Hawaii Medical Service Association
Chief Compliance Officer
Leadership Profile

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Contents

The Opportunity

Hawaii Medical Services Association (HMSA), located in Honolulu, Hawaii, seeks an accomplished and forward-thinking Chief Compliance Officer to provide enterprise leadership for the organization's compliance program while helping shape the future of governance and risk oversight across the organization.

HMSA is Hawaii's largest health insurer and one of the state's most influential healthcare organizations. Established in 1938, HMSA serves more than half of Hawaii's population and offers a broad range of commercial, Medicare, Medicaid, and employer-sponsored health coverage solutions. As Hawaii's Blue Cross Blue Shield licensee, HMSA has played a central role in the state's healthcare system for nearly nine decades, partnering with providers, employers, government agencies, and community organizations to support the health and well-being of individuals and families across the islands. Headquartered in Honolulu with a presence throughout the state, HMSA is driven by a mission to improve the lives of its members and the health of Hawaii while delivering high-quality, affordable healthcare coverage and services.

Reporting administratively to the Chief Legal Officer and maintaining a functional relationship with the Board's Audit, Compliance & Risk Committee, this executive will serve as a trusted advisor to senior leadership, the Board, and regulators while shaping the next chapter of HMSA's compliance, ethics, privacy, regulatory affairs, and fraud, waste, and abuse programs. HMSA's compliance program is well-established, highly respected, and deeply integrated into the business, creating an environment where the next leader can focus on advancing strategic governance, strengthening enterprise risk oversight, and further enhancing organizational capabilities.

The Chief Compliance Officer will oversee a broad enterprise portfolio spanning Medicare, Medicaid, ACA Marketplace, commercial, privacy, regulatory compliance, Special Investigations Unit (SIU), and corporate compliance functions. The successful candidate will play a critical role in helping HMSA navigate an increasingly complex regulatory environment while supporting the organization's broader strategic priorities, including efforts to more closely align payer and provider operations to improve health outcomes, affordability, and the overall healthcare experience across Hawaii.

Success in this role will require a leader who can seamlessly operate at both the strategic and operational levels, someone with the executive presence to engage confidently with Board members, regulators, and senior executives, while also possessing the pragmatism and judgment to support day-to-day business decisions. For the right leader, this represents an opportunity to influence enterprise governance, strengthen a culture of integrity and accountability, develop high-performing teams, and make a meaningful impact on the healthcare of the people and communities of Hawaii.

The successful candidate must have a Bachelor’s degree, while a Master’s Degree, Law Degree, other advanced degree, or a certificate in healthcare compliance is preferred. In addition, candidates must have an outstanding record of achievement, with at least fifteen (15) years of progressive leadership experience within managed care, healthcare operations, compliance, privacy, regulatory affairs, or related healthcare. Significant health plan experience supporting Medicare, Medicaid, ACA, commercial, or other regulated healthcare programs is required. Experience in working with senior management and board members is strongly preferred.

Organization Overview

Founded in 1938, HMSA (Hawaii Medical Service Association) is Hawaii's largest health insurer and the state's Blue Cross Blue Shield licensee. Headquartered in Honolulu, HMSA serves more than 750,000 members—representing more than half of Hawaii's population—through a broad portfolio of commercial, employer-sponsored, Medicare, and Medicaid health plans. With service centers and operations located across the Hawaiian Islands, HMSA plays a vital role in the state's healthcare ecosystem and maintains longstanding relationships with providers, employers, government agencies, and community organizations throughout Hawaii.

For nearly nine decades, HMSA has been dedicated to improving the lives of its members and the overall health of Hawaii. The organization's purpose, *"Together, we improve the lives of our members and the health of Hawaii,"* guides its efforts to provide affordable, high-quality healthcare coverage, promote wellness, and support healthier communities statewide. HMSA works collaboratively with physicians, hospitals, employers, and other healthcare partners to advance healthcare quality, access, and affordability for the people of Hawaii.

As an independent licensee of the Blue Cross and Blue Shield Association, HMSA combines the resources and capabilities of one of the nation's most recognized healthcare brands with a deep understanding of Hawaii's unique healthcare landscape. Recognized as a trusted leader in the state, HMSA is committed to conducting business with integrity, maintaining strong ethical standards, and delivering meaningful value to its members, customers, and communities.

HMSA's scale, market presence, and community impact make it one of the most influential healthcare organizations in the state. Serving more than 750,000 covered lives, the organization works at the intersection of healthcare financing, care delivery, population health, and public policy, partnering with providers, employers, and government stakeholders to address Hawaii's most pressing healthcare challenges.

This combination of market leadership, mission-driven purpose, community impact, and regulatory complexity creates a unique environment for leaders seeking the opportunity to influence healthcare delivery and improve the health of communities across Hawaii.

Position Summary

The Chief Compliance Officer will provide enterprise leadership and oversight for the organization's compliance, ethics, privacy, regulatory affairs, fraud, waste, and abuse (FWA), and operational compliance programs across all lines of business. Accountable for advancing an integrated governance and compliance framework that supports regulatory adherence, organizational integrity, operational effectiveness, and strategic enterprise objectives within a highly regulated managed care environment.

Reporting Relationships

The Chief Compliance Officer reports administratively to the Chief Legal Officer, Orian Lee, and with functional reporting to the Board's Audit, Compliance, and Risk Committee.

The Successful Chief Compliance Officer will:

- Lead and mature the compliance programs across all lines of business.
- Establish and maintain an effective risk-based compliance governance framework aligned with organizational strategy and regulatory expectations.
- Provide executive leadership regarding emerging regulatory requirements, operational risks, and enterprise governance priorities.
- Oversee investigations, corrective actions, regulatory issue management, and remediation activities.
- Ensure effective oversight of Medicare, Medicaid, ACA Marketplace, commercial, and delegated operational compliance requirements.
- Foster a culture of integrity, accountability, ethical leadership, and proactive risk identification throughout the organization.
- Strengthen enterprise readiness and responsiveness for regulatory audits, examinations, and external oversight activities.
- Build collaborative partnerships across executive leadership, operational teams, legal, audit, clinical, technology, and business functions to support compliant operational execution and strategic transformation.
- Serve as the primary compliance advisor to the Board's Audit, Compliance & Risk Committee, providing regular updates on program effectiveness, emerging risks, and significant compliance matters.
- Lead the organization's privacy strategy and HIPAA compliance program, strengthening enterprise privacy governance and oversight.
- Oversee the Special Investigations Unit (SIU) and fraud, waste, and abuse (FWA) program to ensure effective prevention, detection, investigation, and reporting activities.
- Establish enterprise compliance metrics, dashboards, and reporting processes that provide meaningful insight into organizational risk and program performance.
- Develop and mentor a high-performing compliance leadership team, fostering accountability, succession planning, and professional growth.
- Advise leadership on the compliance implications of new products, partnerships, strategic initiatives, and organizational change.

Goals and Objectives

The following goals and objectives have been identified as priorities for this position:

- ***Advance the maturity and effectiveness of HMSA's enterprise compliance program*** by aligning compliance, privacy, regulatory affairs, and FWA oversight with organizational priorities and evolving regulatory requirements.
- ***Strengthen enterprise privacy governance by enhancing HIPAA oversight***, reducing preventable privacy incidents, and building greater organizational accountability for data protection.
- ***Serve as a trusted advisor to executive leadership and the Board*** by proactively identifying emerging regulatory risks, providing strategic guidance, and supporting informed decision-making.
- ***Enhance regulatory readiness and compliance performance*** by strengthening monitoring, risk assessment, corrective action, and examination preparedness activities across the organization.
- ***Foster a culture of integrity, accountability, and ethical leadership*** that positions compliance as a strategic business partner and supports responsible organizational growth.
- ***Develop and mentor a high-performing compliance organization*** while building leadership capabilities, succession strength, and long-term organizational effectiveness.
- ***Maintain HMSA's strong regulatory standing*** by minimizing compliance risk exposure, reducing repeat audit findings, and avoiding significant regulatory sanctions, fines, or contract risks.

Candidate Qualifications

Education/Certification

- Bachelor's degree required; advanced degree (e.g., JD, MHA, MPH, MBA, or related field) or a certificate in healthcare compliance is preferred.

Knowledge and Work Experience

- Minimum 15 years of progressive leadership experience within managed care, healthcare operations, compliance, privacy, regulatory affairs, or related healthcare.
- Significant health plan experience supporting Medicare, Medicaid, ACA, commercial, or other regulated healthcare programs.
- Proven ability to design, implement, and mature enterprise compliance and governance programs that improve regulatory performance, organizational accountability, and operational effectiveness.
- Demonstrated success collaborating across executive leadership and cross-functional teams to develop and advance enterprise compliance strategies aligned with organizational objectives.
- Experience leading regulatory audits, investigations, corrective actions, and enterprise risk mitigation activities within highly regulated healthcare environments.
- Track record of driving measurable improvements in healthcare compliance outcomes, governance maturity, operational risk reduction, and regulatory readiness.
- Deep understanding of managed care operations and healthcare compliance within Medicare, Medicaid, ACA, and commercial health plan environments.
- Strong knowledge of federal and state healthcare regulatory requirements.
- Understanding of accreditation, contractual, and regulatory governance requirements impacting health plans and healthcare organizations.
- Knowledge of enterprise risk management, operational governance, and compliance program effectiveness principles.
- Understanding of healthcare operational workflows and the intersection between regulatory requirements, operational execution, and organizational strategy.

Leadership Skills and Competencies

- Strong industry subject matter expertise and knowledge of all relevant laws, regulations, contractual requirements, industry standards and best practices required.
- Strong acumen and understanding of healthcare, health insurance, and managed health care industries and organizations required.
- Excellent oral, listening, and written communication skills.
- Strong project management skills and experience required, particularly as it relates to managing and leading across large, complex, and matrixed organizations.

- Must have strong analytical and organizational skills, as well as problem-solving capabilities, to ensure that business plans and strategies do not subject the organization to legal, regulatory, or contractual violations, and/or undue risk or exposure.
- Strong partnership-, relationship-, consensus- and coalition-building skills required. Strong emotional intelligence and self-awareness required. Strong executive polish and presence required. The role requires a leader who strikes the optimal balance between strategically navigating the compliance requirements and business needs in a manner that is nuanced and mutually reinforcing.
- Strong and reliable judgment and discretion required. Strong ability to independently and self- sufficiently identify, navigate, and successfully resolve various compliance, risk management, and regulatory issues.
- Strong ethical compass and integrity capital required.

The Community

Honolulu, Hawaii

Located on the island of O‘ahu, Honolulu is the capital and largest city in Hawaii, serving as the state's political, economic, and cultural center. Home to approximately one million residents throughout the broader City and County of Honolulu, the community represents nearly 70% of Hawaii's population and offers a unique blend of urban amenities, natural beauty, and diverse cultural influences. As the gateway to the Hawaiian Islands and a major hub in the Pacific, Honolulu is recognized for its vibrant economy, world-class beaches, outdoor recreation, and exceptional quality of life.

Honolulu's economy is driven by a diverse mix of industries, including healthcare, tourism, government, defense, financial services, and professional services. The city serves as the headquarters for many of Hawaii's leading organizations and maintains strong connections across the Asia-Pacific region. Major employers include healthcare organizations, government agencies, the military, and financial and insurance companies, creating a dynamic business environment while preserving the close-knit community character that distinguishes Hawaii from mainland markets.

Residents enjoy a year-round tropical climate, access to world-renowned beaches, hiking trails, water sports, and outdoor activities, along with a rich blend of Native Hawaiian, Asian, and Western cultural traditions. Honolulu consistently attracts individuals seeking an active lifestyle, a strong sense of community, and a connection to the natural environment. The region is known for its excellent recreational opportunities, vibrant arts and cultural scene, and deep commitment to preserving the unique heritage and traditions of the Hawaiian Islands.

For executives considering relocation, Honolulu offers the opportunity to live and work in one of the most distinctive settings in the United States. Many professionals are drawn to Hawaii for its unique lifestyle, strong community values, natural beauty, and the opportunity to make a meaningful impact in a state where healthcare organizations play a particularly important role in the well-being of local communities.

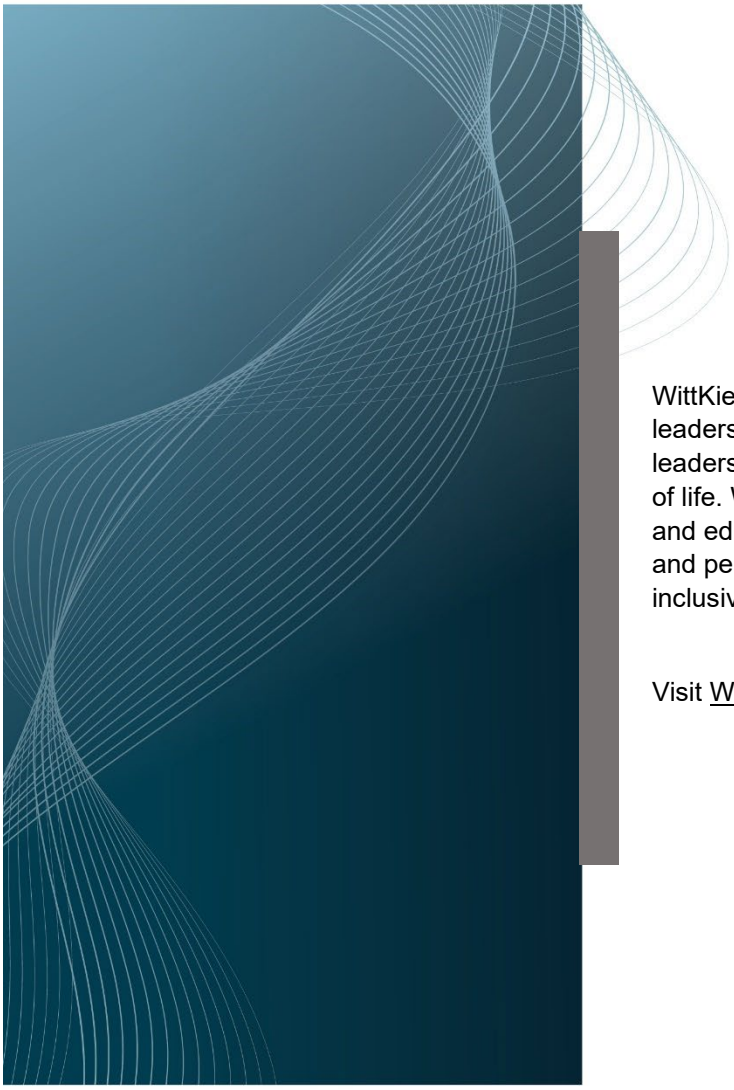
Procedure for Candidacy

Please direct all applications, nominations, and inquiries to the WittKieffer consultants assisting HMSA with this recruitment, preferably via e-mail, to: **tkaufmann@wittkieffer.com**

Werner Boel, LL.M. Senior Partner and Practice Leader, Legal and Compliance 678-302-1559 wernerb@wittkieffer.com	**Taeler Kaufmann** Senior Associate 630-575-6157 tkaufmann@wittkieffer.com

HMSA complies with applicable federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (consistent with the scope of sex discrimination described at 45 CFR § 92.101(a)(2)). HMSA does not exclude people or treat them less favorable because of race, color, national origin, age, disability, or sex.

The minimum salary for this position is $200,000 and the maximum is $250,000, based on qualifications and years of experience. In addition to salary, the Chief Compliance Officer participates in HMSA's performance-based incentive program. The selected individual will also receive a comprehensive benefits package.



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