

FOR IMMEDIATE RELEASE

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Engage Health announces the appointments of Dr. Robert Glenn and Steven A. Greenspan to the executive leadership team.

WILKES-BARRE, PA/ August 27th, 2021:

Engage Health, a nationwide leader in reimbursement technologies and solutions, is proud to announce the recent appointment of Dr. Robert Glenn as the new Chief Medical Officer and Steven A. Greenspan JD, LLM to the role of Chief Strategy Officer.

“We are excited to have two of the most knowledgeable and well-respected individuals in the industry as part of our leadership team,” stated William OMalley, Chief Operating Officer.

“Their understanding of the details and nuances found across the audit and payment integrity landscapes puts Engage in a unique position to offer our clients customized solutions for the ever-evolving challenges they face on a seemingly daily basis.”

Dr. Robert Glenn

Dr. Glenn brings with him over 15 years of clinical and regulatory experience. Most recently, he served as the Contractor Medical Director for Performant Recovery's CMS Nationwide DMEPOS, Home Health and Hospice Recovery Audit Contract (RAC) in Region 5. In that role, he oversaw the concept ideation team in the development and implementation of RAC audit concepts and procedures, worked closely with the provider community on Peer-to-Peer discussions, represented the RAC at Administrative Law Judge hearings and met regularly with representatives from the CMS management or contractors.



Previously Dr. Glenn represented health systems in the regulatory and compliance field while at Optum, previously known as Executive Health Resources (EHR). As Executive Medical Director at EHR, he worked on the team that was responsible for providing strategies to clients on how to manage compliance issues ranging from RAC, MAC and ZPIC audits as well as OIG investigations. In addition, Dr. Glenn acted as the Senior Director of the Education and Training

department where he led the team which was responsible for physician and nurse training initiatives.

Dr. Glenn noted, “I am incredibly excited to be joining the team at Engage Health Solutions. This organization is uniquely positioned to affect very positive changes for our client partners in the healthcare and medical supply space. I am looking forward to the opportunity to work with such an experienced, talented, and innovative team.”

Steven A. Greenspan JD, LLM

Most recently, Mr. Greenspan served as Vice President of Regulatory Affairs at Optum360 (Optum Physician Advisor Solutions formerly Executive Health Resources) and was responsible for overseeing the company’s regulatory compliance and hospital advocacy efforts. He collaborated closely with the compliance and legal teams, and Optum appeals management teams to offer direction and support on complex Medicare, Medicaid, and Commercial Appeals matters. Prior to this role, Mr. Greenspan led the day-to-day operations of Optum’s governmental appeals unit.



Steven has strong knowledge of the Centers for Medicare and Medicaid Services (CMS) and the formal Medicare Appeals Process, having been intimately involved with the implementation of the Qualified Independent Contractor (QIC) program. During his hearing officer career, Mr. Greenspan oversaw the adjudication of more than 200,000 appeals and personally authored more than 10,000 appeal decisions.

Prior to joining Optum, Steven served as Vice President and Project Director for MAXIMUS Federal Services, overseeing the company’s Part A East QIC project while also serving as the proposal manager for the winning Part A West QIC award. Before his time at MAXIMUS, Mr. Greenspan served as President and Chief Hearing Officer for the Center for Dispute Resolution, while also serving as an Administrative Hearing Officer for the State of Delaware, Division of Social Services.

Steven indicated, “I am pleased to become an integral part of the exceptional team at Engage as we assist providers and suppliers with proper claim submission while working with payors to properly adjudicate claims. Claim integrity is at the core of our services as we strive to help our clients alleviate the administrative and financial burdens of improper claim submission, processing, and payment.”

About Engage Health

Ensure Payment Accuracy...Future-Proof Claims

Engage Health provides curative consultative and technological solutions designed to ensure health reimbursements are made accurately across the entire reimbursement continuum. Our proactive approach is focused upon early-on identification, prevention and modification of internal practices which frequently result in payment inaccuracies. As a result, Engage Health can improve the financial metrics of health organizations by reducing unnecessary costs, by decreasing the resources required to address inappropriate payments, and by mitigating revenue leakage where inappropriate payments typically occur.

For more information on Engage Health, please visit our website at: engagehealthsolutions.com