



## Completed Consulting Assignments

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“He hits from both sides of the plate. He’s amphibious.”  
—Yogi Berra—

## **Introduction**

I have completed numerous consulting assignments for a variety of clients.

My clients have included the following: major integrated multi-hospital health systems, academic health centers, medical device manufacturers, venture capital firms, private foundations, contract research organizations, and disease management companies. As a policy, I do not routinely disclose the identities of my clients. In many cases the work I do is done on the basis of a confidentiality agreement.

My assignments have been extremely diverse, representing the breadth of and variation in my consulting expertise. The budget for my largest assignment exceeded \$200,000. I have also accepted small, short-term consulting assignments with a dollar value under \$1,000.

The following is a partial list of some of the projects I have completed as of August 1, 2003. The bulleted points provide some insight into the scope of work for each project.

## **Health Care Resource Needs and Physician Availability in Montana**

- Created a comprehensive social, demographic, economic, health insurance, and health resources profile for all 56 Montana counties (based on state and federal data sources)
- Separately estimated the need for office-based primary care and specialty care services by payer category for every county (In all the analyses physicians were classified as follows: general and family practice, internal medicine, pediatrics, obstetrics and gynecology, orthopaedic surgery, ophthalmology, dermatology, psychiatry, cardiovascular diseases, urology, general surgery, otolaryngology, neurology, and all other specialties)
- Documented the current supply of office-based primary care and specialty care physicians for each county (using all categories available from the Montana Medical Association, and recoding them according to the specialties identified above)
- Identified those counties with either an undersupply or an oversupply of office-based primary care and specialty care physicians
- Developed three variations on what is now called the Primary Care County Health Fund Model for Medically Underserved America
- Evaluated different models that would meet the primary health care needs of uninsured persons
- Identified the essential features of a fully functional office for a primary care solo practitioner in rural Montana



- Estimated the cost of establishing a solo practitioner rural primary care practice
- Developed multiple estimates of the revenue likely to be generated by a primary care solo practice in rural Montana
- Addressed the issue of profitability based on various clinical practice assumptions

### **Center for Advanced Surgical Technology**

- Developed an approach intended to clarify the underlying issues concerning a reasonable niche for a new biomedical engineering center
- Thoroughly reviewed the activities of all biomedical and bioengineering centers in the United States
- Distinguished among the activities of biomedical engineering, bioengineering, and biotechnology centers in the United States
- Inventoried the research priorities for all biomedical and bioengineering centers in the United States
- Compiled program profiles for all biomedical and bioengineering centers in the United States
- Identified the key components for a biomedical engineering program directed towards computer-assisted (robotic) surgery
- Identified potential job candidates for a new center
- Reviewed the qualifications of potential job candidates in which the client expressed an interest
- Identified major sources of funding for research related to computer-assisted surgery
- Reviewed and analyzed all the major companies that are currently involved in the development, manufacture, and sale of robotic surgery equipment
- Proposed an organizational structure for a new center

### **Health Services Research/Health Policy Center**

- Provided background material relevant to the development of an academic health services research/health policy center
- Evaluated and prepared a report on the feasibility of a health services research center at the university of interest to the client
- Reviewed the current research capabilities at the proposed university, and determined to what extent they match those required for health services research
- Prepared a detailed list of tasks relevant to the design and development of a health services research/health policy center at the proposed university
- Established criteria for evaluating the performance and proficiency of health services research centers in the United States
- Conducted a thorough institutional review of health policy and health services research institutes, centers, departments, divisions, and programs in the United States
- Identified those health services research programs that clearly excel at what they do (i.e., the truly "elite" centers)
- Conducted a state-by-state assessment of academic health policy and related capabilities, rating each state as to the level of expertise it has available
- Performed a preliminary assessment as to how a health services research center might serve the health policy needs of the state the health policy center would



serve

- Outlined the most significant shortcomings associated with some of the major health policy/health services research centers in the United States
- Identified those programs that might serve as the basis for a site visit by principal Foundation/project staff
- Defined an approach that might enable the state of interest to better utilize an academic health services research capability
- Provided a rationale as to why it makes sense to have the proposed health services research center independently designed, instead of permitting the sole-source applicant to develop its own plan for a center
- Outlined a process for proceeding with the development of a request for applications, and soliciting a proposal from the sole-source applicant to implement the health services research center design

### **Comprehensive Transplant Center**

- Helped to clarify the direction, needs, and priorities of a comprehensive multiorgan transplant center
- Addressed key issues concerning the desirability of an overall medical or surgical direction for the Liver Transplant Program
- Inventoried historical issues related to the focus, planning, and leadership of the Liver Transplant Program through extensive interviews with key medical center and Transplant Center staff
- Clarified internal perceptions as to the strengths and the weaknesses of the Liver Transplant Program
- Externally validated internal perceptions of the Liver Transplant Program
- Recruited a surgical director for the Liver Transplant Program
- Expanded the capability of the Transplant Center by recruiting a surgical director with pediatric experience and other expertise in liver, kidney, and pancreatic diseases
- Developed an organizational structure for the Transplant Center, including appropriate interfaces with the Center for Liver Diseases
- Addressed various issues related to the development of a transplant center database
- Began the process of enhancing relationships with referring physicians throughout the region served by the Transplant Center
- Initiated work on a staffing plan for the Transplant Center
- Emphasized the importance of developing a five-year plan for the Transplant Center

### **Center for Liver Diseases**

- Reviewed and evaluated all major centers for liver diseases in the US
- Assessed the strengths and weakness associated with existing centers for liver diseases, as well as digestive diseases centers
- Examined the feasibility and desirability of various organizational structures for the Center for Liver Diseases
- Developed an organizational structure for the Center, including appropriate interfaces with the Transplant Center



- Assisted with the development of a mission statement, a vision, and the clarification of institutional objectives for the Center
- Identified the full range of services that would be provided in relationship to the Center for Liver Diseases
- Assessed the potential impact the Center might have on overall transplant activity
- Helped to plan, develop, and implement a focused clinical, health services, and outcomes research program
- Developed a comprehensive staffing plan for the Center
- Emphasized the importance of developing a five-year plan for the Center

### **Potential Supply of Non-Heart-Beating Organ Donors**

- Reviewed previous attempts to estimate the potential supply of non-heart-beating organ donors in the United States and Europe
- Assembled the data required to derive a new set of estimates of the potential supply of non-heart-beating organ donors in the United States
- Developed new estimates of the potential supply of non-heart-beating donor kidneys
- Assisted the client in interpreting the results of the analysis and evaluating a potential commercial venture

### **Uninsured Children and Families in Mississippi**

- Prepared three background papers on the uninsured and related topics
- Worked on the mission statement and related materials for the Foundation
- Developed schematics to convey the interrelationships among various organizations addressing the problems of the uninsured in Mississippi
- Emphasized the development of priorities for which a return-on-investment could be demonstrated
- Developed a national state-level database pertaining to the uninsured and the underserved
- Developed a national database to track grant making efforts on behalf of private foundations and government agencies in relationship to the uninsured and underserved
- Proposed an approach to continue tracking grants intended to fund research and services for the uninsured
- Addressed rural health care-related issues, including medically underserved areas

### **Implantable Intracardiac Monitoring System for Patients with Heart Failure**

- Examined and evaluated product documentation
- Critically assessed proposed economic analyses and product coverage and reimbursement plans
- Reviewed prospectus for future outcomes studies
- Provided advice with respect to the Food and Drug Administration approval process



## **Portable Perfusion Apparatus for Prolonged Donor Organ Preservation, Resuscitation, and Transport**

- Described methods used in previous studies to estimate the supply of organ donors and donor organs
- Presented a detailed decision tree derived from a previous national study estimating the supply of potential organ donors
- Compared and contrasted estimates of both the need and demand for organ transplantation
- Provided an assessment of the potential implications of the aforementioned portable perfusion apparatus

## **Shared Decision Making, Health Information, and Demand Management**

- Identified various approaches to assess and quantify health status for purposes of risk appraisal
- Proposed different methods to project health care utilization on behalf of health plan enrollees
- Identified several approaches to measure, quantify, and value the return-on-investment associated with disease management, including nurse call line services
- Assisted with the planning and development of a data analysis and statistics unit to evaluate disease management, health education, and shared decision making services
- Helped develop a job description for a lead statistician for the aforementioned statistics or data analysis unit

