Update!

NEWS FROM OUR PILLARS • • • This month we spotlight the network’s 2016 goals. Below are some other highlights.

OUR PEOPLE • • • It pays to be healthy, literally… take part in Community’s new wellness program and you could earn dollars to reduce your healthcare costs!

OUR SERVICE • • • Customer loyalty is the key to ongoing success at Community, and exceptional service is the key to loyalty.

OUR QUALITY • • • We’re creating new ways to measure quality and safety, and acquiring new tools to help us improve our care.

OUR FINANCE • • • Our mission is to enhance health and well-being, and that commitment doesn’t stop just because a patient is unable to pay for care.

OUR GROWTH • • • In an era of unpredictable change, how does Community chart a path to ensure ongoing health and growth? By envisioning more than one path.

OUR COMMUNITY • • • It was another million-dollar night for The Giving Gig…$1.4 million, to be exact.

Targeting Another Year of Success

The Community Way is how we do business at Community Health Network. It’s the way we operate and what differentiates us. It both enables and reflects the way we fulfill our mission, live our values and bring our vision to life—enhancing health and well-being, serving patients and families, and creating exceptional experiences, simply delivered.

We all collectively own The Community Way. You’ll hear more in the months ahead about the ways we collaborate to achieve excellence by following The Community Way, and how we assess our organization to identify opportunities where we can put a greater emphasis on excellence.

Community establishes annual network goals that gauge how successful we are in following The Community Way. The results are in for 2015—we met many of our goals but were left with room to improve in others. We’re now working toward our 2016 goals. Please read on to learn about our 2016 goals as well as 2015 results. Also, please watch the latest “Online With Bryan” video program for additional information about our goals and results (just click on the link below). Goals are cascaded through the organization, to ensure that the work each of us does supports the overall goals of the organization.

Why do we make all these plans, measure how we’re doing, create strategies and work so hard to share best practices across our continuum of care? It’s how we unite to become a single team with thousands of members, and ensure that we’re all on the same page, serving our patients and their families, and focusing on the customer experience. Everything that you and your coworkers do should line up with The Community Way, support the exceptional patient experiences we strive to simply create every time, or help us move along the paths we’ve charted for the future. If it doesn’t, please let your leaders know.
PEOPLE PILLAR GOALS FOR 2016
There are two goals for 2016. Once again, we’ll focus on Community’s employee engagement score, as measured through the employee engagement survey. Our target is 77%. We’ll also be focused on physician engagement this year, as measured by a survey of Community providers—it’s a different survey from the one measuring employee engagement, and our goal of 39% would place us among the top-performing fifth of organizations nationwide.

PEOPLE PILLAR IN 2015
Our employee engagement goal for 2015 was a score of at least 76%. The 2015 survey collected input from 8,970 employees, and we hit the target, with an engagement score of 76%! Just as important as achieving the goal is what we’ll do with the feedback we gathered. Leaders across the network received reports for their specific areas, and are now using those results to work with their teams on creating improvements in the employee experience.

THERE ARE SIX LETTERS IN PRIIDE
All of us commit to bringing our PRIIDE values to life as we go about our work, serve patients and families, and interact with each other. And we all know that Patients First, our first value, is at the center of everything we stand for. But it’s worth remembering that there are five more PRIIDE values after Patients First. We won’t succeed at creating exceptional experiences with every life we touch, if we aren’t also mindful of the collaborative Relationships we build on our teams. We can’t thrive without being guided by a spirit of Integrity, and our future depends upon all of us embracing Innovation and spreading it across the network. It takes the Dedication of everyone on the team to create a successful Community. And expect to hear a lot more in the coming months about how The Community Way is mapping out our path to Excellence.

GET AND STAY HEALTHY WITH COMMUNITY’S NEW WELLNESS PROGRAM
Ensuring the health and wellness of you and your family is a priority at Community. Beginning this month, Community will offer a new wellness program that will reward you for getting and staying well. Participate in the wellness program and you’ll earn incentive points throughout the year that could result in a financial contribution to your health reimbursement account or health savings account for 2017. More information about the new program will be mailed to your home in early March.

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START HERE. STAY HERE  • • • Community recently launched a new recruitment and talent development advertising campaign called “Start here. Stay here” to help ensure that we continue to hire top talent to join our team. The campaign highlights the career advancement and professional growth opportunities available at Community. For example, Desirée Tarter, recruitment consultant at Community South, has held a number of different roles at Community while earning a degree. “Being a first generation college student, I was able to utilize Community’s tuition reimbursement program, earn a paycheck and network while in school. I have been able to learn skills while building and maintaining relationships that have allowed me to grow professionally.” The campaign supports the employee referral program that relaunched recently. Refer a friend or colleague for one of the eligible positions and you could receive a referral bonus. Click here for more details about the employee referral program.

THE ENVELOPE PLEASE  • • • The voting is complete in the annual “Best of Madison County” survey conducted by The Herald Bulletin. Community Anderson was once again named Best Company to Work For, while Holly Renz, R.N., earned the title of “Best Nurse” for the fifth time. In addition to the winners, Community Anderson had several nominees, including Beth Sovern, R.N., and Heather Hall, R.N., for best nurse; Charlie Williams, M.D., Preetham Jetty, M.D., and Meredith Potrzebowski, D.O., for best doctor; Marge Dickson for best volunteer; and On the Go Espresso for best coffee shop.

BARTON NAMED VP IN HR  • • • Rick Barton has joined Community as vice president of talent management, part of the human resources team. He leads the network’s performance management, talent assessment, professional development and employee engagement activities. Prior to joining Community, Rick worked at Indiana University Health in Bloomington as the transformation officer and director of organization effectiveness for the south central region.

SHARING OUR EXPERTISE  • • • Chief nursing officer Jean Putnam, R.N., MS, CPHQ, was featured prominently in the February 2016 issue of the American Journal of Nursing. She was quoted extensively in an article on the shifting healthcare landscape and the role nurses are playing in it. Meanwhile, an Indoor Cycling Association article spotlighted Renee Shapurji, instructor at Community Healthplex, and the powerful impact her classes have had on her cycling students. Shapurji, the article explains, has assembled and led a community of cyclists who have together achieved not just physical health but emotional well-being and support for one another. Click on the links below to read the articles.

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Around Community

Our service

SERVICE PILLAR GOALS FOR 2016 • • • We have multiple goals tracking service in both acute and ambulatory care settings. For inpatient measures, we'll use results from the H-CAHPS survey of inpatient customer perceptions. We're tracking improvement on the patient response “yes, definitely would recommend this facility,” and are aiming for at least 1% improvement over our baseline score. We'll also track a measure of loyalty related to service in our emergency departments, and are aiming for 1% improvement in that score. On a separate survey of ambulatory patients, we're measuring relative improvement in how often we earn 9 or 10 ratings on the “how would you rate your provider” question—our target is 1% improvement or more. We'll also be tracking how likely patients are to recommend our ambulatory facilities, and are seeking at least 1% improvement over baseline.

SERVICE PILLAR IN 2015 • • • Last year we tracked the number of H-CAHPS dimensions for which we achieved at least 75th percentile performance. We trended in a positive direction, but did not attain our goal. We also did not meet our goal for the percentage of patients who would recommend our hospitals. On the ambulatory side, we did achieve a green-light performance in provider ratings, for both primary and specialty care providers.

PEOPLE continued

KOEHLER NAMED TO EAST REGION LEADERSHIP ROLE • • • Suzanne Koehler is the new vice president and chief operations officer for the network’s East Region. In her role, she'll be responsible for providing strategic growth planning, execution and operational leadership to designated product lines and patient services across the East Region. Suzanne has more than 29 years of health care experience and joins us from Rapid City Regional Hospital in Rapid City, South Dakota, where she served as vice president of operations.
NEWBORN SIMULATOR ENHANCES TRAINING IN ANDERSON

The Community Hospital Anderson Foundation has purchased a state-of-the-art newborn simulator that will enhance staff training. Team members will be able to practice infant CPR and intubation, and gain experience starting IVs and inserting catheters, with the help of the simulator. The simulated baby’s condition will improve or deteriorate based on the staff’s response. This simulator was made possible by a $30,000 donation from Eulala Roettger, in honor of her sister Hildred Adler, a former OB nurse. There’s more on the story at the link below, from The Herald Bulletin.

WILSON TAKES PATIENT SAFETY ROLE • • • Madeline Wilson, RN, CSSBB, is the new network patient safety officer for Community. In this role, she’ll be responsible for the design, direction, facilitation and implementation of system-wide patient safety initiatives. Since 2010, she has been serving as director of quality risk management, quality resources.

QUALITY PILLAR GOALS FOR 2016 • • • For 2016, we’ll track quality using our “harm score,” a composite of events and outcomes that we strive to prevent. Components of the harm score include patient falls, pressure ulcers and a variety of other healthcare-acquired conditions. Our target is a score of 1.693 or better—that represents at least 1% improvement over baseline. We’ll also track five measures of ambulatory quality, including the percentage of senior patients immunized for pneumonia and the percentage of diabetic patients whose blood pressure is under control. And we’ll continue to work on reducing the percentage of hospital patients who are readmitted within 30 days—the target to achieve at least 1% improvement is a 12.12% readmission rate.

QUALITY PILLAR IN 2015 • • • The 30-day readmission goal was our primary measure of quality in 2015, chosen because it takes a true team effort to prevent readmissions. We made progress in reducing readmissions last year, but did not achieve our goal.

QUALITY PILLAR GOALS FOR 2016

We will implement best practices and evidence-based care, providing services for individuals and populations that result in desired outcomes. Our measurement of quality represents the known best practices for ensuring high-quality care, and requires the coordinated and cooperative efforts of multiple caregivers across the entire network.
Community recognizes that some of those who need our services do not have the ability to pay, which is why we have a financial assistance program. Those who meet the program’s requirements can receive medically necessary healthcare services at a significantly reduced cost, based on verified financial need. We’ve updated the program this year to ensure that it best serves those who need it—here are some things to know about it. First, it’s open to Indiana residents (we’re committed to helping patients from elsewhere connect with the appropriate not-for-profit provider serving their home community). As always, we believe patients are best served if they can obtain medical insurance to cover ongoing needs, including preventive services. Therefore, for applicants seeking non-emergency services, our first step is to help determine if there’s an appropriate government or private insurance program in which they can enroll, and provide enrollment assistance as needed. If we’re unable to successfully help the applicant secure coverage, we’ll proceed with the determination of whether the applicant qualifies for charity or reduced-cost care. Those wishing to apply for financial assistance should be directed to the Community financial services professional or financial counselor in their region.

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Our growth

GROWTH PILLAR GOAL FOR 2016 • • • We've established the broadest possible measure to track growth in 2016: individual patient lives. Put simply, this is the total number of individuals that we serve in one way or another...in the hospital, in a physician’s office, at a MedCheck location, anywhere we provide care. Our aim is to grow that number beyond a baseline of about 509,000.

GROWTH PILLAR IN 2015 • • • Last year, our goal was to achieve growth in total managed lives, with a target of at least 103,000 lives. A “managed life” is defined as a person for whom our reimbursement can fluctuate based on patient outcomes, such as quality, safety, experience and cost (as opposed to traditional contract reimbursement). We surpassed the goal by a significant margin.

Looking Ten Years Down the Road • • • Healthcare is in the midst of dramatic change, and Community’s long-term health demands that we be ready for that change. So how do we know what to expect a decade from now, and what plans to make? Our Strategy 2025 planning process has done much more than simply chart a prediction for the future. In fact, we have carefully studied four very different directions that healthcare could potentially evolve, and are piloting ways we can succeed and fulfill our mission regardless of which future unfolds.

Coming Soon...Another Community Launchpad Innovation Competition • • • The next Community Launchpad Innovation Competition launches soon! It’s your chance to bring your ideas into the spotlight. The last competition uncovered more than 800 great ideas from more than 500 team members, and the cream of the crop earned cash prizes. This year’s competition will be bigger and better than ever, with more cash and more prizes. Stay tuned for more details!

Cheers for the Greyhounds, and for Community • • • The University of Indianapolis and Community make a solid team, and got together to cheer in a couple of ways last month. An open house introduced local residents to the new Community Physical Therapy & Rehab area that’s part of the new UIndy Health Pavilion on the Hanna Avenue campus. Activities included a buffet dinner and tours of the clinic. Afterward, attendees headed across the street to cheer on the Greyhound men’s and women’s basketball teams.

Women and Heart Health • • • More than 70 women received free health screenings and health information at a Women and Heart Health seminar last month at Community Heart and Vascular Hospital. Additionally, Rey Vivo, M.D., a Community Heart and Vascular cardiologist, presented information about heart health risk factors to raise awareness of heart disease, the number one killer of women.
COMMUNITY PILLAR GOAL FOR 2016

Ensure that all Community leaders take part in at least one Serve360° volunteer opportunity during 2016.

COMMUNITY PILLAR IN 2015

It was another remarkable year for our Serve360° volunteer initiatives, and our efforts touched countless lives across the communities we serve. We came close to our target of 100% leadership participation in Serve360°, but there’s still room to improve in 2016. And while the pillar goal specifically measures the participation of leaders, it’s important to remember that Serve360° is for all Community employees. It’s how we take our mission into the communities that gave birth to our organization.

ANOTHER RECORD-SETTING EVENING FOR THE GIVING GIG

More than 1,000 donors from across Central Indiana gathered at the Indianapolis Marriott Downtown last month for The Giving Gig 2016, Community Health Network Foundation’s annual fundraising gala and celebration. Guests had the opportunity to bid on silent and live auction items and enjoyed a performance by Huey Lewis and The News. In its fourth year, the event was hosted by WTHR meteorologist Nicole Misencik and raised more than $1.4 million for our Oncology Patient Assistance Fund, which provides vouchers to cancer patients in financial need to help them access nutritious food, transportation to treatment and lifesaving medication. A huge thank you to the many Community employees who generously volunteered at the event!

WATCH HOW THE FOUNDATION IS HELPING PATIENTS

Thanks to the support of donors, Community Health Network Foundation made tremendous progress in helping patients across Central Indiana in 2015. From women and children to cancer and behavioral health patients, there’s still much to accomplish, and our work is just beginning. Take a look by clicking on the video link below.
FINANCE continued

RESOURCECONNECT...IT’S ALIVE! • • • Wave 2 of the Community ResourceConnect rollout went live without a major hitch at the beginning of the month, with the implementation of new applications for purchasing, payables and inventory. Now, all team members except Anderson employees are using the same chart of accounts for all functions (general ledger, budgeting, payroll and other functions made the changeover last year). That means a more efficient and standardized approach for accounting, materials management, and financial planning and analysis across Community, and new tools for such things as department performance reports and monthly income statements. In our industry’s environment of accelerating change, it’s more important than ever to have such powerful control over Community’s financial picture.

AMBULATORY CARE GETS NEW CFO • • • James T. Read Jr. has accepted a position as chief financial officer for Ambulatory Care Services. Before joining Community, Jim served as vice president of finance and controller for Parkview Physicians Group in Fort Wayne, a multispecialty group.