2017 Report to the Community
Mission, Vision and Values

BayCare’s Mission, Vision and Values are the guiding forces that drive the health system.

BayCare’s Mission clearly states why BayCare exists:

Improve the health of all we serve through community-owned services that set the standard for high-quality, compassionate care.

BayCare’s Vision describes what the organization is working toward for the next three to five years:

BayCare is an extraordinary team leading the way to high-quality care and personalized, customer-centered health.

BayCare’s Values describe how we treat people, both inside and outside the organization:

The Values of BayCare are trust, respect and dignity, and reflect our responsibility to achieve health care excellence for our communities.

Letter from Our President/CEO and Board Chairman

Welcome to our Report to the Community. 2017 was an extraordinary year for BayCare. We celebrated a huge milestone, our 20th anniversary of BayCare coming together as an organization. We are proud of how far we’ve come and our steadfast dedication to preserving the local delivery of health care. But we also know the job is far from done.

At BayCare, we set our standards incredibly high. In fact, our top priority is delivering clinical excellence in every setting. That means our customers will have access to health care that’s as good as, or better than, anywhere else in the country.

We are happy to report that we took major steps in that direction.

Clinical Excellence

This is our true north at BayCare. Everything we do ties back to clinical excellence. Our Truven Health rankings went up, moving us closer to our goal to be in the top 20 percent of health systems in the country. In 2018, St. Joseph’s Hospitals and Mease Countryside Hospital were named to the IBM Watson Health 100 Top Hospitals list. Our hospitals were the only large community hospitals in the state to receive this recognition. On specific clinical measures, we also did some great work. Our overall readmission rates were the lowest they’ve been since 2012. We also saw good improvements in how we treat patients with blood clots and in our Emergency Department throughput, which is a measure of how long our patients spend in our emergency departments. While we celebrated these important achievements, we also realize that we fell short on other clinical goals, and we need to focus even more on those areas in 2018.

Teamwork

In order to achieve clinical excellence, we know that we need happy and engaged team members and physicians working together as one BayCare team. So, we set forth a significant body of work to measure how we are doing in these areas. In 2017, our team member and physician engagement scores moved to the top 15 percent nationally when compared to similar health systems around the country.

Customer Experience

We know our industry is changing faster than ever, and customers are becoming savvier and more retail-minded. So, we are evolving our business model to meet their expectations. We added more physician practices and urgent care sites, and we unveiled a new partnership that will add digital health locations at Publix stores. We also made it easier for patients to find a doctor if they don’t already have one, and to schedule appointments online. We also improved our ability to monitor what’s being said about us on social media sites so we can have a better picture of how we are doing.

Financial Responsibility

Maintaining our financial stability is important because we know that a healthy bottom line is the best way to continue ensuring that we provide high-quality care for everyone, regardless of whether they have good health insurance or none at all. While we don’t have corporate shareholders to impress, we do have a community that depends on us. And they deserve our very best.

On behalf of our entire organization and our Board of Trustees, thank you for taking a few moments to learn more about us. We appreciate your continued support.

Sincerely,

Tommy Inzina
President/CEO

V. Raymond Ferrara
Board Chairman
2017: By the Numbers

$391 million
Community Benefit

5,240
Physicians and Medical Professionals

$3.9 billion
Operating Revenue

27,600
Employees

3,459
Beds

858,576
HomeCare Visits

139
Physician Practice Locations

15,065
Births

63,165
Outpatient Surgeries

675,645
ER Visits

176,228
Discharges

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About Us

BayCare is a leading not-for-profit health care system that connects individuals and families to a wide range of services at 15 hospitals and hundreds of other convenient locations throughout the Tampa Bay and West Central Florida regions. BayCare also is one of the largest private employers in the area with an estimated $6.62 billion in annual impact on the region and the state.

Our Network

BayCare Behavioral Health
BayCare HomeCare
BayCare Laboratories
BayCare Medical Group
BayCare Outpatient Imaging
BayCare Surgery Centers
BayCare Urgent Care

Our Hospitals

Bartow Regional Medical Center
Founded 1925
72 beds

BayCare Alliant Hospital
Founded 2008
48 beds

Mease Countryside Hospital
Founded 1985
311 beds

Mease Dunedin Hospital
Founded 1937
120 beds

Morton Plant Hospital
Founded 1916
613 beds

Morton Plant North Bay Hospital
Founded 1965
150 beds

St. Anthony’s Hospital
Founded 1931
393 beds

St. Joseph’s Hospital
Founded 1934
465 beds

St. Joseph’s Children’s Hospital
Founded 1990
207 beds

St. Joseph’s Women’s Hospital
Founded 1976
108 beds

St. Joseph’s Hospital-North
Founded 2010
108 beds

St. Joseph’s Hospital-South
Founded 2015
114 beds

South Florida Baptist Hospital
Founded 1953
147 beds

Winter Haven Hospital
Founded 1926
458 beds

Winter Haven Women’s Hospital
Founded 1987
61 beds

1 Represents unreimbursed costs for traditional charity care, Medicaid and other means-tested programs, and unbilled community services
2 Includes PRN
3 Includes beds at Morton Plant North Bay Hospital Recovery Center and St. Joseph’s Hospital Behavioral Health Center
4 Includes employed, credentialed and community-based physicians, and medical professionals (PA, ARNP, CRNA, etc.)
5 Twenty-five Walk-In Care stations will be available inside select Publix stores throughout the Tampa Bay area in 2018
6 Includes only hospital-based outpatient surgeries
BayCare provides the full continuum of health services in a four-county area. BayCare also is one of the largest private employers in the area with an estimated $6.62 billion in annual impact on the region and state.
BayCare kicked off its new brand campaign with a television ad that ran locally during the Super Bowl.

BayCare unveiled a redesigned, easier-to-read consolidated billing statement for its hospitals, imaging, primary care, urgent care and outreach lab services.

South Florida Baptist Hospital started to provide emergency cardiac catheterization.

Publix Pharmacy and BayCare announced an exclusive collaboration to improve the delivery of health care to the residents of Hillsborough, Pasco, Pinellas and Polk counties.

BayCare hospitals went live with telemonitoring.

St. Joseph’s Children’s Hospital achieved Pathway to Excellence designation from the American Nurses Credentialing Center (ANCC).

BayCare hospitals went live with telemonitoring.

St. Joseph’s Women’s Hospital achieved Pathway to Excellence designation from the American Nurses Credentialing Center (ANCC).

Bartow Regional Medical Center started providing cardiac PCI, a nonsurgical technique for treating obstructive coronary artery disease.

St. Joseph’s Hospital-North achieved Pathway to Excellence designation from the American Nurses Credentialing Center (ANCC).

Hundreds of BayCare team members and physicians volunteered countless hours to help care for patients and families during Hurricane Irma.

St. Joseph’s Hospital achieved Pathway to Excellence designation from the American Nurses Credentialing Center (ANCC).

Winter Haven Hospital opened a new Emergency Department.

Morton Plant Hospital opened its new Doyle Tower, a four-story, 200,000-square-foot patient and surgical building.

BayCare expanded health care access to the New Tampa and Wesley Chapel neighborhoods by opening a health center with imaging, laboratory, urgent care and primary care services.

BayCare broke ground on the Bloomingdale HealthHub, a high-tech center that provides traditional health care along with wellness services.

BayCare opened its first Publix/BayCare digitalHealth station in Brandon.

BayCare expanded urgent care services in Polk County.

BayCare Physician Partners was approved to become a track 3 accountable care organization, taking on $70 million of risk.

Morton Plant North Bay Hospital hosted the grand opening of its new Emergency Department.

St. Joseph’s Hospital-South achieved Pathway to Excellence designation from the American Nurses Credentialing Center (ANCC).

BayCare Select received its license to operate a health maintenance organization (HMO).
### Financial Information

#### Our Resources

<table>
<thead>
<tr>
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<th>2017</th>
<th>2016</th>
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<tbody>
<tr>
<td>Acute Care, Behavioral Health and Rehab Services</td>
<td>$ 3.3 billion</td>
<td>$ 3.09 billion</td>
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<tr>
<td>Physician Services</td>
<td>257 million</td>
<td>230 million</td>
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<tr>
<td>Ambulatory Services</td>
<td>314 million</td>
<td>285 million</td>
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<tr>
<td>Continuing Care Services</td>
<td>30 million</td>
<td>29 million</td>
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<tr>
<td>All Other Services</td>
<td>26 million</td>
<td>39 million</td>
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<tr>
<td>Non-Operating Income Primarily from Investing Activities</td>
<td>461 million</td>
<td>293 million</td>
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<tr>
<td><strong>Total Resources</strong></td>
<td><strong>$ 4.39 billion</strong></td>
<td><strong>$ 3.97 billion</strong></td>
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#### How Our Resources Were Used

<table>
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<tr>
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<th>2017</th>
<th>2016</th>
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<tbody>
<tr>
<td>Salaries and Benefits to Our Team Members</td>
<td>$ 1.97 billion</td>
<td>$ 1.85 billion</td>
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<tr>
<td>Medical Supplies</td>
<td>655 million</td>
<td>618 million</td>
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<tr>
<td>Other Supplies and Services</td>
<td>623 million</td>
<td>557 million</td>
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<tr>
<td>Contracted Physician Services</td>
<td>86 million</td>
<td>80 million</td>
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<tr>
<td>Financial Costs</td>
<td>60 million</td>
<td>60 million</td>
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<tr>
<td>Funding for Replacement Capital</td>
<td>208 million</td>
<td>207 million</td>
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<tr>
<td>Business Acquisitions</td>
<td>90 million</td>
<td>64 million</td>
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<tr>
<td>Funding for Future Community Health Care Needs, Technology, New Programs and Facilities</td>
<td>696 million</td>
<td>525 million</td>
</tr>
<tr>
<td><strong>Total Resources Used</strong></td>
<td><strong>$ 4.39 billion</strong></td>
<td><strong>$ 3.97 billion</strong></td>
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### Community Benefit

Typical residential street in Clearwater’s North Greenwood neighborhood, where BayCare partnered with Mt. Olive AME Church to hold a free health fair for residents.
Community Benefit

Woven into the fabric of our organization is the steadfast belief that everyone deserves the same access to high-quality care, regardless of their ability to pay. BayCare’s size and financial stability enable us to stay true to our not-for-profit, community-based roots.

Every year, we provide care—in the form of community benefit—to uninsured and underinsured patients. Many might not receive the care they needed without the safety net that BayCare provides.

Community benefit includes charity care, Medicaid and other income-based programs, and unbilled community services, such as health professional education, community health services, cash and contributions to community groups and other services. All of these are measured in unreimbursed costs.

In 2016, our total community benefit was $346 million or 9.4 percent of operating revenue. In 2017, that figure went up to $391 million or almost 10 percent of operating revenue.

Every three years, we also conduct a Community Health Needs Assessment to determine the most pressing health needs of our communities. The most recent assessment identified access to health care services as the most pressing need.

BayCare has responded by offering, among other things, an impressive roster of health screening events: 188 events in 2017, with 4,686 people seen. Our Community Health team’s 30 members conduct screenings and dispense health education wherever there is a need and, when indicated, will refer screening participants for ongoing health care.

“Improving the health of the community, both inside our clinical facilities and across our neighborhoods, is part of our DNA and fundamental to why our team members get up every day and go to work.”

– Keri Eisenbeis, director of Government Relations and Community Outreach

“God bless us with the relationship with BayCare,” said Dr. Joseph Smiley, a prominent member of the Mt. Olive congregation. BayCare, he says, “brought a Christ-like spirit for helping to the table.”

“Bringing Health to the Community

Leaders at Clearwater’s Mt. Olive African Methodist Episcopal Church needed help to organize a community-wide health fair for residents of the North Greenwood neighborhood near the church.

They reached out to BayCare’s Faith Community Nursing (FCN) program for help. Together, they pulled in other community groups and BayCare entities whose involvement could help North Greenwood, including Gulf Coast Dental Outreach, the Juvenile Welfare Board, RIC, the Turley Family Health Center and the St. Joseph’s Children’s Wellness and Safety Center.

“My. Many of these residents are low income and many probably don’t get health care,” said Rev. James V. Williams, Mt. Olive’s pastor for the past seven years. “If people don’t have health, their whole life is impacted. We’re grateful that BayCare is so open to just come and share all they have with the community.”

When the doors opened for the free North Greenwood Community Health Fair on a Saturday in October, visitors were welcomed by more than 20 beaming BayCare Faith Community Nurses.

“It was great to be accepted there. I thought it was a great door opener,” said FCN Supervisor Susan Fontaine. “Lives were changed that day, not just physically, but mentally.”

Neighborhood residents stepped up to tables staffed by dozens of BayCare team members: Community Health nurses who checked blood pressure and tested for cholesterol and prediabetes; educators from BayCare’s Morton Plant Mease diabetes education program; health care navigators to help them sign up for health insurance; nutrition educators who offered advice about inexpensive ways to improve their diets; physicians who answered questions; members of the BayCare Pastoral Care program who provided information about advance directives; and representatives of BayCare Behavioral Health.

“The Rev. James Williams, pastor of Mt. Olive AME Church in Clearwater, called for the congregation to get more involved in the nearby North Greenwood community’s struggles.

The Rev. James V. Williams, pastor of Mt. Olive AME Church in Clearwater, called for the congregation to get more involved in the nearby North Greenwood community’s struggles.

Dr. Joseph Smiley, a leader at Mt. Olive AME Church in Clearwater, a passionate about improving the health of North Greenwood residents.
Honorita P. Darden didn’t have insurance coverage when she was diagnosed with cancer. BayCare’s Financial Assistance department helped her get the surgery and cancer treatments she needed. Now she wears a badge that states “I love BayCare” when she goes to medical appointments.

“I love BayCare.
If it weren't for BayCare and God's help, I would be dead.”
— Honorita P. Darden

Financial Assistance

BayCare’s “Army of 100”

When the telephone rings in BayCare’s Financial Assistance department, on the other end of the line there is often a frightened, desperate person—someone who needs medical treatment or surgery, and is worried they cannot afford the bill.

That’s when the Financial Assistance “Army of 100” steps up. BayCare employs almost 100 people whose job is to help individuals get the medical care they need, regardless of their ability to pay.

“I see our department as a balance between our mission and our financial responsibility,” said Lou Ann Watson, BayCare’s director of Financial Assistance. “BayCare’s mission is to serve our community, and some members of our community can’t afford health care. It is important for us to care for everyone in our community, regardless of their ability to pay for their health care.”

Patients often are shocked when BayCare offers help with their medical bills.

“We hear them crying over the phone,” Watson said.

A special bond forms between the patients and the Financial Assistance team member who assists them. Many patients send letters of gratitude. Some patients have invited their caseworkers to their weddings. One patient named her child for her caseworker.

BayCare also is one of the few health systems in the nation that employs in-house Marketplace navigators to assist community members in signing up for insurance coverage under the Affordable Care Act.

Financial Assistance team members also help people apply for Medicaid, Social Security disability and other county, state and federal assistance programs. Hospital-based Financial Assistance navigators also make about 1,500 bedside visits per month to insured patients, just to make sure they understand how to take full advantage of their insurance benefits and to address any health care access issues they are experiencing.

“Our help doesn’t end when a patient leaves the hospital,” Watson said. “Some of our team members have developed relationships that span years of assisting our patients. Ultimately, our goal is to provide the best possible assistance to each person who needs our help—one patient at a time.”

Answered Prayer

St. Petersburg resident Honorita P. Darden, 59, expresses her feelings on a small sign she pins to her dress every time she goes to medical appointments. “I love BayCare,” it reads.

“I mean it when I wear that sign,” she said. “I love BayCare. If it weren’t for BayCare and God’s help, I would be dead.”

Honorita, who was born in the Philippines and moved to the United States in 1980, is divorced and the mother of two adult children. She’s also a former BayCare team member who left the health system in 2015 and started her own cleaning business. Just six months later, she was diagnosed with cancer and was told she needed immediate surgery. Her first thought?

“Oh no. I don’t have my health insurance yet.”

She had been waiting for her new business to take off before buying health insurance. Now, she had no way to pay for surgery. Sick and praying for help, she visited several community hospitals to ask for relief on medical bills, but got nowhere—until she walked into BayCare’s St. Anthony’s Hospital and met Financial Assistance team member Courtney Burt.

Burt worked with Honorita on her hospital-related charges so the surgery could proceed. The Financial Assistance department also stepped in again when tests showed Honorita’s cancer had spread, helping her set up chemotherapy and radiation treatments and getting her enrolled in Medicaid. Tests show she is now cancer free.

“They were so good, so helpful,” Honorita said of the Financial Assistance team members. “It was an answered prayer.”
Behavioral Health

Caring for the Whole Person

Many hospital systems provide few or no behavioral health services because the regulatory and funding mechanisms are complex and different from traditional health services. Also, treating behavioral health patients can be challenging because of the medical, psycho/social, economic and legal aspects of their care.

But ignoring the community’s mental health needs is not an option for BayCare, which is committed to caring for the whole person.

BayCare Behavioral Health offers the full gamut of services, from conducting educational workshops for the public to accompanying police as they attempt to rescue mentally ill individuals from harmful situations. BayCare positions mental health interventionists in courtrooms, schools and emergency rooms all over the community. It provides both residential and outpatient care through programs designed to provide whatever level of care a person needs to get better.

“The population we serve suffers from the greatest disease burden,” said Dr. Nick Dewan, Behavioral Health director and chief medical officer. “We serve patients who also are fearful of getting care, may not want the care, and who get labeled and blamed for their illnesses.”

BayCare also manages Employee Assistance Programs, and recently placed behavioral health therapists inside seven BayCare Medical Group physician practices so patients may see a therapist and their regular physician in the same trip.

BayCare’s Student Assistance Program, created after the Virginia Tech mass shootings in 2007, offers confidential assessment, referral and short-term counseling services for approximately 300,000 students attending colleges from the Florida Panhandle to Palm Beach County and in a few other states. Students have 24/7/365 access to mental health professionals when facing personal problems that could affect their academic success and overall well-being.

Every day, BayCare Behavioral Health provides services to thousands of people in the bay area and beyond.

“We have an army of people who know how to do this,” said Gail Ryder, BayCare’s vice president of Behavioral Health Services. “It’s a vast program.”

A Godsend for Me and My Family

Kim and all four of her young children were at home in Pasco County on the awful day in 2011 when her husband collapsed and died from a massive heart attack in front of them.

Kim admits that the years since have been chaotic.

All of her children, who are now 15, 13, 11 and 9 years old, have medical issues. And her 13-year-old son has been treated for behavioral health problems that began soon after his father died.

The boy began lashing out, and each year his anger seemed to grow. He was in therapy, but nothing seemed to work.

Kim was desperate for answers. “I just don’t want to fail my kids,” she said.

She got help from BayCare’s Pasco Community Action Team (CAT), an intensive, state-funded program that serves youths, ages 11 through 21, who have serious behavioral health issues not helped by traditional treatment.

The team includes case managers who tackle any immediate crisis gripping the family, such as a loss of housing or expulsion from school; a nurse who reviews the child’s medications, sleep schedule and nutritional needs; and a psychiatrist, therapists and mentors. The entire team gets together four days a week to talk about each child’s progress and needs.

“We do whatever it takes,” said Jenine Martin, who coordinates the Pasco team. “We don’t lose these kids. We aim everything we have at that child and family.”

The Pasco CAT worked with Kim’s son for almost a year, and CAT’s male mentor helped him vent his bottled-up emotions about his father’s death. Now, he is less angry and aggressive, Kim said, and shows remorse if he does wrong.

“The CAT team was fabulous, and the mentor they sent out was phenomenal,” Kim said. “The CAT team was a godsend for me and my family.”
Reducing Avoidable Readmissions – A Team Effort

Like many health systems, BayCare had struggled to reduce the number of patients who returned to the hospital soon after they left. Data showed that some patients were readmitted in as little as one to four days after discharge. So, BayCare marshaled clinical team members and leaders, led by Dr. Bruce Flareau, BayCare’s executive vice president and chief medical officer, to tackle the problem.

The solution, it turned out, was building a bridge between BayCare and the patient’s home, rehab center or other care setting—a bridge built on a foundation of immediate, persistent and caring communication after the patient leaves the hospital.

By the end of 2017, the readmission rate for high-risk patients was down 9.5 percent compared with the previous year, with 126 fewer patients readmitted within 30 days.

“"It is not over, but we have moved the needle, bringing us one step closer to delivering clinically excellent care to our patients,”” Dr. Flareau said.

Here’s how the BayCare teams worked the problem.

Discharge Planning

Could BayCare better prepare patients to complete their recoveries at home? A multidisciplinary team of leaders throughout the health system collaborated on how to standardize our hospital case management approach to the discharge process. Backed by data analytics, they implemented their changes immediately:

- Before patients leave the hospital, clinical staff members provide enhanced teaching about what they must do to recover successfully at home.
- Pharmacy staff delivers medications to patients before discharge if they don’t feel well enough to stop at a pharmacy on the way home.
- Within 48 hours, BayCare’s Post-Acute Care Center calls patients who are at high risk of readmission to schedule their first follow-up appointment, and also checks on them for 30 days.
- For a month, discharged patients get automated phone messages that educate them about their diagnosis and treatment.

“"Patients have expressed their appreciation at having a partner to support them beyond the walls of the hospital,”” said Lisa Johnson, senior vice president and chief nursing officer.

Care Transitions

A second team found ways to improve the transition of care from the hospital to home, rehabilitation center or nursing facility, and to ensure that patients get vital follow-up care, said Jim Cote, senior vice president of BayCare Ambulatory Services.

An advanced registered nurse practitioner (ARNP) now meets with patients before discharge to answer questions, and also visits them at home. BayCare HomeCare nurses observe the patients in their homes through scheduled telemonitoring visits—more than 2,096 of them during 2017. A program that focuses on heart failure and chronic obstructive pulmonary disease teaches patients and their caregivers how to recognize and quickly respond to signs the patient’s condition is deteriorating.

A BayCare pharmacist calls patients after discharge to see how they are doing on their medications. The BayCare Pharmacy Transitions of Care (PTOC) program received a 2017 national Best Practice Award from the American Society of Health-System Pharmacists. During 2017, 3,821 BayCare patients received the PTOC service, with a demonstrated positive impact on readmission rates.

Palliative Care

Sometimes patients with terminal illnesses return to the hospital because they fear what lies ahead or because they believe going back to the hospital is their only option for comfort care. Those patients are supported by another BayCare initiative: a palliative care program.

Built over the last two years, the palliative care team consists of seven board-certified palliative care physicians, three advanced registered nurse practitioners, and social workers and chaplains. Team members are available at most BayCare hospitals.

“These teams are dedicated to palliative care, to help patients address the physical, spiritual and emotional needs that come with a terminal illness,” said Dr. Jeffrey Held, vice president and chief medical officer for BayCare Ambulatory Services.

Clinical Excellence
Continuing Education

Students in the BayCare/St. Petersburg College associate degree nursing program smile at their recent graduation ceremony, attended by their families and friends.

Investing in Our Team Members
BayCare encourages its team members to dream of a better future for themselves and their families, and devotes substantial resources to helping them achieve those dreams, no matter where they start in the health system.

BayCare's dedication to education is reflected in the size of its training budget—approximately $55 million a year. During 2017, the health system paid $6.6 million in tuition reimbursements alone to 3,500 team members attending 124 educational institutions.

The health system has received national and international attention for its education programs. FORTUNE magazine recognized BayCare as a 2017 Great Place to Work. And Training magazine named BayCare to its prestigious Training Top 125, which recognizes companies around the globe that are "unsurpassed in harnessing human capital."

In some cases, BayCare develops educational programs to get ahead of a predicted labor shortage. When BayCare realized there was no program in the community to train new medical laboratory technologists, it partnered with Hillsborough Community College and Erwin Technical College to create one, which graduated its first class in 2017.

BayCare's associate degree nursing program in partnership with St. Petersburg College (SPC) also helps the health system grow some of its own nurses in the face of a national nursing shortage. Classes are held in BayCare's Clearwater headquarters, which essentially is a satellite campus of SPC for nursing students.

Once nursing students graduate from the BayCare/SPC program or nursing programs in most Tampa Bay-area colleges, they are very likely to do their required clinical rotations—an essential part of their training—in BayCare hospitals. Almost 5,000 were getting their clinical training in BayCare facilities in 2017, with BayCare nurses as their preceptors.

BayCare's clinical education programs also include a variety of internships for registered nurses who want to get advanced skills in a nursing specialty. Almost 300 were participating in internships in 2017.

While many of the educational programs are clinical in nature, BayCare also provides a six-month career development class for entry-level BayCare team members to prepare them for promotions or college. Students learn life management skills, writing and grammar, basic math, medical terminology, and patient satisfaction and safety. They take the class on their own time while also working their regular jobs, and graduates often qualify for increases in pay or responsibility.

"It's exciting," said Will Davis Jr., education manager for BayCare. "It's raising their level of education. We are enabling them to get a more sustainable rate of pay."

The Opportunities Are Here
In 1997, Entela Ademi was 27 and a middle school math teacher in Albania when she and her husband decided to immigrate to America. She recalls her arrival in the United States as exciting, but difficult because she didn't speak English.

While she took English classes, Entela needed a job where she would seldom have to speak to anyone. The former math teacher ended up clearing rooms at BayCare's Morton Plant Hospital in Clearwater. She stuck with it for a year.

Then, she saw a flyer in a hospital restroom inviting applicants for the job of patient care technician, so she signed up and was trained for the job in classes provided by BayCare. Two years later, she read about Earn As You Learn (EAYL), a BayCare program where successful applicants could become licensed practical nurses, taking classes four days a week and working at their regular BayCare jobs the other days. BayCare would pay for the classes and books. Entela jumped at the opportunity and was in the first EAYL class. She spent the next five years as an LPN.

Today, Entela is a registered nurse with a bachelor's degree in nursing and a special nursing certification in progressive care. She is a charge nurse at Morton Plant and a preceptor who helps train new nurses. BayCare was her partner on the whole journey.

Entela said that when people ask her about her background, "I tell them my short story, about how I was able to advance my career through BayCare. The opportunities are here for anyone who wants to learn."

"I tell them my short story, about how I was able to advance my career through BayCare. The opportunities are here for anyone who wants to learn."

~ Entela Ademi

Entela Ademi knew no English when she immigrated to the United States in 1997, so she got a job cleaning rooms at BayCare’s Morton Plant Hospital. She’s now a registered nurse there, and most of her nursing education was paid for by BayCare.

Students in a BayCare/St. Petersburg College nursing class perform assignments in the nursing simulation lab, working on a “human patient simulator.”
Increasing Access to Quality Care

Telemedicine is the newest frontier in the delivery of health care to consumers, and during 2017, BayCare made great strides in building its own telemedicine portfolio, which it calls digitalHealth™. These programs use technology to deliver health care to consumers wherever they are—at home, on vacation, at the supermarket—with a level of convenience and immediacy that couldn’t have been imagined 50 years ago. Technology also expands and equalizes access to health care, reduces the spread of infection and enables increased monitoring of hospitalized and home-bound patients.

BayCare HealthHub™ at Publix

BayCare announced in March 2017 that it was collaborating with Publix supermarkets to provide a new kind of health care in Publix stores: BayCare HealthHub, an outpatient destination that utilizes technology to integrate health and wellness.

Publix stores have self-service kiosks that allow customers to check certain vital signs such as blood pressure and pulse.

In addition, a small room is being constructed in select Publix stores and equipped with technology that allows a customer experiencing a minor illness to have a private video visit with a board-certified physician. The customer may use several simple medical tools, including a stethoscope, otoscope and blood pressure cuff, to provide the doctor with information needed to diagnose the problem and prescribe medication. Called “Walk-In Care provided by BayCare,” the sites will be located in at least 25 Publix stores by the end of 2018.

Telemonitoring at Home

There were days when BayCare HomeCare nurse Laurel Simons, a specialist in advanced wound care, spent more hours in her car than she did tending to patients. HomeCare’s territory stretches from Sarasota to Ocala, so she could get to the homes of only 15 to 20 patients a week.

Now, Simons can examine a wound, talk with the patient and the patient’s regular HomeCare wound nurse, and recommend new treatments—all without ever getting in her car. Starting in January 2017, HomeCare gave its wound nurses iPads that they use to show wounds to Simons while she watches on a monitor in her Dunedin office.

Now Simons can see 40 to 50 patients a week, and patients’ wait times to get a consultation with her are 20 to 60 minutes, rather than three to five days.

Another BayCare HomeCare program lets cardiac critical care nurses monitor homebound patients who have certain conditions that put them at high risk for readmission to the hospital. Patients use devices supplied by HomeCare to take their vital signs every morning and transmit the data to a command center. If the nurse sees something unusual in the data, she or he can teleconference with the patient and even link in the patient’s doctor, pharmacist or family members.

“There have been times we called 911 and saved the patient’s life,” said Dr. Greg Hindahl, vice president and chief medical information officer for BayCare.

A Virtual ICU

During 2017, BayCare finished implementing a program started in 2014 to add an extra layer of patient monitoring for its hospital Intensive Care Units. The Virtual ICU (vICU) operates from a central Pinellas County location equipped with computer monitors, specialized software and a staff of 55 critical care nurses and physicians. Twenty-four hours a day, the staff provides virtual monitoring and clinical support to 330 beds in 21 BayCare ICUs.

Two members of the vICU team confer about information they are receiving about a patient located in a hospital intensive care unit that’s miles away.
Physician Engagement

2017 was a remarkably good year for BayCare physicians and the health system. Major priority areas included advancing our ability to deliver clinically excellent care, bolstering physician relations to best assure a sustainable culture in the delivery of that care, and developing care management capabilities to provide high-value care.

To get to clinical excellence, we must have an engaged physician base, and we made huge strides on physician engagement in 2017. We committed to creating a culture of inclusivity by engaging practicing physicians in every major decision that impacts them. We also dedicated a body of work to understanding physician burnout and creating programs to improve physician resiliency and well-being.

In 2017, our physician engagement scores went up at an impressive rate. Scores from the general medical staff rose to the 87th percentile nationally, providing the health system with a huge win in this area.

We also created the first-ever position of chief medical officer for the hospital division, hiring an experienced change agent to further the mission of clinical excellence through physician engagement.

BayCare Physician Partners

High-Value Care
BayCare Physician Partners Clinically Integrated Network (BPP CIN) and BayCare Physician Partners Accountable Care Organization (BPP ACO) continue their transition from fee-for-service to value-based care.

These organizations had a great year as we generated shared savings to all of our payers, met all of our contractually-obligated quality goals and increased our physician engagement score by 15 percent.

We are outperforming accountable care organizations (ACO) in the nation and continue to mature our capabilities. We revised our strategic plan, moving BayCare Physician Partners into downside risk agreements as a Medicare Shared Savings Track 3 ACO, taking on sizeable downside financial risk. Between our commercial and Medicare relationships, we now manage over $1 billion of health care premium spend, with nearly $70 million of downside risk. We are well on our way to value-based care! A shout-out to the dedicated physician leaders of our BPP board for making this happen.

Supporting this work is the maturation of our care management capabilities, relaunching local meetings to assure transparency and local physician engagement around value-based care. We also worked with our employed physician group to drive operational excellence and efficiencies to position us for success.

Additionally, we need to enhance our abilities around evidence-based utilization management and aggressively manage the “medical loss ratio” (MLR) to assure success in our value-based contracting. Clearly, the work needs to continue as we increasingly call upon our physicians to collectively help lower the cost of care while delivering high-quality care.

Nurses are still present in the ICUs to work directly with patients, but cameras in the units permit the vICU critical care nurses to see the patients, with such good resolution that they can read the patients’ bedside monitors and even the labels on medication bottles. They also can speak to the patients, family members and nurses. On the overnight shift, a critical care physician also is on duty in the vICU.

The goals of virtual ICU monitoring are to reduce mortality, shorten length of stay, reduce complications and improve patient outcomes.

Monitoring Nursing Home Residents
Sixteen skilled nursing facilities around Tampa Bay accept the majority of BayCare patients who need post-acute care. BayCare wanted to improve the outcomes of these patients and reduce the number of times they were taken to the emergency room or readmitted to the hospital. Technology that allowed additional support of nursing facility patients was the solution.

A program called ePACC™, for Post-Acute Care Consult, was started in late 2016 and continued in 2017. It allows nurse practitioners to use iPads to monitor these BayCare patients from 7pm to 7am, when skilled nursing facilities typically have a lower staff count. They can diagnose and treat conditions that occur overnight, order lab-tests and start the patients on medications. With ePACC, emergency room trips and hospital readmissions are reduced.

Keeping a Check on Diabetics
BayCare’s Turley Family Health Center in Clearwater, which serves a mostly low-income population, found a digital solution to the challenge of getting its diabetic patients to return for follow-up visits. It takes the visits to them!

Fifty diabetic patients were selected for the new program. Turley medical assistants visit their homes, record their vital signs and then, using an iPad, set up a digital health visit between the patient and a resident physician participating in the center’s Family Medicine Residency Program.

“It’s kind of like the modern version of the old house call,” said Doug Howse, telemedicine program manager.

The Turley program serves two purposes: Patients receive health care without having to find transportation to the center for appointments, and the resident physicians get experience in conducting telehealth visits.
Team Member Satisfaction/Awards

When BayCare launched its new Vision statement and strategic plan in 2017, one of our goals was to have the happiest and most engaged workforce in health care. We believe we are heading in the right direction.

Here’s why:

- In 2018, BayCare was named 65th on the 2018 FORTUNE 100 Best Companies to Work For list, which was based on survey responses in 2017 from more than 310,000 employees rating their workplace culture on 50-plus elements. These elements include trust in managers, compensation, fairness, pride, camaraderie and workplace traits linked to innovation.

- In 2017, Great Place to Work® and FORTUNE named BayCare one of the Best Workplaces for Women, Millennials, Diversity and Best Workplaces in Health Care—nationally!

- For three years in a row, BayCare also was recognized as a Top Workplace in the Tampa Bay area by the Tampa Bay Times. In 2017, BayCare also earned the WorldAtWork Seal of Distinction, made Top 150 Great Places to Work in Healthcare according to Becker’s Hospital Review, and was included on Training magazine’s global list, “Training Top 125.”

“...one of our goals was to have the happiest and most engaged workforce in health care.”
## Leadership

### Chief Executive Officer
- Tommy Inzina
  - President/CEO

### System Support
- Janice Polo
  - EVP, Chief Financial Officer
- Kyle Barr
  - SVP, Chief Team Resources Officer
- Scott Kiner
  - SVP, Chief Legal Officer
- Ed Rafalski
  - EVP, Chief Strategy and Marketing Officer
- Terri Shother
  - SVP, Chief Quality Officer
- Tim Thompson
  - SVP, Chief Information Officer
- Jim Beermann Jr.
  - VP, Insurance Strategy
- Ronaldo Colagruosi
  - VP, Supply Chain and Hospital Operations Support
- Jeffrey Durham
  - VP, Audit Services and Corporate Responsibility
- Lynda Gorken
  - VP, Patient Financial Services
- Scott Harding
  - VP, Facilities and Construction
- Diane Karmirsch
  - VP, Managed Care
- Thien Lam
  - VP, Chief Information Security Officer
- Scott Patterson
  - VP, Infrastructure, Chief Technology Officer
- David Rood
  - VP, System Finance
- Donna St. Louis
  - VP, Business Development
- Carl Tremonti
  - VP, Chief Financial Officer, BayCare Medical Group and Ambulatory Operations

### Operations
- Glenn Waters
  - EVP, Chief Operating Officer
- Jim Cote
  - SVP, Ambulatory Services
- Kimberly Gay
  - SVP, Hillsborough Market Leader
- Kris Hoge
  - SVP, Pasco County/West Pasco Market Leader
- Lisa Johnson
  - SVP, Chief Nursing Officer
- William Ulbricht
  - SVP, Chief Administrative Officer, BayCare Medical Group
- Ethan Chermin
  - VP, Chief Operating Officer, BayCare Physician Partners
- Tom Doria
  - VP, Patient Care Services’ Chief Nursing Officer – West
- Lou Galdieri
  - President, Mease Hospitals
- Victor Hrusczyn
  - VP, Laboratory
- Todd Jones
  - VP, Ambulatory Experience and Operations
- Karen Kerr
  - President, South Florida Baptist Hospital
- Carol Koeppel-Olsen
  - VP, Patient Care Services’ Chief Nursing Officer – Polk
- Mike Magee
  - VP, Pharmacy Services
- Joanne Mayers
  - VP, Patient Care Services’ Chief Nursing Officer – East
- Arlene McGannon
  - VP, Mission Services, St. Joseph’s-Baptist Health Care
- Paula McGuiness
  - President, St. Joseph’s Hospital-North
- Sr. Mary McNally
  - VP, Mission, St. Anthony’s Hospital
- Philip Minden
  - President, Bartow Regional Medical Center
- Sarah Nazmowich
  - President, Morton Plant North Bay Hospital
- Steve Newman
  - President, Winter Haven Hospitals
- Matthew Novak
  - President, St. Joseph’s Hospital-South
- Kate Reed
  - President, St. Joseph’s Women’s Hospital and St. Joseph’s Children’s Hospital
- Gail Ryder
  - VP, Behavioral Health Services
- Patricia Sizemore
  - VP, Nursing Systems and Resources
- Scott Smith
  - President, St. Anthony’s Hospital
- Daniel Sweeney
  - VP, BayCare HomeCare

### Physician Executives
- Bruce Flareau, MD
  - EVP, Chief Medical Officer
- Andrew Fink, MD
  - SVP, Chief Medical Officer, BayCare Medical Group
- Dana Kellis, MD
  - SVP, Chief Medical Officer, Hospital Division
- Sandra E. Brooks, MD
  - VP, Chief Medical Officer, St. Joseph’s Children’s Hospital and St. Joseph’s Women’s Hospital

### Notes received from BayCare patients and family members who got help with their medical bills through BayCare’s Financial Assistance department.

"My sister Candace and I want to say how grateful we are for you. You have been an oasis of hope during this difficult journey."

"It seems as if you were sent from above—sharing your caring, sharing your love. Thank you for everything."

"Sometimes things were so stressful, and to have help when we needed it was a blessing. People come in and out of our lives, but some get a little piece of our hearts. You are one of them."

"If the quality of a firm’s employees is an indication of future success, then BayCare has a very bright future."