AdventHealth Provider Network Annual Value Report 2024



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Year-End Review

From the Chief Population Health Officer

The health care landscape is evolving, along with consumers' needs, creating opportunities for us to meet patients where they are. We are developing innovative ways to deliver whole-person care that is easy to access, fits seamlessly into consumers' lives and offers dynamic ways to receive care. Our dedication to advancing patient-centered care remains central to everything we do as we expand our networks and services across the care continuum.

As part of that commitment, AdventHealth created a new division called the Primary Health Division (PHD). The services under PHD work together to provide convenient, timely access to high-quality integrated care. AdventHealth Provider Network (AHPN), our Clinically Integrated Network (CIN), is at the core of this meaningful work. The network is comprised of ancillary facilities as well as over six thousand employed and independent primary care and specialty physicians. Our network physicians are focused on following clinical best practices to elevate the quality of care they deliver and embedding value-based strategies within their practices to reduce unnecessary health care costs.

At the start of 2024, AHPN was operating as two separate CINs. To broaden our reach and leverage the size of a large unified network, we consolidated our regional CINs and merged AHPN. This initiative created additional opportunities to engage physicians, develop a streamlined set of quality metrics across all covered lives and enhance programs available to support physician practices in managing patient outcomes. The changes have led to improved patient care and experience, reduced operating costs by over 25%, and increased shared savings and incentive payments for our physician partners.

I want to thank our network team members and partners for their unwavering commitment in 2024. I am grateful to our physicians, administrative team members and leaders who leaned into our priorities to achieve the successes highlighted in this report. I look forward to further collaboration as we continue to build a high-performing statewide network to serve our communities for years to come.

Sincerely,

Our network physicians are focused

on following clinical best practices to

their practices to reduce unnecessary

health care costs.

elevate the quality of care they deliver and

embedding value-based strategies within

Jennifer Jackson
Senior Vice President
Chief Population Health Officer



JENNIFER JACKSON
Senior Vice President
Chief Population Health Officer

Primary Health Division (PHD) Services

- Primary Care Network (PCN)
- Primary Care+
- Well 65+
- Centra Care Urgent Care
- Population Health Services Organization (PHSO)
- Home-Based Services
- Hospice

About AdventHealth

At AdventHealth, Extending the Healing Ministry of Christ is our mission.

Our unique brand of health care is whole-person care — our promise to heal and restore the body, mind and spirit.



More than 100,000 skilled and compassionate caregivers in physician practices, hospitals, outpatient clinics, skilled nursing facilities, home health agencies and hospice centers provide individualized, wholistic care.

Our Christian mission, shared vision, common values and focus on wholeperson health is our commitment to making communities healthier with a unified, consumer-focused system.



Our Mission

Extending the Healing Ministry of Christ

Our Vision

Driven by our mission and commitment to provide wholistic care to all people, AdventHealth will be known for our preeminent, faith-based, consumer-focused clinical care. This reputation — which will make us a trusted household brand by 2030 — comes from the realization of our strategic aspirations and will promote our continuing efforts to help those we serve feel whole.

Our Values

Our values align us around a common set of beliefs and standards that both inform our work and guide our behavior.

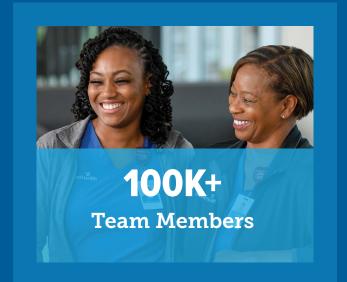
Our Service Standards

Our service standards define how we interact with every consumer and every team member who walks through our doors. Those we serve will come to know our mission, vision and values through their direct experience with us. That experience is delivered through our service standards.



AdventHealth Footprint



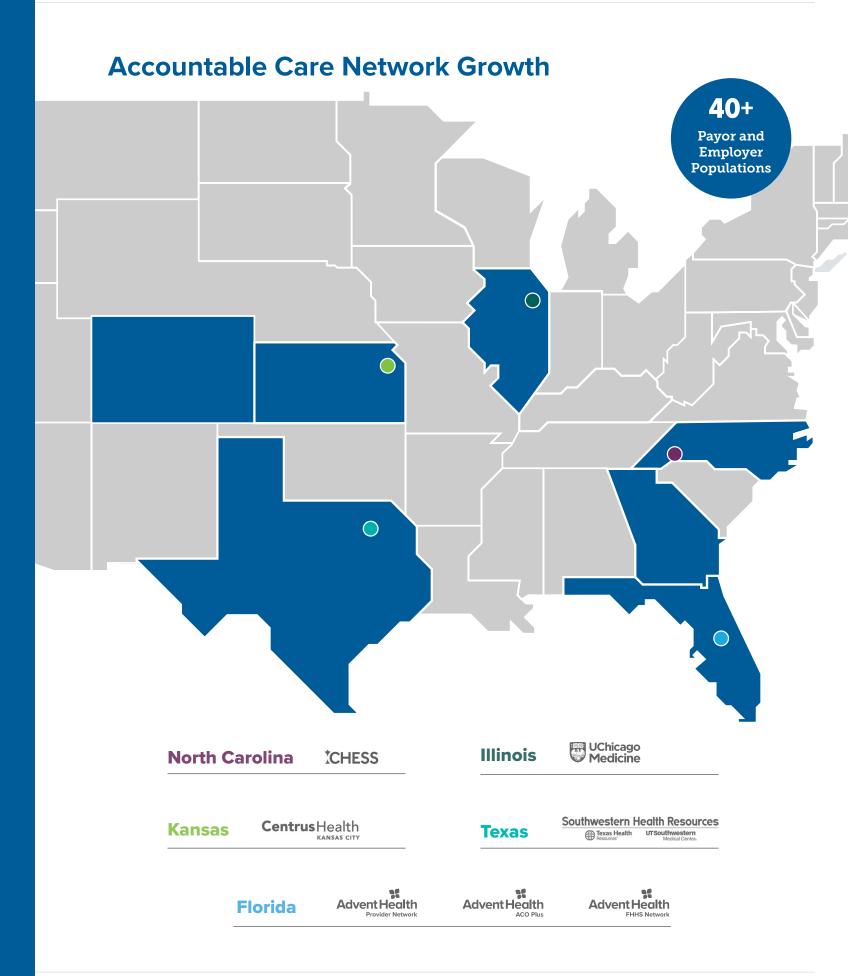


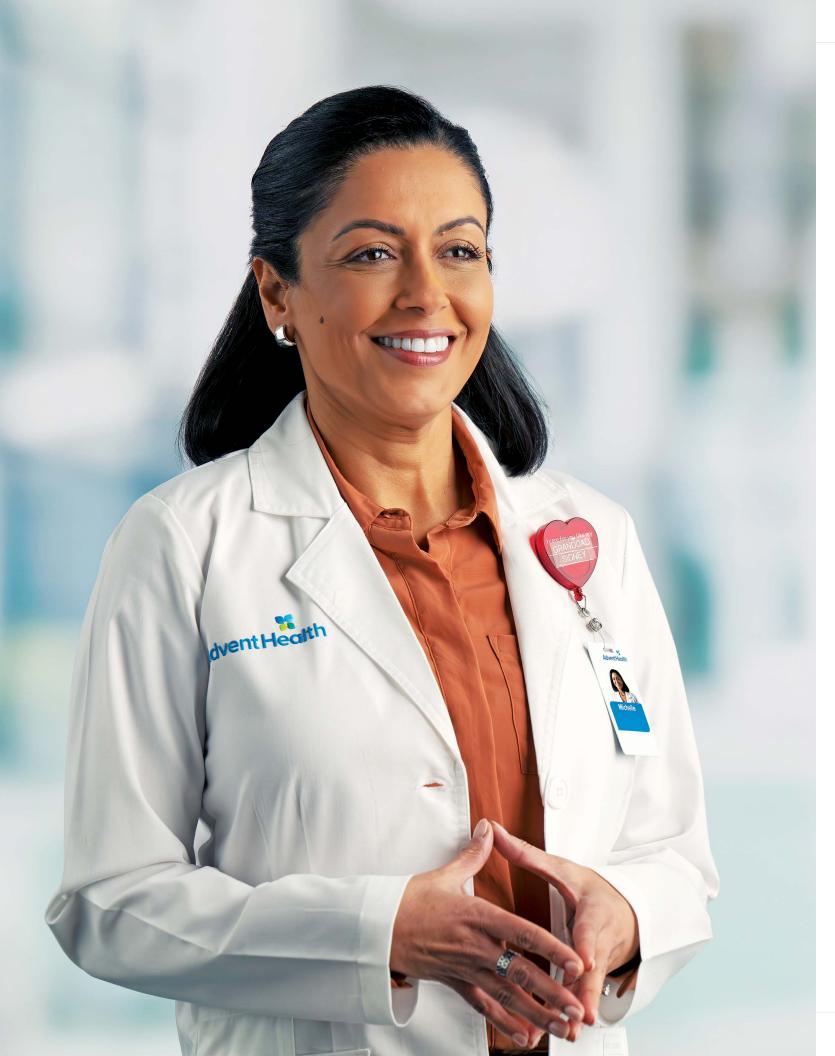












AdventHealth System Accolades



Great Place to Work® Certified 2024-2025

Great Place To Work® Certification is a highly coveted achievement that requires consistent and intentional dedication to the overall employee experience. The certification provides instant recognition of a company as having a great workplace environment for its employees. When it comes to company culture, 79% of team members say AdventHealth is a great place to work compared to 57% of employees at a typical U.S.-based company, according to Great Place To Work®.

Reputation.com #2 Top Healthcare Provider

The 2024 Healthcare Reputation Report analyzed millions of pieces of reputation performance data from hundreds of different sources to understand how leading U.S. acute care hospitals are delivering on their individual brand promises. AdventHealth was ranked #2 nationwide.



Forbes' Best-in-State Employers

We're honored to be recognized by our team members. Forbes partnered with market research firm Statista to survey more than 160,000 employees working for companies with at least 500 people within the United States. Responses were tallied and incorporated into a scoring system, along with survey data from the past three years.



America's Greatest Workplaces for Diversity

Newsweek and Plant-A Insights Group have recognized AdventHealth as one of America's Greatest Workplaces for Diversity 2024. The recognition is based on methodology that included a survey of over 220,000 individuals and included representation from employees of over 1.5 million companies in America. A promise to foster an inclusive environment is one of AdventHealth's commitments to team members as part of our team member pledge, which promises to care for them mentally, physically and spiritually.

Becker's Hospital Review 150 Top Places to Work in Healthcare

Becker's highlights hospitals, health systems and health care companies that prioritize workplace excellence and the happiness, satisfaction, well-being and fulfillment of their employees. AdventHealth was especially recognized for our Diversity Council, our Women's Leadership Forum, our Leadership Institute, and other growth initiatives available to our teams.



Honored To Be an Emerald Award Winner

The Leapfrog Group has exclusively recognized AdventHealth for remarkable achievements and leadership in patient safety, quality and transparency by a health care system, including maintaining a culture of excellence throughout all levels of the organization. Delivering consistent, high-quality, whole-person care is our priority, and we're honored to be the first health care system to earn this award.

Recognitions Across Florida

Our system is nationally recognized for quality and safety. In Florida, our teams have earned some of the most prestigious awards in health care, including:



The Leapfrog Group "A" Hospital Safety Grades

All of AdventHealth's eligible hospital facilities in Orange, Osceola, Seminole and Volusia counties earned an "A" Hospital Safety Grade in the latest ratings from The Leapfrog Group, a national nonprofit watchdog that sets standards for excellence in patient care.

Leapfrog assigns an "A," "B," "C," "D" or "F" grade to general hospitals across the country based on over 30 national performance measures reflecting errors, accidents, injuries and infections, as well as the systems hospitals have in place to prevent harm.

The hospitals include AdventHealth Altamonte Springs, AdventHealth Apopka, AdventHealth Celebration, AdventHealth Daytona Beach, AdventHealth DeLand, AdventHealth East Orlando, AdventHealth Fish Memorial, AdventHealth Kissimmee, AdventHealth New Smyrna Beach, AdventHealth Orlando and AdventHealth Winter Park. West Florida hospitals include AdventHealth Carrollwood, AdventHealth Dade City, AdventHealth Ocala, AdventHealth Wesley Chapel, and AdventHealth Zephyrhills.



Healthgrades' America's Best Hospitals

With a patient experience rating 5% higher than the national average, AdventHealth Orlando ranked #1 in Orlando for 2024. Healthgrades evaluates hospital performance using objective quality measures including clinical outcomes and patient safety, as well as patient experience.



America's Best-in-State Hospitals

AdventHealth Orlando was named a Best-in-State Hospital by Newsweek in 2024. America's Best-in-State Hospitals ranking is compiled using hospital quality metrics sourced from the Centers for Medicare & Medicaid Services, the AHA Annual Survey of Hospitals Database, patient experience surveys (HCAHPS), and a voluntary survey on Patient-Reported Outcome Measures.

#1 Hospital in GREATER ORLANDO

AdventHealth Orlando has been recognized as the #1 hospital in Greater Orlando for 14 years in a row by U.S. News & World Report. The hospital was also ranked among the top 50 in the nation in four clinical specialties: diabetes and endocrinology; neurology and neurosurgery; obstetrics and gynecology; and ear, nose and throat, and was rated as high performing in seven additional specialties: cancer; cardiology, heart and vascular surgery; gastroenterology and GI surgery; geriatrics; orthopedics; pulmonology and lung surgery; and urology.

The recognition applies to all of AdventHealth's Central Florida Division hospitals, which include AdventHealth Altamonte Springs, AdventHealth Apopka, AdventHealth Celebration, AdventHealth East Orlando, AdventHealth Kissimmee, AdventHealth Winter Garden, and AdventHealth Winter Park.















AdventHealth
Daytona Beach
is recognized by
U.S. News & World
Report as one of
America's best
hospitals in eight
types of care.



AdventHealth Tampa is ranked #3 in Tampa-St. Petersburg and high-performing in 9 procedures/ conditions.

Primary Health Division

Formed in 2023 and launched in 2024, the Primary Health Division (PHD) was created to stay at the forefront of an evolving industry. PHD aligns primary care practices, home-based services, urgent care and population health to focus on delivering care solutions and services that advance value-based care for the populations we serve. With a focus on improving outcomes and experiences while meeting patients where they are — and where is most convenient to them — we will continue to be their provider of choice into the future.



Primary Health Division Services

Primary Care Network (PCN)

Connects 370+ AdventHealth Medical Group physicians unified by the same promise of whole-person care.

Primary Care+

Designed to make it easier than ever to access comprehensive primary care through extended hours and same-day and weekend appointments.

Well 65+

From preventive screenings to treatment for chronic conditions, Well 65+ specializes in wholistic, value-based care for ages 65 and up.

Centra Care Urgent Care

Convenient neighborhood walk-in care for non-life-threatening injuries and conditions with onsite prescription, lab and X-ray services.

Population Health Services Organization (PHSO)

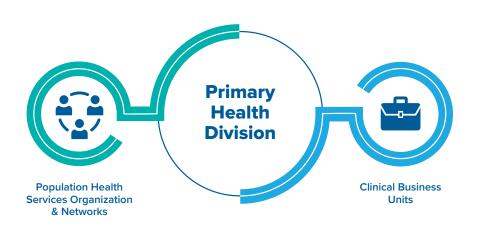
Focused on advancing the adoption of value-based care through networks and services that make communities healthier while reducing strain and costs for both consumers and the system.

Home-Based Services

Personalized in-home services like hospital at home, nursing, rehab, diabetes management, post-surgery follow-up and therapy.

Hospice

Compassionate end-of-life care supported by physicians, a case manager, social worker, chaplain and bereavement counselor.



your phone.

Primary Health Division Guideposts

- Enhanced Access
 Multiple options for multiple demographics:
 venues close to home, at home and on
- Seamless Consumer Experience
 Services are easy to access, simple to use and help consumers feel whole.
- Shared Success Improving health outcomes and financial stewardship.
- Varied Payor Structures Government, commercial, employer; valuebased care and fee-for-service.

Longitudinal Reach

The established primary health relationship is intended to be ongoing: a consumer-focused, connected health journey.

Retain High Value

Value as determined by the consumer and the payor: Quality, timeliness, completeness, connectedness and cost of care.

Wholeness Pillars
Love the Whole Person, Heal the Whole
Body, Grow the Whole Potential, Live the
Whole Journey.

Building an Outpatient System of Care





Primary Care for Seniors

According to Census data, all Baby Boomers will be age 65 or older by 2030. It's never been more important for us to have a plan to care for our large, aging population — without sacrificing quality or our commitment to whole-person care.

Medicare patients often have complex health care needs and require frequent access to medication and services. **AdventHealth Well 65+** was created in 2021 as a state-of-the-art primary care practice model designed specifically for adults 65+, providing more time with and access to their doctors. Our facilities are comfortable environments with a complete care team of physicians, registered nurses, social workers and more, all under one roof.

The result is better health outcomes for every patient, with whole-person care tailored to each individual's needs and desires. This new model has also attracted top physicians and health care professionals aligned with our mission and eager to make a difference in the lives of older adults.

Benefits and Access for Patients

- Longer appointments (up to 60 minutes)
- Onsite labs and pharmacists
- · Same- and next-day availability
- Social workers and case managers
- Care coordinators
- · Personal health coaches

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AdventHealth Provider Network



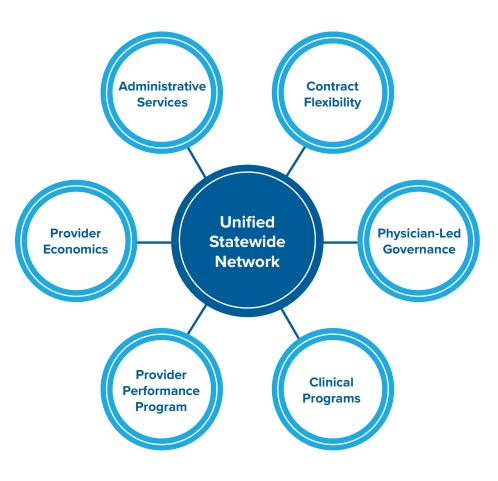
A Shared Commitment to Excellence

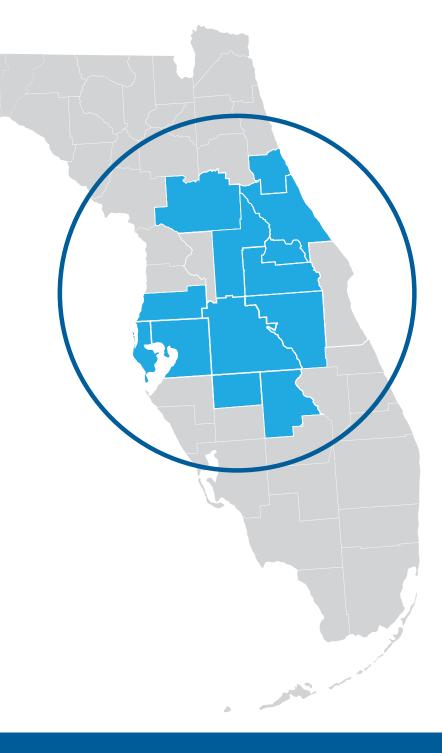
AdventHealth Provider Network (AHPN) is a like-minded community of physicians and clinical leaders collaborating at the highest level to transform how health care is delivered.

Our network of over 5,700+ employed and independent providers receives administrative support that enhances the quality of care and improves the patient experience, all while reducing cost. Providers also utilize health management services for high-risk patients, actionable data and a performance and enablement team to help them navigate the population health journey.

In addition to our patient-centric clinical support services, our network physicians benefit from our value-based contracts by gaining access to the patients within these contracts.

By having a unified network across Florida, and placing quality over quantity, we promote a system that helps physicians, patients, employers, our organization, and the industry succeed.





Our Florida Network

AHPN provides high-quality care and access across the state through our comprehensive network of providers.

- Covers a 13-county market area
- 5,700+ employed and independent providers, including primary care and most medical/surgical specialties
- Clinical care sites
- Hospitals
- Ambulatory surgery centers
- Home-based services
- LTAC
- Urgent care
- Imaging centers
- Home infusion
- Skilled nursing facilities
- Outpatient rehabilitation
- Outpatient infusion and chemotherapy
- Hospice

Types of Contracts

- · Full risk
- Network access
- Pay-for-performance
- Shared savings: upside only
- · Shared savings: upside and downside

"Being part of AdventHealth I believe has increased my patient referrals due to the visibility and reputation of the network. This has led to an increase in patient volume and revenue. I would like to express my heartfelt gratitude for the tremendous effort your staff has put forth in assisting us. Their hard work and dedication were instrumental in helping us complete our project successfully. It is truly commendable how your team went above and beyond to ensure that everything ran smoothly and efficiently. It has been a pleasure working with such a professional and dedicated group. Thank you once again for everything you and your team have done."



DR. MEHR T. RAHMATULLAH, Internal Medicine and Cardiology

AHPN Insights



AHPN Wins in 2024

30%

Expansion of low-cost care sites

47%

Increase in Health Management enrollment per team member

430+

Avoided admissions from Health Management program

154%

Increase in physician incentive payouts year-over-year

125K+

AHPN Directto-Employer Contract Patients

Featured Employer Partner

AdventHealth CastCare[™] Disney Benefits for *Walt Disney World*[®] Resort Cast Members

The AdventHealth Provider Network across Florida helps to keep eligible Disney Employees and Cast Members healthy and whole. Through AdventHealth CastCare[™] they have access to services like:

- Member Experience Center that exclusively serves Cast Members with personal health care coordination
- AdventHealth On Demand, connecting patients to fast virtual or in-person care
- Nurse care managers who can help create health plans, set goals and manage chronic conditions
- Virtual visits for many common conditions with a \$0 copay
- Education on knowing where to go for different types of health needs

Our team has successfully guided CastCare⁵⁴ members through everything from daily health questions to serious diagnoses. We provide around-the-clock support that keeps patients healthier so they can stay active.

AdventHealth and Disney

The Walt Disney Pavilion at AdventHealth for Children

AdventHealth for Children is a national leader in pediatric care with an extensive network that includes AdventHealth for Children in Orlando, 250+ pediatricians and pediatric specialists, regional clinics, pediatric ERs and Centra Care Kids urgent care locations.

AdventHealth for Children's flagship hospital in Orlando hosts The Walt Disney Pavilion which features an atrium designed by Disney Imagineers. AdventHealth for Children is part of Disney's Children's Hospitals Program, which delivers comfort and inspiration to families with children facing serious illness by reimagining the patient and family experience in children's hospitals.

AdventHealth World of Wellness

As the official health care provider of Walt Disney World® Resort, AdventHealth is redefining the future of wellness for Walt Disney World® Resort Guests, offering access to a nationally ranked care network and services in our local community before they arrive and during their visit. Our dedicated Care Concierge team helps guests with all levels of health needs plan for medical equipment rentals, prescription delivery and many other services. It's our goal to keep Disney's Guests well during their visit so they can enjoy all Walt Disney World® Resort and the Central Florida region have to offer.

AdventHealth ER at FLAMINGO CROSSINGS Town Center

The full-service emergency room at FLAMINGO CROSSINGS Town Center provides convenient emergency care for the Central Florida community and Walt Disney World® Resort Guests. This one-of-a-kind space was designed with state-of-the-art clinical technology plus environmental details like Disney-inspired designs, customizable lighting and other touches to help make our littlest patients more comfortable while they get the expert ER care they need.







AHPN Benefits for Physicians



We set our physicians up for success.

The AdventHealth Provider Network has been thoughtfully structured to include features that advance our system and our physicians' practices.

- Large Statewide Network
- Access to Patients in Payor and Direct-to-Employer Arrangements
- Enhanced Patient Services
- Patient Reporting
- Focus on Patient Care
- Engagement and Performance Support
- Quarterly and Annual Shared Savings
- Physician Leadership
- Innovative Support Solutions
- Chronic Disease Management Guidelines
- Clinical Documentation Integrity Support
- **⊘** Electronic Health Management System Support
- Advanced Analytics and Patient Management Support

APHN Benefits for Physicians

AHPN Annual Value Report 202-

Benefits for Primary Care Physicians

Access to Patients

Physicians have the opportunity to participate in AHPN's diverse payor and direct-to-employer contracts. AHPN supports increased patient access, growing panels and patient care:

- Enhanced patient services: Specialized services, including chronic care management, emergency department care coordination and transitional care management, support practices in delivering comprehensive and continuous patient care.
- Prioritized patient reporting: Network participants receive streamlined and prioritized reports tailored to improve efficiency and quality.
- Focus on patient care: With our support in clinical documentation and operational management, PCPs can concentrate on what matters most — patient care.

Engagement and Performance Support

Network PCPs benefit from a dedicated support team that provides them with the tools and resources for continued success in managing the care of their patients.

- Regular performance reporting: PCPs stay informed with insights that help track their performance progress and identify areas for improvement through monthly/quarterly meetings and reports.
- Streamlined performance program: PCPs receive support to help them navigate the
 complexities of disparate payor programs with ease. AHPN's cohesive performance program
 harmonizes various requirements, simplifying PCP participation and maximizing network
 benefits.

Financial

PCPs who lower health care expenditures, raise quality outcomes and improve patient experience participate in AHPN's pay-for-performance and shared savings arrangements that are part of our value-based contracts.

- Quarterly incentive revenue: By achieving targets for key performance metrics in cost of care, utilization, quality, access to care and clinical documentation integrity, PCPs can earn quarterly incentives.
- Annual shared savings: When AHPN achieves its goals, PCPs receive annual shared savings (proportional to the practice's membership share) and share in the collective success of our network.

Physician Leadership

AHPN is physician-led, which gives physicians a voice in contract quality measures, payment structure and network oversight.

• Collaborative community: Our PCPs are a network of peers dedicated to advancing valuebased health care. Our structure is designed to promote collaborative learning and the sharing of insights to collectively shape a better future for health care.

Benefits for Specialty Physicians

Some of the benefits to specialists within our network are:

- Increased patient access due to participation in exclusive contracts only available to AHPNaffiliated physicians.
- · Competitive fee schedules.
- AHPN specialists remain the preferred referral source for network PCPs.

"We have significantly improved the patient experience since we joined the AdventHealth Provider Network. We focus on preventive care, chronic disease management, and overall wellness, leading to improved patient health. Coordination across providers ensures seamless care, reducing stress and confusion for patients. The CIN has offered us opportunities to take part in performance-based incentives for meeting clinical and operational benchmarks. It has also offered us risk-adjustment support and tools such as workshops, webinars, and toolkits on evidence-based care. Each piece from the training to education has been a welcome opportunity to network and improve processes from the practice level."



DR. ALAN IEZZI, Family Medicine

"Being part of the AdventHealth Provider Network has benefited me and my practice enormously. The network has helped me to become more proficient and compliant with the care given to my patients and has helped my practice to grow exponentially. The services offered by AdventHealth are phenomenal; the staff are exceptional, as they spend the time to help you in any way they can. They offer resources to enable my patients to become more informed and share a genuine interest in the quality of care given to patients."



DR. DANIEL HAY, Family Medicine



Innovative Support Solutions

Clinical Care Pathways

Our Clinical Care Pathways provide best practice guidelines for managing chronic illnesses. Co-designed by AHPN physicians, the program identifies evidence-based clinical guidelines for managing chronic illnesses, including chronic kidney disease, and is aligned with nationally accepted standards. It helps ensure appropriate primary care, reduce unnecessary and costly specialty care, as well as avoidable hospital utilization, which improves cost and quality. Included are defined metrics of success and a dashboard to monitor ongoing performance.

Throughout 2025, we will host educational sessions that address multiple chronic disease states or specific episodes of care that have been identified as areas of significant low-value spend and underperformance.

We will continue to deliver CME events, clinical protocols approved by our Board of Managers, and access to individual physician-level performance of contracted covered lives for a variety of clinical measures.

Clinical Documentation Integrity (CDI)

We support our AHPN providers with a dedicated coding and documentation team. We also require best practice compliance to ensure our providers are educated in appropriate coding and documentation. From curriculum and toolkits to performance dashboards, we make sure providers can accurately chart and code to ensure the appropriate documentation of each patient's health status to drive the appropriate use of health care services.

The CDI team saves time for physicians by taking care of certain administrative tasks, like previsit questionnaires and paperwork, helping streamline the patient experience while relieving some stressors from clinicians. This initiative has also allowed for more focus on patients' care needs during their appointment by reducing the workload on their provider.

Electronic Health Management System Support

Access and support for Electronic Health Record (EHR) systems are key to supporting value-based care. It helps patients by improving access to their medical information, promoting better coordination of care and enabling more informed decision-making, ultimately leading to better health outcomes and increased patient satisfaction.

AHPN supports AdventHealth-employed and independent providers with value-based tools and reports that make it easier than ever to:

- Track, trend and improve nearly 60 certified HEDIS measures along with multiple customized payor-specific quality indicators
- Identify avoidable ED visits and redirect patients to an alternative site of care
- Identify patients at risk for unnecessary health care overutilization
- Prioritize patient outreach based on care needs
- Optimize programming to automatically assist with insurance claims
- · Receive support via third-party vendors AHPN is contracted with

Excellence in Analytics

By maintaining a data warehouse and providing analytical services like roster management, regular reports on plan performance and actionable insights, we make data-driven decisions that help us better manage populations and understand what areas provide the best opportunities for innovation.

One-of-a-kind models built by our teams organize claims, clinical and financial data into actionable tasks to help provide optimal care. We also leverage patient utilization patterns, health conditions and behavioral engagement to allow us to continue reducing health plan spend, and support the health and well-being of our patients.

Network practices are provided with onsite training and user-friendly dashboards with the ability to track their covered lives and sort by network contract. These tools supply real-time insights into individual provider performance and their patients' clinical outcomes. Dashboards are available for tracking clinical pathway adherence, coding and documentation of HCCs and more.

"It's the collaboration between all the teams that makes the difference in this CIN. Some CINs don't do much, but the participation here from all teams really holds our hands about what we need to do. The way the teams help independent practices by meeting with them, telling them where they can improve and what we need to work on. Everyone is very available, as well as the materials that are distributed — we [providers] use these as resources that we can always refer to. It's a teamwork approach that brings the most success."



DR. FRANK YANEZ, Family Medicine

Support Programs for AHPN Physicians and Patients

Emergency Department Care Coordination

The Emergency Department Care Coordination Program (EDCC) helps prevent avoidable admissions to the hospital by working with ED physicians to identify clinically appropriate alternatives.

When a covered patient visits a local ED, our dedicated nurses and licensed social workers follow their case in real time and communicate directly with the ED doctors and staff to determine the most effective and cost-efficient plan of care.

Benefits

This program improves health outcomes by managing patients' health needs at the appropriate sites of care. It also avoids unnecessary hospital utilization and cost while improving patients' experiences.

Goals

- Lower Avoidable Hospital Admissions and Readmissions Helping patients avoid unnecessary hospital stays.
- Improve Outcomes and Lower Cost Connecting patients with clinically appropriate services in lower-cost care settings.
- > Simplify the Patient Experience
 EDCC can help coordinate patients' care needs, from routine visits to specialty care.

Key Services

- Follow-up with PCPs
- · Referrals for chronic care management
- Home-based services
- In-home urgent care visits
- Referrals to licensed social workers and assistance with social needs
- Coordination of specialist appointments
- Real-time collaboration and treatment planning

IMPACT

Average >5% reduction in unnecessary admissions at AdventHealth facilities, saving \$10-20K per avoided admission



118

Unnecessary admissions avoided



Cost avoidance





Care Management for Chronic Conditions

Care management is a comprehensive suite of services and activities that help patients with chronic conditions manage their health. We aim to improve care coordination, reduce hospital visits and boost patient engagement.

Our collaborative approach uses a multidisciplinary team to care for the whole person while ensuring individuals get the appropriate care in the proper setting — easing the patient experience and reducing costs all around.

Goals

- Successfully manage chronic conditions, like chronic kidney disease, within healthy ranges
- > Reduce avoidable ED visits
- Connect patients with social determinants of health needs with the proper local resources
- > Sustain high rates of care gap closure
- Patients choose the appropriate care site when they are ill
- > Patients use the AdventHealth portal to take charge of their health
- Patients are educated on their chronic condition and manage it successfully on their own
- Patients feel supported on their path to wellness

\$150

Per member,
per month
(PMPM)
savings of
members
enrolled in
the program
vs. not
enrolled

IMPACT STORY

Our PHSO Care Management team strives to improve our patients' quality of care through education and navigation while focusing on whole-person health during each patient encounter.

In late 2024, our nurse, Jessica, was assisting a patient with his chronic disease, but she was also attuned to his other medical and social issues. He was retired and blind from diabetes, relying on his elderly wife to help him with medical care and everyday tasks.

During a call with the patient, the patient reluctantly told Jessica that he did not have a lot of food in his house and was unsure if there was enough for the weekend. When the call ended, Jessica located a food pantry at a church about a mile from their home.

Transportation was also difficult for the elderly couple, so Jessica called and spoke with the church helpers: "I know you don't typically deliver, but is there any way someone can bring them some groceries?" Within a few hours, the church employees arrived at the family's door with a variety of groceries. Jessica provided a list of additional community benefit organizations available to assist the family and she continues to work with the patient on his journey to feeling whole.

Jessica serves each patient with her whole heart. She says, "We're all here to make sure that we are Extending the Healing Ministry of Christ to every patient. We want them to know that we're here to help. Our goal is to connect people to community resources so they have what they need to be able to care for themselves."

Transitions of Care Management

The AdventHealth promise of whole-person care for every individual drives us to take an integrated medical-behavioral approach. We remain close to help monitor and manage chronic conditions and work to avoid patients needing repeated treatments or hospital admissions.

Goal

Avoid Readmissions

Our team provides education, support and care coordination for 30 days after an acute care-setting episode.

Key Services

- Confirming understanding of discharge instructions
- · Securing follow-up appointments
- Post-admission symptom management
- Confirming home care standards
- · Medication reconciliation
- · Addressing non-medical social needs and connecting patients with community services

Patient Satisfaction



recommend this service (70% industry average)



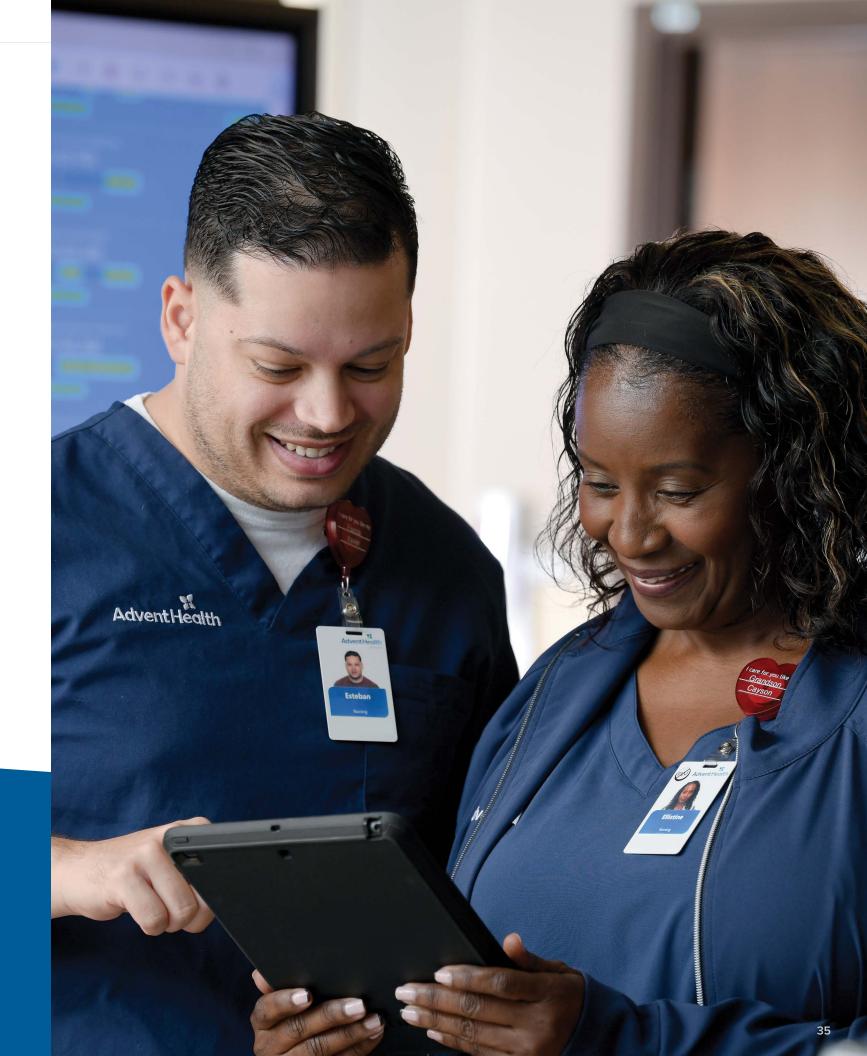
are satisfied with their service

IMPACT STORY

One patient, a 63-year-old woman, had a history of 10 ED visits in one year due to liver failure symptoms. She experienced a repeated barrier to care, unable to schedule weekly paracentesis orders at the facility most convenient to her.

Our licensed clinical social worker partnered closely with the interventional radiology coordinator at the patient's facility of choice and the next closest facility to get her regularly scheduled. The facility agreed to bypass internal scheduling protocols and hold Friday at 1 pm each week to accommodate the patient's appointments.

Our patient successfully attended scheduled appointments until she received her transplant.





Health Engagement

The AHPN team aims to guide and inspire every individual to take charge of their wellbeing, be proactive about preventive care and live a life of whole health. Our team engages patients using a proprietary communication model with tailored messages for a higher likelihood of action.

These focused messages empower patients to follow treatment plans, participate in preventive care and manage chronic conditions effectively, leading to better overall health and a reduction in unnecessary health care utilization.

Goals

- > Help patients understand their benefits
- > Educate patients on where to go for different types of care
- Help patients find and schedule with a PCP
- ➤ Highlight ways to manage certain health conditions on their own

Health Engagement Impact and Results

Health engagement campaigns have a proven record of helping individuals learn more about what services are available and what preventive strategies can keep them healthy.

Activities

- Patient outreach across multiple communication channels
- Use of keywords and phrases
- Varied cadence of touchpoints
- Multi-wave schedule
- · Response-driven and interactive

IMPACT

Emergency Department Redirection campaign

64% email open rate and 15% total clicks

Managing Diabetes campaign

36% of patients completed an A1c lab after receiving outreach

Breast Cancer Screening campaign

7% of patients responded in real-time to be directly connected to schedule their screening exam

AHPN Benefits for Patients



Pursuing the Best Patient Experience

The AdventHealth Provider Network is designed to improve patients' health and well-being by creating a care experience that is seamlessly connected, accessible, affordable and of superior quality.

With AHPN, patients have access to the following services:

Care Advocacy

- A trusted guide who helps patients navigate their care via chatbased support
- Can coordinate medication refills, appointments and more
- Integrated into the patient's AdventHealth Account for easy digital access and communication

Concierge Services

- Personalized assistance to help them get the care they need faster and easier
- Chat online, by email or by phone with a Member Experience Representative for health care questions
- Provides help with finding a PCP or specialist and can schedule appointments

Video Visits

- Access to an urgent-care provider 24/7 from a smartphone or tablet
- **Prescriptions can be called in** to patients' preferred pharmacy

APHN Benefits for Patients

AHPN Annual Value Report 202

Care Advocacy

Care Advocacy is the next level of integrated care from AdventHealth, helping eliminate any pain points individuals face when navigating their health care. Care Advocates can help patients virtually find a physician or location, provide status updates on AdventHealth's patient portal messages and information within the Epic electronic medical record system, and connect them with other AdventHealth services. Care advocates work in partnership with AHPN practices to navigate questions related to the care patients need or are receiving.

Our Care Advocacy team is available to assist patients who have AdventHealth-employed providers and those with independent providers. However, patients who have an AdventHealth provider have the added benefit of a dedicated Care Advocate, who can get to know them and also help reschedule appointments, ensure medication refills occur quickly, request a referral, locate a specialist, answer questions about care and more.

Concierge Services

Our Care Concierge services were created after asking a simple question: How can we make health care easier? Since these services launched, they have positively influenced our patients' care experience and quality of life, helping more people feel whole.

Care Concierge is designed to help patients of an employer-funded health plan navigate their benefits and health care needs. These support teams take some of the administrative load off providers and their offices by fielding questions, managing scheduling needs, refill requests and other tasks as appropriate.

Our teams can help patients who need:

- Assistance with finding a new PCP
- Scheduling PCP appointments
- A liaison between the Third-Party Administrator (TPA) and themselves
- Support during annual open enrollment
- General guidance about where to go for care

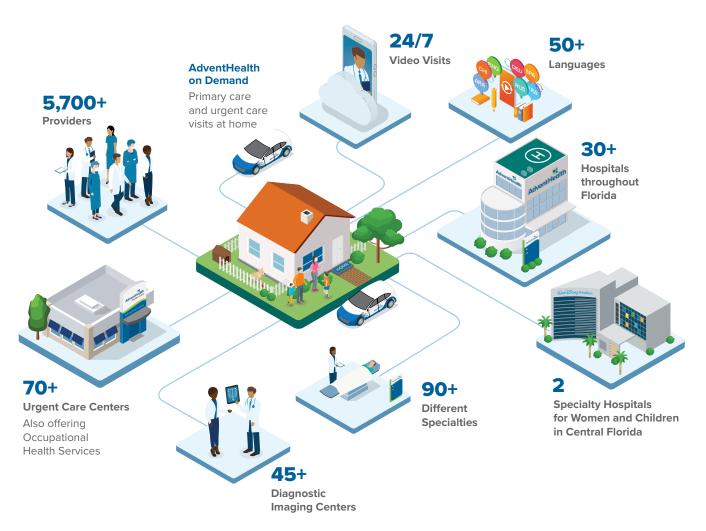
In addition to serving as the primary resource for patient inquiries, our teams make it easy to advance our goals in population management by performing targeted patient outreach focusing on specific areas of opportunity, such as avoidable ED utilization, out-of-network utilization, gaps in care and patients who have not seen a PCP in more than 12 months. These proactive outreaches result in greater care gap closure, compliance, lower ED utilization and cost savings for our contracted partners.

Virtual Care

Consumer demand for telehealth has grown. Our virtual primary care model launched at the beginning of 2025, making it easier for patients to establish a relationship with a PCP. Our physicians offer online visits for a variety of health concerns, from minor ailments to specialty care and more — right from a smartphone, tablet or computer. Virtual care options help patients access an appropriate care site when in need, rather than using the emergency department for non-severe injuries and illnesses.

When patients need urgent care right away, they can also schedule a video visit through the AdventHealth app. Our urgent care services are available 24/7 in Colorado, Florida, Georgia, Illinois, Kansas, Kentucky, Missouri, North Carolina, Tennessee, Texas and Wisconsin.

A Network for Every Need



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AdventHealth's Population Health Services Organization delivers whole-person care for the populations we serve through high-performing networks and innovative solutions. We focus on achieving positive health outcomes and ultimately providing our members with comprehensive, affordable care that improves their overall well-being.

Goals and Aspirations for Our CIN

From the President of AdventHealth Provider Network

AdventHealth's Population Health Services Organization is helping to deliver whole-person health across broad populations by growing high-performing networks and developing new innovative services. We are successfully bending the cost curve while enhancing our clinical skills and achieving positive clinical outcomes.

The network's approach is physician-led. We follow a governance structure comprised of a physician majority who are clinically active and represent communities from across the state of Florida. We routinely communicate with network physicians and invite their feedback.

In addition, our administrative team is well-seasoned and knowledgeable about industry strategies, contractual risk options, and operationalizing programs to support our CIN. Through prior success in direct-to-employer contracts, government programs, bundled payments and commercial risk models, we have proven our competency. We are positioned well to evaluate new opportunities and recruit high-performing physicians and facilities into our network.

Managing population risk and implementing innovative, risk-based health care through expert clinicians to grow our reach and revenues are strategic priorities of AdventHealth's Vision 2030. We are called to excel in value-based care, and that is what we are doing.

By 2030, we'll have continued network maturation and curation of a high-performing network. We will launch the high-value specialist program to include routine reports for PCPs to make knowledgeable in-network referrals to specialists who create high value for patients through the delivery of quality, cost-effective health care. We'll have measurable direct-to-employer contract growth and avenues that allow providers to take more risk-based contracts.

While our CIN has been working to extend AdventHealth's vision of whole-person care in value-based contracts through our CIN for a decade, this past year and the years ahead have a promise of great expansion for participating physicians, employers and patients. As we step into 2025, we will continue to support AdventHealth's value-based growth and PHD initiatives, delivering outstanding health outcomes to our patients. We performed exceptionally in 2024, and I have every confidence we will exceed expectations again.

Sincerely,

Tom Diller, MD, MMM, CPE, CMQ
President
AdventHealth Provider Network



DR. TOM DILLER
President
AdventHealth Provider Network

AHPN's Future

- Best-in-Class Value-Based Care
- Continued Performance and Growth in Contracts
- Implementation of Clinical Pathways Guidelines
- Robust Care Management
- Analysis and Improvement of Total Cost of Care and Utilization
- Medication Adherence and Reconciliation

