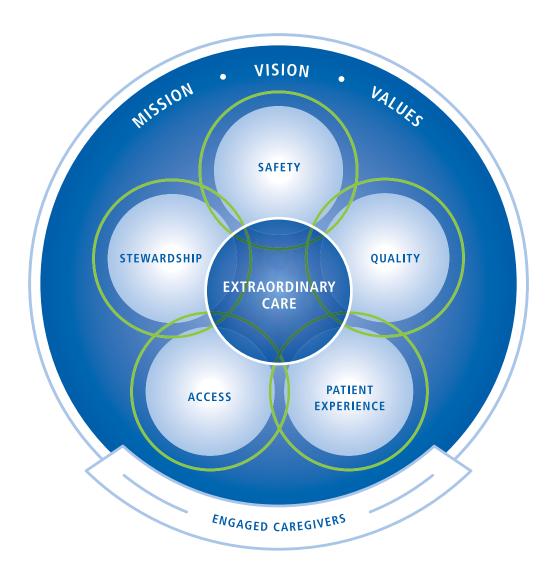
HELPING PEOPLE LIVE THE HEALTHIEST LIVES POSSIBLE®

Intermountain Healthcare Report to the Community 2016







Front Cover: Petronella A. Adomako, MD, Infectious Diseases, Intermountain Medical Group

OUR MISSION

Helping people live the healthiest lives possible®

OUR VISION

Be a model health system by providing extraordinary care and superior service at an affordable cost

OUR VALUES

INTEGRITY: We are principled, honest, and ethical, and we do the right thing for those we serve.

TRUST: We count on and support one another individually and as team members.

EXCELLENCE: We perform at the highest level, always learning and looking for ways to improve.

ACCOUNTABILITY: We accept responsibility for our actions, attitudes, and health.

MUTUAL RESPECT: We embrace diversity and treat one another with dignity and empathy.



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HEALTHCARE IS PERSONAL

Messages from our Chair and our CEO



Scott Anderson (left) and Marc Harrison, MD

From SCOTT ANDERSON Chair, Intermountain Healthcare Board of Trustees

I treasure my volunteer service in the governance of Intermountain Healthcare, because it allows me to see firsthand the life-affirming—and often life-changing—effects of an organization devoted to promoting health and providing truly world-class medical care. My role gives me opportunities to interact with people who have a calling to help others, as well as with those whose lives are changed as a result of that noble work.

In 2016, we started writing a new chapter in the story of Intermountain Healthcare. After many years of inspiring leadership, Dr. Charles Sorenson retired as President and CEO to pursue one of his cherished dreams of creating an institute to help develop a new generation of healthcare leaders. As Founding Director of the Intermountain Healthcare Leadership Institute, he'll have the opportunity to shape the emerging new world of healthcare that is based on clinical excellence, superb patient and consumer experiences, affordability, and the relentless promotion of health—commitments achieved with the utmost integrity and reflecting humanitarian values.

We're pleased to welcome an exceptional new President and CEO, Dr. Marc Harrison, who also has a strong vocation to transform healthcare. Dr. Harrison brings vast leadership experience, strength of character, and impeccable integrity. He's passionate about Intermountain's Mission, Vision, and Values, and the Board is confident Dr. Harrison is the leader we need to take Intermountain to even higher levels of excellence in serving our patients and communities.

From MARC HARRISON, MD President and CEO

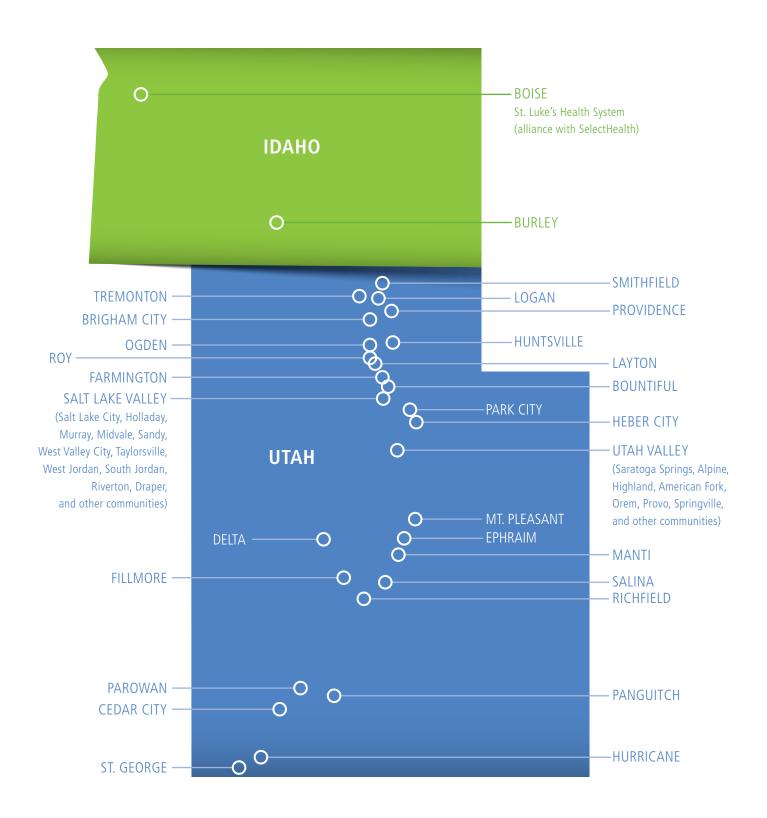
Intermountain's Mission of helping people live the healthiest lives possible® is highly personal for me. I'm a cancer survivor, and we have a son who nearly died from a head injury. Every day, every time I see a patient, I think about that patient's life and all the family, friends, colleagues, and others who are touched by that life. Our work to promote health and preserve life is an honor, a privilege, and the deepest of responsibilities.

At Intermountain, we strive to put the patient at the center of all we do. We're relentless about the health and care of each person we serve. We ask how we might innovate to improve safety, quality, the patient experience, and access in ways that honor our stewardship to them. We know people are trusting us with their lives and their loved ones' lives, and that is an obligation and a privilege we never take lightly. Every action, every interaction with a patient, is based on what our knowledge and our values tell us is the right thing to do. That's refreshing and inspiring for me.

In addition to providing leading-edge medicine, we're fully committed to the "keeping people healthy" part of healthcare. We want to help people live better, more healthful lives. Our focus on health and prevention, as well as on providing the most effective care, also helps us make healthcare more affordable. Affordability is so important, of course, because offering the best care in the world doesn't mean much if people can't afford to access it. We also provide significant charity care to people with limited means. We accept patients regardless of their ability to pay, and we work with a network of agencies to address pressing health issues in our communities.

In 1975, when The Church of Jesus Christ of Latter-day Saints donated its hospitals to the community and Intermountain was established to administer the system, church leaders had only one request: that Intermountain always strive to be a model of excellence in healthcare that would stand as a shining light to other organizations. Intermountain responded by innovating around integration and improving clinical care. That innovative spirit will define our future priorities as well. Today, in national surveys of healthcare leaders, Intermountain is typically ranked among the top five American health systems.

There is so much good work still to be done, and I'm honored to serve as Intermountain's President and CEO. My wife, Mary Carole, and I completed pediatric residencies in the early 1990s through the University of Utah School of Medicine, working at Primary Children's Hospital. I also completed a pediatric critical care fellowship here. And we started our family here. Returning to Utah and Intermountain is like coming home. I truly believe Intermountain is better positioned than any system, anywhere in the world, to take health and care to new levels of excellence. We look forward to providing the very best care—reflecting both value and values—and to helping people live the healthiest lives possible.®



OUR SERVICE AREA

As a not-for-profit health system, we strive to provide extraordinary care to those we serve.

Helping people live the healthiest lives possible® is our Mission—and it is central to everything we do throughout our health system of 22 hospitals, 180 clinics, SelectHealth insurance plans, and other services and partnerships. Throughout Intermountain Healthcare, "healing for life" means striving to provide optimal, affordable care each day to the people in our communities.



Numbers are rounded. *Includes all employed doctors and advanced practice clinicians working at Intermountain.



EXTRAORDINARY CARE—QUAD STYLE

Indie, Esme, Scarlett, and Evangeline Gardner are active, healthy toddlers. Helping these quadruplets live the healthiest lives possible today started with great obstetrics and maternal-fetal medicine care for their mom, Ashley, at 21 weeks during her pregnancy, and excellent preemie care during their own first weeks of life in the Newborn Intensive Care Unit (NICU) at Intermountain's Utah Valley Hospital.

Tyson and Ashley Gardner's family story began with an eightyear infertility struggle and then in-vitro fertilization in 2014. They were shocked and thrilled when Ashley became pregnant with quadruplets—two sets of identical twins growing in two placenta sacs. "Every flood of emotion comes through you at that moment," says Ashley.

After months of bed rest and even in-utero surgery, the babies were delivered by C-section at 29-weeks' gestation. "It was what our neonatologist, Dr. Stephen Minton, loves to call organized chaos," says Ashley. "Four babies out in two and a half minutes—each baby had her full medical team around her, and I had a medical team. Everybody knew exactly what they were supposed to do, and it was perfect and very comforting."

The girls spent two months in the NICU at Utah Valley Hospital, where Dr. Minton serves as Medical Director. "That NICU is a very special place," says Tyson. "Our girls had everything they needed, just such incredible care. Dr. Minton and the NICU team think of every kid as their own. They really do." Ashley adds, "I truly felt their love for each one of my children, and for us.



For how stressful that time of my life was, they did everything possible to make sure I felt at peace."

Dr. Minton says the care provided to the Gardner quads was the same as the care given to every baby. "The difference here was that it was quadrupled. One of the reasons I'm with Intermountain Healthcare is because of our focus on quality care and always striving to improve it."

"We didn't have to worry about the medical side of things," says Tyson. "We were able to trust and have faith in our caregivers and focus on what we needed to do."

THE NUMBER OF CAREGIVERS IN THE DELIVERY ROOM READY TO CARE FOR THE FOUR BABY GARDNERS.



Left: Indie, Esme, Scarlett, and Evangeline Gardner are healthy, active 2-year-olds. Above: The Gardner family grew from two to six members in 2 ½ minutes on Dec. 28, 2014.



WORKING 'UPSTREAM' TO PROMOTE HEALTHIER LIVES

Intermountain caregivers strive to improve health and prevent illness.

To keep people well, you have to keep your eye on social determinants of health, such as education, income, transportation, access to nutritious food, and the ability to communicate with caregivers.

Once people do get sick—as we all do from time to time—they need access to the best possible care: care that is proven effective, that draws from the best options medicine is able to offer, and that is tailored for the needs and preferences of each individual patient. Even when the limits of medicine are reached and outcomes are less than hoped for, every patient's experience should be extraordinarily positive.

At Intermountain, we aspire to provide extraordinary care, in all its dimensions, to our patients. We think holistically and creatively about the care we provide.

One innovation pioneered at Intermountain over the last two decades is our integration of mental health services in our primary care clinics. Mental and behavioral health issues are frequently associated with physical health, so it makes sense to diagnose and treat patients in a holistic way.

Intermountain will continue to look farther and farther "upstream"—before patients get sick to improve health and prevent illness. We partner with a wide range of community agencies and organizations to do this. For example, we support early childhood development programs, accident prevention campaigns, fitness and nutrition initiatives, and efforts to improve health literacy. Many of the chronic illnesses that challenge our society—diabetes, high blood pressure, congestive heart failure—can often be prevented if we work upstream to address their causes.

Early childhood development programs and integrated care in our clinics are two ways we strive to improve health "upstream."





NEW TECHNOLOGY IMPROVES LIFE FOR PEOPLE WITH TYPE 1 DIABETES.

Like most college students, Camille Gunnell was focused on studying, dating, and balancing life away from home. Then she started having health problems. After visiting the campus physician, she was shocked to be diagnosed with type 1 diabetes.

"It was pretty overwhelming having to test my blood sugar, dose insulin, and count carbs every day," says Camille.

When she learned about the Tech for Type 1 study offered by Intermountain, she was quick to volunteer with 28 other young adults. Participants received a FitBit® and glucose monitor that sync to an app, customized for Intermountain, on their smartphone. These tools help the study participants consistently see how sleep, exercise, and diet affect their diabetes.

The tech tools really help Camille improve her diabetes management. "I love using these tools," she says. "I guickly learned how important exercise and sleep are to managing my blood sugar. I walk a lot around campus, and the app tracks my steps and my blood sugar so I can see how they relate. I also love to hike, dance, and ski, so it was great to see how these activities affect my diabetes."

Camille saw improved results immediately. After three months, her A1c (a test that measures average blood sugar) dropped from 10.0 to 7.8, a significant improvement. She also has more energy, feels better, and is more confident about managing her health.



The technology conveniently provides the important data Camille needs to balance the demands of her diabetes and college life. She excels in her studies (double major in communication disorders and special education), works part-time with special needs adults, and enjoys an active lifestyle.

Intermountain continues to explore new technologies that help patients improve their health. For example, another new program called GRAD provides support to teens with chronic health conditions as they move from pediatric to adult care and become more independent.

After participating in the Tech for Type 1 study, Camille Gunnell has more energy, improved blood sugar levels, and more confidence in managing her diabetes.



RAPID TEAM RESPONSE MINIMIZES BRAIN DAMAGE AFTER STROKE AT ZION PARK

While vacationing at Utah's Zion National Park, Chuck Dobry experienced a potentially fatal stroke. His wife, Diane, recognized Chuck's slurred speech and slumped smile and alerted emergency medical responders.

With stroke, every second counts to save brain cells and function. Caregivers at Dixie Regional Medical Center activated their stroke response team, and after arriving at the hospital, Chuck was quickly evaluated in the ER, assessed by a neurologist stroke specialist at Intermountain Medical Center via TeleHealth technology, and received clot-busting drug therapy.

In Chuck's case, medication would not be enough to fully break up the large clot blocking blood flow to his brain. Neurointerventionalist Benjamin Fox, MD, and a team of caregivers removed the clot using a minimally invasive surgical technique. "We advanced a specialized stent (a small mesh wire) retriever via a catheter (tube) extending from the femoral artery in Chuck's right groin up through his carotid artery up into the brain to the artery where his clot was located," said Dr. Fox. "We then expanded the stent, which grasps and adheres to the clot, and retrieved the clot out of Chuck's head through a larger catheter."



After treatment and recovery, Chuck and Diane were able to finish their vacation at Zion National Park. Back home in Michigan, Chuck resumed his active lifestyle and went on a kayaking adventure. "I was fortunate that I was in Utah when my stroke happened," says Chuck. "To go through a stroke and have the caregivers at Intermountain be able to do what they did, and then have me back up on my feet and out the door a couple of days later, is mind boggling."

Diane agrees. "That the brain can be saved, that Intermountain can give that to the people of Utah, it's amazing."



THE ESTIMATED NUMBER OF NEURONS LOST EACH MINUTE FOLLOWING A STROKE UNTIL THE CLOT IS REMOVED AND BLOOD FLOW TO THE BRAIN IS RESTORED.

Chuck Dobry (left) experienced a stroke on vacation at Zion National Park. Quick treatment by Dr. Benjamin Fox and caregivers at Dixie Regional Medical Center (above) restored Chuck to health and his active lifestyle.



INNOVATION TRANSFORMS HEALTHCARE, ADVANCES MEDICAL SCIENCE

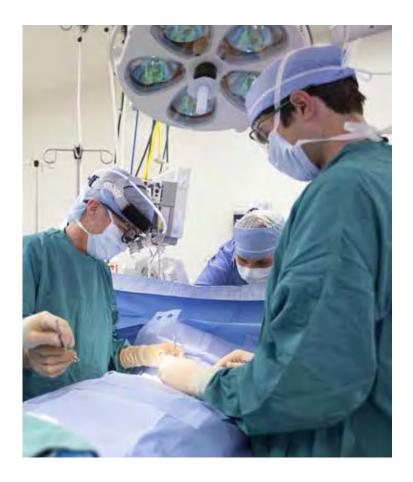
Intermountain's pioneering efforts improve quality, lower costs.

Intermountain has a long history of innovation, starting with our pioneering use of informatics in the 1970s and our focus—begun in the 1980s—on using statistical quality improvement techniques to develop clinical best practices.

We are committed to transforming healthcare in innovative ways, shaped by our Mission of helping people live the healthiest lives possible.[®]

Here are three recent examples:

- Navican Genomics is a new Intermountain Healthcare genetics research and testing company helping physicians identify personalized options to treat and manage cancer. Navican uses a unique process developed by Intermountain Precision Genomics to analyze the genetic makeup of a patient's cancer and utilizes a team of skilled molecular tumor specialists to review each test and determine how to most effectively treat that particular cancer type.
- Rehab Outcomes Management System (ROMS) is a web-based tracking and analytics tool that provides physical therapists with the information and data they need to make better, more personalized decisions. ROMS serves as a central repository of patients' self-reported pain and disability measures. Therapists use the information to provide the most effective therapy. It also reduces costs for patients and payers.
- Empiric Health is a new company developed by Intermountain Healthcare that leverages the ProComp application developed by Intermountain to help surgical teams maintain surgeon preferences, track and reveal costs, and compare surgical supplies. Users can see the costs of supplies, search for comparable products, submit change requests, and see the history of past changes. Within Intermountain, this initiative has reduced unnecessary costs for supplies by more than \$90 million.



Intermountain innovations in 2016 included the launch of a genomics research and testing company, as well as tools to help caregivers improve outcomes and lower costs.



3D PRINTING TECHNOLOGY HELPS SAVE LINDA'S KIDNEY

After being diagnosed with complex kidney cancer, Linda Green feared she would need to have her entire kidney removed to treat the cancerous tumor. Then she met Intermountain urological cancer surgeon Jay Bishoff, MD. The specialists at the Intermountain Urological Institute and the Intermountain Transformation Lab used innovative 3D printing technology to make an exact replica of Linda's kidney and tumor. Guided by the model, the team was then able to devise a way to completely remove her cancer while saving her kidney.

"Linda's tumor was right in the middle, where all the arteries and veins come into the kidney," says Dr. Bishoff. "Because of its location and other medical conditions Linda faced, removing the tumor and preserving the kidney would be difficult."

Caregivers at Intermountain's Transformation Lab, working with Dr. Bishoff and radiology specialists, were able to create a three-dimensional reconstruction of Linda's kidney and tumor using a CAT scan of her kidney. They then printed the kidney reconstruction using a 3D format printer. "This is exactly her anatomy. It's like we took her kidney out to have a chance to explore it before we operated on it," says Dr. Bishoff. "Referring back and forth to the model, we were able to dissect the tumor out of the kidney without causing any significant bleeding. Additionally, we were able to completely identify the tip of the tumor, which we very easily could have missed without the model. We cured her of her cancer that day."



Linda's surgery was done laparoscopically through four very small incisions. She went home the next day with her kidney intact. And she is very grateful. "When Dr. Bishoff told me he was going to try to save my kidney, I was shocked. I had been told there wasn't a chance of saving my kidney. For me, faith in God and exceptional medical care got me through. I want other people to know that there is hope. With the right technology, better things can happen for each of us. That's what Dr. Bishoff did. He saved my kidney and gave me a better life."

Linda Green is grateful to be cancer-free and have her kidney intact, thanks in part to an innovative 3D kidney model created by Intermountain caregivers.



ALEX'S NEW HEART GIVES LIFE, LOVE

While Alex Homer was still in-utero, doctors discovered he had only half a heart—hypoplastic left heart syndrome. After multiple heart surgeries, strokes, and even liver surgery, at age 8, Alex received a heart transplant at Primary Children's Hospital. He now lives each day to his active, joyful limit.

In 2016, Alex was honored by the Children's Miracle Network as the Primary Children's Hospital Utah Champion. He also spoke at a celebration last spring marking the 30th anniversary of the UTAH (Utah Transplant Affiliated Hospitals) Cardiac Transplant Program that includes Primary Children's, Intermountain Medical Center Heart Institute, University of Utah Hospital, and The George E. Wahlen Department of Veterans Affairs Medical Center.

"Alex is a great example of collaborative care," says Dr. Phillip Burch, Pediatric Cardiothoracic Surgeon at Primary Children's Hospital and the University of Utah School of Medicine's Department of Surgery. "I think four separate cardiac surgeons have at one point or another operated on Alex, as well as general surgeons. We have a multi-disciplinary approach to provide good care to complicated patients. To see a child make it through that, to have a child who can now take a few medications and have a quality of life that's very similar to children who were born without a cardiac defect, is probably the most rewarding thing."

1,300+

NUMBER OF HEART TRANSPLANTS PERFORMED VIA THE UTAH CARDIAC PROGRAM SINCE 1985.



Alex says he has big plans for his new heart, including gratitude, joy, exploring, forgiving, and loving. And he is extremely grateful to his Primary Children's Hospital doctors and caregivers. "Thank you for helping me be treated and for giving me a second chance at life."

Alex's mother, Brynn, concurs. "We have our son. I'm so thankful for Primary Children's. Our family has a little brother, a big brother, and we have a chance to experience so many wonderful things with him."

NUMBER OF HEART TRANSPLANTS PERFORMED AT PRIMARY CHILDREN'S SINCE 1985.

150+

Alex Homer's smile (left) shows his love for life and his gratitude for his new heart. He thanks Primary Children's doctors and caregivers like Phillip Burch, MD, Pediatric Cardiothoracic Surgeon (above).

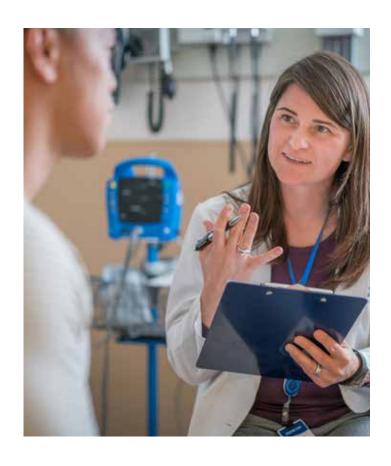
ENHANCING QUALITY, IMPROVING OUTCOMES

Intermountain's Clinical Programs and Services

Intermountain's 10 Clinical Programs bring together our experts in medical science, operations, data analysis, and care delivery to advance clinical care. These programs help Intermountain optimize quality, and they are key to our ability to offer affordable care. Why? When care is provided in the best possible way, there are fewer medical complications, patients recover more quickly and completely, and costs tend to be lower.

Clinical Programs at Intermountain include: Behavioral Health, Cardiovascular, Intensive Medicine, Musculoskeletal, Neurosciences, Oncology, Pediatric Specialties, Primary Care, Surgical Services, and Women & Newborns.

A physician medical director and an operations director oversee each program and lead their guidance councils. The work of these governing councils benefits all Intermountain patients and involves the collaborative efforts of multidisciplinary development teams. These teams include representatives from every region of our hospitals and clinics. They work together to review the medical literature, evaluate our processes and data, and develop evidencebased best practices. Our caregivers then apply these standards, using judgment and flexibility, to tailor care to meet the unique circumstances of each patient.



For example, teams from the Cardiovascular Clinical Program focused their efforts on improving care processes for people at high risk for hospital readmissions and mortality from heart failure. The Clinical Program developed the Heart Failure Pathway, a comprehensive set of reports, processes, and decisions to help our clinical teams intervene and deploy best practices for treating people with heart failure in a timelier manner, leading to improved patient outcomes. In 2016, Intermountain expanded the Heart Failure Pathway implementation—that began with our largest hospitals—to many of our smaller hospitals, broadening the potential to help more people with heart failure live longer, healthier lives (see related story on page 47).

Intermountain's Clinical Services support our Clinical Programs and play a role in each one. These services include: Dialysis, Environmental Services, Food and Nutrition, Imaging, Infectious Disease, Integrated Care Management, Laboratory, Nursing, Pain Management, Patient and Provider Publications, Patient Safety, Pharmacy, Rehabilitation, Respiratory Care, and Wound, Skin and Hyperbaric Medicine.

CLINICAL STATISTICS

These charts indicate service trends in key clinical areas across Intermountain.



The charts are not drawn strictly to scale and are intended as artwork to illustrate differences. These statistics do not include Garfield Memorial Hospital & Clinics, which is owned by Garfield County and managed by Intermountain Healthcare.





Heart health is a lifelong journey.

Intermountain LiVe Well® includes dozens of programs at Intermountain hospitals and clinics—and in our communities—serving hundreds of thousands of people. It also includes digital resources through intermountainlivewell.org and social media channels seen by millions.

LiVe Well is not a diet. It's not a boot camp. It's not about the perfect body. It's not about a quick fix, a band-aid, a fad. It's a lifestyle, not a crash course. It's about learning how to LiVe Well, be well, eat well, feel well, and move well.

One LiVe Well example: Last year marked the 10th anniversary of the 100-Day Heart Challenge program hosted by Utah Valley Hospital. A similar program, the My Heart Challenge, is sponsored each year by the Heart Institute at Intermountain Medical Center.

The Utah Valley 100-Day Heart Challenge addresses the fact that heart disease is the number one killer of women. It focuses on three underlying causes of heart disease: poor diet and nutrition; lack of exercise; and poor stress management. Each year, at least 10 women and their partners are invited to improve their heart health, working with an assigned trainer and a registered dietitian.

Kena Mathews and Andrea Jensen participated in a special alumni edition of the 100-Day Heart Challenge in 2016. These women then served as mentors for new participants in the February 2017 heart challenge.

Kena, who won the heart challenge in 2015, lost 27 pounds at that time. In addition, her pre-diabetes symptoms ended, and her triglyceride and cholesterol levels dropped. She has continued her LiVe Well focus.

"I was overweight since I was a teenager, and it's always been a really hard thing for me to be heavy," says Kena. "It affected my life greatly, and now I've been able to lose 70 pounds. People notice. And I feel better, finally, after 45 years of not feeling well. My whole life has changed. I am able to do things I never thought I'd be able to do. My outlook on life is different."



Kena Mathews won the 100-Day Heart Challenge in 2015. She lost 27 pounds and enjoyed improved health and energy.

INTERMOUNTAIN BOARD OF TRUSTEES

Trustees help Intermountain serve people in our communities.



THE NUMBER OF TRUSTEES SERVING THROUGHOUT INTERMOUNTAIN.

470+

More than 470 community representatives donate their time and expertise as Intermountain trustees, working without pay to help Intermountain achieve its Mission and fulfill its commitments to the community. Trustees serve on the Intermountain Healthcare Board of Trustees, as well as on local governing boards.

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Only clinical and doctoral titles are included.

INTERMOUNTAIN FOUNDATION

Bold ideas and inspired donors

Intermountain Foundation's call is bold: invest in redefining patient care through innovation, research, education, and programs for the 21st century. During 2016, a record number of visionary donors responded, turning their ideas into reality. Here are a few:

- Never shy to big ideas, developer Kem Gardner is tackling one of the biggest: transforming healthcare. He is giving \$20 million toward the construction of the Intermountain Transformation Center, currently under development on the Intermountain Medical Center campus. The programs based in the Transformation Center aim to re-engineer healthcare in ways that are patient-focused and value-based, consistently providing the best clinical outcomes at affordable costs.
- In honor of his mother who passed away from cancer, Utah Valley business leader Blake Roney and his family gave a \$5 million gift to the Cancer Center at Utah Valley Hospital. Part of a \$430 million building and renovation effort, the Cancer Center will advance a holistic and multi-disciplinary approach to cancer care, fostering the best clinical outcomes.
- Born eight weeks premature, the grandson of St. George businessman Jack Renouf received superb care at Dixie Regional Medical Center's NICU. Now a strapping 2-year-old, Jack's grandson is the inspiration behind a generous \$500,000 gift, which will consolidate high quality Women and Newborns Services as part of the hospital's \$300 million expansion project.
- The relationship between Smith's Food and Drug and Primary Children's Hospital dates back to founder Dee Smith, whose granddaughter was a heart patient. In 2016, Smith's customers, vendors, and associates continued that legacy, giving \$1.4 million to the hospital's charity care program. With 24 years of annual fundraising for Primary Children's, Smith's cumulative giving exceeds an impressive \$14 million.



• A heart attack is often personally devastating. For businessman and grateful patient Dell Loy Hansen and his wife Lynnette, the experience prompted an extraordinary \$4 million contribution. His gift is driving innovative cardiovascular research, dramatically improving treatment and clinical outcomes for thousands of heart patients.

For more information about turning ideas into reality, please visit intermountainfoundation.org.

The Intermountain Kem Gardner Transformation Center will open on the Intermountain Medical Center campus in 2018.

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The Intermountain

Foundation oversees fundraising activities system-wide. Community **Development Boards** operate under the auspices of the Foundation and engage in fundraising related to Intermountain's local hospitals. Intermountain Foundation is a 501(c)3 institution qualified to receive tax-deductible donations from individuals. community organizations, and private foundations and corporations. It ensures funds are used as donors intend. Donations are gratefully received and enhance our ability

to provide charity care, leading-edge medicine, research, and new facilities that become part of the community.

Garfield Memorial Hospital & Clinics is owned by Garfield County and managed by Intermountain Healthcare. Its governing board and foundation board are entities separate from Intermountain.

INTERMOUNTAIN **COMMUNITY CARE FOUNDATION**

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The Intermountain Community Care Foundation provides financial support to community clinics, health agencies, and projects serving the low-income and uninsured populations.

These lists include trustees as of April 1, 2017. Only clinical and doctoral titles are included.



BRAIN IMPLANT HELPS CONTROL EPILEPTIC SEIZURES

Being seizure-free would be life-changing for millions of people in the United States with epilepsy. Medication helps some of those patients. And now a new NeuroPace stimulation device implanted in the brain offers additional hope of seizure control for epilepsy patients like Wendy Toale. Wendy has a lesion on the right side of her brain and began experiencing seizures at age 19. Medication helped control her symptoms for several years, but then the seizures returned, significantly interfering with the quality of her day-to-day life as a wife, mother, and school teacher.

The NeuroPace brain stimulation device monitors brainwave activity, detects seizure onsets, and stimulates electrodes implanted in the brain to try to abort the seizure activity.

Wendy was one of 13 patients to have the NeuroPace device implanted by neurosurgeons at Intermountain Medical Center in 2016. "Being able to provide advanced, leading-edge services to our patients on a daily basis is so important to me," says Tawnya Constantino, MD, a neurologist specializing in epilepsy. "Patients derive great comfort from knowing they have access to the latest medical breakthroughs."



"Dr. Constantino has been such an advocate for me," says Wendy. "And the fact that there is a device that goes right onto my brain now that can help take seizures away is just incredible. I don't feel it. I don't know it's there." She looks forward to doing all the things she once did. In the first few months since the implant, Wendy has already seen significant improvement. She now is experiencing fewer and less severe seizures.



NUMBER OF PEOPLE WITH EPILEPSY WHO LIVE WITH UNCONTROLLABLE SEIZURES.

Epilepsy patient Wendy Toale (left) works toward reducing her seizures with support from neurologist Tawnya Constantino, MD (above), and other specialists.

IMPROVING EFFICIENCY AND CONSERVING NATURAL RESOURCES

Wise use of resources helps Intermountain save millions and reduce costs for patients.

Using resources wisely and efficiently is a key part of Intermountain's Mission, Vision, and Values—and helps us reduce cost. For example, our Supply Chain Organization—ranked No. 1 in the nation on the 2016 Gartner Healthcare Supply Chain Top 25—has achieved more than \$600 million in savings in the last decade. Further, our Supply Chain assures that our caregivers have the items they need when they need them to properly care for our patients. The savings and value are reflected in a lower total cost of care and are passed along to patients, employers, and communities.



Community gardens on several Intermountain hospital campuses are used by individuals, families, and groups.

Wise use of resources applies to natural resources as well, and Intermountain is a leader in striving for cleaner air, as well as conserving energy, water, and other key resources. For example, our sustainability efforts include measures to prevent pharmaceuticals, chemicals, and the waste stream from polluting the environment. We follow "green" practices ourselves, and we also require our suppliers to do so.

A recent example: At LDS and Riverton Hospitals, we installed LED lighting, creating an energy savings of about 2,197,000 kilowatt hours per year (the equivalent to the annual electricity consumption of 194 U.S. households). And compared to the previously used fluorescent lamps, the newly installed LED lights last 2.5 times longer—a cost-saving efficiency.

Education, recycling, meeting Leadership in Energy and Environmental Design (LEED) building standards, and reducing the use of fossil fuels are also part of our earth-friendly efforts. Intermountain participates in programs such as Adopt-a-Highway, community gardens, and Clear the Air Challenge, and we encourage our caregivers and their families to adopt wise-living practices as well.

Sustainable use of natural resources is hardwired into our culture at Intermountain. Renewable practices are not only the responsible thing to do; they also help us promote health and reduce the cost of care.



THE NUMBER OF KILOWATT HOURS PER YEAR SAVED BY LED LIGHTING INSTALLED AT LDS AND RIVERTON HOSPITALS.

INTERMOUNTAIN FINANCIAL SUMMARY

FUNDS AVAILABLE	2016		2015
		(IN MILLIONS)	
PATIENT SERVICES AND NON-PATIENT ACTIVITIES:			
Net patient services, including inpatient and outpatient care,			
pharmaceuticals, and supplies; net of discounts provided for patients			
covered by Medicare, Medicaid, and other sources because these			
agencies have limited their level of payment	\$ 4,368.9		\$ 4,167.4
Charity services to qualifying patients unable to pay as part of our ongoing			
community commitment	(419.5)*		(352.9)*
Bad debts for services provided to patients who were unwilling to pay	(243.5)		(215.3)
Non-patient activities, including health insurance premiums, contributions,			
and other resources	3,010.7		2,459.4
Non-operating income from investing activities	237.5		50.6
TOTAL FUNDS AVAILABLE	\$ 6,954.1		\$ 6,109.2
FUNDS APPLIED			
Salaries and benefits to our employees	\$ 2,838.1		\$ 2,607.4
Medical services and supplies	2,402.7		2,074.5
Business services, insurance, utilities, and cost of facility maintenance	888.2		823.6
Depreciation and amortization cost for this year's use of buildings and equipment	280.3		276.3
Interest on borrowed funds	49.4		48.3
Increase in funds available for future needs to replace and improve health facilities,			
technology, and services, and to provide long-term stability	495.4		279.1
TOTAL FUNDS APPLIED	\$ 6,954.1		\$ 6,109.2

^{*} This amount represents Intermountain's unadjusted total. Based on Utah State Tax Commission standards, Intermountain provided adjusted charity care of approximately \$244.7 million in 2016 and \$202.3 million in 2015.

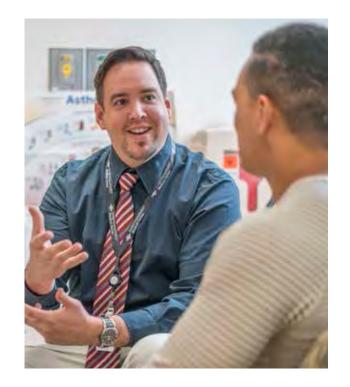


PATIENT-CENTERED CARE IN OUR CLINICS

Intermountain Medical Group

Intermountain Medical Group clinics provide patients with convenient access to primary care, urgent care, occupational health clinics, and specialty care. More than 1,600 physicians and advanced practice clinicians lead caregiver teams at about 180 clinics. Our caregivers put customers and patients first. In addition to advancing the quality of care and healing experience during clinic visits, they are working on new ways to reach out and meet people wherever they may be. Here are some of the things moving forward this year:

- Personalized Primary Care. These primary care clinics focus on quality, great experiences, always improving access, and helping patients navigate through our system of hospitals, clinics, and home-based services. We believe in caring for and helping people in any way we can, with care that is holistic and customized for each person.
- Multispecialty clinics. With more than 50 distinct specialties, almost every patient can be cared for by our teams of specialty caregivers and benefit from the coordination of our care managers and shared electronic health record.
- Direct patient online scheduling. Having learned from a pilot program in 2016, we are ready for broader implementation in 2017.
- **Scheduled video visits.** With new technology available this year in our electronic health record, we have started offering video visits as another way for our patients to receive care. This service will expand in the future
- My Health. Patients access this interactive tool to see their latest lab results, exchange messages with physicians, request appointments, schedule appointments themselves, and more.
- InstaCare Get in Line. To cut waiting time at InstaCare urgent care clinics, patients can save their place in line with InstaCare.org or the Health Hub mobile app.



NUMBER OF FREESTANDING INTERMOUNTAIN MEDICAL GROUP CLINICS THROUGHOUT UTAH.



INTERMOUNTAIN HEALTHCARE 2016 CHARITY CARE

NAN	IE OF HOSPITAL	LOCATION	LICENSED BEDS	STAFFED BEDS	2016 CHARITY CARE ⁴	2016 CHARITY CARE CASES	
Urban Hospitals ¹							
1.	Alta View Hospital	Sandy, Utah	71	66	\$ 7,875,542	4,389	
2.	American Fork Hospital	American Fork, Utah	89	89	7,782,678	4,084	
3.	Bear River Valley Hospital	Tremonton, Utah	16	16	1,240,254	884	
4.	Dixie Regional Medical Center	St. George, Utah	245	245	31,538,587	16,250	
5.	Intermountain Medical Center	Murray, Utah	508	492	112,917,204	33,543	
6.	LDS Hospital	Salt Lake City, Utah	250	250	54,654,241	15,482	
7.	Logan Regional Hospital	Logan, Utah	146	128	11,567,018	6,293	
8.	McKay-Dee Hospital	Ogden, Utah	321	312	69,846,357	18,197	
9.	Orem Community Hospital	Orem, Utah	24	18	2,114,602	1,834	
10.	Primary Children's Hospital	Salt Lake City, Utah	340	332	16,177,044	12,809	
11.	Riverton Hospital	Riverton, Utah	97	88	6,021,861	3,843	
12.	The Orthopedic Specialty Hospital (TOSH)	Murray, Utah	40	40	2,386,957	1,510	
13.	Utah Valley Hospital	Provo, Utah	395	359	45,865,578	16,640	
Rural Hospitals ¹							
14.	Cassia Regional Hospital	Burley, Idaho	25	25	3,660,787	2,961	
15.	Cedar City Hospital	Cedar City, Utah	48	48	5,670,667	5,767	
16.	Delta Community Hospital	Delta, Utah	18	18	791,468	648	
17.	Fillmore Community Hospital	Fillmore, Utah	19	19	580,964	388	
18.	Garfield Memorial Hospital & Clinics ²	Panguitch, Utah	14	14	-	-	
19.	Heber Valley Hospital	Heber City, Utah	19	16	2,035,010	1,371	
20.	Park City Hospital	Park City, Utah	37	37	2,983,283	1,456	
21.	Sanpete Valley Hospital	Mt. Pleasant, Utah	18	18	1,608,051	1,127	
22.	Sevier Valley Hospital	Richfield, Utah	29	24	2,491,662	1,798	
22	Hospitals		2,769	2,654	389,809,815	151,274	
	Medical Group				23,983,887	84,863	
	Homecare				4,905,759	11,999	
	Other ³				833,502	537	
Total Charity Care ⁴ \$\frac{419,532,963}{200}				248,673			

⁽¹⁾ Urban and Rural designations reflect the location of hospitals relative to U.S. Census Bureau Metropolitan Statistical Areas.

⁽²⁾ In 2016, Garfield Memorial Hospital & Clinics (Garfield Memorial) provided 822 cases of charity care totaling \$634,881 (unadjusted). As Garfield Memorial is a managed entity of Intermountain, the charity care provided has not been incorporated into Intermountain's financial accounting.

^{(3) &}quot;Other" includes charity care provided by other operations such as the Avenues Surgical Center, the McKay-Dee Surgical Center, and Intermountain Rehabilitation Services.

⁽⁴⁾ The charity care totals listed in this table represent unadjusted financial assistance provided to people unable to pay. The total adjusted financial assistance based on standards established by the Utah State Tax Commission is approximately \$244.7 million.

2016 COMMUNITY AND SCHOOL-BASED CLINICS

2016 Community Clinic Visits ¹	2016 VISITS	2015 VISITS
Community clinics provide services to uninsured, low-income, and homeless people.		
Intermountain Owned and Operated Community Clinics		
Intermountain Cache Valley Community Health Clinic (Logan, transferred to Midtown Comm. Hlth. Clinic in 2016)	_	1,912
Intermountain Dixon Middle School Clinic (Provo)	1,475	1,691
Intermountain North Temple Clinic (Salt Lake City)	6,585	7,264
Intermountain Pamela Atkinson Lincoln Elementary Clinic (Salt Lake City)	2,818	3,517
Intermountain Rose Park Elementary Clinic (Salt Lake City)	1,155	1,217
Totals ⁴	12,033	15,601
Independent Community Clinics Supported by Intermountain ^{2, 3}		
Bear Lake Community Health Centers (four sites in Garden City, Hyrum, Logan)	26,582	_
Community Health Centers (eight sites in Brigham City, Salt Lake City, Tremonton)	123,715	86,563
Doctors' Volunteer Clinic (St. George)	12,497	11,259
Family Health Services Clinic (three sites in Idaho: Burley, Kimberly, Rupert)	19,197	28,505
Family Healthcare Clinic (five sites in Cedar City, Hurricane, St. George)	33,229	28,993
Fourth Street Clinic (Salt Lake City)	27,634	32,318
Hope Clinic (Salt Lake City)	10,200	12,500
Maliheh Clinic (Salt Lake City)	15,344	16,166
Midtown Community Health Center (eight sites in Logan, Ogden, Salt Lake City)	71,163	80,597
Mountainlands Family Health Center (five sites in Payson, Provo, Vernal)	42,612	43,590
Odyssey House Martindale Clinic (Salt Lake City)	4,503	2,237
Paiute Indian Tribe Clinics (four sites in Cedar City, Ivins, Kanosh, Richfield)	11,122	_
People's Health Clinic (Park City)	8,428	8,547
Utah Partners for Health (two sites in Salt Lake City)	11,451	14,490
Volunteer Care Clinic (Provo)	4,106	3,470
Wayne County Community Health Center (two sites in Bicknell, Escalante)	23,044	17,301
Totals ⁴	444,827	386,536

⁽¹⁾ The number of visits for individual clinics may fluctuate from year to year due to a number of factors, including temporary variations in capacity.

⁽²⁾ Clinic Visit statistics were provided by the respective clinics.

⁽³⁾ These clinics receive most of their funding through federal, state, and private grants and donations. Intermountain's financial support of independent clinics includes grants from the Intermountain Community Care Foundation, cash, and in-kind contributions such as diagnostic vouchers and lab services.

⁽⁴⁾ Including both Intermountain-owned community clinics and Intermountain-supported community clinics, the total number of patient visits in 2016 was 456,860.

REACHING OUT TO IMPROVE HEALTH IN OUR COMMUNITIES

Intermountain is focusing on prevention of prediabetes, high blood pressure, depression, and prescription opioid misuse.

Intermountain conducted a Community Health Needs Assessment during 2016 to identify the greatest health challenges facing communities served by each of our 22 hospitals. This was done in collaboration with the Utah Department of Health, Idaho Department of Health and Welfare, and local health departments in each community.

As a result of the assessment, Intermountain identified four health priority needs: prevention of prediabetes, high blood pressure, depression, and prescription opioid misuse. We are now addressing these needs (especially for low-income and underserved people) through screening, education, and treatment. For more information on the assessment, visit intermountainhealthcare.org.

The assessment is just one of the ways we promote health and access to care for people in our communities. We provide services directly and in collaboration with others. In 2016, our Community Benefit efforts included:



CLINIC VISITS

Community clinics for low-income and uninsured. Intermountain owns four community and school clinics and provides financial and in-kind support to 48 independently owned clinics. These clinics cared for patients in 456,860 total visits in 2016.



FINANCIAL ASSISTANCE

Financial assistance for people unable to pay. We provided more than \$419.5 million (unadjusted) in 248,673 cases. Does not include \$243.5 million in bad debts (care provided to people unwilling to pay).



VOUCHERS

Diagnostic vouchers. Intermountain gave nearly 10,000 vouchers valued at \$8.3 million to 48 community and safety net clinics, reducing barriers to accessing diagnostic services.



FDUCATION

Health professions education. We provided education for medical residents and college-level clinic training valued at \$35.9 million.



RESEARCH

Medical research. Intermountain provided more than \$9.2 million in support of medical research.

Numbers are rounded



GRANTS

Intermountain Community Care Foundation provided \$4.3 million in grants to improve access to healthcare services for low-income, uninsured, or medically underserved people.

DIGITAL TOOLS CONNECT PATIENTS WITH CAREGIVERS, RESOURCES

From My Health to TeleHealth, flexible Intermountain resources put patients at the center of their care.

Digital resources are an important part of Intermountain's commitment to engaging patients in their care and meeting them where, when, and how they want. Whether people are connecting with Intermountain at our clinics, in our hospitals, from home after a hospital stay, or through their computers and mobile devices, we want to provide them the best, most convenient resources possible.

Two examples from 2016:

- My Health is a secure and convenient online patient tool. Historically, My Health has tracked a patient's health history, providing online access to lab results, prescriptions, and more. In 2016, My Health enhancements included scheduling physician appointments online (pilot programs), completing online Medicare Annual Wellness Visit forms, viewing provider notes from a medical visit, and conveniently messaging providers.
- **TeleHealth** gives patients and providers the opportunity to interact from a distance via audiovisual connections. Highlights include:
 - Connect Care, a service that allows patients to access providers from their computer or mobile devices anytime, anywhere, 24/7/365. More than 4,400 patients used this service during 2016.
 - In 2016, hospitals throughout Intermountain became connected via TeleHealth, allowing specialists from across the system to provide additional support to patients from Burley, Idaho, to St. George, Utah, in areas such as critical care, stroke, newborn critical care, behavioral health, pediatrics, and more.
 - TeleHealth technology also connects Intermountain experts to seven non-Intermountain community hospitals in Utah, Idaho, Nevada, and Wyoming, where we're providing support for critical care, stroke, behavioral health, and newborn critical care.
 - In the future, TeleHealth services will expand to include additional clinic visit options.

Future plans include **Connected Health**, a digital strategy that will seamlessly integrate traditional and digital care to reach people when, where, and how they choose. Flexible tools will help patients:

- Compare providers, costs, treatment options, and out-of-pocket expense estimates.
- Quickly access information and support before and after a medical visit.
- Connect with remote monitoring services.
- Have a single, unified, "whole person" health and lifestyle record.







Providing innovative services to members

SelectHealth offers a range of health plans and personalized services to help members meet their individual needs and achieve their best possible health. One such group is Medicare Advantage members, who are benefitting from the SelectHealth Advantage Medication Therapy Management Program.

The program helps members manage their medications and associated health conditions. At no cost to Medicare Advantage members, a SelectHealth Medication Therapy Management pharmacist conducts a telephone consultation for those enrolled in our prescription drug plan to:

- Evaluate medications and medical conditions, such as high blood pressure and diabetes, to assist members in getting the most benefit from their medications.
- Provide suggestions on how members can take their medications to minimize side effects.
- Explain how medication compliance may help save money.
- Offer ways to simplify the member's medication routine.
- Offer recommendations allowing medications to work better for the member.

When appropriate, SelectHealth clinical pharmacists work directly with the member's healthcare provider and pharmacy to ensure clear communications and coordination that benefit the member. A written summary of the pharmacist's medication review and recommendations are provided to members and their primary healthcare providers.

LeeAnn Madrid, Pharm. D, SelectHealth clinical pharmacist, describes how the program makes a difference—one member at a time. "My goal is to help each person understand their medicines, be successful with their care plan, and stay healthy. The SelectHealth members appreciate the fact that someone cares about them as a person and about the medicines they take. By establishing trust and rapport on my calls, the members feel more at ease and share what is going on with their health. With this information I can assist them in leading a healthier life and meeting their personal goals."

The SelectHealth Advantage Medication Therapy Management Program shows how SelectHealth pharmacists, working together with members and their healthcare providers, can help people live the healthiest lives possible.

THE NUMBER OF SELECTHEALTH MEDICARE ADVANTAGE MEMBERS, AS OF DECEMBER 31, 2016.

39,000



HEART FAILURE PATHWAY LOWERS DEATH RATES, IMPROVES LIFE

Last year, Kirstin Blake became gravely ill with heart failure. Her heart was weakened by 16 rounds of chemotherapy used to fight her breast cancer. "Kirstin's heart was pumping at only about 30%; normal is 55%," says Saima Husain, MD, a cardiovascular disease specialist with the Heart Failure Clinic at McKay-Dee Hospital.

More than 6 million people in the United States suffer from heart failure, a condition where the heart is unable to pump enough blood—with needed oxygen and nutrients—to organs and tissues. This can lead to shortness of breath, frequent coughing, fatigue, dizziness, pain, and swelling of the legs, feet, and abdomen.

Since 2014, a multidisciplinary team of Intermountain clinicians has been developing a Heart Failure Pathway program designed to treat patients at high risk for heart failure, reduce the incidence of the disease, improve outcomes, and lower death rates.

The Heart Failure Clinic at McKay-Dee Hospital supports these efforts and was a pilot program for the pathway. The results were impressive, with a significant improvement in mortality rates.

"Our goal is to improve the quality of life and increase the duration of life," says Dr. Husain. "We work together with the



patient, focusing on 'I do my part, you do your part, and that's how we'll move forward.""

Dr. Husain worked with Kirstin to help her make lifestyle changes and know what to look for, such as when her blood pressure falls, and how to respond. Kirstin says she is making healthier choices and better understands what her body is doing.

And even though Kirstin is still battling breast cancer, she has made significant progress related to her heart failure. "I will forever be grateful for the people in the Heart Failure Clinic," she says. "We are a team."

SAFER CARE

THE MORTALITY RATE OF MCKAY-DEE HOSPITAL PATIENTS PARTICIPATING IN A HEART FAILURE PATHWAY PILOT PROGRAM IN 2014 WAS 7%, COMPARED TO 19% FOR HEART FAILURE PATIENTS NOT PARTICIPATING.

Cardiovascular disease specialist Saima Husain, MD, helps heart failure patients increase the duration and quality of life.

RECOGNIZING EXCELLENCE

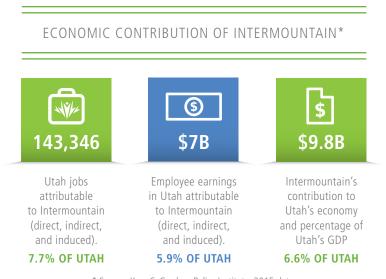
"It's really hard to think of a healthcare organization not just in the United States but worldwide that's been more significant than Intermountain Healthcare—now for decades—in pursuit of what I call the Triple Aim: better care, better health, and lower costs. The medical landscape would be phenomenally different and far less favorable without the contributions Intermountain has made."

—Donald Berwick, MD

Professor, Harvard Medical School and Harvard School of Public Health; former administrator, Centers for Medicare and Medicaid Services; co-founder and past president, Institute for Healthcare Improvement

REGIONAL PERFORMANCE

A *New England Journal of Medicine Catalyst* article in May 2016 focused on Utah's ranking as the top state in the nation when looking at both the health of the population and per-capita healthcare costs. On several measures of health quality, Utah leads or is among the country's leaders. For example, the ratio of medical discharges per thousand Medicare enrollees is 32% lower in Utah than the national average. On average, hospitalized Medicare patients in Utah went home in 0.83 patient days per enrollee, versus 1.42 nationally. And per-capita healthcare costs in Utah historically are among the lowest in the country.



^{*} Source: Kem C. Gardner Policy Institute, 2015 data

Neighboring Idaho, a portion of which also comprises Intermountain Healthcare's service area, also joins Utah and only about seven other states in this "sweet spot"—achieving high levels on the healthiness scale while also performing well on the affordability scale.

Several factors contribute to these good results, including the relatively young age and high education levels of the population, healthy lifestyles, strong family and social support networks, and other factors. And as a leading health system in the region, Intermountain has long been dedicated to providing high-quality care at the lowest sustainable costs. With an integrated healthcare network that focuses on helping people live the healthiest lives possible, Intermountain plays an important role in helping Utah and the region achieve excellent medical outcomes at significantly lower costs.

RECOGNITION HIGHLIGHTS

Intermountain was widely recognized in 2016 in national awards, rankings, and other honors, including the following:

- 100 Top Hospitals. In its annual top hospitals study, Truven Health Analytics honored three Intermountain hospitals— LDS Hospital, Logan Regional Hospital, and McKay-Dee Hospital—as being among the nation's 100 best hospitals. In Truven's related study of the nation's top health systems, Intermountain was ranked among the top quintile of all systems for the second consecutive year. In addition, Becker's Hospital Review named Intermountain Medical Center as one of its 100 Great Hospitals in America for 2016. And an organization called iVantage Health Analytics included three Intermountain hospitals—Bear River Valley, Cedar City, and Sevier Valley—among the country's Top 100 Rural & Community Hospitals.
- **Supply Chain Excellence.** Intermountain Healthcare was ranked as the No. 1 overall healthcare supply chain organization in the nation in 2016 by Gartner. The ranking recognizes companies across the healthcare value chain that demonstrate leadership in improving patient care and lowering costs. Intermountain has ranked among the top companies on the Gartner Healthcare Supply Chain Top 25 for several years, ranking No. 3 in both 2014 and 2015.



- National Spotlight for Transforming Healthcare. Several high-profile news articles and reports focused on Intermountain's success in bending the healthcare cost curve while also achieving high quality. A New York Times feature article entitled, "A Novel Plan for Health Care: Cutting Costs, Not Raising Them," highlighted Intermountain's efforts around population health and the introduction of the SelectHealth Share population health product for large employers.
- Health Innovation. Intermountain was highlighted in Becker's Hospital Review as one of 40 hospitals and health systems with innovation centers, and the organization's innovation process was regularly featured in various national and healthcare trade media outlets. It also again earned a spot on the InformationWeek Elite 100 list of business technology innovators for creating a culture of innovation.
- U.S. News Best Hospitals. Primary Children's Hospital again ranked among the nation's best children's hospitals, according to U.S. News & World Report. It was ranked among the best nationally in nine out of the 10 pediatric specialties that are researched and ranked by *U.S. News*.

- Certifications and Designations. Various Intermountain facilities achieved important certifications and designations during 2016. Intermountain Medical Center earned designation as the only hospital in Utah to be named a Comprehensive Stroke Center by The Joint Commission. The Emergency Department at Cedar City Hospital received approval as a Level IV Trauma Center by the Utah Department of Health. And Intermountain's Precision Genomics core laboratory earned accreditation from the College of American Pathologists.
- Community Value. Seven Intermountain hospitals were designated as 2016 Community Value Five-Star Hospitals for being financially sound, reinvesting in the facility, maintaining a low cost structure, charging reasonable rates, and providing high-quality care.
- Employer of Choice. Intermountain and SelectHealth again received several work environment and employment-related honors in 2016, including: Great Places to Work in Healthcare (Becker's Hospital Review), America's Best Employers (Forbes), Great Workplace Award (Gallup), 100 Best Places to Work in IT (Computerworld), and Fit-Friendly Worksite (American Heart Association).
- Consumer Choice. National Research Corporation (NRC) again presented the Consumer Choice Award to three Intermountain hospitals—McKay-Dee, Intermountain Medical Center, and Utah Valley—for being the top-rated hospitals in their respective markets— Ogden, Salt Lake City, and Provo/Orem. In addition, three hospitals—Dixie Regional, LDS, and Logan Regional—were honored by NRC with 2016 Dimension Awards for excellence in specific dimensions of the patient experience.
- Leadership Recognition. Intermountain leaders continued to be recognized among the best in the healthcare industry. In 2016, Intermountain executives were included on national lists of the top health IT leaders, top financial and operations executives, most influential physician executives, leaders in patient safety, top rural hospital leaders, and various other individual honors.
- Hospital Quality Awards. In 2016, 14 Intermountain hospitals received the HealthInsight Hospital Quality Award for strong performance on a range of inpatient and outpatient process-of-care measures, patient satisfaction scores, and readmission rates. All 14 of Intermountain's winning hospitals ranked at or above the 75th percentile nationally.
- Most Wired. For the 17th time in the past 18 years, Intermountain Healthcare was included among Health Care's Most Wired as designated by Hospitals & Health Networks magazine.

KEY EVENTS IN 2016

Leadership Transition. Dr. Charles W. Sorenson retired as President and CEO, and Dr. A. Marc Harrison succeeded him in the role.

Stanford-Intermountain Collaboration. Stanford Medicine and Intermountain formed a collaboration to support innovative projects in research, patient care, and medical education.

3D Printing Aids Surgery. In a Utah medical first, doctors at Intermountain Medical Center printed and used a 3D kidney to help save a patient's organ during a complicated tumor-removal procedure (see story on page 19).

New Technology for Bladder Cancer Patients. Intermountain Medical Center became the first hospital in Utah and the Intermountain West to utilize a technology that improves detection of cancerous tumors in patients with bladder cancer.

Precision Medicine. Intermountain achieved several milestones related to precision medicine, including the launch of a new Intermountainowned genomics research and testing company called Navican Genomics.

Other precision medicine developments at Intermountain included:

- Participation in the White House Precision Medicine Initiative.
- Intermountain leaders and researchers met with Vice President Joe Biden in Salt Lake City to discuss the administration's "moonshot" effort to cure cancer, and Dr. Joshua Schiffman, a pediatric oncologist at Primary Children's, became a founding member of a national Cancer MoonShot 2020 team aimed at speeding the progress of pediatric cancer treatments.
- Intermountain, Stanford Cancer Institute, Providence Health & Services, and Syapse teamed up to launch a data-sharing network called the Oncology Precision Network (OPeN).
- Intermountain and the Stanford Genome Technology Center (SGTC) established a collaborative research program.
- Intermountain finalized an agreement with Asia Genomics to offer the Intermountain Precision Genomics ICG100™ test.

Supporting Healthy Communities through contributions and projects, including:

- Contributions to Neuroworx and Safe Kids Utah.
- A donation to the National Ability Center.
- Collection of more than four tons of unused medications in secured medical drop boxes around Utah. Through our Community Pharmacies, we also provided access to Naloxone—a medication that can reverse the effects of opioids and prevent death from overdose—without a doctor's prescription. Both initiatives are part of the Use Only As Directed campaign, a partnership between Intermountain, the state of Utah, and others.
- Opening of the Move Well Studio at Intermountain's Salt Lake Clinic.
- Opening of "Healing Homes" for patients and their family members who travel for cancer care at the Blood and Marrow Transplant Program at LDS Hospital.
- Expansion of the Health Insurance Premium Support (HIPS) program through Intermountain Community Care Foundation and the Association for Utah Community Health.



Progress on new facilities and services projects includes:

- Construction continued on the Utah Valley Hospital replacement project.
- Work began on an expansion project at Dixie Regional Medical Center.
- An expansion was completed at Park City Hospital.
- The Riverton Hospital Outpatient Services Center opened.
- Construction commenced on patient/clinic towers at Alta View Hospital.
- Progress was made on construction of a new hospital and medical office building in Layton.
- Intermountain Connect Care® launched.
- The Utah Valley Hospital Primary Children's Network was formed.
- A cancer immunotherapy program was implemented at Intermountain Cancer Centers.
- The Intermountain Foundation received a \$20 million donation from philanthropist and former Board Chair Kem Gardner toward construction of a new healthcare Transformation Center on the Intermountain Medical Center campus.

RESEARCH HIGHLIGHTS

Humanizing Critical Care. Intermountain research concluded that eliminating even minimal hospital visitation restrictions leads to improved family, patient, and nurse satisfaction without representing a safety risk. The studies suggested patients do better medically when their families are free to accompany them during their ICU stay.

Cardiac Care. Several studies led by the Intermountain Medical Center Heart Institute identified a range of factors that contribute to heart attacks and other cardiac events.

Safe Scans. Intermountain Medical Center Heart Institute researchers found that clinically indicated MRI tests are safe and do not need to be withheld in patients with cardiac implantable electronic devices.

Integrated Care. A 10-year study conducted by Intermountain shows delivering integrated mental and physical healthcare in team-based primary care settings results in better clinical outcomes for patients, lower rates of healthcare utilization, and lower costs.

Research Collaborations include:

- **Stanford-Intermountain Grants.** More than \$500,000 in seed grants was awarded for seven projects jointly led by principal investigators from Intermountain and Stanford.
- **Cloud-based Data Repository.** Intermountain Medical Center Heart Institute joined with the American Heart Association and other heart research centers in a strategic collaboration with Amazon Web Services to launch a global, secure cloud-based data repository.
- Regional Oncology Research. Intermountain joined Multicare and the Northwest NCI Community Oncology Research Program.

