

Curriculum Vitae
R. Lawrence Nicholson, CFE, FACFEI, DABFE, CMI-II, FHFMA

POSITION President, CFO and Director, The Toiyabe Group, Inc., and Nicholson Enterprises, Inc.

EDUCATION UNIVERSITY OF COLORADO, Boulder, CO - Certificate
Executive Graduate Program in Health Care Financial Management
CALIFORNIA STATE UNIVERSITY, Sacramento, CA
Bachelor of Arts - Government-Major - Pre-Law
SACRAMENTO CITY COLLEGE, Sacramento, CA
Associate of Arts - Business Administration-Major - Business

PROFESSIONAL AFFILIATIONS (current) Certified Fraud Examiner (CFE), Assoc. of Certified Fraud Examiners
Fellow, American College of Forensic Examiners International (FACFEI)
Diplomate of American Board of Forensic Examiners (DABFE)
Certified Medical Investigator – Level II (CMI-II), American College of Forensic Examiners
Fellow, Healthcare Financial Management Association, (FHFMA)
Chair, Washoe County Audit Committee, Washoe County, NV
Commissioner, Civil Service Commission, Reno, NV
Committee Member, Airport Noise Abatement Panel, Reno, NV
At-Large Member, West Truckee Meadows Citizens Advisory Board, Washoe County, Nevada

PROFESSIONAL AFFILIATIONS (past) Chairman, California UB-82 Committee
President, Northern California Chapter, Healthcare Financial Management Association, (HFMA)
Member, HFMA Rural Task Force Committee
Member, Nevada Association of Hospitals and Health Systems
Member of Health Care Fraud Committee for year 2002

RANGE OF EXPERIENCE Overall direction of health care consulting activities, especially Medicare and other regulatory compliance audits; development of fraud audit criteria and coordination of corresponding investigative activities; coordination of all PATH, medical necessity and documentation audits; development of audit protocols for performing operations audits of hospital, medical group practice and DME provider patient accounting systems and billing activities. Assists DME suppliers with obtaining provider numbers, surety bonds and on-site audits performed by DMERCs. Assisted one DME supplier with performance of an audit to determine potential overbilling of TENS units and supplies and the resolution of outstanding claims for TENS units and supplies with the DMERC. Performs valuation analyses and risk assessments, particularly of medical group practices, HHA and DME providers. Develops staff and in-service training protocols, with respect to regulatory compliance programs implemented by health care organizations. Coordination of performance of billing and compliance reviews required in conjunction with corporate integrity agreements. Testifies as an “Expert Witness” in health care related cases. Hospital Controller responsible for evaluation

and implementation of database financial management system; general ledger; budgeting; cash management; rate setting and financial reporting activities; patient accounting; data processing; payroll and accounts payable functions; PPO contracting and marketing activities and integration of contracted services with IPAs and HMOs. Also, was an Administrative Assistant for Blue Cross of California; a Hospital Medi-Cal and Medicare Auditor; Director of Patient Financial Services; and Assistant Finance Officer.

PROFESSIONAL AND BUSINESS HISTORY

THE TOIYABE GROUP, INC, formerly CALIFORNIA SERVICE BUREAU - HEALTH MANAGEMENT SERVICES, INC. and NICHOLSON ENTERPRISES, INC., Reno NV, President and Director of both corporations 1987- Present

MED-SENTRY, LLC, Sparks, NV, Principal 2004 - Present

SANTA ROSA MEMORIAL HOSPITAL, Santa Rosa, CA
Controller - 1979 to 1987
Director, Patient Financial Services - 1974 to 1978

ST. JOSEPH HOSPITAL, Albuquerque, NM
Director, Business Services - 1978 to 1979

SACRAMENTO MEDICAL CENTER, Sacramento, CA
Assistant Finance Officer - 1972 to 1974

MERCY GENERAL HOSPITAL, Sacramento, CA
Medicare/Medi-Cal Auditor - 1969 to 1972

BLUE CROSS OF CALIFORNIA, Oakland, CA
Administrative Assistant - 1967 to 1968

SELECTED PUBLICATIONS

"Look Who's Observing your Observation Services," *NV Chapter, Healthcare Financial Management Assn (HFMA) newsletter "Grapevine"* – January, 1999

"Ambulance Restocking," July, 1998 & "Self-Administered Drugs," August, 1999 and Look Who's Observing your Observation Services, January, 1999, *NV Assoc Hospitals (NAHHS) – News and Views publication*

SELECTED SPEECHES

"Charge Description Master Maintenance Program" for the Indiana Pressler Memorial Chapter of HFMA, Merrillville, IN, August, 1993

"DRG Unbundling," Kansas Assn. of Hospital Patient Accounting Managers and Kansas Assn. of Hospital Admitting Managers, for the Kansas Chapter of HFMA, Kansas City, KS, April, 1996

Participated as faculty for Atlantic Information Services' workshop series "How to Avoid Part B Billing Errors & Identify Opportunities," Chicago, Los Angeles, New York and Orlando, October, 1997

Series of Compliance Seminars in California, January-March, 1998

Compliance Issues and Strategies: The Feds are Coming – 30th Annual Rural Healthcare Symposium, Sacramento, CA, March, 1998

American Bar Association National Institute on Health Care Fraud, San Diego, CA, May, 1998

Taxpayers Against Fraud (TAF) National Conference for Relators' Counsel, Washington, D.C., February, 2001

American Assoc of Healthcare Administrative Management (AAHAM), Annual National Institute, Reno, NV, October, 2001

"Patient Observation Status Decisions: Determining the Appropriate Patient Level of Care" for the Region 11 HFMA Healthcare Symposium, Las Vegas, NV, January, 2003

"Assembly Bill No. 1455 & Assembly Bill No. 1627", AAHAM Southern California Chapter, Whittier, CA, April, 2004

"OIG Workplan 2004," NVHIMA Annual Convention 2004, Reno, NV, May, 2004

"Operational Implications of Compliance for Acute Care Providers" (re OIG's 2005 Work Plan), Panel Member, HFMA Northern California 2005 Spring Conference, Oakland, CA , April, 2005

REFERENCES

Available upon request