

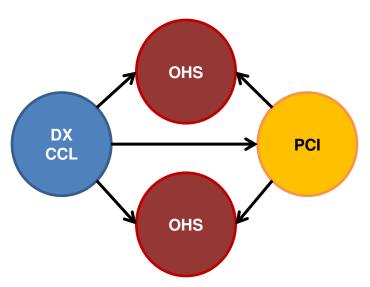
Case Study:

Full-Service CV Service Line Consolidation for a Midwest Health System

Corazon assisted a large health system in the Midwest with service consolidation of their multi-site Cardiovascular Service Line. A proven approach to regionalize key services within a health system may allow providers to meet the market demands while sustaining Return on Investment, quality outcomes, and the health system's trusted brand.

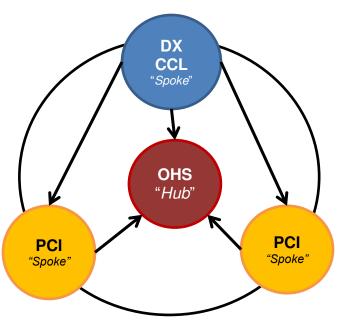
Complex cardiovascular offerings such as Open Heart Surgery (OHS) are fraught with challenges, including a decreasing pool of qualified practitioners, a potentially declining market of eligible patients, and high costs. Consolidation of these services should be a key consideration of health system strategy, especially as Certificate of Need laws prohibiting Coronary Angioplasty (PCI) with off-site Open Heart Surgical support have relaxed in many states. With these changes, greater opportunity exists to regionalize services through a reorganization and/or consolidation of cardiovascular offerings, which can ensure access to acute care for AMI, while keeping operational costs low across the system.

Prior to Corazon's support, our client health system's leadership felt consolidation of OHS services may be necessary, but the task was complex and daunting. The system was comprised of four community-based hospitals offering varying levels of CV services: Two offered the full continuum-of-care, including OHS, only several miles apart; the third offered angioplasty (PCI) with off-site OHS support; and the fourth hospital offered basic cardio-diagnostic services, as depicted below.



This scenario was creating an inequity of patient referrals, as providers would most often refer to one of the two OHS hospitals. Further, negative community perception related to the competency of care at these hospitals was emerging, as this referral 'splitting' resulted in lower volumes at each facility, coupled with lower outcomes scores for quality. Financial performance across these hospitals also suffered as a diminishing contribution margin continued due to maintaining duplicative high-cost services. Meanwhile, the community hospital offering PCI without on-site OHS was unable to adequately handle the incoming patient volume. Surprisingly, the diagnostic-only center was the sole highly-functioning site, with the most limited scope of services!

A Strategic Consolidation Model: Based upon results from a system-level strategic assessment to evaluate the level and performance of CV services at all four hospital sites, the system leadership decided to move forward with consolidation as a means to improve quality for each hospitals' services, streamline volumes and referral patterns, and ensure community access to care. Corazon



initiated a two-phase approach to consolidating dualsite open heart surgery services into one main fullservice Cardiovascular Center "Hub", with Angioplasty "Spokes" at the two community hospitals, and diagnostic services remaining at the fourth site, as depicted in the diagram below.

The first phase involved a market and operational gap analysis, along with the creation of a cardiac steering committee. Since strong administrative and physician opinions often exist related to which services are performed at what facility, the data from this initial step provides the necessary evidence for smart decision-making. With Corazon moderating, the components of the gap analysis were deliberated to determine key implementation steps for the cessation of OHS at one hospital facility. Corazon then assisted with recruitment for a system-wide CV service line

administrator who would ultimately coordinate service line development for the entire system.

The second phase, which focused on full consolidation of the open heart surgery program(s) into one site, and maintenance of best-practice PCI at two sites, began with an assessment of capacity needs at all four hospitals. The analysis determined that one OHS site could easily absorb the full community volume of open heart, while also allowing for a 10% market share increase overall. In fact, the Corazon planning process demonstrated CV market growth for each of the system's hospitals for their newly defined scopes of services.

Corazon also worked with the Health System's CV steering team to:

- Bring physicians to the table as engaged and active participants in clinical program planning and redeployment.
- Develop internal and external marketing / position statements to explain the changes in CV services at each facility.
- Perform a gap analysis for services across the system even beyond the second consolidation phase so that CV services would continue to achieve top-tier results.

The Results: Due to the value achieved with Corazon, and our hands-on, 'in-the-trenches' approach,

over a period of 10 months, the health system was able to successfully consolidate CV services and achieve clinical, operational, and financial goals at all four hospitals. A more regionalized approach allowed all CV care to be standardized within the health system; meanwhile, keeping angioplasty at two "spoke" sites, along with a basic diagnostic program in a more remote location, ensures timely access to emergent care, while centralizing the high-cost, resource-intense OHS program, which now posts some of the best surgery results in the nation and is considered the premier Heart & Vascular Center within the local community. When considering national healthcare reform initiatives, this case of a successful regionalized approach to CV care, coupled with a large-scale services consolidation, has best-positioned this health system for the evolving future of the industry.

To further discuss this or other Cardiovascular Consolidation project that involved multiple components of Corazon's offerings, please call 412,364.8200.