional fees of \$15,000-\$25,000 per month may be incurred if the duration of this phase exceeds 150 days.

Phase III: Negotiation of Proposals, Selection of Finalists

- Clarification and improvement of proposals
 - Selection of finalists
 - On-site presentation by finalists
 - Reverse site visits and due diligence of finalists
 - Best and final proposals
 - Conversion of best and final proposals into term sheets (This will expedite the Letter of Intent phase that follows and can serve as the key decision point for selecting preferred partner)
 - Decision point: Proceed with the partnership process or choose to conclude the process
 - Duration: TBD (included in affiliation process timeline)
- **Professional fees:** \$150,000-\$165,000 Note: additional professional fees of \$15,000-\$25,000 per month may be incurred if the duration of this phase exceeds 150 days.

Phase IV: Non-Binding Letter of Intent with Preferred Partner

- Selection of Preferred Partner
- Retention of runner-up as “Plan B”
- Negotiation of a non-binding Letter of Intent with Preferred Partner
- Communication of community benefits, including those responsive to affiliation objectives
- Decision Point: Proceed with the partnership process or choose to conclude the process
- Duration: 30-45 days
- **Professional fees:** \$30,000-\$35,000 (included in affiliation process timeline) *Note: additional professional fees may be incurred if the duration of this phase exceeds 45 days.*

Phase V: Due Diligence and Definitive Agreements

- Host data room
- Respond to due diligence requests
- Conduct reverse due diligence
- Collaborate with transaction counsel in drafting and negotiating definitive agreements
- Decision point: proceed with the partnership process or choose to conclude the process
- Duration: 120 Days
- **Professional fee:** \$15-\$18,000 per month

Phase VI: Regulatory Approvals and Closing

- Documentation of affiliation process
- Assist counsel with regulatory filings and interrogatories
- Assist with closing
- Duration: TBD
- **Professional fee:** \$15,000-\$18,000 per month

Total Estimated Costs:

- Phase I (optional): \$27,500-\$32,500 to define and quantify community health needs and priorities
- Phases II-IV: \$305,000-\$335,000 for affiliation/partnership process through non-binding Letter of Intent
- Phases V-VI: \$15-\$18,000 per month for an estimated duration of 6-8 months during due diligence, definitive agreements, regulatory reviews, and closing
- **Estimated Total: \$422,500-\$511,500** *Note: professional fees may be higher if the duration of the process exceeds timeline range assumed for Phases II-VI.*

Stroudwater invoices professional fees monthly based on professional fees incurred. The professional fee estimates provided are not-to-exceed figures for the scope of work described. Akerman can terminate the Stroudwater engagement at any time by providing written notice and will only owe professional fees and expenses incurred before the written notice terminating the engagement is received. Stroudwater does not add an administrative fee to our professional fees.

Out-of-pocket expenses, which include airfare, lodging, car rental, internet connectivity charges (if incurred), and meals, are invoiced as incurred without markup. Occasionally, states charge fees for all-payer market share and patient origin data; such fees, if applicable, can be minimized when the client orders the data from the state. Stroudwater will work with Akerman to determine the best

approach to obtain this data. If Stroudwater requests and covers the cost of the requested data, Akerman will only pay for the actual cost without a markup.

Please note the decision points outlined in this fee proposal, which are intended to provide Akerman and LFKHD with discrete points where it can assess the progress of the engagement and decide whether to proceed. As noted above, Akerman may terminate the engagement at any time and will only be responsible for professional fees and expenses incurred before Stroudwater receives notice of cancellation.

ABOUT STROUDWATER ASSOCIATES

For forty years, Stroudwater Associates has served the rural healthcare industry since its founding in 1985. An employee-owned healthcare consulting firm with experience in all 50 states, we advise a national healthcare market including State Offices of Rural Health, community-based organizations, major academic and tertiary care centers, rural and community hospitals, physician groups, ACOs, health plans, and provider organizations. Our consulting team offers deep expertise and broad experience in strategic, financial, clinical, and operational areas.

At Stroudwater, we have an all-encompassing devotion to rural healthcare nationwide. Our team is driven each day by the conviction that every rural community deserves a compassionate and quality healthcare delivery system. We partner with healthcare leaders from Alaska to Maine to sustain and strengthen the vital role hospitals and clinics play in rural America. Our experience with hundreds of rural hospitals serves as our inspiration and expertise base in creating solutions for resilient institutions to provide the very best care in their communities for the long haul. Our counsel is down-to-earth and actionable. We pride ourselves in offering the education, motivation, and practical tools clients need to implement our recommendations without breaking the bank. Our rural team's passion for facilitating customized solutions for each client fuels us. We thrive when our clients thrive.

Currently, Stroudwater has active engagements and client relationships in over thirty states encompassing every region of the country. Our consultant expertise and comprehensive service complement are ideal for meeting the needs of rural and underserved communities.

We offer, among others, the following services:



Stroudwater Associates assists numerous rural providers to improve operational performance and meet the needs of underserved populations more effectively. To that end, Stroudwater worked with the Federal Office of Rural Health Policy (FORHP) and the NRHRC to develop the Rural Healthcare Provider Transition Project (RHPTP) (formerly the Small Rural Hospital Transition Project), funded by the FORHP, for which Stroudwater has been the lead consulting firm for the past eight years. Through the RHPTP Project, Stroudwater assists hospitals with transitioning to a new healthcare environment. Similarly, with the support of the Delta Regional Authority (DRA) and the FORHP, Stroudwater has partnered with the NRHRC since 2017 to provide selected rural Mississippi Delta providers and their communities with technical assistance through the Delta Region Community Health Systems Development Program (DRCHSD). Stroudwater's consulting services have grown and evolved to meet the healthcare needs of rural communities and the varied organizations that impact access to healthcare. In addition, Stroudwater Associates has worked with the Federal Office of Rural Health Policy, the Department of Housing and Urban Development, and the United States Department of Agriculture to implement financing vehicles that would enable rural hospitals access to capital markets.

Stroudwater consultants are active in the movement to improve rural quality and operational performance, including developing models of collaboration between FQHCs and rural hospitals; participation on the Institute of Medicine's committee on rural health; involvement with the National Rural Health Association's Rural Health Congress and Governmental Affairs Committee; and the Federal Office of Rural Health Policy's Rural Hospital Issues Group. We present regularly at national, regional, and state conferences offering thought leadership in rural hospital operations, financial improvement, clinical service development, physician practice management, and FQHC operations.

PROJECT TEAM

The project team will consist of the following Stroudwater consultants: Jeffrey Sommer, Clare Kelley, Julie Georgoff, and Keith Bubblo. Additionally, the team will have access as needed to the broad range of multidisciplinary expertise of the entire Stroudwater Associates team.



Jeffrey Sommer



Clare Kelley



Julie Georgoff



Keith Bubblo

COSTS AND ARRANGEMENTS

Affiliation Options Assistance Phases	Estimated Costs
Phase I: Community Priorities and Needs	\$27,500-\$32,500
Phases II and III: Affiliation Process to Selection of Preferred Partner	\$275,000-\$300,000
Phase IV: Negotiation of Non-binding Letter of Intent ("LOI")	\$30,000-\$35,000
Subtotal (excluding Phase V and Phase VI)	\$332,500-\$367,500
Phase V: Definitive Agreements and Due Diligence	\$15,000-\$18,000 per month
Phase VI: Regulatory Review and Closing	\$15,000-\$18,000 per month
Total (including six to eight months for Phases V and VI)	\$422,500-\$511,500

Upon authorization to proceed, an initial payment of \$25,000 will be due and will be applied to the final invoice. You may terminate our engagement at any time and will only be liable for fees and expenses incurred to date. Expenses will be billed as incurred. Stroudwater does not mark up expenses or charge for normal overhead items, including communications, printing, and the like. Professional fees and expenses are invoiced monthly and will be due upon receipt. Invoices outstanding beyond 30 days are subject to interest charges of 1% per month.

If you agree to the engagement described in this proposal, please sign below and return one copy with a check for the initial payment, care of:

Gail Belt, Administrator
 Stroudwater Associates
 1685 Congress Street, Suite 202
 Portland, ME 04102
admin@stroudwater.com

By signing this proposal, you agree to [Stroudwater's Terms and Conditions](#) (linked here and attached separately), which are hereby incorporated into this proposal, and the terms of [Stroudwater's Business Associate Agreement](#) (linked here). Please reach out to us with any questions or concerns.

☐ If this box is checked, the proposed project does not include an exchange of data and the signatures below do not bind the Client or Stroudwater to the BAA terms; there is a valid, fully executed BAA already in place as confirmed by Stroudwater's Administrator; or Stroudwater's Managing Director has granted an exemption to this requirement in this instance.

 Felicia Leborgne Nowels, Partner
 Akerman, LLP

 Date

APPENDIX A: PROPOSED STROUDWATER PROJECT TEAM

Please see the following pages.



JEFFREY B. SOMMER, MPP Managing Director

AREAS OF FOCUS

- Strategic advisory
- Partnership advisory
- Performance improvement
- Board education & facilitation
- Capital planning and access

EDUCATION

- Jeff earned his BA in Political Economy from Williams College.
- He received a master's degree in Public Policy with a focus on health policy and management from Harvard's Kennedy School of Government.

OUTSIDE THE OFFICE

- Jeff lives in Maine with his wife Dominique and their two boys. They enjoy time together skiing, boating, fishing, and hiking.

CONTACT

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- jsommer@stroudwater.com
- 1685 Congress St., Suite 202, Portland, ME 04102



Jeffrey Sommer is Stroudwater's Managing Director and leader of Stroudwater's Partnerships & Affiliations practice. For more than 25 years, Jeff has focused on assisting hospital and health system clients with strategic positioning, executing major strategic initiatives, and conceiving and executing partnerships of all kinds. Jeff's advisory practice is centered on the nexus of strategy, capital planning, partnerships, and operational performance. He is passionate about working proactively with health system leadership to define, quantify, and mitigate strategic risks.

Jeff is an expert at facilitating board decision-making around strategic options, including defining and selecting a preferred strategic option for clients and then executing the preferred direction. He is passionate about ensuring his clients understand the risks and benefits of a preferred strategic option and take prudent steps to mitigate risks associated with any strategic choice. When necessary, Jeff has helped clients unwind or refine outmoded and ineffective affiliation structures to achieve desired strategic objectives.

In addition to his client responsibilities, Jeff's role as Managing Director places him in a coordinating role across Stroudwater's strategic and operational advisory practices. Jeff has found the multidisciplinary perspective afforded by the Stroudwater team and his Managing Director role to be an important asset in his client work.

REPRESENTATIVE ACCOMPLISHMENTS

- Partnership planning assistance for dozens of regional referral centers, community hospitals, and Critical Access Hospitals including full acquisitions, joint ventures, member substitutions and clinical or service-line-specific partnerships
- Assisting rural health systems to define and quantify their value proposition to create enhanced affiliation options and improved affiliation terms
- Performance improvement assistance with a focus on addressing short-term needs such as bond covenant violations or longer-term strategic imperatives such as mitigating operating risk, providing required access to capital, conserving strategic options, or enhancing the negotiating position of community hospitals contemplating or engaged in affiliation
- Ambulatory service planning for health systems and community hospitals, including development of "ambulatory destination centers"
- Strategic and capital planning services in support of 15 "greenfield" and replacement hospitals, new bed towers, and ambulatory centers in ten states, with total project costs above \$1.4 billion
- Expert testimony in a Maryland Certificate of Need hearing and authoring of white papers assessing Certificate of Need programs in two states regarding overall regulatory oversight of acute care and outpatient services and oversight of interventional cardiology services
- Combining demand modeling, scenario analysis, financial and capital planning to minimize project and strategic risk for bed towers, new hospitals, major new clinical programs and ambulatory projects



JOHN DOWNES, JR., MBA, LEED-AP Director

AREAS OF FOCUS

- Rapid strategic planning
- Community health needs assessments (CHNA)
- Market assessments
- Demand modeling
- Facility master planning
- Expert testimony

EDUCATION

- BA, Rutgers College
- MBA, Boston College
- LEED Accredited Professional

OUTSIDE THE OFFICE

- In his spare time, John enjoys travelling with his family, golf and gourmet cooking.

CONTACT

- 1685 Congress St. Suite 202
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- jdownes@stroudwater.com



John Downes brings over 27 years of experience to clients in the healthcare facilities planning arena. He has developed detailed expertise in market assessments, scenario modeling for clinical services, and strategic facility master plans. Recently, John has delivered expert testimony to community forums and trial courts on the process of projecting healthcare demand. Before joining Stroudwater, John directed the consulting division of an architectural firm that enjoys a national leadership position in the healthcare arena.

A nationally recognized speaker, John has served as a guest lecturer in the Brown University Executive Master's in Healthcare Leadership program. He has presented on market analytics and linking strategy, finance, and facilities to the National Rural Health Association, various State Offices of Rural Health, Healthcare Design, American College of Healthcare Executives (ACHE) and the ASHE Planning and Design Conference.

REPRESENTATIVE ACCOMPLISHMENTS

- Three-day Rapid Strategic Planning (RSP) engagements with clients in Colorado, Georgia, Illinois, Kansas, Louisiana, Massachusetts, Mississippi, Montana, Nebraska, Ohio and Oregon
- Intensive one-week on-site charrette master facilities plans for clients in Colorado, Georgia, Illinois, Kansas, Louisiana, Massachusetts, Michigan, Montana, New Jersey, New York, Ohio, Oklahoma, Oregon, Pennsylvania, South Carolina and Washington
- Development of a facilities master plan, space/functional programming, community planning board presentations, and expert witness testimony for the complete replacement of a community hospital with \$1B net Patient Revenue.
- Emergency department demand analysis and utilization modeling to provide an academic medical center with a second opinion to right-size their ED to meet community needs
- Demand modeling and facility analysis for a large statewide multispecialty physician practice with over 100 locations
- Healthcare market analysis and presentations for a developer incorporating clinical space into mixed-use urban developments
- Strategic facilities master plan for a three-hospital system consisting of a 250-bed tertiary hospital, a 50-bed community hospital, and a 25-bed critical access hospital
- Community Health Needs Assessments (CHNA) for Critical Access Hospitals in Oregon, Tennessee, and Texas



CLARE KELLEY, MPH

Senior Consultant

AREAS OF FOCUS

- Affiliation advisory
- Physician practice improvement
- Strategic planning
- Ambulatory strategy and development
- Data visualization

EDUCATION

- Clare earned her Master of Public Health degree from The Dartmouth Institute for Health Policy and Clinical Practice.
- She holds a BA in Geography from Middlebury College.

OUTSIDE THE OFFICE

- In her spare time, Clare enjoys soccer, skiing, kayaking or anything active outdoors.

CONTACT

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- ckelley@stroudwater.com



Clare is an experienced healthcare consultant providing vision, direction and leadership in Stroudwater's Affiliations & Partnerships, Physician, and Strategy practices, to help ensure sustainable access to healthcare for all communities. Her recent work includes educating larger not-for-profit medical centers on the value of small critical access hospitals (CAHs); developing and evaluating a risk analysis for an independent short-term acute care center; affiliating small Critical Access Hospitals with larger University Medical Centers; advising CAHs on clinic operations and physician need; developing a joint venture for an Ambulatory Surgery Center between a not-for-profit hospital and a physician specialty group; creating and implementing strategic plans for CAHs; and evaluating financial proformas for new hospital facilities.

Before joining Stroudwater, Clare interned at The Dartmouth Institute for Health Policy and Clinical Practice; there, she researched and reported on the numerous international representations of healthcare variation. In a similar role at the not-for-profit Partners in Health, Clare made healthcare facility maps for major sites and analyzed data to aid in the decision-making behind new facility sites. She has created base maps of healthcare facilities in Haiti, Rwanda, and Malawi to distribute to citizens and present to organizations.

REPRESENTATIVE ACCOMPLISHMENTS

- *Value of a Rural Partner* – Educated a larger not-for-profit hospital on the benefits and value of a rural CAH partner to both organizations resulting in an affiliation.
- *Strategic Risk Analysis* – On behalf of a hospital client, developed a strategic risk analysis to provide guidance to the hospital on their decisions for the future.
- *Physician Practice Operations* – Assisted with the analysis of the clinics of a community hospital and advised on areas for both operational and workflow improvement.
- *Affiliation to larger partners* – Assisted a community hospital in the Northeast with their affiliation to a large University Medical Center.
- *Formation of a Joint Venture Ambulatory Surgery Center* – Assisted in the creation of a joint venture Ambulatory Surgery Center between a large not-for-profit health network and a physician specialty group.
- *Strategic Options Analysis* – On behalf of a hospital district, assisted with determining county-wide health needs and potential for a Greenfield Hospital outside a metropolitan area.
- *Community Health Needs Assessment* – Developed a Community Health Needs Assessment, including strategies for tackling health needs for a rural community hospital, and incorporated it into their strategic plan.



JULIE GEORGOFF, CHFP

Consultant

AREAS OF FOCUS

- Financial management
- Strategic planning
- Service line evaluation
- Revenue cycle management

EDUCATION

- Julie earned her Bachelor of Business Administration in Corporate Finance at Kent State University.
- Julie is certified as a Lean Leader as well as a Healthcare Financial Professional (CHFP).

OUTSIDE THE OFFICE

- In her spare time, Julie enjoys spending time with family, camping & traveling. She has a daughter in Bowling Green, Ohio, and a son in Seattle. She and her husband reside near Toledo, Ohio.

CONTACT

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An accomplished healthcare and finance professional with diverse experience in the strategy space and a strong background in clinical operations, Julie Georgoff joined Stroudwater Associates in 2023. Julie understands the complexities of the current healthcare financial landscape and enjoys the challenge of helping each client succeed in their unique situation. At Stroudwater, Julie supports clients through services such as financial and operational analysis, strategic planning, service line evaluation, and revenue cycle management. She uses her expertise to help provider organizations address the major pain points in healthcare delivery, facilitating comprehensive data-driven strategic discussions, creating tools to leverage financial management, and helping teams to design sustainable community-based healthcare close to home.

Before joining Stroudwater, Julie served as CFO and Vice President of Finance for a Critical Access Hospital in Ohio. Julie led with a focus on the future of healthcare, developing and implementing successful financial models for transacting tomorrow's business. Her work enhanced the value of the finance organization by driving team engagement and the role of the finance committee of the board. She created budgeting and forecasting models, a capital management process, and performance measurement of a diverse investment portfolio. Before her tenure as CFO and VP of Finance, Julie worked as an independent management consultant facilitating provider alignment and compensation models, return on investment, and structured growth and expense control. She has successfully designed and implemented multi-million-dollar cost reductions in both small hospitals and multi-site systems. Julie also served as a Regional Administrator focused on converting vision and strategy into action across seven hospitals while aligning operations with institutional objectives. These previous positions gave her experience working with a wide range of healthcare challenges and provider types.

Julie is an active member of the Healthcare Financial Management Association (HFMA) and is a Certified Healthcare Financial Professional.



KEITH M. BUBBLO

Senior Analyst

AREAS OF FOCUS

- Data visualization
- GIS
- Strategic planning
- Facilities planning
- Community health
- Population health

EDUCATION

- Keith holds a Certificate in Geographic Information Systems from the Department of Geography-Anthropology at the University of Southern Maine.
- He attended Arizona State University in Tempe, Arizona, and has a BA in English and Political Science from Wilkes University in Wilkes-Barre, Pennsylvania.

CONTACT

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Seeing your data leads to better decisions. Keith joined Stroudwater Associates in 2001, and has helped develop Stroudwater's data-driven approach to client engagements.

His expertise is in the management, analysis, and presentation of healthcare data, and he uses state-of-the-art Geographic Information System (GIS) and visualization software to interpret the components and distribution of patient records, utilization estimates and projections, market share, and demographic data, adding insight to a client's market position and highlighting areas of risk and opportunity. A major focus of his work is helping to answer critical client questions with custom data visualizations that are interactive and easy to understand.

REPRESENTATIVE ACCOMPLISHMENTS

- An enhanced set of utilization, risk, and demographic dashboards for a state health information exchange to deploy to their Medicaid program managers and care coordinators, replacing legacy reporting system;
- A financial benchmarking tool for a large healthcare system in the northeast;
- A claims dashboard of a hospital's self-funded health plan data to identify high cost/high utilization patients and out-of-network leakage;
- A patient throughput and occupancy analysis for a large tertiary medical center building a replacement facility;
- Comprehensive market analysis dashboards, including service area, demographics, competitor analysis, and patient origin by travel time, for multiple clients throughout the country;
- An enhanced community health needs assessment for a rural community in the southwest;
- Custom patient panel analyses for multi-site, multi-specialty physician groups looking to maximize efficiencies and develop new markets;
- Facility relocation/new construction/closing analyses using GIS to model the impact on existing or potential patients; and
- Ambulatory market potential studies using historical market share, business data, daytime/nighttime population trends, and traffic counts.

Stroudwater's data-driven approach is scalable to all types and sizes of projects. Keith has assisted clients ranging from large tertiary centers in dense, urban areas to small rural and community hospitals; from new "greenfield" hospitals under development to ambulatory surgery centers; and from physician groups to employer-sponsored health plans.



STROUDWATER

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Managing Director

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