



Re-engineering Oncology Navigation: Driving Quality and Demonstrating ROI

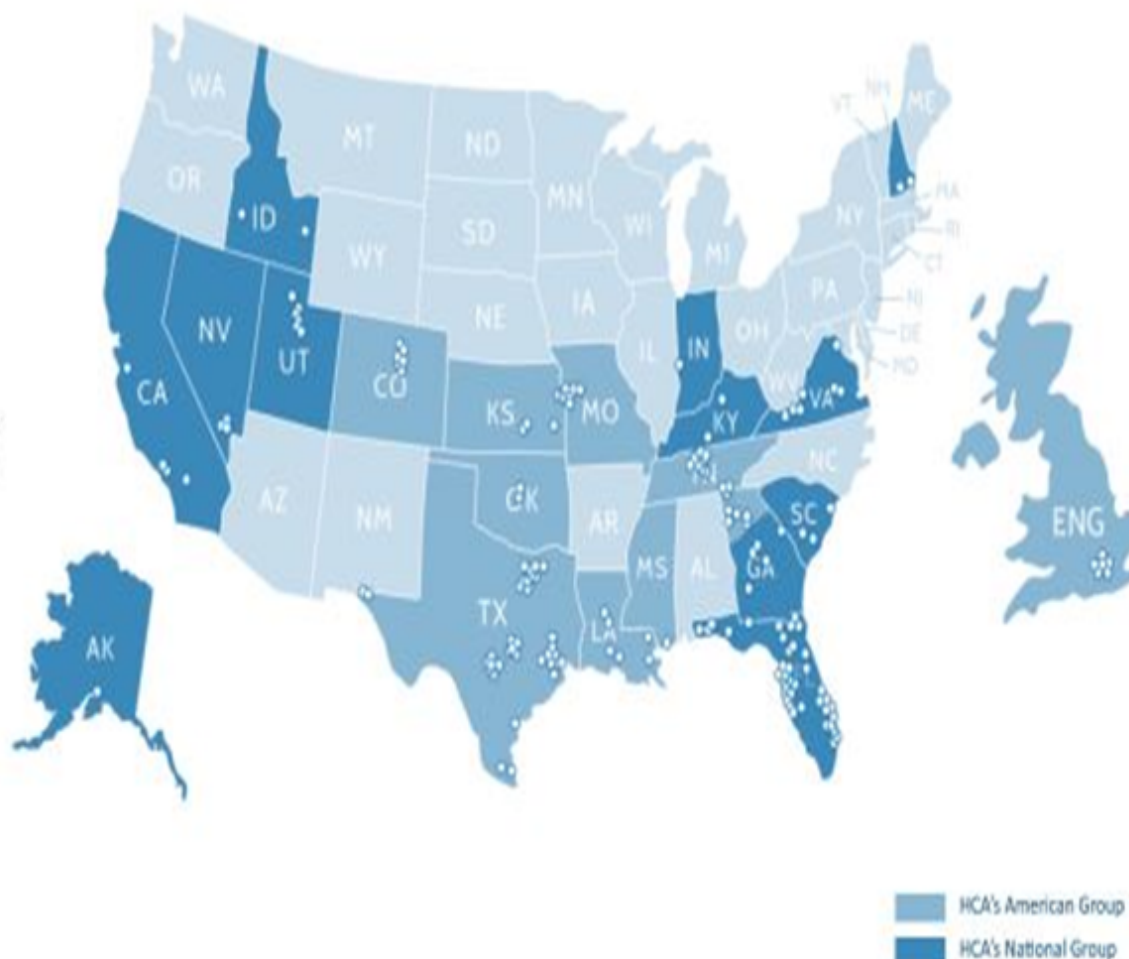
Crystal Dugger, MBA, RN

Asst. Vice President of Clinical Operations, Sarah Cannon / HCA

HCA FOOTPRINT

- 27+ million patient contacts annually
- Approximately 5% of major hospital services in U.S.:

Admissions	1.9 million
Clinic Visits	8.0 million
Deliveries	0.2 million
Total Surgeries	1.5 million
ER Visits	8.4 million
- 174 Hospitals, 119 Freestanding Surgery Centers
- Operating in some of the fastest growing metropolitan communities providing approximately 25% of hospital services
- 240,000+ employees, including 80,000 nurses and 47,000 allied health professionals
- 37,000 affiliated physicians, including 4,100 employed physicians and practitioners



SARAH CANNON SERVICE LINE INITIATIVE

- **Sarah Cannon formed a global oncology service line to:**
 - Solidify and expand HCA's position in cancer care – a very significant healthcare spend
 - Ensure we deliver strong growth in the future against high quality competitor offerings

- **Sarah Cannon partnered with each market to:**
 - Gather input and perspective on the local cancer care market and understand work to-date
 - Develop and refine an integrated oncology service line model
 - Mobilize around specific growth opportunities, including securing the necessary resources
 - Ensure delivery of best-in-class offerings for our patients, referrers, and physicians as well as a financial return to our company

SARAH CANNON'S MISSION

People who live with cancer – those who work to prevent it, fight it, and survive it – are at the heart of every decision we make. Bringing the most innovative medical minds together with the most passionate caregivers in their communities, we are transforming care and personalizing treatment.

Through clinical excellence and cutting edge research, Sarah Cannon is redefining cancer care around the world.

SARAH CANNON – LEVERAGING SCOPE/SCALE/SCIENCE



One of the world's
largest
drug development
/phase 1 programs

120,000+
Newly diagnosed cancer
patients per year within the system



200+
oncology-trained
nurse navigators
Largest
cancer navigation
program in the US

Utilizes the
largest
patient access/ER system
to diagnose cancer at
earlier stages
(8.4 million visits a year)



Together, we provide
**state-of-the-art cancer care close to
home** for hundreds of thousands of
patients, a **number unmatched by
any single cancer center.**

1,000+
annual transplants

Largest
blood cancer
transplant
network



SARAH CANNON MODEL – A WORLD CLASS CANCER ORGANIZATION

RESEARCH

Broad Physician Base | Scientific Expertise



NAVIGATION AND THE HCA MODEL

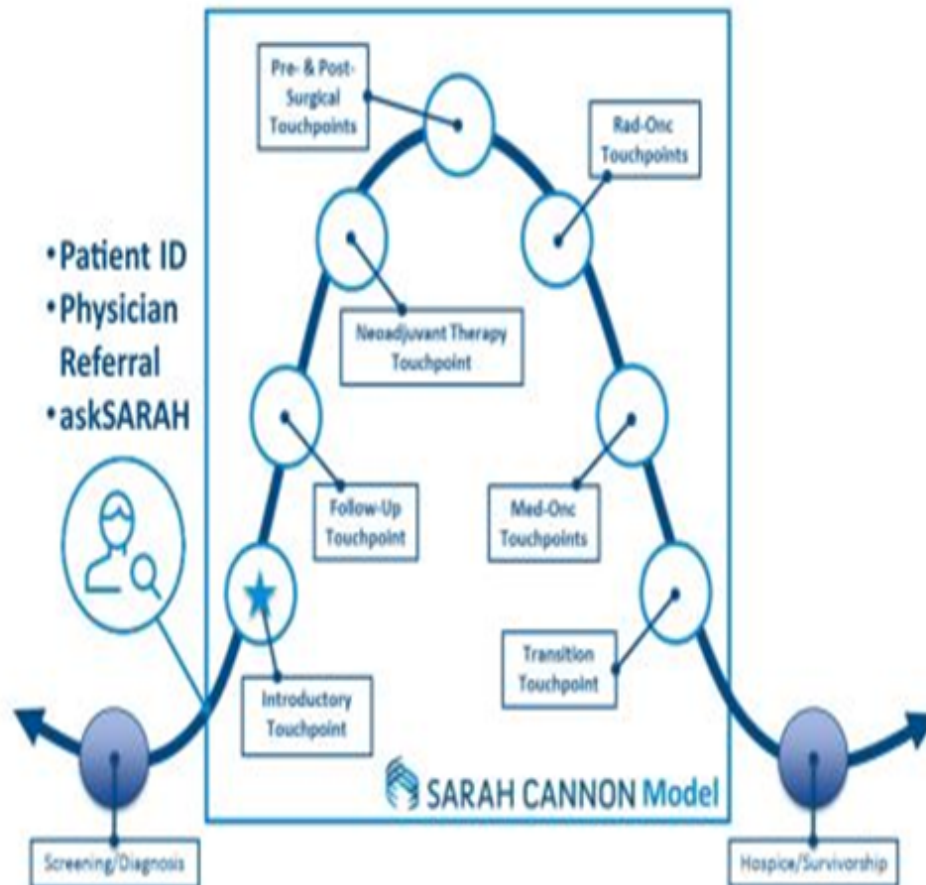
- ✓ Navigation enhances **PATIENT** outcomes and experience
- ✓ Navigation partners with **PHYSICIANS** to get the best outcomes
- ✓ Navigation uses the best of **BUSINESS** to improve performance

Navigation exemplifies the HCA model of being the provider system of choice



NAVIGATION WORKFLOW & MISSION

Navigation **Begins** at Cancer Diagnosis and
Ends at the End of Active Treatment



MISSION: Sarah Cannon Navigators **care for cancer patients** by ensuring compliance to the treatment plan through removal of barriers to care

- 1 Develop** trust with the physicians and patients through multidisciplinary care coordination
- 2 Assist** in educating patients about their cancer so they can make informed decisions about their care
- 3 Provide** emotional support to the patient, family and caregivers
- 4 Improve** access and utilization of HCA and Sarah Cannon partnered resources
- 5 Advocate** for the patient's voice in development of the treatment plan

NAVIGATION STATISTICS (2014-PRESENT)

85,000+

cancer patients navigated by...

200

navigators spanning...


147


hospitals

6.9%

navigator turnover (rolling 12 month)

 HCA Hospital Locations (178 hospitals in 20 states)

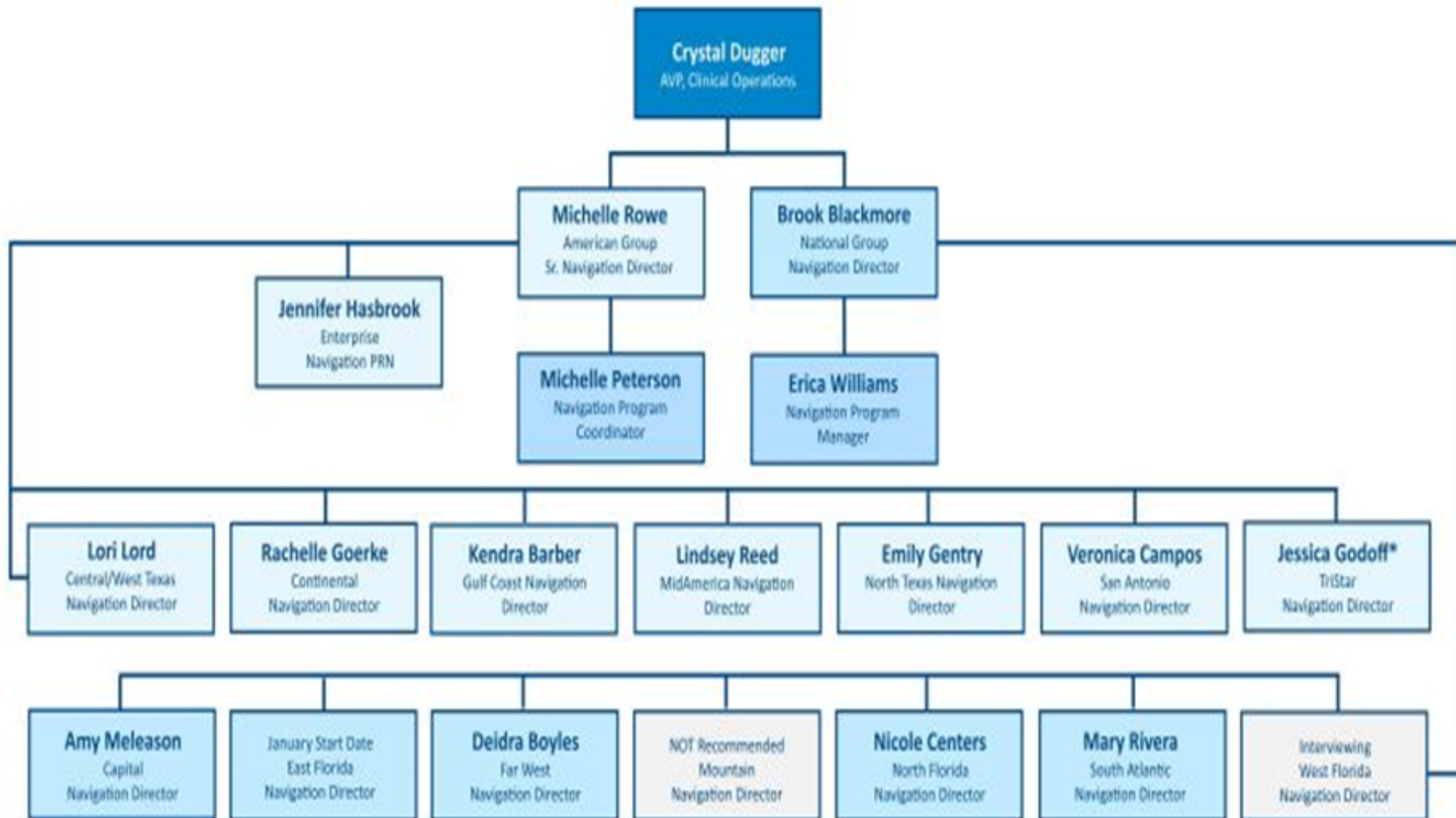
 Sarah Cannon "Signature" Navigation Division
Signature: Mature market with Director, on SC Model, Technology, and Scorecard

 Sarah Cannon "Emerging" Navigation Division
Emerging: Director in place less than 6 months

 Sarah Cannon "Upcoming" Navigation Division
Upcoming: Director approved but not in place

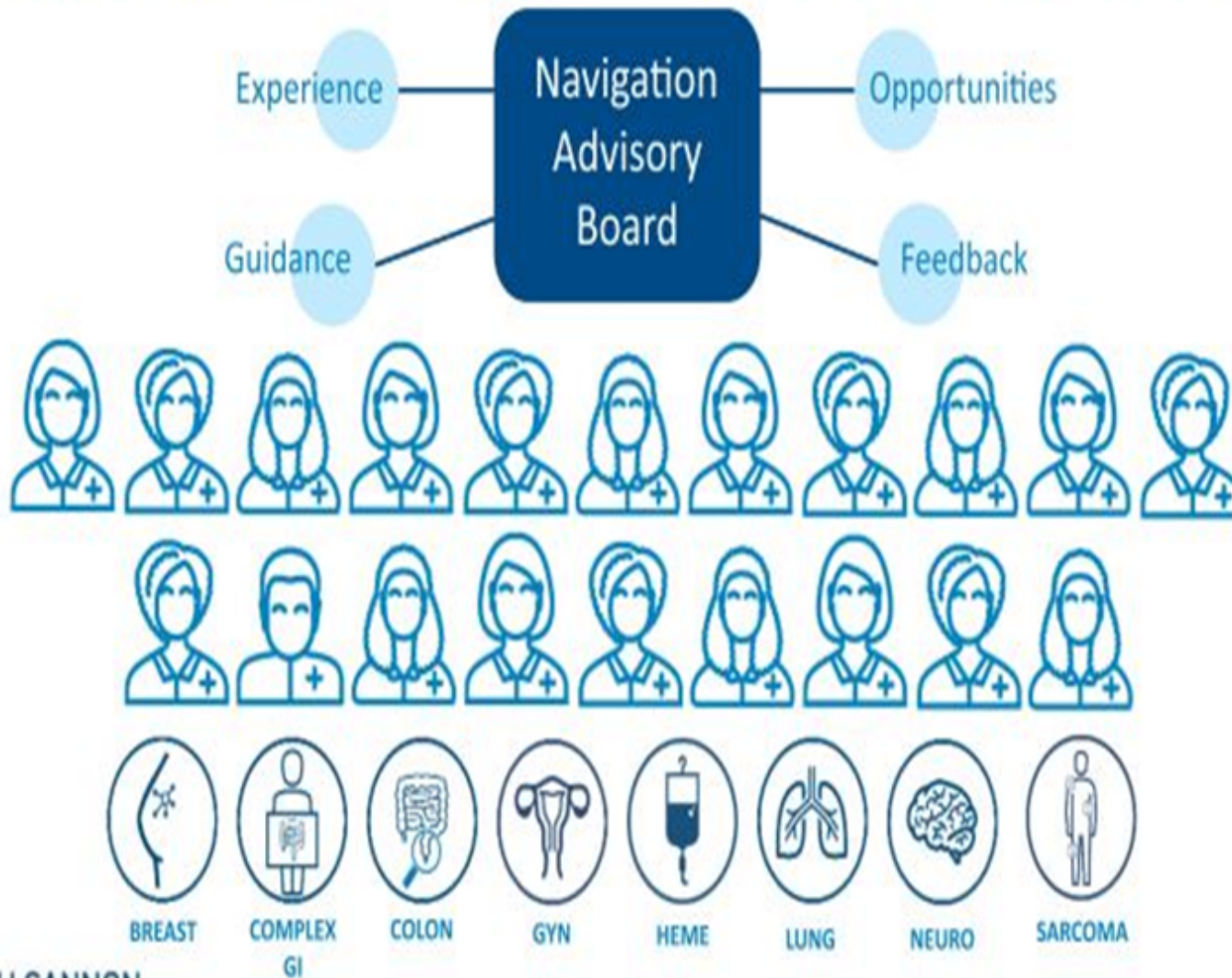


SARAH CANNON DIVISION NAVIGATION STRUCTURE



NAVIGATION ADVISORY BOARD

Led by 20 Nurse Navigators, from all 11 Managed Markets, representing 7 disease sites.





GROWTH



SERVICE



QUALITY

Scope of Practice

Navigation Patient Identification Triggers
Tumor Site Specific Care Pathways
Navigation Process and Workflow
Navigation Governance Structure
Navigation Policy and Procedure

Training & Education

Robust Standardized Navigation Orientation
Programmatic and Software Training
Diverse Cancer Community Podcasts
Interactive All Hands Meetings
Clinical Education Series

Monthly Evaluation

Navigation Scorecard
Patient Experience Rounding
Programmatic Action Planning
Pathway Adherence Scorecard
Productivity & Patient Opportunity Review

Technology

iNavigate Software
Patient ID Technology
NavQue Worklist Tool
Cancer Data Warehouse
AdHoc Reporting Software



BRIDGING THE GAP IN CARE COORDINATION: SARAH CANNON NAVIGATION

2014

Standardization
Success Metrics
Infrastructure

2019

Patient Engagement
Efficiency
Growth
Payor Strategy



2014

2015

2016

2017

2018

2019

Breast, Lung, Complex GI (50% Volume)

+ Virtual Colon, GYN, Neuro, Sarcoma

Standardize
Mission, Vision,
JD, Training, and
Success Metrics

Standardize
Technology:
iNavigate

Implement
Navigation
Director
Leadership

Standardize and
Develop the
Scorecard

Improve Growth
Efficiency and
Analytics:
PatientID/
NavQue
AdHoc/askSARAH

Improve Efficiency,
Patient Engagement &
Growth
Personalized
Navigation, ASD,
Patient Advisory Group

TECHNOLOGY



The collaboration between **administration, clinical care, and technology** has been instrumental to the success of the Sarah Cannon Navigation Program

iNavigate:

- Proprietary navigation database with 5 modules
 - Breast
 - Lung
 - Complex GI
 - General
 - Hematology

AdHoc:

- Reporting tool utilized by Navigation Directors to give the navigation program the ability to analyze all data entered into iNavigate to improve quality, processes, and efficiencies

Patient ID and NavQue:

- Patient Identification tool utilizing natural language processing to identify positive cancer patients from Meditech pathology reports and filtering them to the correct cancer registrar and nurse navigator

SARAH CANNON NAVIGATION PROGRAM LEADERSHIP



Accountability

- Corporate Navigation Director Supports National Group Programs



Process

- Cancer Physician Specialists
- Division and Facility Leadership
- Physician Relations



Evaluation

- National Group Scorecard
- Standardized Reports
- Action Plans and Toolkits



Scorecard Metric	Benchmark	Facility A	Facility B	Facility C
Entered Patients – YTD Var% Over PY	≥5%	✓ 19%	✓ 7%	✗ 4%
Timeliness - Breast	<30 days	✗ 31	✓ 29	✓ 27
Timeliness - Lung	<30 days	✓ 14	✗ 31	✓ 21
Timeliness - GI	<30 days	✓ 20	✗ 28	✗ 31
Patient Retention	85%	✓ 93%	✓ 90%	✗ 84%
Patient Satisfaction	75%	✓ 76%	✓ 84%	✓ 93%
Productivity	100%	✗ 98%	✓ 110%	✗ 96%

PROBLEM STATEMENT

Sarah Cannon Oncology navigators “stalked” procedural areas in order to identify positive cancer patients.

Operationally, the program was unaware in real time how many patients were diagnosed daily in our hospitals and outpatient centers.

Cancer Registrars had to read ALL pathology reports in order to identify the 120,000 positive cancer patients across the organization. (~1M reports read per year)

10% Direct Patient Interaction

20% Physician Relationships

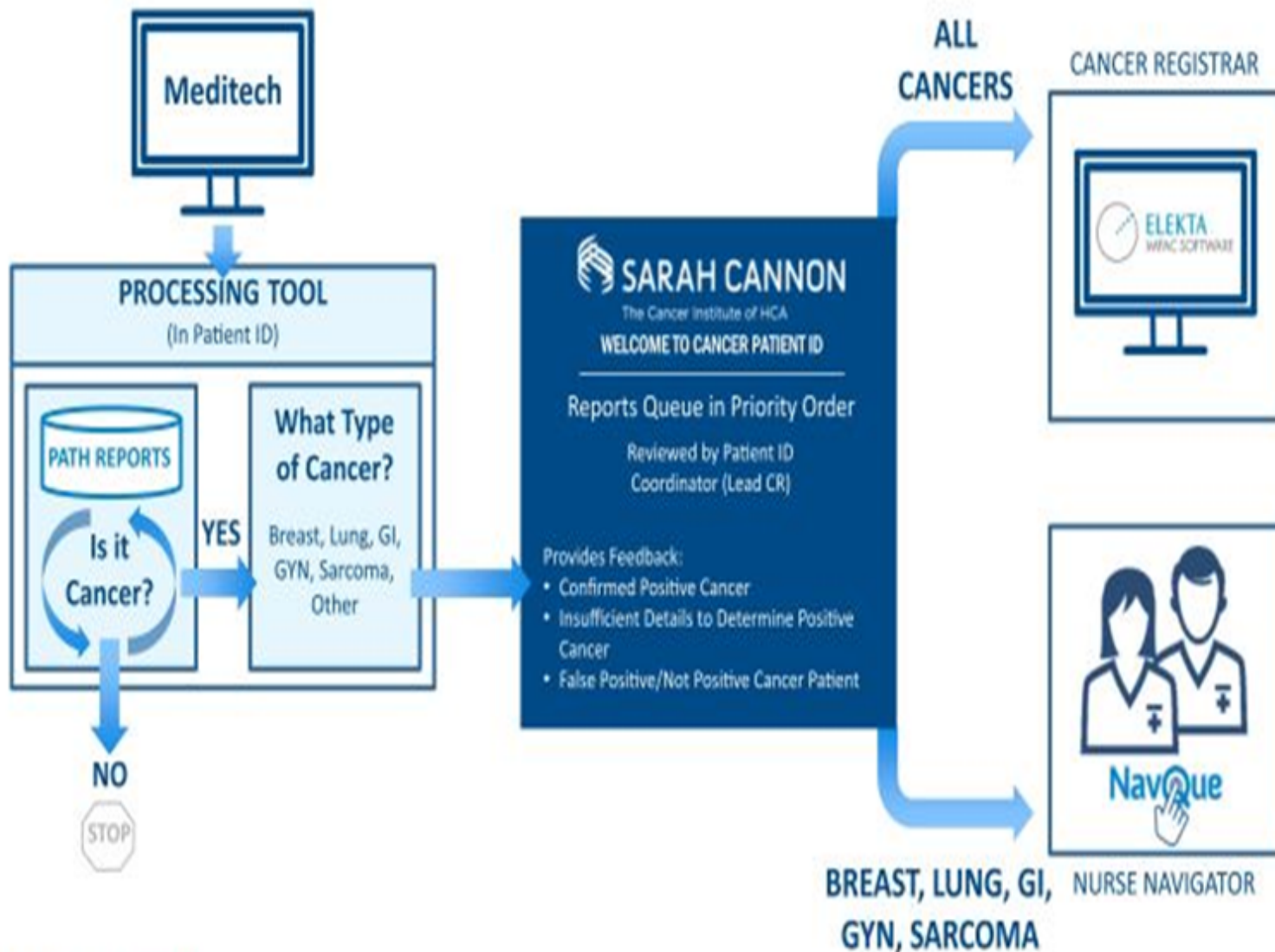
30% Patient Identification

40% Data Entry

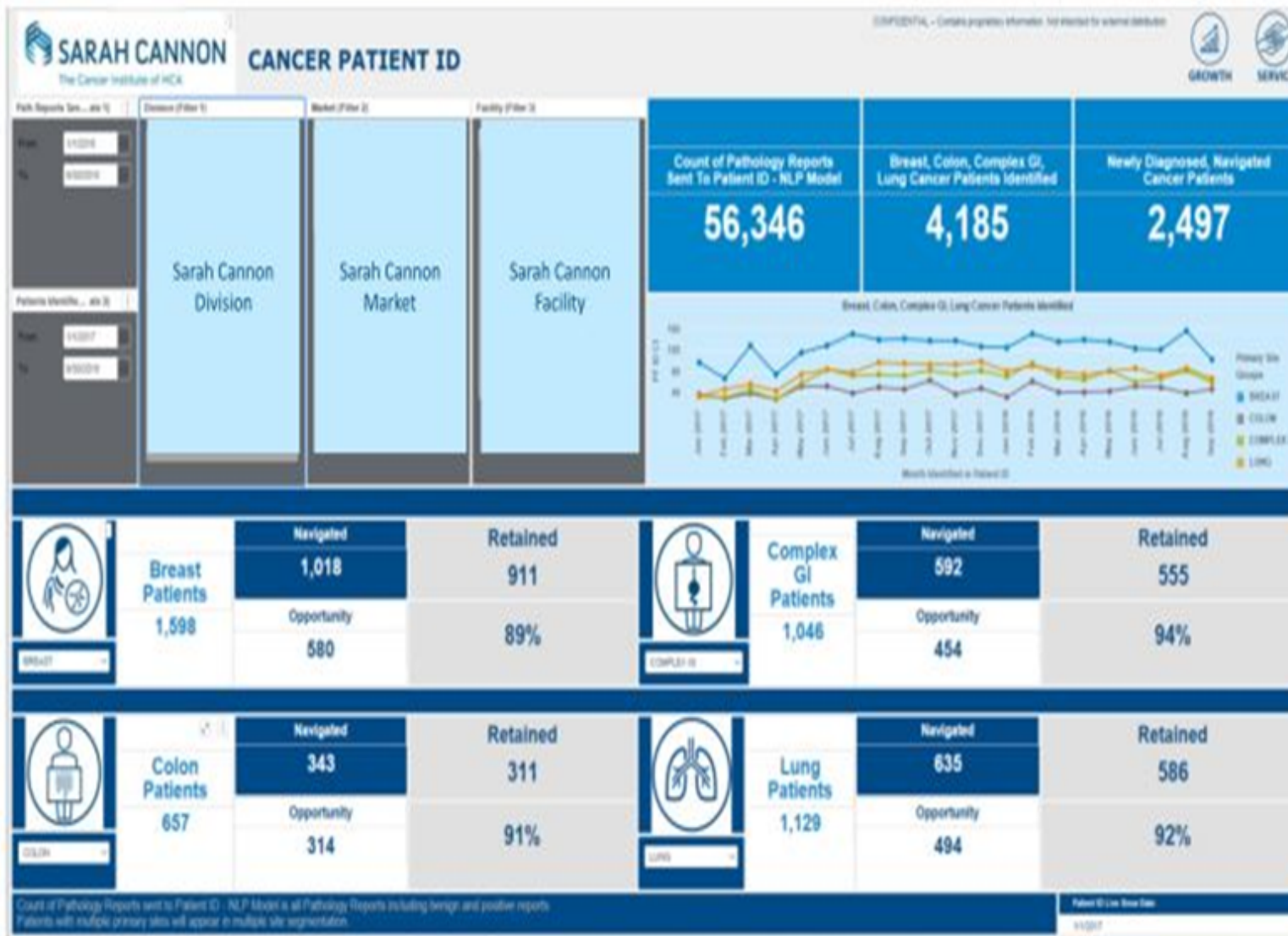
Pre-Patient ID



PATIENT ID PROCESS OVERVIEW



PATIENT ID REPORTING EXAMPLE



NAVIGATION OUTCOMES

Patient ID Has Enabled Navigators to Spend More Time With Physicians and Patients



<7% Navigator turnover

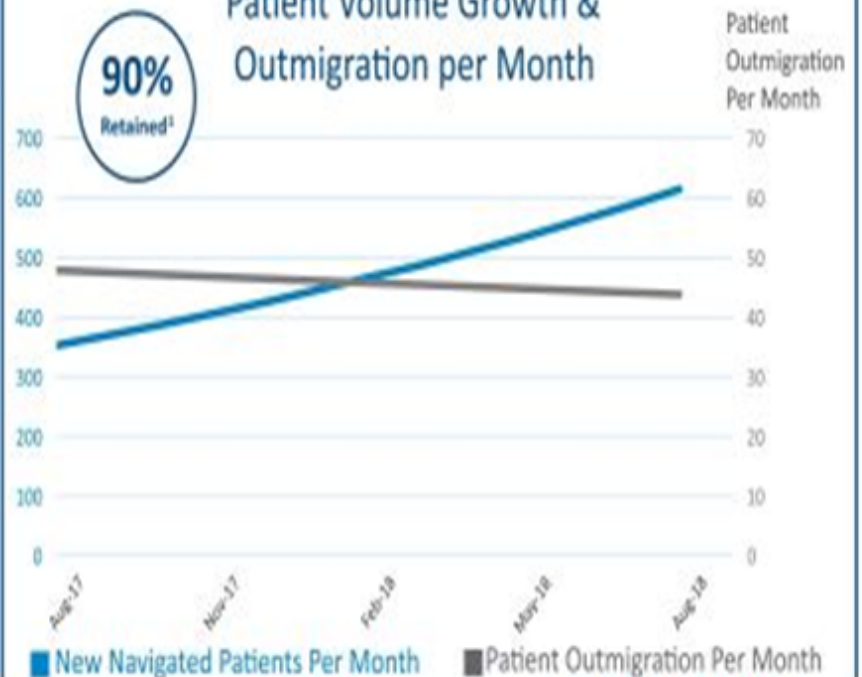
Pre-Patient ID

30% Physician/Patient Relations

Post-Patient ID

65% Physician/Patient Relations

Patient Volume Growth & Outmigration per Month



SERVICE

+35% Increase in navigator time spent with patients and physicians

GROWTH

+59% Increase in navigated patients growth YTD 2018 vs 2017¹

SERVICE

75% Maintained Press Ganey top box patient satisfaction for overall navigation experience after introducing virtual navigation

QUALITY

≤30 Days From first treatment to diagnosis; Maintained timeliness of care¹

PRODUCTIVITY

96% Met productivity target with an increased benchmark from 175 to 200/year/navigator¹

SURGEON ENGAGEMENT, LOYALTY AND PHYSICIAN PERCEPTION

Surgeon Loyalty¹

Surgeon Market Share to HCA Facilities after Implementation of Navigation



Physician Perception²

Question	Sarah Cannon Divisions				Non-Sarah Cannon Divisions			
	N	%	YOY	Rank	N	%	YOY	Rank
Quality of Care	194	45%	-0.8	69	254	34%	5.1	41
Place to Practice	194	47%	3	73	254	36%	6.8	49
Administration	190	34%	-4.6	74	258	31%	3.1	65
Surgical Services	193	34%	8.4	65	255	28%	3.3	41
Nursing	190	45%	1.1	79	255	26%	1.3	38
Patient Safety	191	41%	-3	62	254	37%	7.5	50

Above the 50th percentile rank and improved YoY
Above the 50th percentile rank but dropped YoY
Below the 50th percentile rank

13.6% or **1,360** basis points
Surgeon Market Share Increase

Sarah Cannon divisions unanimously rank above the 50th percentile

Surgeon market share and physician perception are likely attributed to all aspects of cancer programmatic development and appears to have a direct correlation for surgeons that are loyal to navigation.³

¹ Growth Link and iNavigate; ² Professional Research Center HCA study;

³ Loyal to navigation = referring to navigation for 20+ patients per year

⁴ Last perception study actually performed in 2016