

Joshua L Berman

Healthcare Revenue Cycle Professional



☎ 440.262.5525 ✉ JoshuaLBerman@iCloud.com [in linkedin.com/in/JoshuaLBerman](https://www.linkedin.com/in/JoshuaLBerman)

SUMMARY

12 Years in the Hospital and Physician Revenue Cycle

12 Years in Revenue Cycle Software and Technology

7 Years in Private Equity Backed Businesses

www.JoshuaLBerman.com

CAREER ACCOMPLISHMENTS

- Operationalize private equity owned business driving 135% YOY growth, 75% gross profit margin and 384% adjusted EBITDA growth as Chief Operating Officer leading to [an investment transaction in mid 2021](#).
- Full P&L and operational responsibility for a \$40 million business line as VP, Operations
- Full P&L responsibility for a \$50 million product line as AVP, Revenue Cycle Solutions
- Led successful ICD-10 transition for all of RelayHealth's products and processes as Director, Regulatory Affairs
- Product Manager of \$3.2 million dollar net new analytics product using RelayHealth's broad data as Director, Business Analytics and Intelligence
- Product Manager of \$1.3 million dollar net new Denial Database created exclusively for Cleveland Clinic's billion dollar revenue stream as Director, EDI and Denial Management

PROFESSIONAL EXPERIENCE

Barti

Head of RCM | Strategic Advisor (Jan 2026-Present)

Responsible for RCM and advising processes for Series A PE-backed business

- Leading development of next-generation RCM infrastructure within an AI-enabled EHR platform
- Designing scalable worklist, automation, and analytics tools to improve visibility into A/R and denial management
- Partnering across product, engineering, and operations to embed revenue cycle workflows directly into clinical systems
- Driving strategy to evolve Barti into a fully integrated RCM + practice management platform

Millennia

Chief Operating Officer (Jan 2019-May 2025)

Responsible for all operations and 85% of the staff with the goal to grow and scale operations

- Maximized operational profit via process, technology and people with the goal of creating a tech enabled business
- Responsible for all operational processes including the call center, infusing technology holistically into the business, and guiding culture to maintain staff at all levels
- Run implementation to bring clients live at elite pace of 30-45 days
- Built new analytics and robotic process automation team
- Built processes to maximize both revenue growth of 135% and EBITDA growth of 384%, both within 2 years

- Run all marketing processes including but not limited to website, collateral, Pardot, and general outreach information until hiring of CMO in early 2021
- Built out new sales team of 4 new VP of Sales, 1 Sales Ops leader, and 1 Inside Sales Associate until hiring of CCO in early 2021. Led \$10m+ in sales.
- Execute and formalize the data team, data team processes, and data standards until hiring of CDO in Dec of 2021
- Successfully implemented offshore call center to help business scale

MedData

VICE PRESIDENT, OPERATIONS (Nov 2017-Dec 2018)

Responsible for all profit, loss and operations for company business line totaling \$40 million+. Leader and manager of all facets of business, including but not limited to the strategy and operations of both onshore and offshore teams

- Responsible for the development and implementation of an operational strategy and vision
- Lead a team of 1700+ people both onshore and offshore
- Maximize operational profit via process and technology
- Responsible for all coding, billing, accounts receivable, and patient receivables departments working with over \$4B in billed claims
- Reduced Days in A/R by 8 days in the first year
- Increased Cash per Month by 11% in the first year
- Reduced high client escalations to zero within 9 months

McKesson (RelayHealth/Change Healthcare)

ASSISTANT VICE PRESIDENT, REVENUE CYCLE SOLUTIONS (Oct 2015-May 2017)

Responsible for all profit and loss for company Practice Management product totaling \$50 million+. Leader and manager of all facets of business, including but not limited to product roadmap, marketing, sales, implementation, customer service and information technology.

- Responsible for the development, product management, and roadmap of Practice Management system and backend transaction systems in order to drive revenue
- Transaction products included estimation, eligibility, claims status, claims, analytics and remits
- Led a team of 50 developers to guide focus, agile process, and timelines
- KLAS scores from 83.5 to 90
- Used prior technology knowledge to provide high quality service, an API developer portal and a sales marketing toolkit
- Responsible for all strategy and approvals for marketing
- Create budget and ensure budget numbers are hit
- Approve all sales strategies for a team of 6 and successfully achieved bookings numbers
- Led account management team of 7 with a strategy successfully with zero client attrition

McKesson (RelayHealth)

DIRECTOR, REGULATORY AFFAIRS (Dec 2012-Sept 2015)

Led the entire RelayHealth team of employees and customers through a successful ICD-10 transition, which included zero client attrition, no increase in customer service call volumes or backlog, and zero revenue loss.

- Created and implemented a formal plan and scheduled business goals in order to guarantee a smooth transition.
- Managed over 2000 clients to a successful ICD-10 implementation. This included face to face visits, webinars, and a full testing suite for client success which led to zero attrition.
- Collaborated with all departments and their members to achieve and exceed goals and objectives, as well as maintain friendly relationships with other industry leaders and clients.
- Created ICD-10 analytic marketing micro-site to educate and help the industry succeed while in turn driving analytic sales and revenue.

McKesson (RelayHealth)

DIRECTOR, BUSINESS ANALYTICS AND INTELLIGENCE (Feb 2010-Nov 2012)

Overseer of the creation, development and implementation of building RelayAnalytics Pulse, the largest new company product to date. Product was sold to acute healthcare facilities nationwide. Heavily responsible for the marketing and sale strategy of product. Led a team of over 20 employees, who were dedicated to developing, releasing, marketing, and selling of the RelayAnalytics Pulse Product.

- "Whiteboard to Release" product management of net new analytic solution
- Managed a team of over 20+ employees, and \$1.5M budget, who were dedicated to developing, releasing, marketing, and selling of the RelayAnalytics Pulse Product.
- Gained and utilized extensive knowledge of ACOs, Meaningful Use, KPIs and hospital revenue cycle processes to provide company solutions that were new and trending within industry.
- Product successfully sold \$3.2m in first year

McKesson (RelayHealth)

DIRECTOR, OPERATIONS (Nov 2009-Jan 2010)

Manager of 35 account executives and their operations. Day-to-day management of team members including attrition goals, sales statistics and customer satisfaction statistics. Simultaneously built group-wide operational excellence programs in order to maintain clients and customers. Responsible for the support of \$149 million in revenue.

- Oversaw the coordination and handling of 2,300+ clients, which included hospitals, physician practices and value-added resellers.
- Maintained a consistent retention rate of 98% among customers.
- Awarded the Northface Award for Customer Satisfaction.

Cleveland Clinic

DIRECTOR, EDI AND DENIAL MANAGEMENT (June 2008-Oct 2009)

Manager of 43 FTEs and their daily operations. Ownership of Main Campus, East Region, West Region and all Florida regional hospitals for all claims transmissions and denials including the claims manager, ePremis (assurance) and the proprietary denial system, The Denial Database. Managed more than 1,300 users of ePremis (Assurance) and The Denial Database.

- Product manager of net new home grown Denial Database application containing \$80+ million in denials a month (built in 2002 as Manager of Revenue Recovery and owned through 2010).
- Built roadmap for denial analysts, programmers and database administrators for system design enhancements and overall goals/direction.
- Created advanced analytics for denial management to recognize trends.
- Successfully implemented and executed ePremis (Assurance), which was responsible for the billing of all chargers over \$1 billion in claims per month.
- Oversaw all HIPAA transactions sets, dissemination of information and proper processing of those files when necessary
- Liaison to all department chairman, normally physicians, and department administrators for all revenue cycle issues

Cleveland Clinic

SENIOR MANAGER, ELECTRONIC CLAIMS AND DENIALS (May 2007-May 2008)

- Maintain job responsibility of below job duties from the Revenue Recovery team, but at an enterprise level. Added all 11 of the regional hospitals to current main campus responsibilities
- In charge of centralizing main campus and regional electronic claim applications and processes
- Completed electronic claim application centralization project cost analyst for what will be the largest priority one application at Cleveland Clinic
- Consult and guide regional hospitals on their denial product and help implement best denial practice

Cleveland Clinic

MANAGER, REVENUE RECOVERY (Feb 2002-April 2007)

- Built home grown SQL Denial Database application containing 80+ million dollars in denials a month
- Direct activities of Denial Analysts, ITD System Programmers, and ITD Database Administrators for system design enhancements and overall goals/direction
- Manage 750+ users of both The Denial Database and Claims Management system via user groups, email, a home grown blog, and their direct managers
- Successfully implemented new version of claims management system for main campus (1.5 year project)
- Manage, organize, and direct use of Claimtrack to ensure electronic billing of all main campus claims
- Study denial data and implement front end edits in Claimtrack to prevent delay, loss, or reduced insurance payments

Cleveland Clinic

SUPERVISOR, MEDICARE BILLING (July 1999-Jan 2002)

- Responsible for all billing, collections, and A/R for Medicare and Railroad Medicare
- Responsible for 290 million in billed charges in 1999 and 300+ million in 2000
- Collect an average of 5 million in net revenue per month
- Reduced A/R over 60 days by 12%
- Chairman of the bimonthly supervisor meetings for the Patient Financial Service department
- Manage and manipulate the Health Data Services(HDS) system to ensure complete and correct front end billing is done
- Reduced unaged accounts receivable by 74%
- Write programs through the SMS OLIE product to automate many functions
- Act as a liaison between Patient Financial Services and the Family Health Centers, the Clinical Departments, and Registration
- Create monthly reports focusing on A/R, DRO, Billing Activity, Staff Allocation, and HDS statistics

Cleveland Clinic

COMMERCIAL FOLLOW-UP AND BILLING (1997-1999)

EDUCATION AND CREDENTIALS

Ohio University, Athens, Ohio

Bachelors of Science in Health Administration

Minor in Business

Adoption Network Cleveland - Cleveland, OH

Board of Directors (2009-2011)