

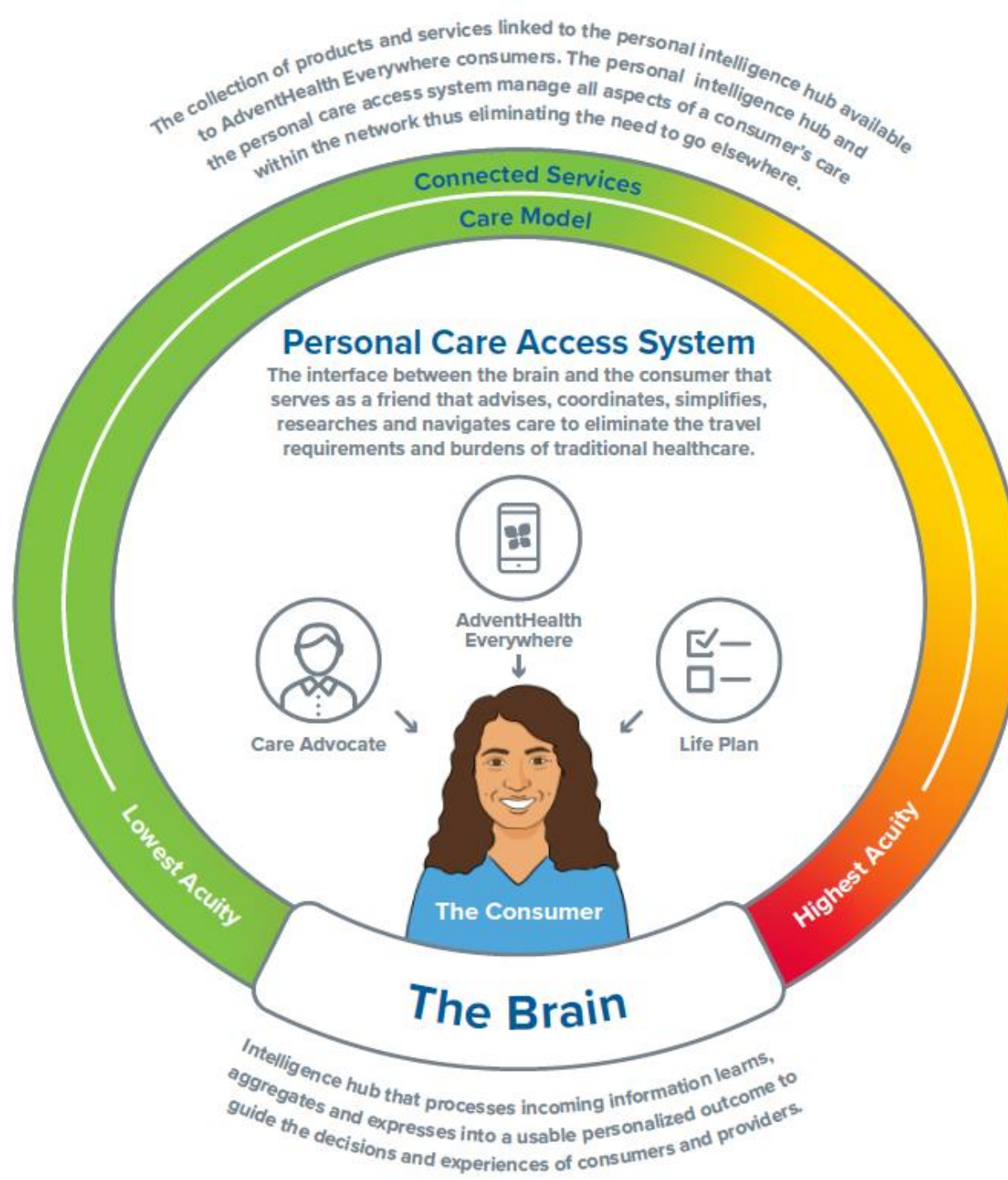
A photograph of three men in a professional setting, likely a meeting room. They are standing in front of a large whiteboard covered with numerous colorful sticky notes. The man on the left, seen from the back, is holding a blue marker and pointing at a note. The man in the middle is smiling and looking at the whiteboard. The man on the right is looking at the man in the middle. The image has a blue gradient overlay at the bottom.

# Reimagining the Health System

November 5, 2020

Daryl Tol

# The **Everywhere** Experience



AdventHealth has designed two models to make Care Advocacy scalable and available to any consumer

## Care Advocacy – Assigned Model



Consumer



Care Advocate

### For Consumers to be eligible

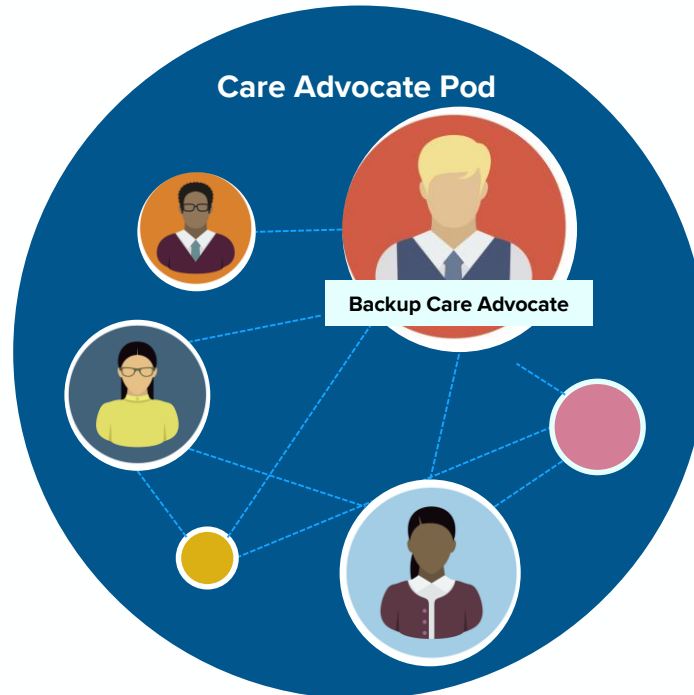
Must have **AdventHealth Medical Group PCP**

Must have **AdventHealth account**

**Enrolls in digital messaging service** via mobile app or web



Care Advocate  
Nurse



### Consumer benefits & features

**Introduced** to Assigned Care Advocate to build trusted relationship with Consumer

Supports **any healthcare need** including scheduling, refills, navigating healthcare system

Nurse on staff to **support clinical questions**

Complete **messaging history**

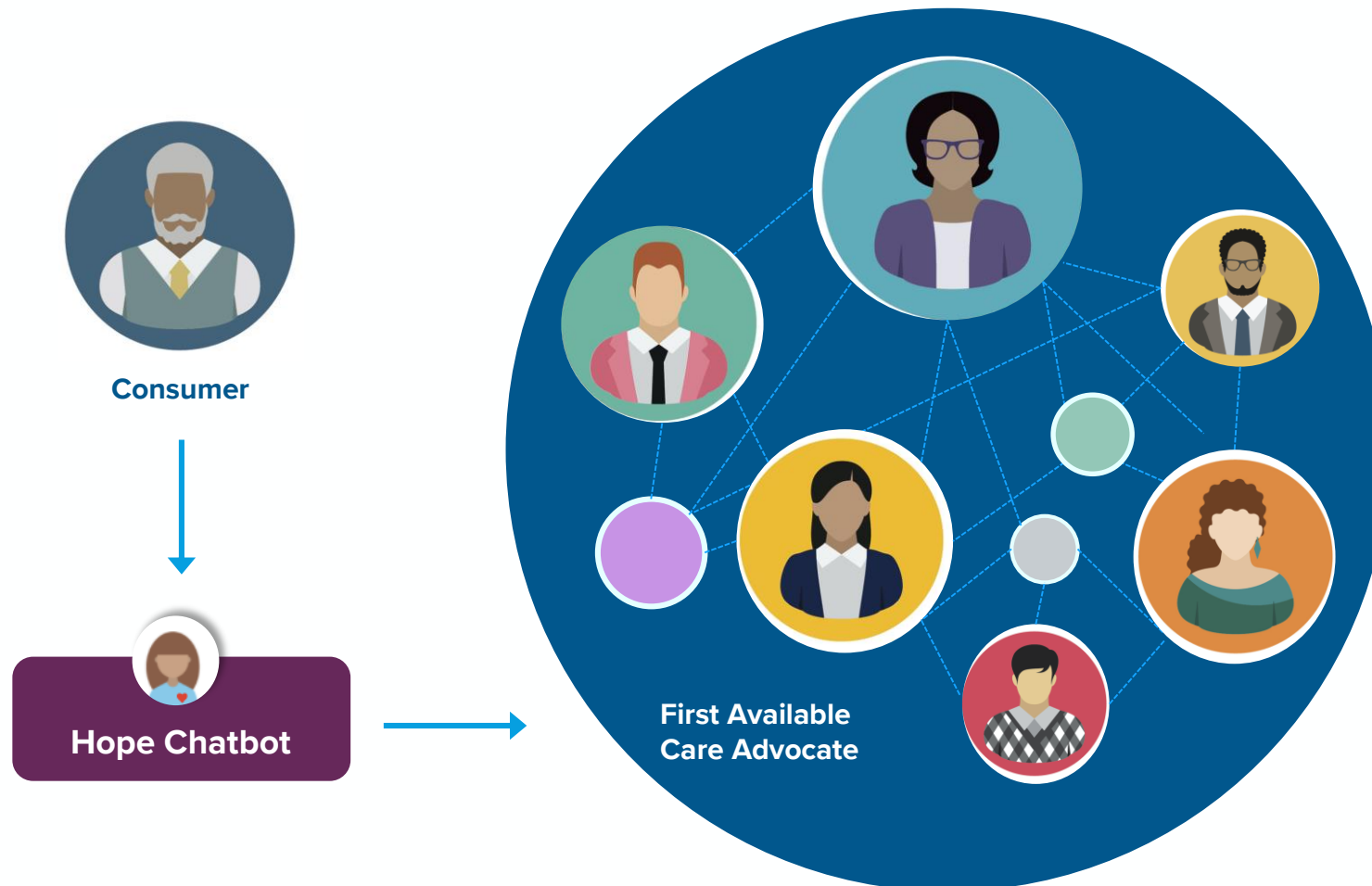
Identifies **health goals**

Accesses daily **journals**

Connects **health tracking devices**

AdventHealth has designed two models to make Care Advocacy scalable and available to any consumer

## Care Advocacy – Unassigned Model



### For Consumers to be eligible

Does **NOT** have **AHMG PCP** or has not enrolled in Care Advocacy

Visits mobile app or web

### Consumer benefits & features

Has access to **first available** Care Advocate

Establishes **foundation of help & support** for those new to AdventHealth network

**Single interaction** only (no messaging history)

Assists with more **generic logistics and routing** across system

\*not available via voice




# Care Advocacy Onboarding

## Primary Care Provider Selection

9:41 AM100%


Please confirm your Primary Care Provider

According to your records, we found the following providers in your care team:



Paul Travis Smith, MD  
Family Medicine

☒



Other or not listed

☐

Not Now

Next


## Care Advocacy Assignment

9:41 AM100%


Welcome to Care Advocacy

We are pleased to meet you!  
We are your trusted, everyday partner for those moments in-between visits, answering any questions: simple or serious.

Your Team



Melinda  
Care Advocate



Paul T. Smith, MD  
Family Medicine

Meet your Care Advocate, Melinda, the newest member of your team. They will be your primary contact, but you may occasionally receive messages from other Care Advocates as well.

Here are some things you can expect from us:

• Personalized care through conversation with quick response and resolution with no phone calls or voicemails.

• Convenient help with prescription refills, paperwork, referrals & more all through chat.

• Whole person health and wellness recommendations based on your personal health history.

We look forward to connecting with you!

Not Now

Next


## Contact Preference Selection

9:41 AM100%


Welcome to Care Advocacy

Let's get to know you better!


What's the best time to contact you?



Morning  
7am-12pm




Afternoon  
12pm-4pm



Evening  
5pm-7pm

Skip

Next

## Health Goal Selection

9:41 AM100%

Welcome to Care Advocacy

Let's get to know you better!

Are you working toward any health goals?

Fitness

Nutrition

Mental Health

Motivation

Stress


Wellness

Not right now

Other

Enter other goals


Skip

Next

## Onboarding Completion

9:41 AM100%

Advent Health



Thank you for your information.

Start chatting with your Care Advocate.

Got it

Chat Now

# Meet Norah

43 years old

Middle school teacher


Wife and mother to 11 year old son

Recently diagnosed Type 2 Diabetes

Open to alternating lifestyle to improve health

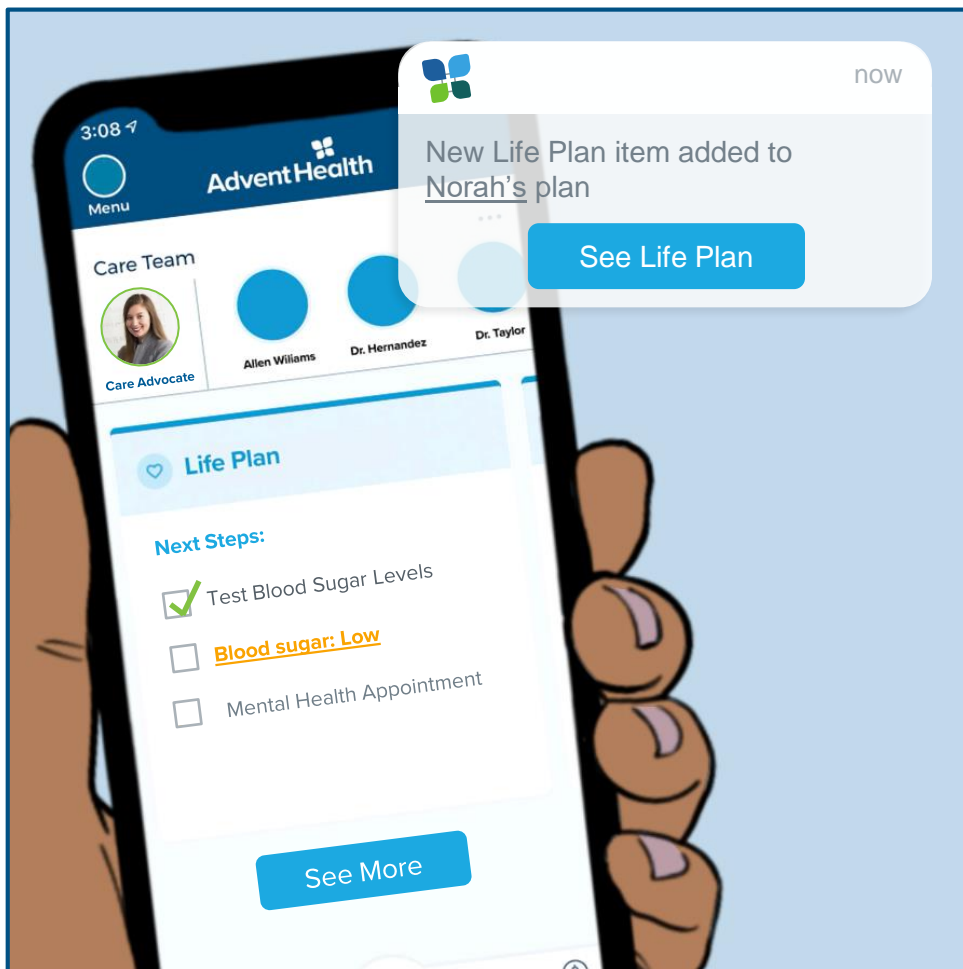
With AdventHealth Norah wants a **simple, seamless, & hassle-free** experience:

- easily take the **next best action**
- healthy reminders in **key partner experiences** she encounters
- has a **trusted friend** in healthcare for assistance along the way
- exceptional **whole-person care** with improved outcomes



Why is taking care of myself and my family so difficult? I wish it were **easier**...

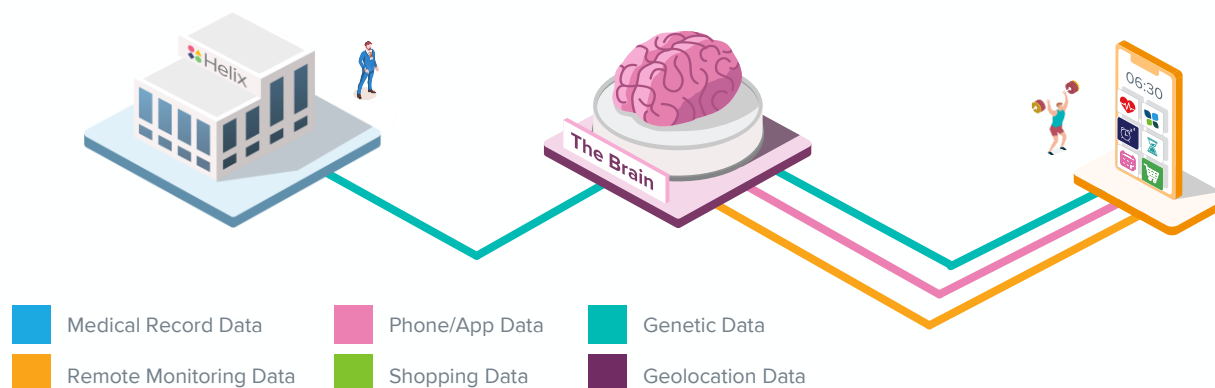
# Day One



**7:30 AM**

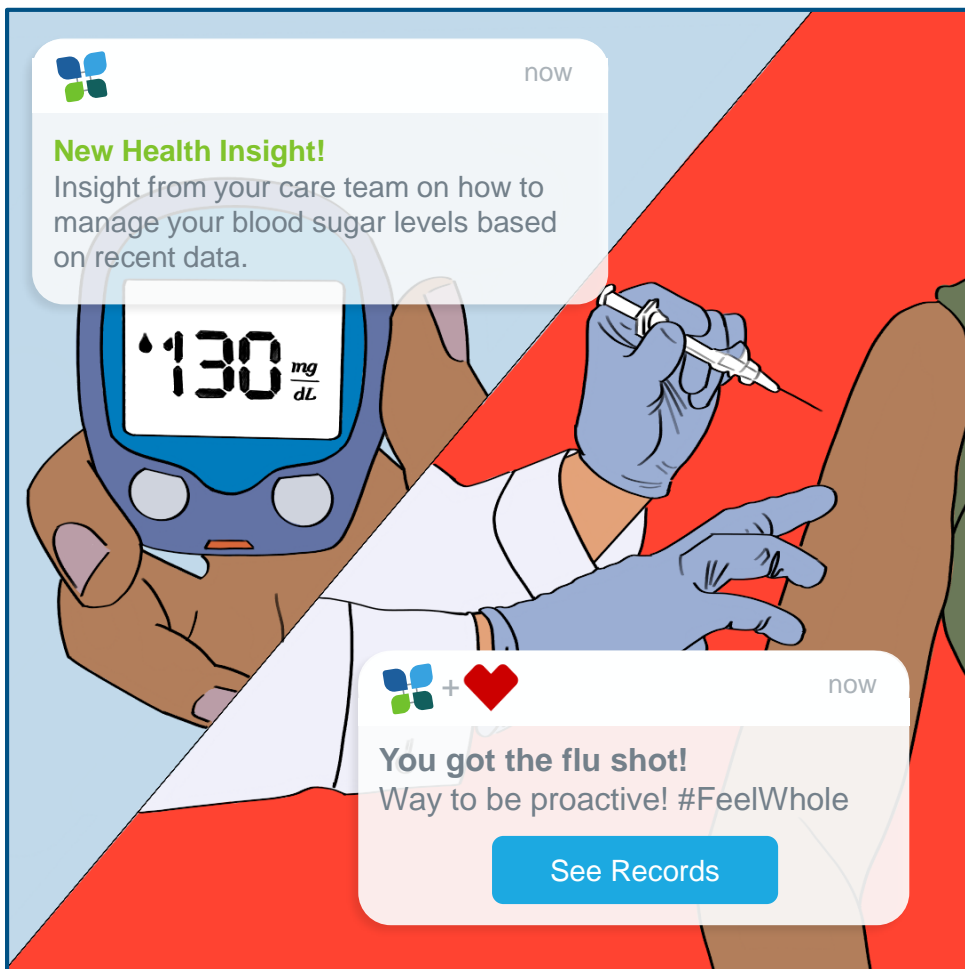
Norah was recently diagnosed with Type 2 Diabetes. She has an AdventHealth **At-Home Kit** so she takes her blood sugar levels at home which save into her AdventHealth account and further into the Personal Intelligence Hub.

Norah gets a real-time update that her **Life Plan** has been updated based on her blood sugar reading. Her **Care Advocate** also receives a notification and checks in with her to make sure she is following up on the recommendation. Norah tells her Care Advocate that she has been feeling more anxious lately. Melinda gives her some practical tips on breathing exercises to help her manage but also schedules a **virtual visit with a mental health expert**.





# Day One

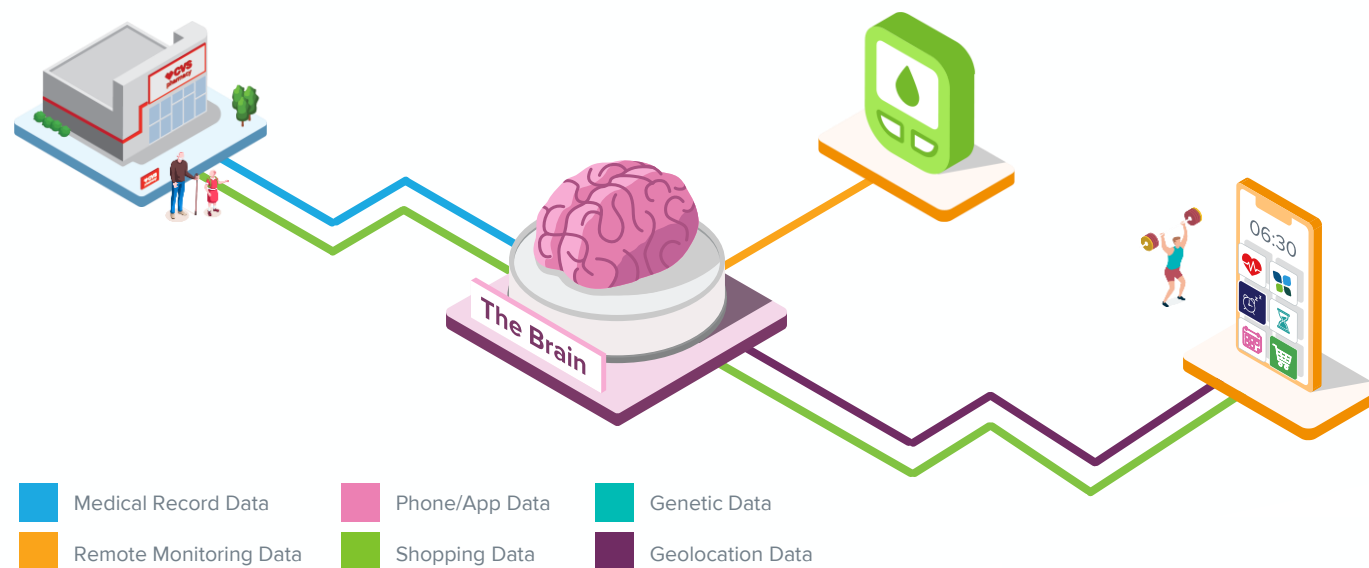


**12:00 PM**

Norah realizes she's running low on her test strips. She stops by her **preferred CVS** to purchase more.

As she approaches CVS, Norah receives a notification on her watch from AdventHealth saying "Flu season is right around the corner - **CVS is offering free flu shots today**".

Norah opens her CVS app to find the test strip she purchased last time and guides her where it is in the store and then she proceeds to get her flu shot in store. Afterwards her **vaccination record auto-populates** to her AdventHealth app.



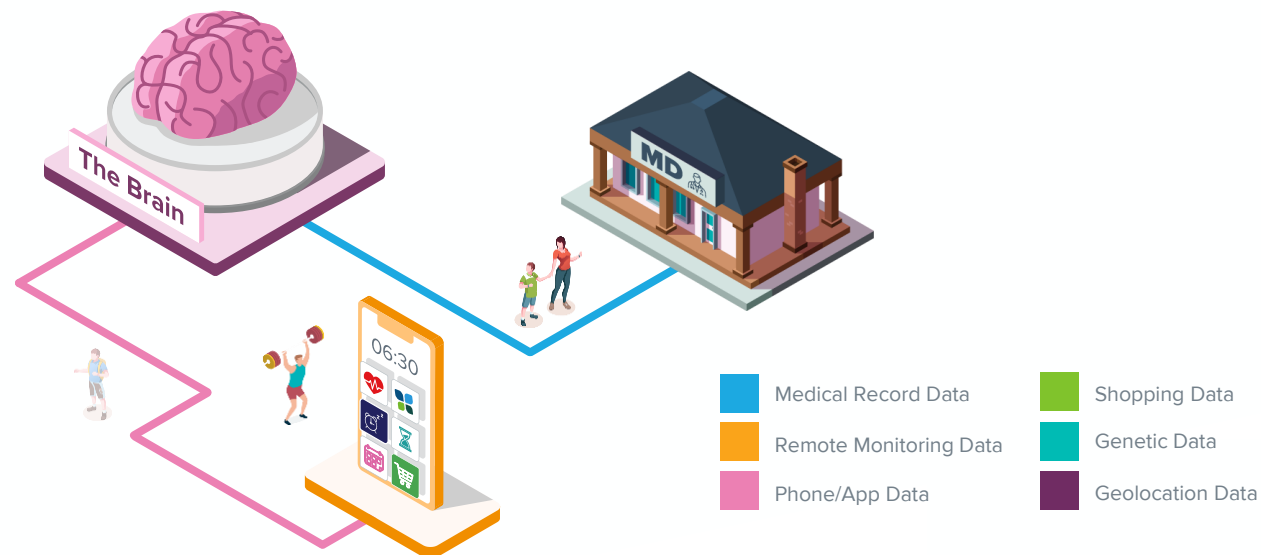
# Day One



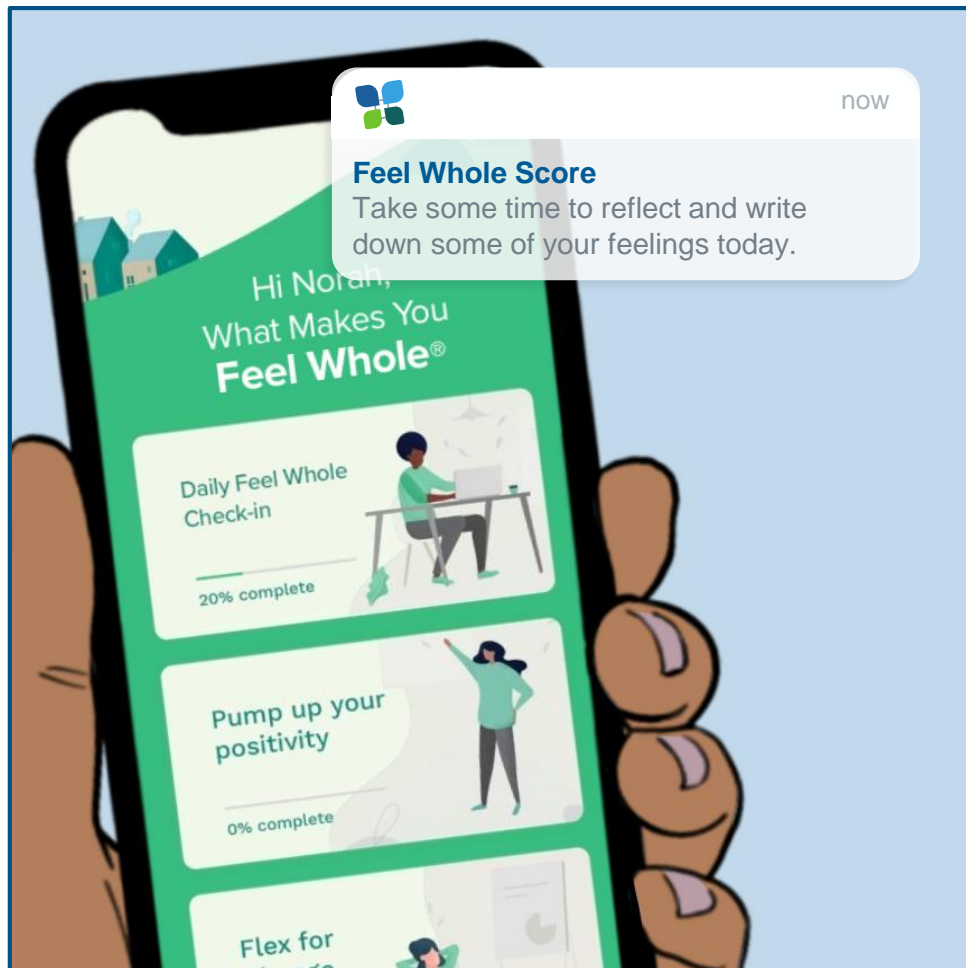
**2:00 PM**

Norah attends **virtual session with a therapist** to discuss her recent diagnosis of diabetes and her symptoms of depression. The therapist reviews the summary from her **Care Advocate**, he also reviews Norah's accumulative **Feel Whole Scores** and asks questions about specific days she was experiencing low energy and anxiety.

The therapist suggests further cognitive behavioral therapy sessions, along with a few lifestyle changes, to help her with her depression and overall diabetes management. The therapist also provides suggestions to Norah's **Care Advocate** to help with daily management. Additional mental health sessions are added to her "Appointments Prescribed" list on the **AdventHealth app** and the lifestyle changes prescribed are added to her daily **Life Plan** Next Steps.



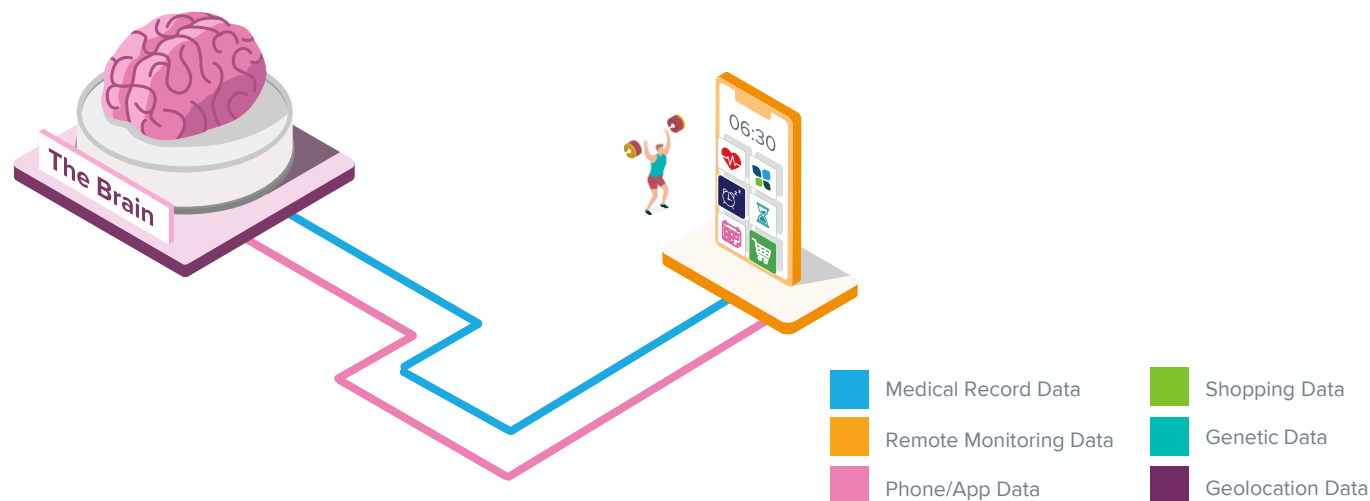
# Day One



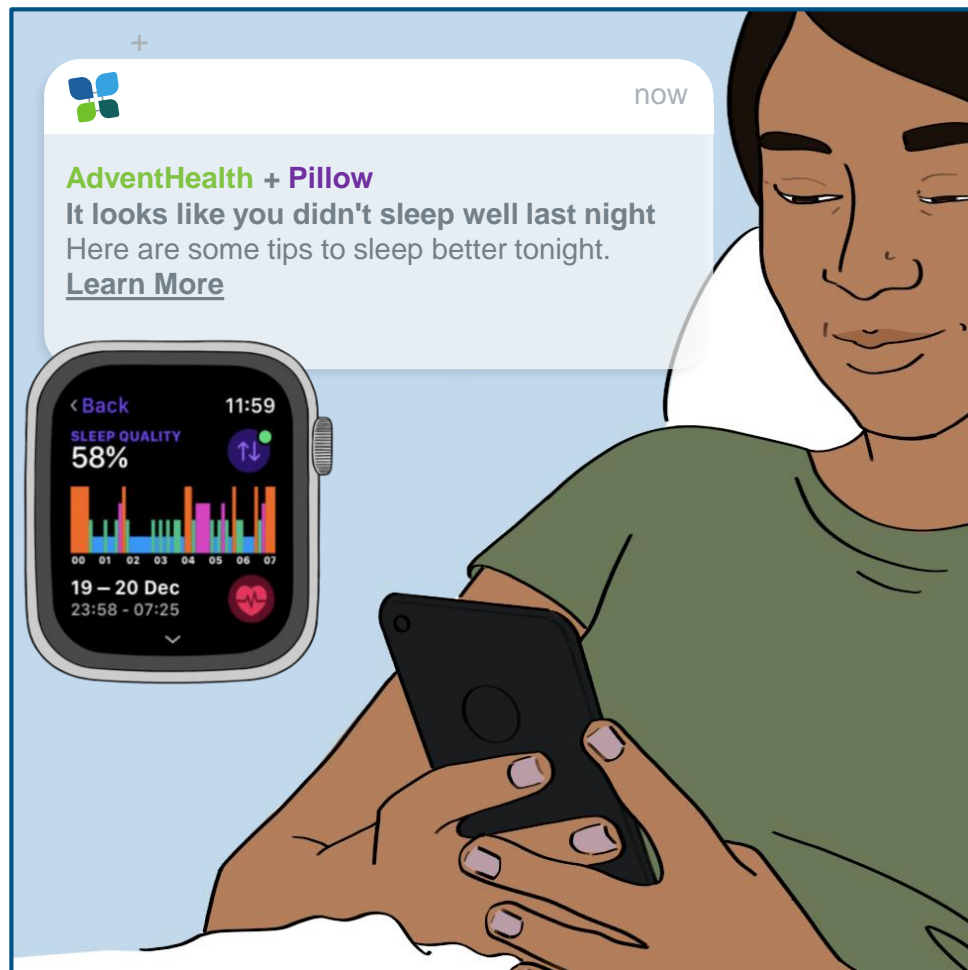
## 8:00 PM

Based on Norah's preferences, she receives occasional prompts to answer a few short questions to better gauge her Whole-Person health. She completes her **Feel Whole Score** for the day. She says she's feeling productive, but slightly stressed and overwhelmed from her recent diagnosis for type 2 diabetes—trying to manage her own health, and the health of her family.

Norah's PCP and **Care Advocate** also have access to her Feel Whole Score. The Care Advocate is able to offer suggestions to help Norah make modifications to improve portions of her day with recipes, meditation techniques, and more.



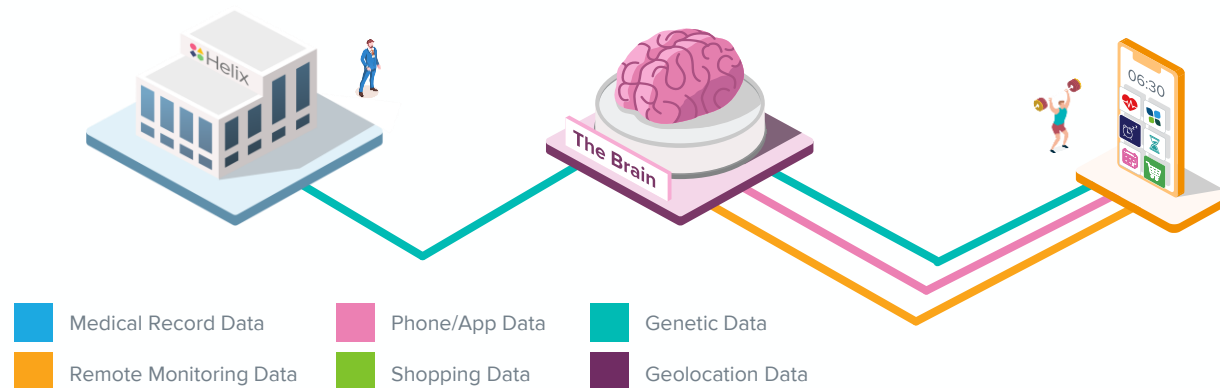
# Day Two



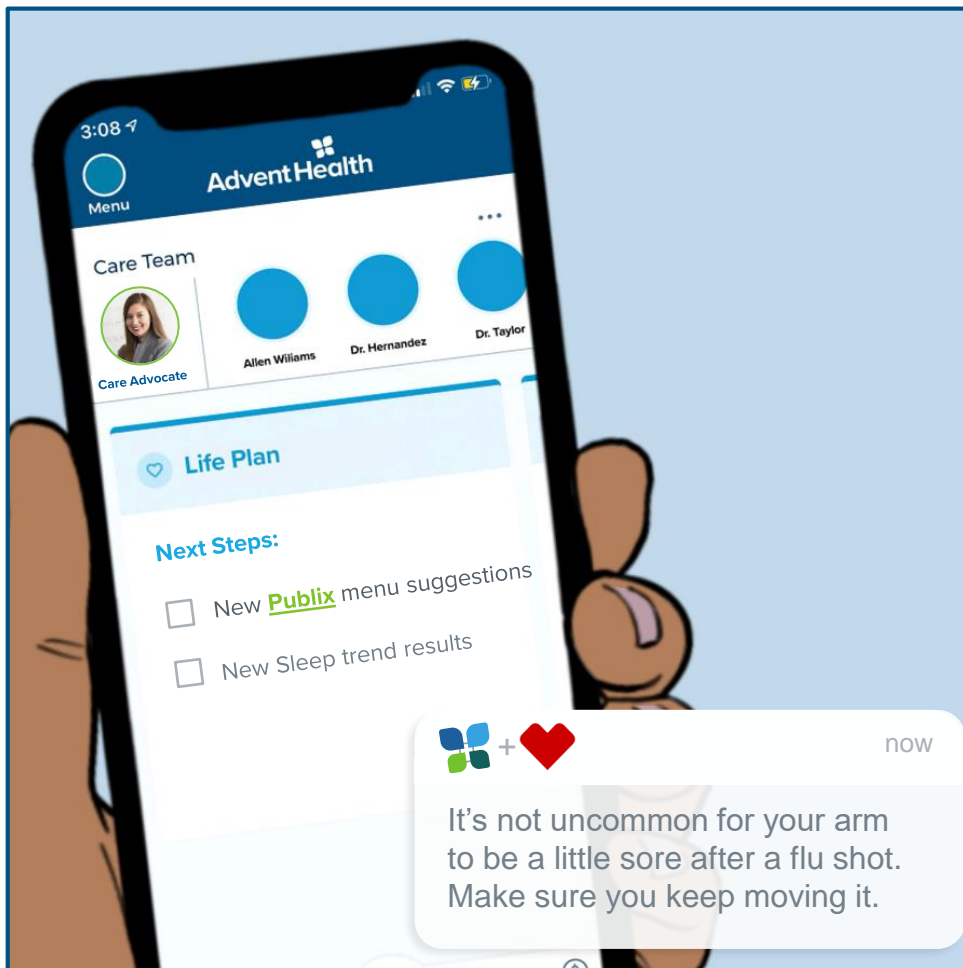
## 6:30 AM

Norah wakes up and turns off her alarm. Her AdventHealth recommended **sleep machine shares results** with her AdventHealth app. "We noticed you didn't sleep well last night. We have some tips sleep tonight." Norah learns about how drinking water in the morning can help energize her body and what breakfast foods she should eat to help her have energy until lunch time.

Later in the day, Norah's **Care Advocate** checks-in with her and offers encouragement and additional tips for a better night. Based on Norah's personalized genomics and individual preferences, she receives advice based on her genetics test result discussing her circadian rhythm result, that may keep her up later at night, resulting in not enough sleep, and how she can work to go to bed earlier.



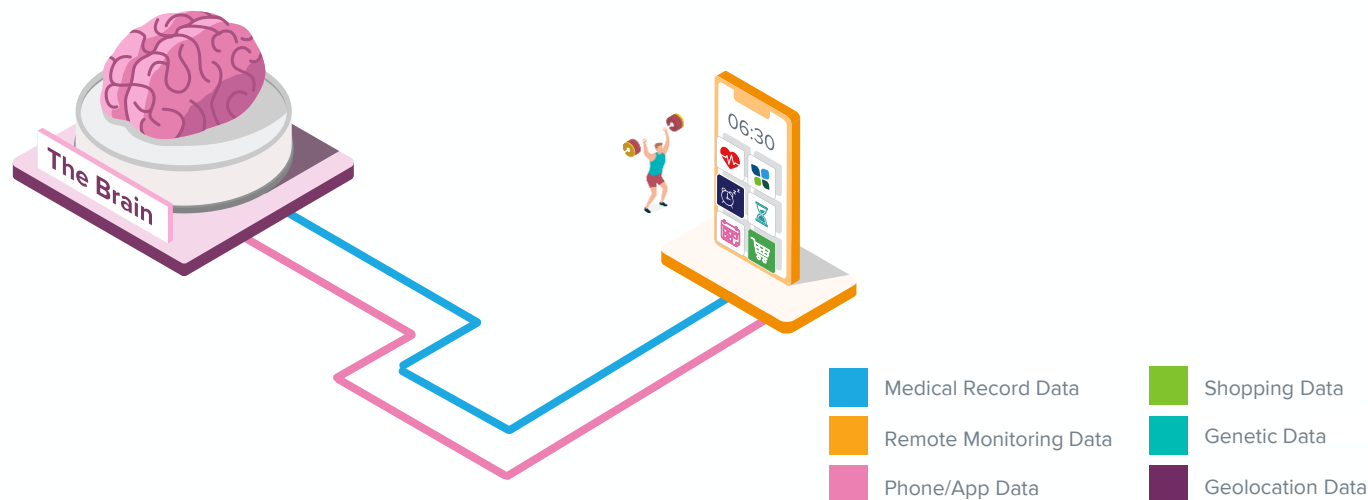
# Day Two



11:30 AM

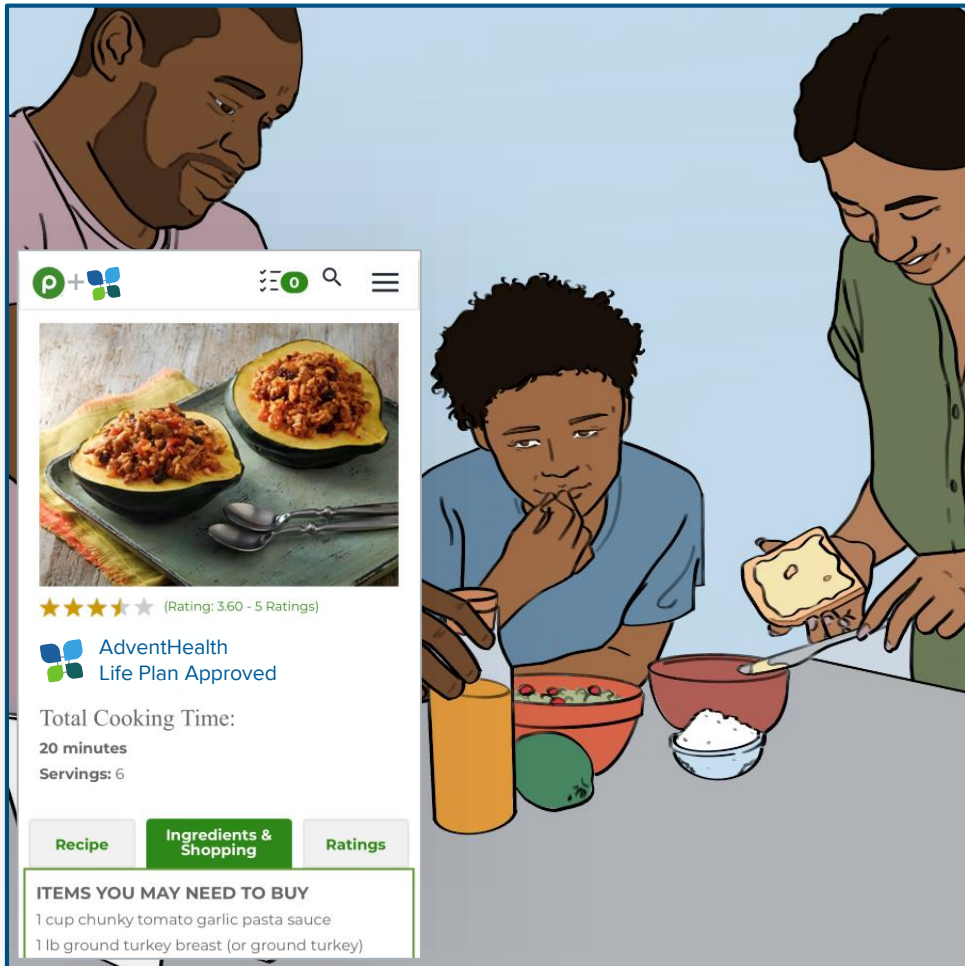
Norah's **Care Advocate** is compiling information for Norah's upcoming PCP appointment. Based on the data collected, her Care Advocate summarized that Norah is still not sleeping well, her recent blood sugar levels have been high, and based on her monthly **Feel Whole** accumulative score, Norah may have her recent Type 2 Diabetes diagnosis. Norah's Care Advocate adds the notes from the **therapist** and sends to the PCP. Her Care Advocate adds recommendations onto her **Life Plan**.

Norah also receives a notification from **AdventHealth and CVS** offering advice the day after her flu shot: "It's not uncommon for your arm to be a little sore after a flu shot. Make sure you keep moving it. If soreness persists, you can take 2 ibuprofen, or use a cold compress to relieve some of the pain."





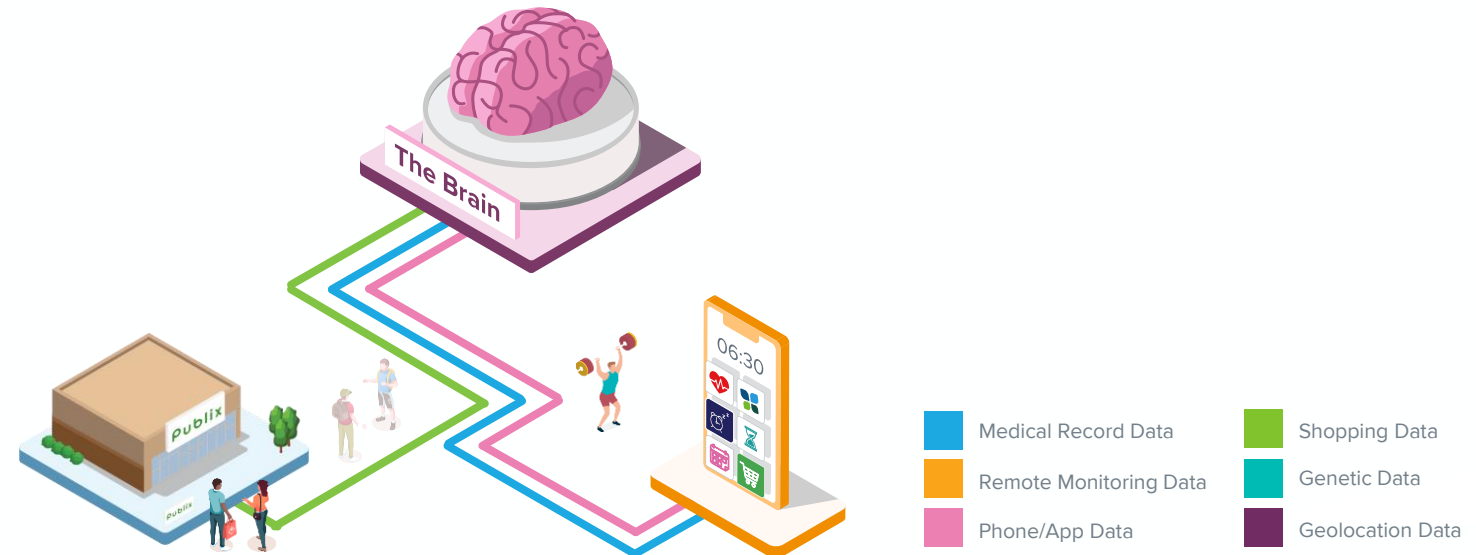
# Day Two



3:00 PM

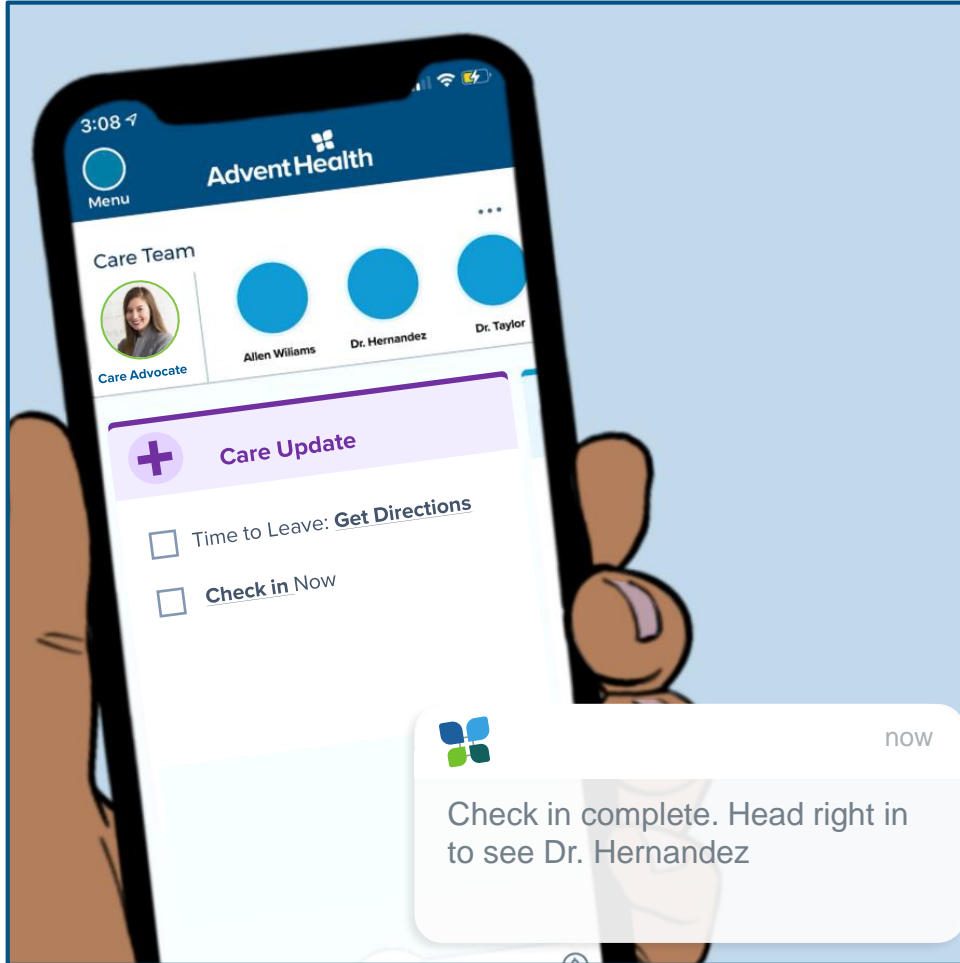
Norah is thinking about what the family will eat dinner and heads to **Publix app** to order groceries. There is a convenient **AdventHealth section** with family friendly and diabetic appropriate menu recommendations based on the specific health conditions of Norah's family. Based on AdventHealth's information of Norah's son is lactose intolerant **Publix app** includes alternative dairy suggestions for him as well. Norah can choose the items that suit their tastes and proceeds with one-click ordering.

Finally, a convenient way to order healthy food and have it delivered to her home just in time to make dinner.





# Day Three

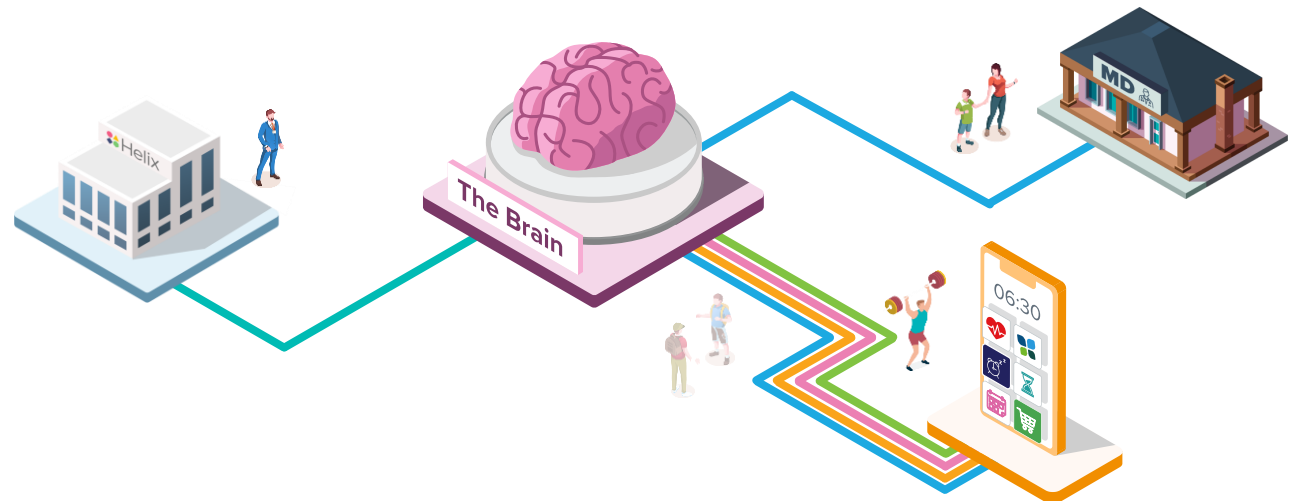


9:00 AM

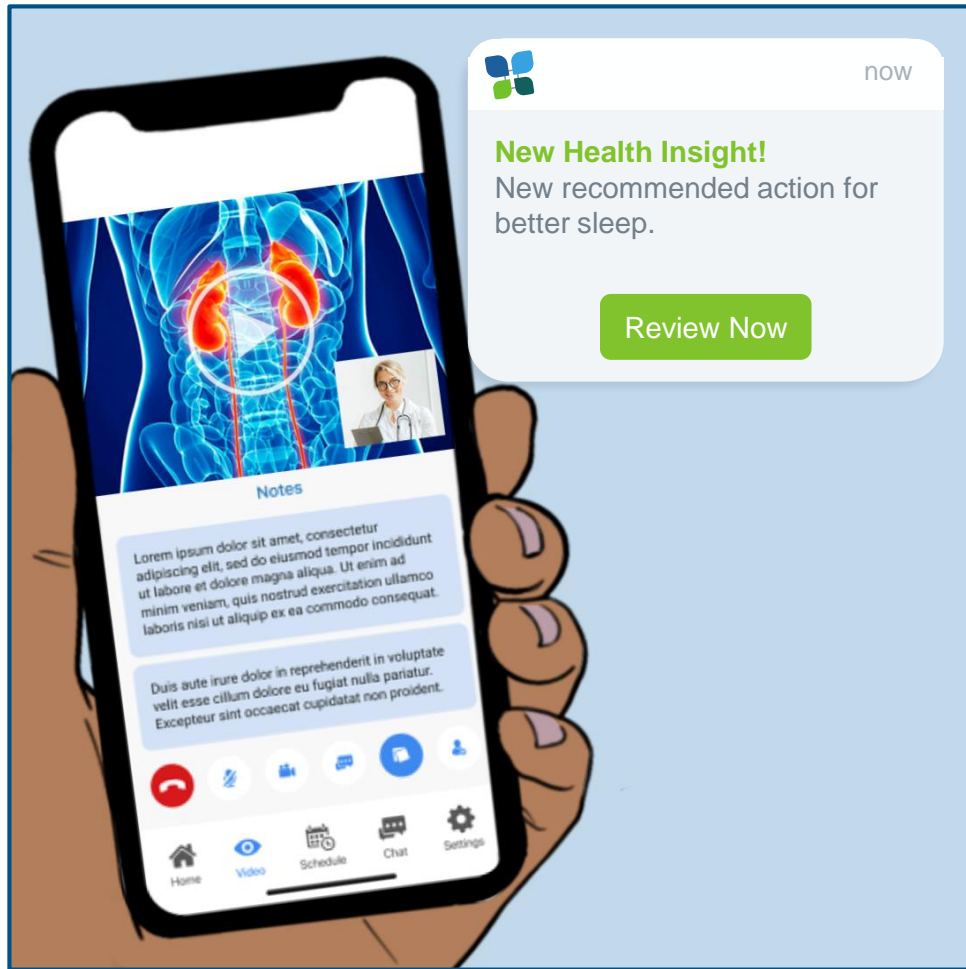
Norah's **AdventHealth app** reminds her of upcoming appointment and offers convenient directions to her PCP office.

Norah visits her PCP where she checks-in via her **AdventHealth app** then proceeds right back to an exam room without any wait. Her PCP had already reviewed the notes and Pre-Appointment Summary from Norah's Care Advocate. Her PCP was able to spend more time discussing Norah's anxiety and was glad to see she had also seen a mental health therapist.

Following her appointment, Norah's **Care Advocate** follows up to reinforce her PCP instructions, answer questions, and offers encouragement.



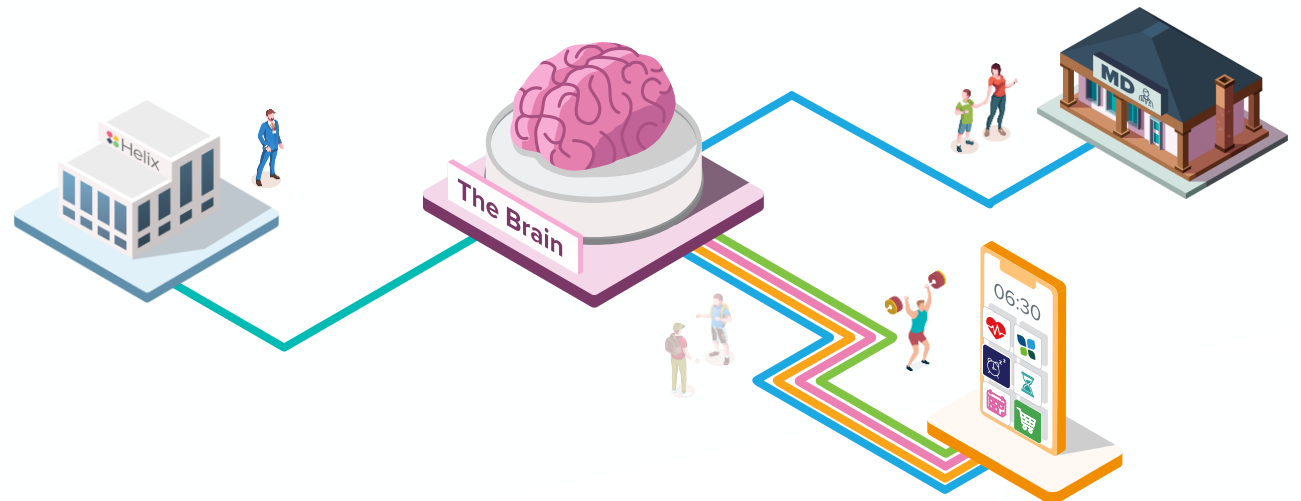
# Day Three



6:00 PM

Following the PCP review, she adds several items to Norah's **Life Plan** of additional labs and notes to the Care Advocate of additional interaction suggestions. Her Care Advocate schedules the appointments based on Norah's preferences and recent insurance change.

Norah also receives an update of her **Digital Twin** revealing great visuals of Norah's kidneys and how it may be contributing to her sleep issues. "Having high blood sugar can activate your kidneys and cause the need to urinate more frequently throughout the night, interrupting your sleep."



# The **Primary** Care Experience



## Virtual Care

### Definition

Build the case for a structured virtual care business capable of providing virtual healthcare services to consumers, employers and providers.



## Senior Care

### Definition

Develop a risk-bearing clinic model that is scalable and tailored to serve the needs of the Medicare population.



## Primary Care+

### Definition

Build a family practice model on the promise of patient convenience, accessibility, personalization and innovation.



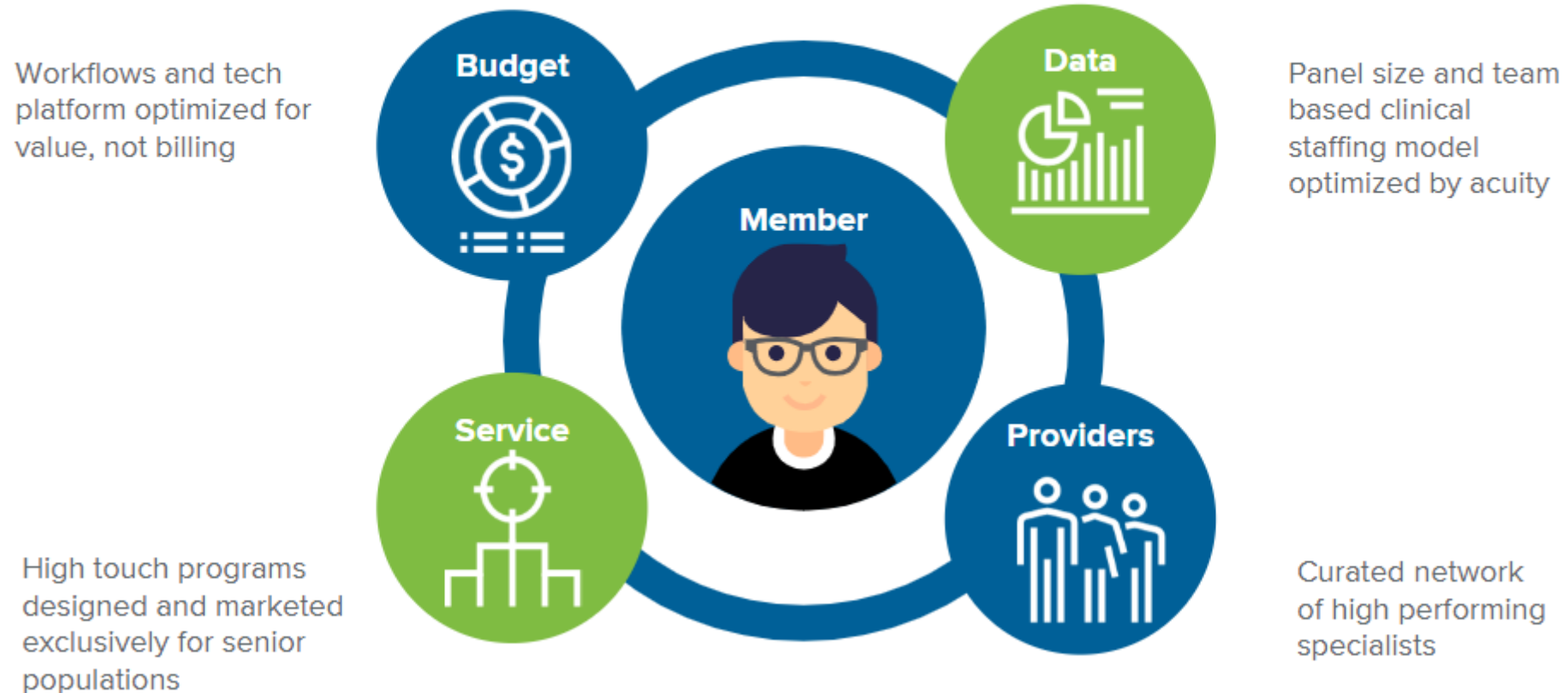
## Health Parks

### Definition

Build a consumer-centric, connected experience that allows for co-located primary care, ambulatory and specialty services on the promise of convenience, accessibility, personality and innovation.

# Primary Care Senior Care

## Senior Care Clinic vs. Traditional Primary Care Differentiators



# Primary Care Senior Care

## Service Delivery

**4 PCPs** per location

Placed where  
**Seniors frequent**  
& built to **meet seniors' needs**



## Location Services

- ✓ Health Coaches
- ✓ Manager
- ✓ RN
- ✓ Welcome Staff
- ✓ Phlebotomy
- ✓ Payor Brokers
- ✓ Pharmacist
- ✓ Marketing

*Will launch both de novo and transition locations.*



# Primary Care Senior Care

## Provider Panel & Access Management



**450 - 750**

Medicare Advantage  
**Patients per Physician**

*(Panel size based on the acuity / RAF score  
of the patients)*

**10 - 12**

**Patients a day**  
when stable

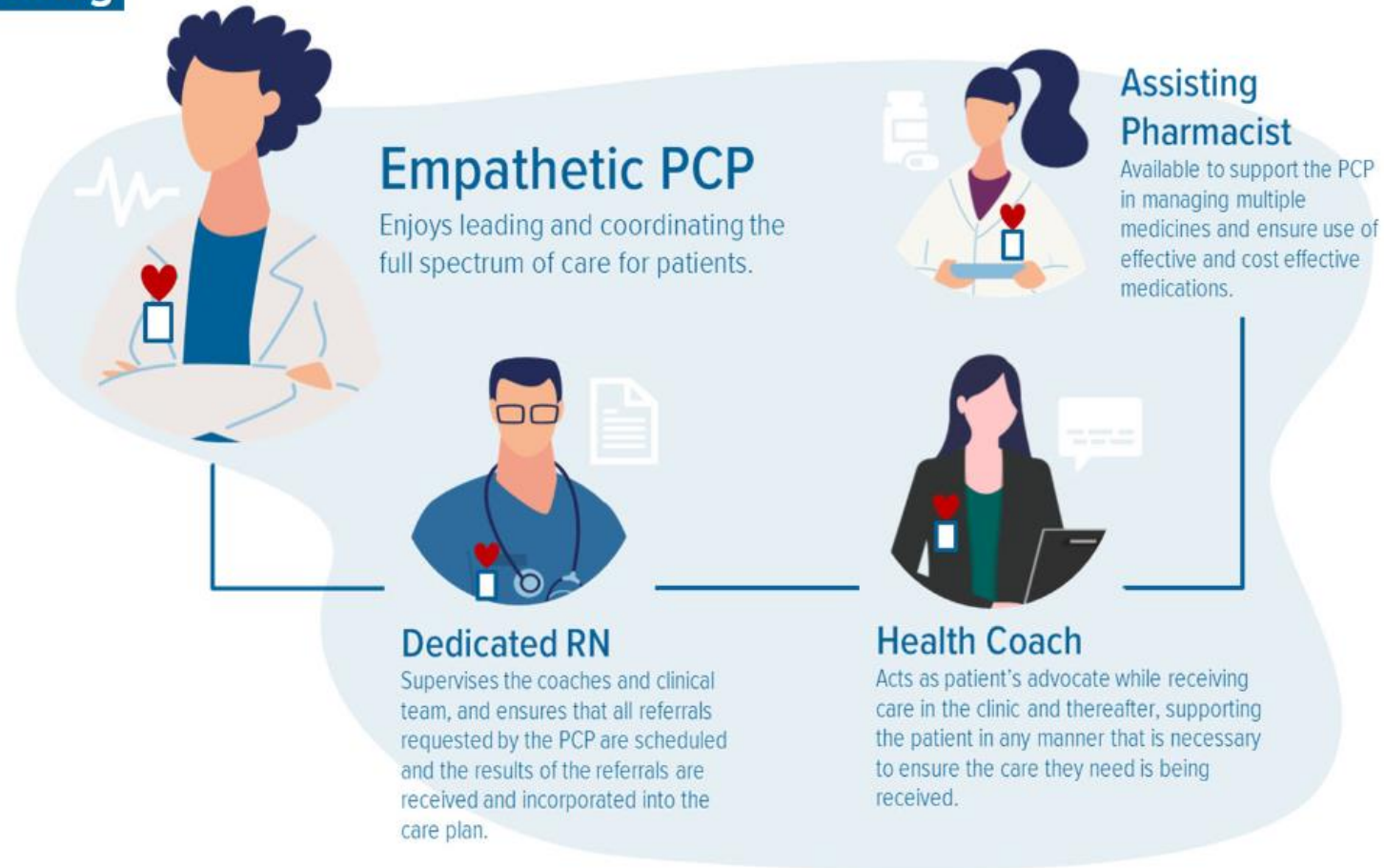
Participation with at least **3 Medicare Advantage Payors**  
per location



*Utilize the provider Network  
of the payor*

# Primary Care Senior Care

## Staffing



**30%** of the *customer interactions* are with the *physician*.

The remainder are with coaches, social workers, etc.

*All systems are structured in such a manner to ensure the patients have access to their care team.*



What makes it “+”?

- Convenience & Accessibility
- Personalization
- Innovation



# Primary Care+

*Primary Care+ is a new family practice model built on the promise of patient convenience, accessibility, personalization, and innovation.*

- Open 7 days/week, extended hours, same-day access & self scheduling
- On-site, same day labs,
- Interactive in-room monitor
- 24/7 communications with care team via AH App

## Convenience & Accessibility



- Personalized first visits & care plans
- Concierge referrals
- Hospitality trained staff

## Personalization



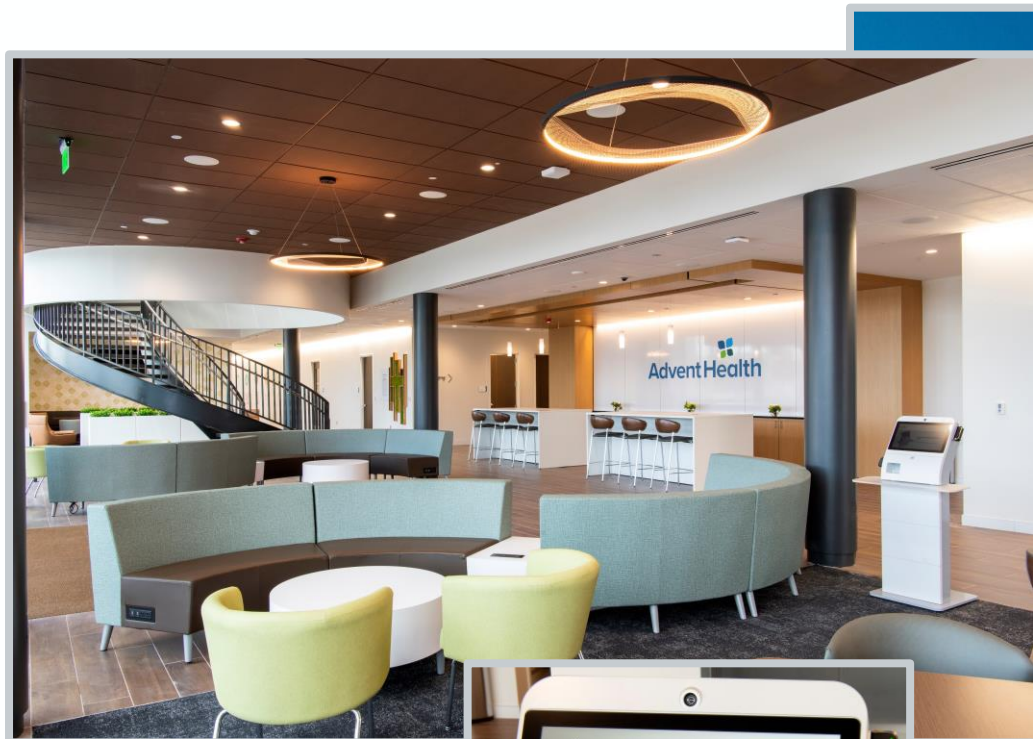
- Virtual Care with care team, dietitians & mental health counselors
- Paperless pre-visit registration

## Innovation





# Health Parks

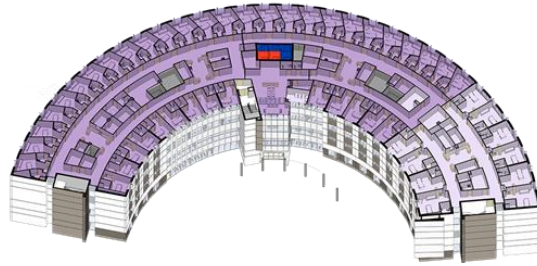


# The **Acute Care** Experience



# Possible Models

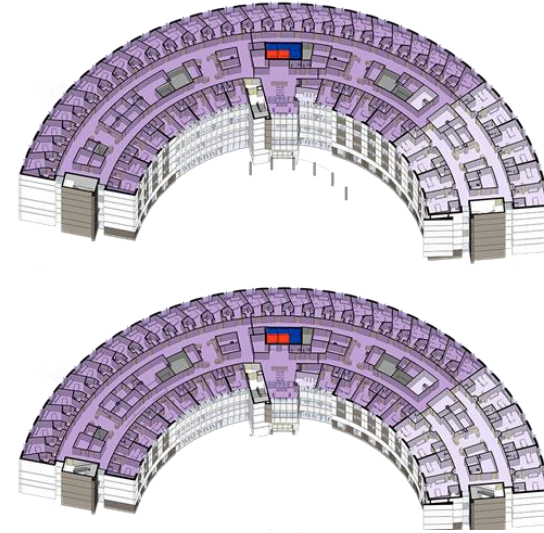
Model A



50 Beds (capped)

\$62 M

Model B



100 Beds (capped)

\$75M (shelled)  
\$92M (built)

# 100 BED PROTOTYPE – SUMMARY OF SERVICES

TOTAL – 122,146 BGSF (EXTERIOR TILT WALL STRUCTURAL FAÇADE, SINGLE COLUMN LINE)

3<sup>RD</sup> LEVEL – 30,351 BGSF & 4<sup>TH</sup> LEVEL – 30,351 BGSF = 60,702 BGSF

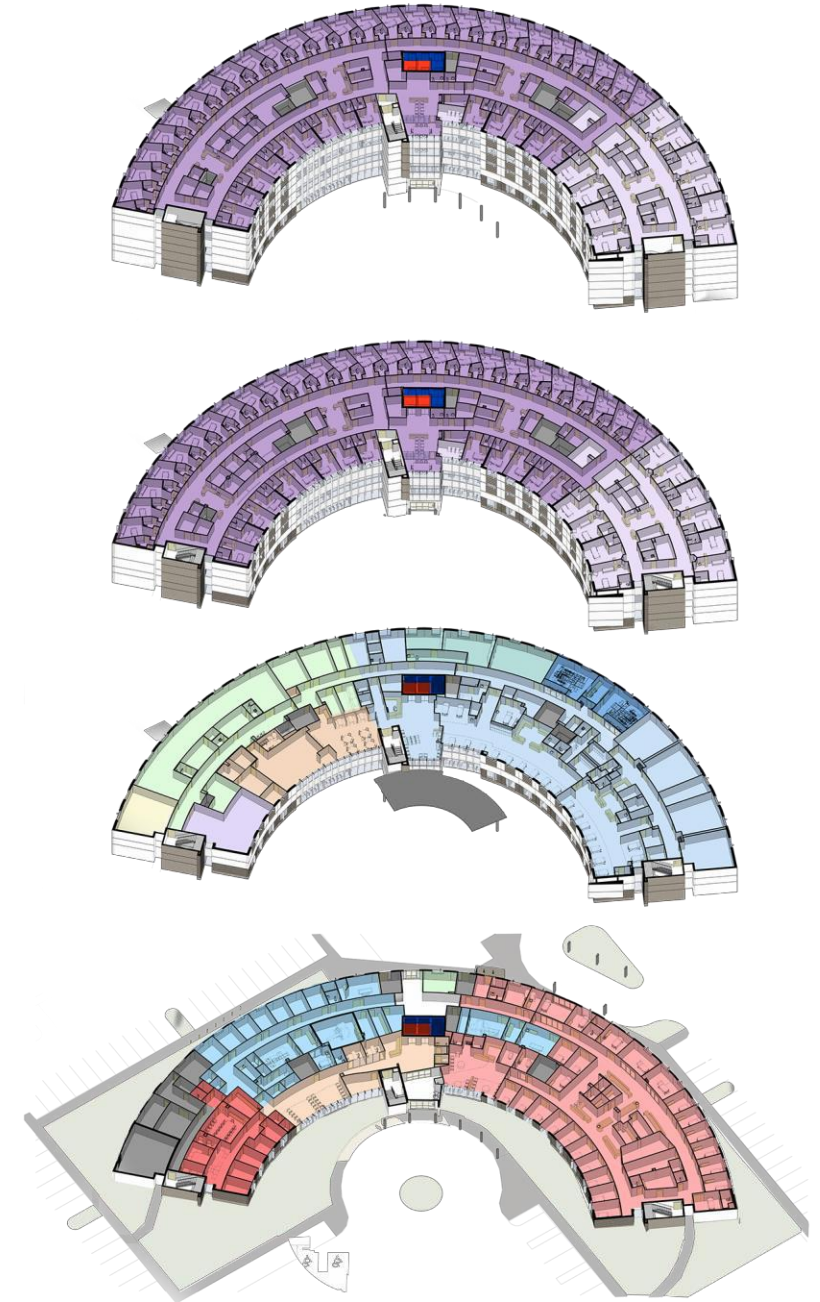
- MEDICAL SURGICAL UNIT – 40 BEDS, NO BIRTHING, NO EXPANSION X 2 = 80 BEDS
- CRITICAL CARE UNIT – 10 BEDS X 2 = 20 BEDS
- BUILDING SUPPORT – 3 ELEVATORS, CENTRAL LOCATION, ROOFTOP AHU'S

2<sup>ND</sup> LEVEL – 30,248 BGSF

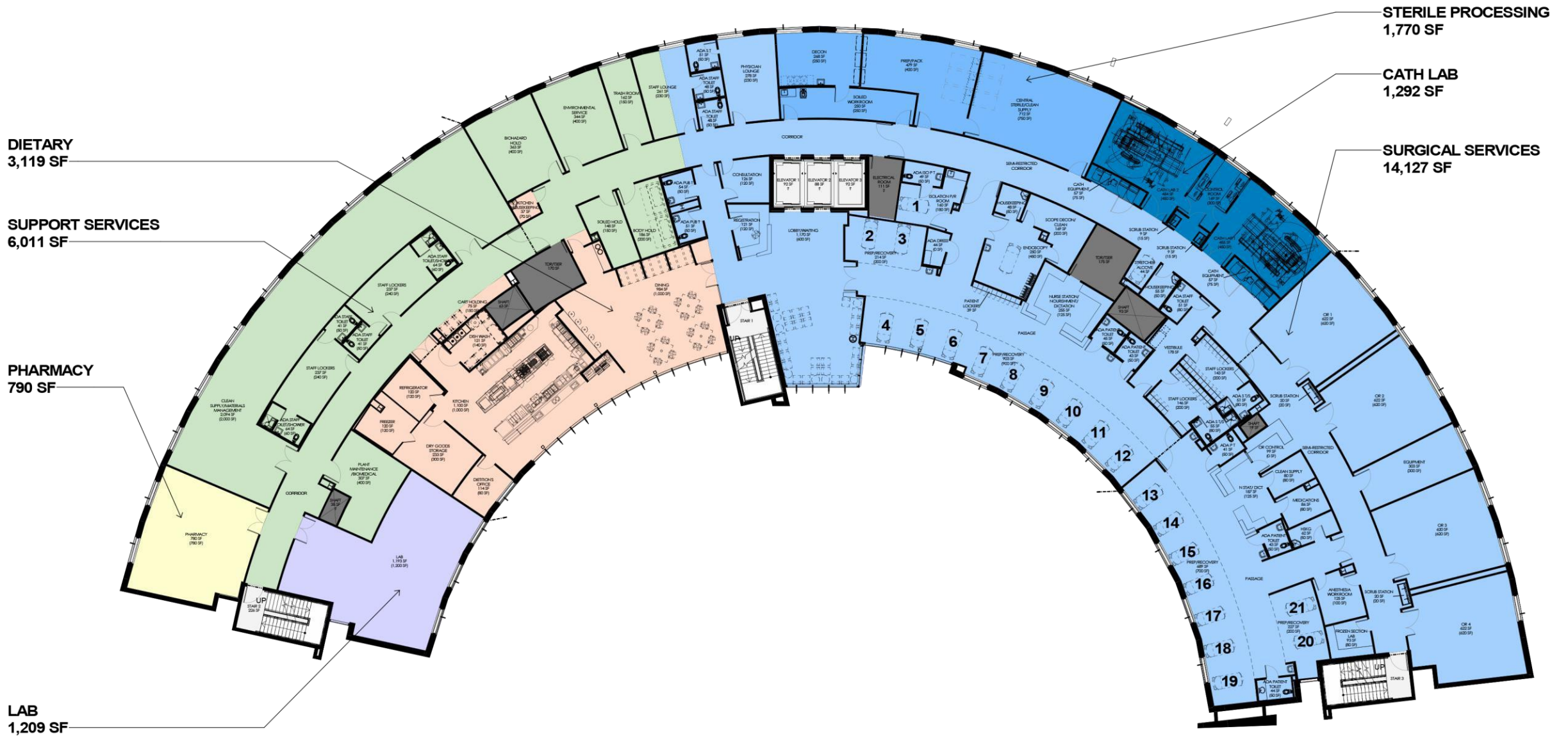
- SURGICAL SERVICES – 4 OR'S, ALL OVER 600 SF, 21 PREP/RECOVERY BAYS
- STERILE PROCESSING & DISTRIBUTION
- CATH LAB & ENDOSCOPY – 1 CATH, 1 FUTURE CATH, 1 ENDO
- SUPPORT SERVICES – MAT MGMT, ENVIRON SERV, LAB, PHARMACY
- DIETARY – CHEF'S KITCHEN CONCEPT
- BUILDING SUPPORT – MOVING TO 1<sup>ST</sup> FLOOR FOR D/T & SUPPORT EXPANSION
- LAB
- PHARMACY

1<sup>ST</sup> LEVEL – 31,039 BGSF

- EMERGENCY DEPARTMENT – 24 TREATMENT ROOMS
- IMAGING – CT, MRI, RAD, RAD/FLUORO, NM, EKG, EEG, ECHO, STRESS X 2, PFT
- ADMINISTRATION – MOVING TO 1<sup>ST</sup> FLOOR FOR D/T & SUPPORT EXPANSION
- BUILDING SUPPORT – 2 GENERATORS, ALL CRITICAL SYSTEMS, LIMITED REDUNDANCIES

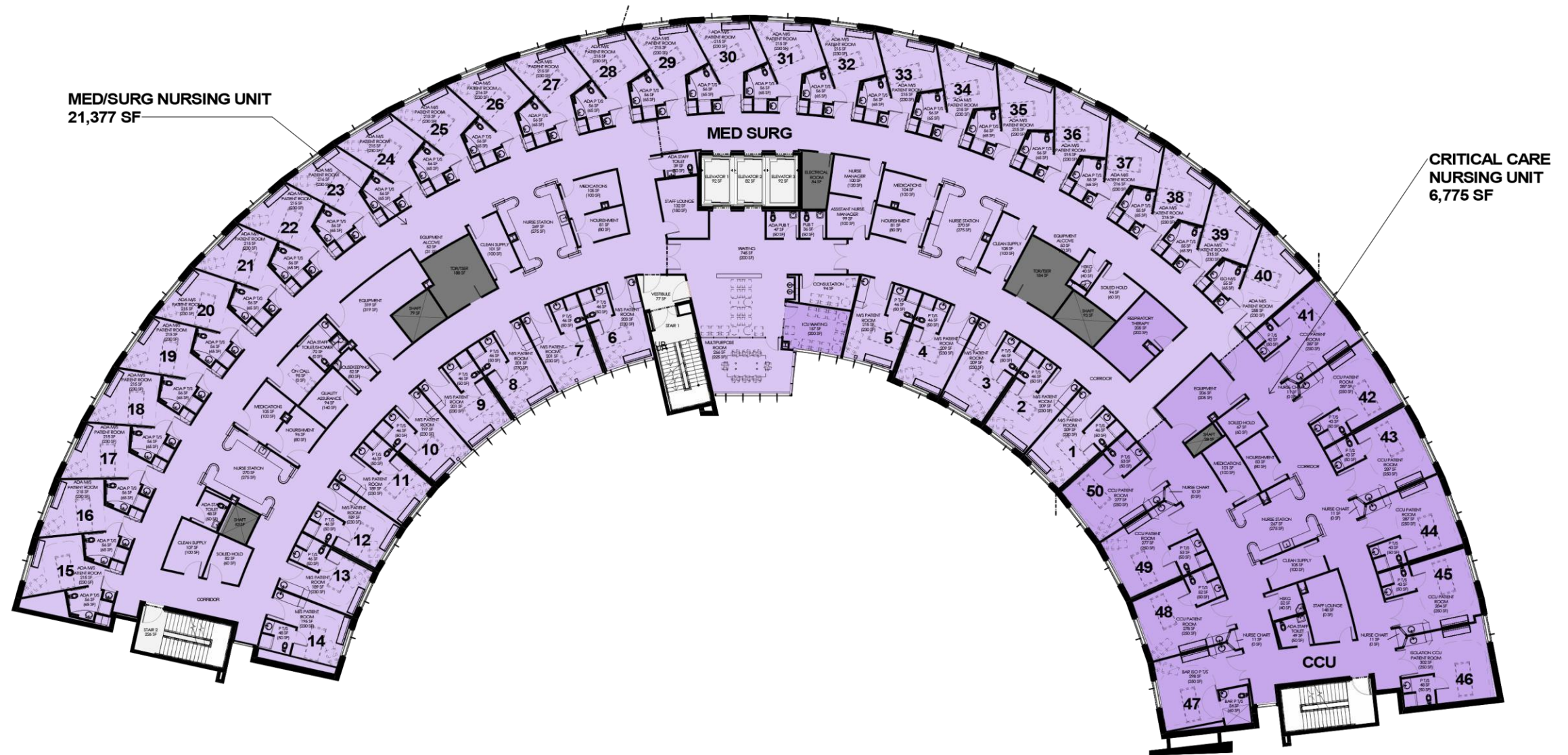


# 100 BED PROTOTYPE – LEVEL TWO DEPARTMENTS



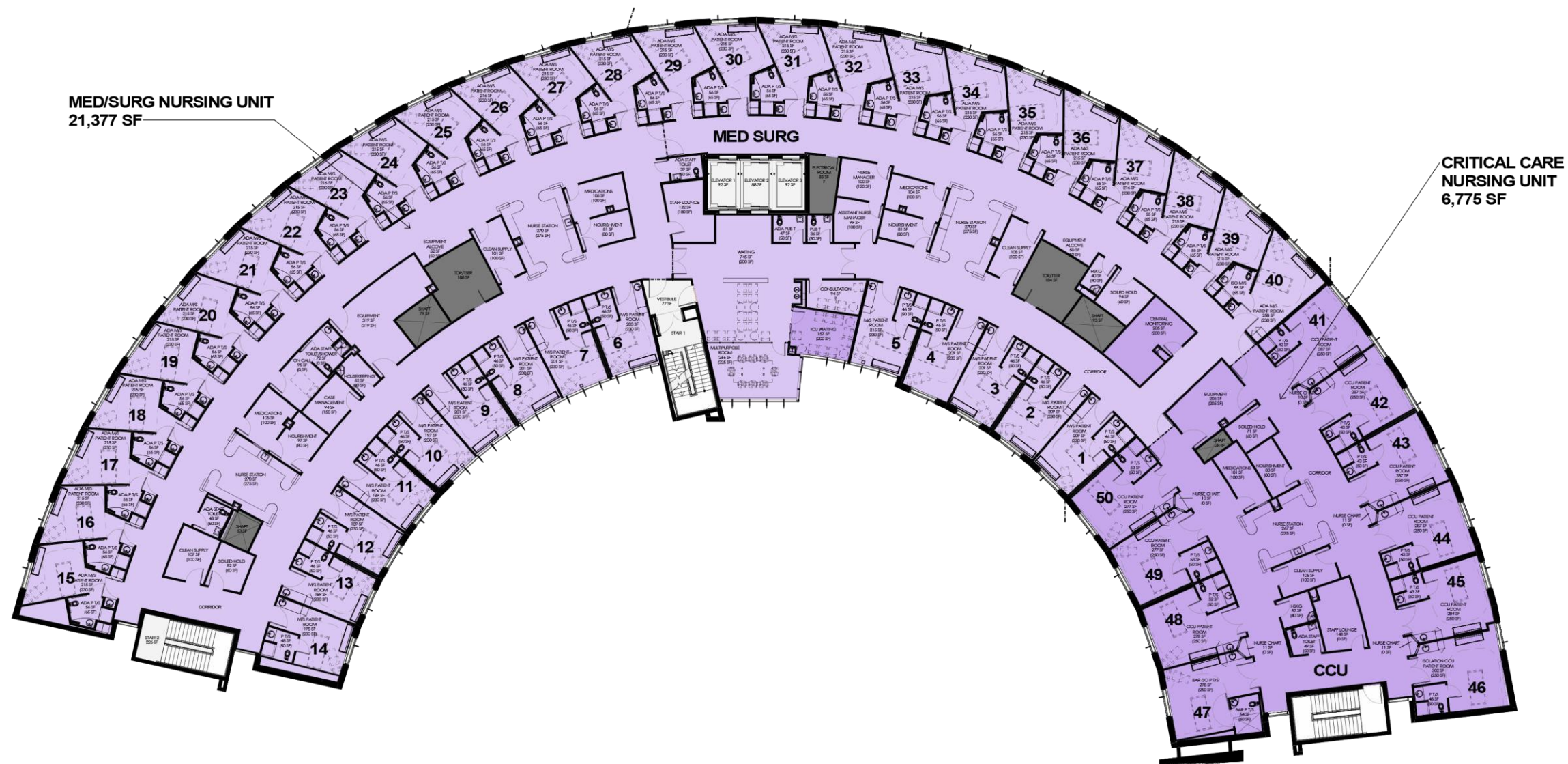


# 100 BED PROTOTYPE – LEVEL THREE DEPARTMENTS

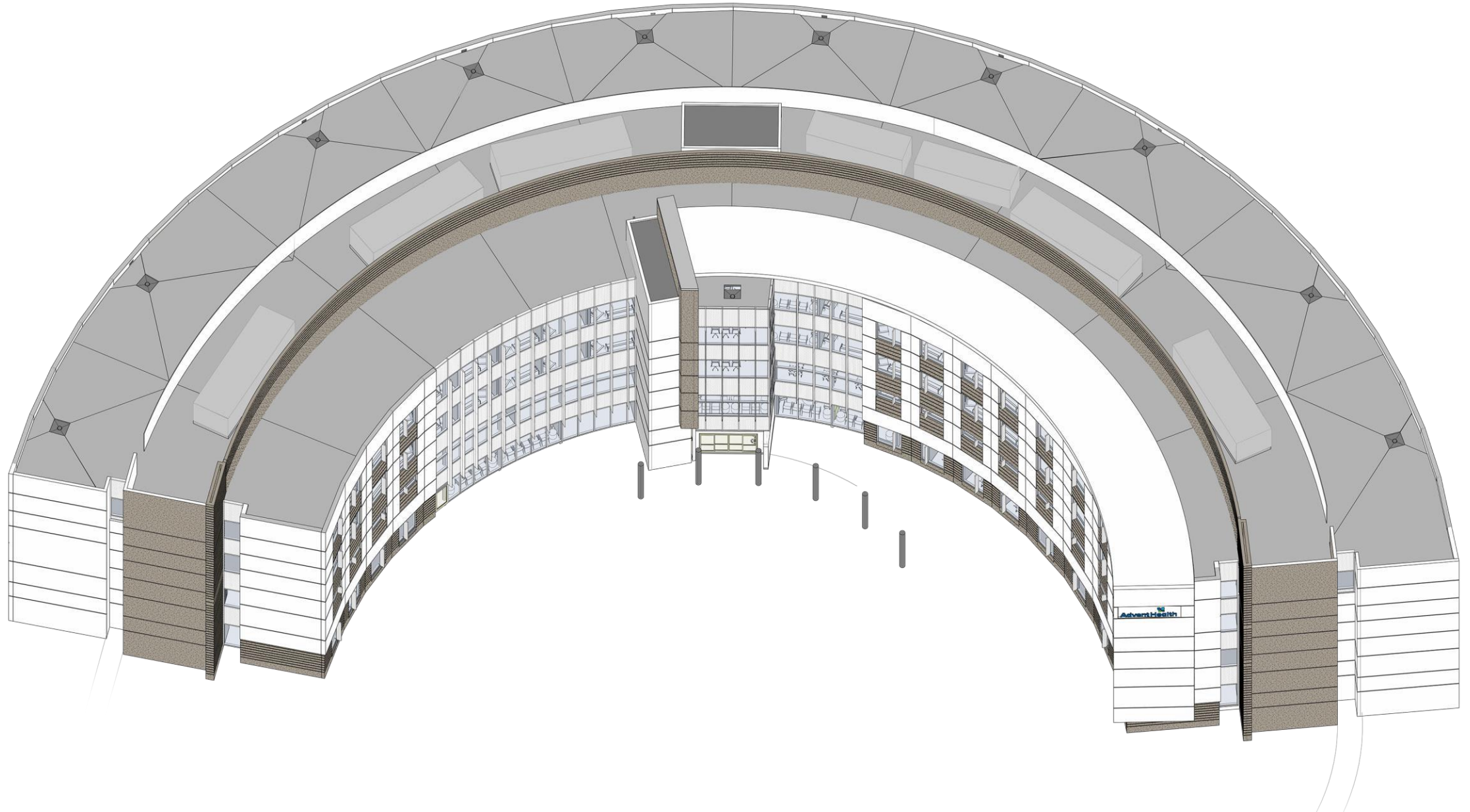




HuntonBrady  
ARCHITECTS



# 100 BED PROTOTYPE – LEVEL ROOF AXONOMETRIC





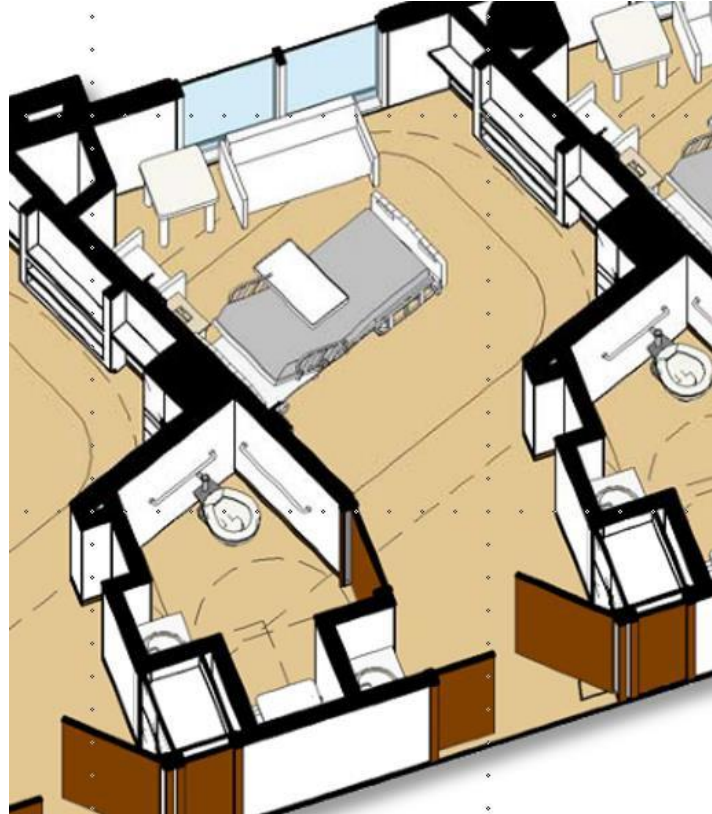
# BENCHMARKING – INPATIENT DEPARTMENT

## Type of Unit

Medical/Surgical  
(120 SF Min Clear)

Intensive Care  
(200 SF Min Clear)

TOTAL HOSPITAL BGSF:





# 100 BED PROTOTYPE – AERIAL VIEW LOOKING SOUTHWEST





A photograph of three men in a professional setting, likely a meeting room. They are standing in front of a large whiteboard covered with numerous colorful sticky notes. The man on the left, seen from the back, is writing on a sticky note with a blue marker. The man in the middle is smiling and looking at the whiteboard. The man on the right is looking at the whiteboard with a focused expression. The background is bright and slightly blurred, suggesting a modern office environment.

# Reimagining the Health System

November 5, 2020

Daryl Tol