

2021-2030 Strategic Plan: Living Healthier Together

Vision 2030



A wide-angle landscape photograph showing a dirt path that curves from the bottom right towards the center of the frame. The path is flanked by lush green grass and wildflowers. In the background, a dense forest of trees stretches across the horizon under a bright, hazy sky where the sun is setting, creating a warm, golden glow.

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LETTER FROM THE CEO



This 10-year plan sets forth an ambitious framework to guide Luminis Health through the next decade. We will continue our work of enhancing health, advancing wellness, and removing barriers to reach our highest potential. We will also enter a future where Luminis Health will forge new partnerships in the health ecosystem; set bold goals limited only by our imagination, and embrace a world of innovation. Each of us has a role - as leaders, employees, clinicians, caregivers, donors, volunteers and trustees - to advocate for those who need care, healing, and support.

I reflect with pride on the accomplishments of the past decade and our Vision 2020, Living Healthier Together.

The culmination of Vision 2020 was the establishment of Luminis Health in 2019, formed through a partnership between Anne Arundel Health System (AAHS) and Doctors Community Health System (DCHS). Vision 2020 provided the direction to grow us into a major, regional health system serving central Maryland from DC to Delaware, with three hospitals; comprehensive multi-specialty medical group and ambulatory platform; with 80 care locations, a behavioral health campus and \$1.1 billion in annual revenue.

Looking out 10 years at the horizon is an enormous task, particularly in an environment as uncertain as ours. When the work of defining Vision 2030 was completed, we were yet to embark on the uncharted path of the global pandemic of COVID-19. Now, we adjust our focus to include ongoing monitoring of our immediate and critical needs. Planning for uncertainty in the imminent future magnifies the challenge of embracing visionary change and reimagining health. However, more than ever, the Vision 2030 strategy is both directionally meaningful and robust enough to accommodate unforeseen and critical work such as this.

Throughout 2020, we have endured tremendous adversity: a pandemic, urban and social unrest, economic strife and deep political divisions. Before COVID-19, I wrote: "We face challenges of scarce resources, heightened expectations, new discoveries, and cultural differences that call on us to deliver on the promise of a high performing, frictionless experience for our patients, their families and our entire region." With the additional lens of this pandemic, Luminis Health has never been more committed to delivering on that promise and honoring its legacy of improving the wellbeing of our communities.

I invite you to join us, as you are indispensable, on the journey we call Vision 2030: Living Healthier Together.

In good health,

Victoria W. Bayless
Chief Executive Officer
Luminis Health

Under Vision 2020, Anne Arundel Health System saw:



Top 10
national quality
rankings



64%
increase in
total operating
revenue



128%
increase in
Community
Benefit



32%
reduction in total
system debt



41%
increase in
our workforce,
doubling the
size of our team



\$112
Million in
philanthropy

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Vision 2030 is defined by two principle forces that Luminis Health believes will serve as the overarching influence on our organization through the coming decade. One is our assessment of the strategic imperatives that we anticipate will occur outside Luminis Health, shaping our community and informing the role we fill. The other elements shaping our vision are the key directional shifts we believe we must recognize, align with, and leverage as we position Luminis Health within the changing world. Our Vision 2030 sits at the confluence of these external signals and internal drivers.

Strategic imperatives

We found three distinct strategic imperatives that we believe Luminis Health must be prepared to face in order to achieve our Vision 2030.

Shift Focus to the Health Ecosystem

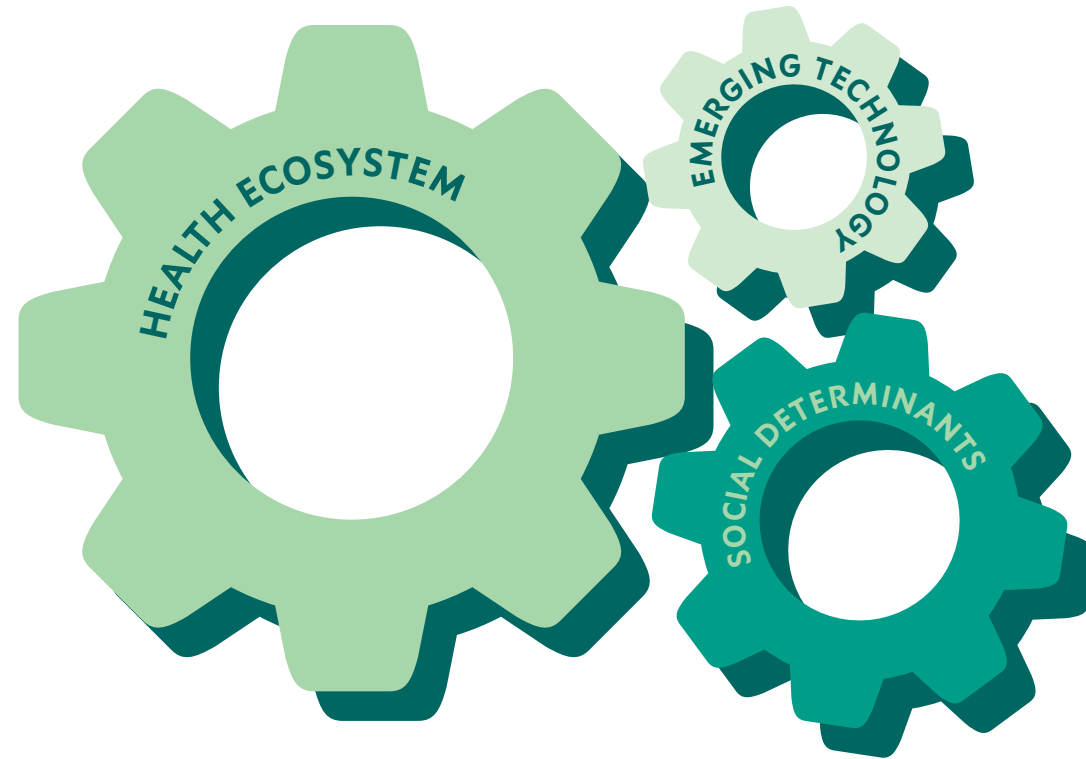
We anticipate shifting our focus toward supporting health and wellbeing for the communities we serve. Broadening our focus toward individual and community wellness requires an understanding of the entire ecosystem.

Address Health through Social Determinants

Understanding and improving the underlying social and economic conditions for the people Luminis Health serves and our surrounding communities must be seen not only as a moral imperative, but as a strategic one for Luminis Health.

Adopt Technology Proactively

The pace of emerging technologies will require that Luminis Health become proactive around technologies over the next decade.



Key directional shifts

Beginning in April 2019, Luminis Health leaders worked together over the course of several feedback and input sessions, and in a final workshop in September 2020, to identify and develop our shared understanding of the key directional shifts informing the future of health, health care and wellbeing by 2030. These key directional shifts are fundamental achievements that we believe will drive us in a new direction. They are essential to our future success and accomplishing our vision for Luminis Health.

 QUALITY	Advance excellence in high-quality care, equitably delivering what is important to our communities
 COMMUNITY	Optimize our role as a public health partner, engaging communities through innovation and collaboration to achieve health equity
 WORKFORCE	Create an environment of cultural appreciation and wellbeing to recruit and retain an inclusive, adaptable workforce with equitable opportunity
 GROWTH	Reimagine our role and expand our reach through innovation, technology, and diversification
 FINANCE	Strengthen our financial position through care redesign and portfolio mix to achieve high value

Vision 2020 lookback

The following is a description of the process that led to the development of Vision 2030 beginning with the foundation of Vision 2020, the engagement of stakeholders, environmental scanning, and the roadmap that will guide Luminis Health into the next decade.

Vision 2030 builds upon the prior 10-year plan adopted by the AAHS Board of Trustees on February 25, 2010, known as "Living Healthier Together." That plan was developed in 2009 just prior to landmark legislation enacted in March 2010 - the Affordable Care Act (ACA). Paradigms were shifting; challenges to reduce costs, improve quality, and exceed patient expectations were pressuring health systems to respond. AAHS did just that.



Vision 2020 strategic framework

AAHS executed on a solid strategic framework for Vision 2020. The vision of "Living Healthier Together" for AAHS was to be:

- Centered on the patient
- Operating beyond the walls of the hospital
- Built on partnerships, relationships and connectivity
- With shared accountability among patients, physicians, hospital employees and community
- Driven by standards based on evidence and outcomes
- Serving a broader geography and diversity of patients
- Remaining viable, cost effective and responsible.

<p>VISION 2020 Strategic Goal Areas</p>		<p>Our Vision: Living healthier together. Our Mission: To enhance the health of the people we serve. Our Values: Compassion • Trust • Dedication • Innovation Quality • Diversity • Collaboration</p>
QUALITY	Q'd Up We are nationally recognized as a model for quality.	
COMMUNITY	Better Together We are a patient-centered system of care.	
WORKFORCE	A-Team We are engaged, healthy and diverse.	
GROWTH	Think Big We are expanding access and services across the region.	
FINANCE	Smart Money We invest and innovate for long-term financial strength.	
<p>LIVING HEALTHIER TOGETHER.</p>		

Vision 2020 community impact

Vision 2020 provided the framework for numerous accomplishments that had a significant impact on the community served by AAHS. It is upon that foundation that Vision 2030 is built. Throughout the course of Vision 2020, we achieved many significant goals across a variety of areas. A full list of our Vision 2020 accomplishments is presented in Appendix I.

Our system grew tremendously, adding a patient tower at Anne Arundel Medical Center (AAMC), opening the J. Kent McNew Family Medical Center, launching three regional medical office buildings, and growing our medical group to include more than 300 providers providing a continuum of primary and specialty care in the hospital and throughout the region. We initiated numerous quality programs, from developing our Collaborative Care Network (CCN), adding a range of graduate medical education programs (surgical, medicine, obstetric residencies in addition to a range of fellowship programs), to gaining and maintaining nursing magnet designation. We successfully navigated the transition to Maryland's Global Budget Reimbursement program, redefining high-quality, low-cost care to remain financially profitable and positioned for continued growth.



An integrated health delivery system

Vision 2020 ultimately culminated in the formation of Luminis Health, an accomplishment that demonstrates the success of our prior 10-year strategy and sets the foundation for Vision 2030. In 2019, AAHS and DCHS joined together to form Luminis Health.

The ten year approach to strategic planning is a bold one in such an uncertain environment. Despite the challenges inherent in such a long planning horizon, it has proven an effective method for establishing a vision to pursue and upon which to build three year and annual operating plans.

While Vision 2020 covered the former AAHS, Vision 2030 includes the collection of operating companies that comprises Luminis Health, including AAMC, Doctors Community Medical Center (DCMC), and Luminis Health Clinical Enterprise (LHCE). Each of these business units will operate under annual plans aligned with Vision 2030, and with anticipated updates that will be developed throughout the 10-year planning horizon.



3 Hospitals **8** Counties
80+ Care sites



741 Total licensed beds



156,054
Emergency visits



\$1.1 Billion
Operating revenue



35,406
Inpatient admissions



1,770
Medical Staff



6,500+
Employees



1,430
Volunteers



\$66 Million
Community benefit

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Vision 2030 was developed throughout the planning and inception of Luminis Health. To achieve the goal of developing a bold, robust strategy for the 10-year horizon, Luminis Health enlisted the help of renowned foresight consultant, Institute for the Future (ITF). ITF is the world's leading futures thinking organization. For more than 50 years, businesses, governments, and social impact organizations have looked to ITF to provide global forecasts, custom research, and foresight training to navigate complex change and develop world-ready strategies. ITF utilizes unique methodologies and toolsets to develop transformative possibilities across all sectors that support a more sustainable future.



Development process

The development of Vision 2030 began with a series of innovation and visioning exercises.

The Luminis Health, AAHS, and DCHS executive teams continued to refine and hone the strategic framework of AAHS and DCHS into one, cohesive mission, vision, and values that would serve the entire system, drawing from the strong, existing strategies of each institution. The Board of Trustees, physician leadership, executive management, administrative directors, and patient and family advisors collaborated via multiple forums from October 2018 through September 2020 to provide insight and foresight into this plan (Appendix II).



October 2018
Kickoff on consumerism

Our kickoff event in October 2018 featured a deep dive into consumerism with author Dr. Barbara Kahn, professor of Marketing at Wharton School of Business, and author of the book *The Shopping Revolution: How Successful Retailers Win Customers in an Era of Endless Disruption*. Dr. Kahn engaged members of the board of trustees, executive leadership, physician leaders and emerging administration leadership on the important trend of health care consumerism, including an exercise to apply the lessons of the retail industry, consumerism, and disruption to the health care industry.

January 2019
Visionary strategies on caregiving

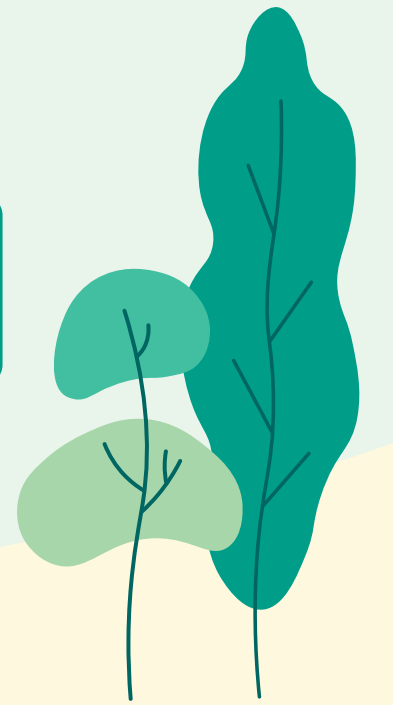
Our second session was facilitated by IFTF in January 2019. Our work focused on creating bold visions for the future of caregiving and included understanding alternative scenarios to address the aging population and need for caregivers. After evaluating opportunities to create novel solutions to caregiving through policy, technology, and social change, our participants considered how we could take steps to create a future where alternative caregiving models are the norm. Our goal was to help Luminis Health leaders gain experience and comfort with futures-back strategies which are an effective tool to develop novel, visionary solutions to problems.

April 2019
Executive retreat

An executive retreat was held in April 2019, during which the leadership team, physician leaders, and Board of Trustees gathered to formulate the guiding principles of Vision 2030. An executive retreat was held in April 2019, during which the leadership team, physician leaders, and Board of Trustees gathered to formulate the guiding principles of Vision 2030. This event was facilitated by IFTF, and led the team through a series of visioning exercises designed to generate bold, innovative plans for the future vision of our organization. This is discussed in detail in chapter four.

September 2020
Luminis Health vision

In September 2020, a group of trustees, clinical chairs, executives, and patient and family advisors met to discuss the changed realities of our national landscape and how Luminis Health should adjust our vision to include strategies around pandemic preparedness, seismic economic shifts, and our renewed focus on race and equity.



Mission, vision, values

The foundation for Luminis Health is its mission, vision, values, and strategic framework. These are the fundamental principles by which we serve, defining both who we are and who we aspire to be. The mission, vision, and values for Luminis Health were derived from both AAHS and DCHS (Appendix III). Our Luminis Health mission, vision, and values foundation defines us, our priorities, and drives us to aspire to the highest level of achievement through a shared understanding of Luminis Health.

Our mission is our purpose, our vision represents our future, and our values serves as our guideposts. Our values are brought to life daily in the behaviors and attitudes we exhibit and the choices and decisions we make. They serve as a beacon to guide Luminis Health in allocating resources, in drafting policies and procedures, and responding to daily and long-term situations.

MISSION

To enhance the health of the people and communities we serve

VISION

LIVING HEALTHIER TOGETHER

- Health and wellness are fundamental to everyone
- We work side-by-side with our community and patients to empower them to take control of their health
- Partnerships and connectivity form the foundation for care
- Evidence-based care is centered around people and family
- Access to care should be refreshingly easy
- Luminis Health will generate a positive impact for all

VALUES

RISE: Respect, Inclusion, Service, and Excellence



Respect ■ Inclusion ■ Service ■ Excellence

How we treat each other matters. We collaborate, foster trust, and demonstrate compassion, making each person feel like they are the only one that matters.

Our humanity is enriched when everyone has a voice, and a diversity of perspectives is equitably represented

We work side-by-side with our community, patients and each other; dedicated to providing safe care to all in our community in an efficient and seamless way.

As an agile system of care, we're creating a new force in health care, dedicated to delivering high quality care in an optimal way. This legacy of high performance will advance our vision and set the standard for innovative, clinically expert care.

Igniting new possibilities

A photograph of two hands holding lit sparklers. The sparklers are bright yellow and orange, with many small sparks flying out. The background is dark with many out-of-focus, circular bokeh lights in shades of yellow and orange. The overall mood is celebratory and hopeful.

Luminis Health is leveraging many elements from prior DCHS and AAHS frameworks and these new mission, vision, and values reflect our reimagined perspective of health. Our new focus centers on community, wellness, and experience, which differentiates vision 2030 from both our prior strategies and those of other health systems. Our reimagined vision hones in on health and wellness rather than illness or treatment. Fundamental to this vision is our belief that it is essential to be in partnership with our community. Lastly, as we expand our vision to include the broader health of our community, we embrace the changing world of consumer experience and expectations, who seek access to a frictionless health system. Luminis Health is igniting new possibilities: a health system that is refreshingly easy.

Leadership framework

An essential element of Luminis Health's success has been the development of a leadership framework that aligns closely with the mission, vision and values of the system. This framework not only shares our priorities for key leadership traits, it guides our recruitment, retention and development/succession planning for leadership.

Luminis Health considers three primary tenets of leadership that we use to guide, teach and recognize leadership: Team, Change, Business, known throughout as the TCB framework.

Team Leadership

Team Leadership highlights the need to create high performing and diverse teams. It establishes a commitment to a coaching culture that emphasizes mentoring and staff development and lays the foundation to create an organization that provides compassionate care and values employee wellbeing.

Change Leadership

Change Leadership outlines the need for innovation, market awareness, and the importance of leading with a system perspective. At the foundation of change is an emphasis on performance improvement and sustainable growth.

Business Leadership

Business Leadership sets the expectation that all leaders have technical and business expertise. It speaks to our culture of accountability and individual ownership to help guide Luminis Health forward.

When leaders are hired or promoted into leadership positions, they participate in a yearlong development program that is based on the TCB framework.

Strategic management system

The long range plans of Luminis Health serve as the framework for the short- range strategic management system. Our Strategic Management System relies on the annual component to align operational work with our corporate strategies.

Annual Operating Plans and True North

Each year, Luminis Health identifies system-wide top priorities and establishes operational goals, objectives, and initiatives. In addition, Luminis Health utilizes the True North tool to focus on the annual top priorities for the organization. The annual plans and metrics are developed in alignment with our mid- and long-range goals, but incorporate near term needs. By developing annual action plans we are able to align our operational work with longer term strategies to ultimately accomplish our goals and move us in the direction of Vision 2030. Executive leadership across Luminis Health monitor system wide performance and the achievement of the initiatives that make up the annual plans of the organization.

Strategic Framework

Our strategic framework resembles the one developed ten years ago, which has become a strong and robust foundation for Luminis Health.



Luminis Health strategic framework



MISSION
To enhance the health of the people and communities we serve.

VISION
LIVING HEALTHIER TOGETHER

VALUES
Respect, Inclusion, Service, Excellence

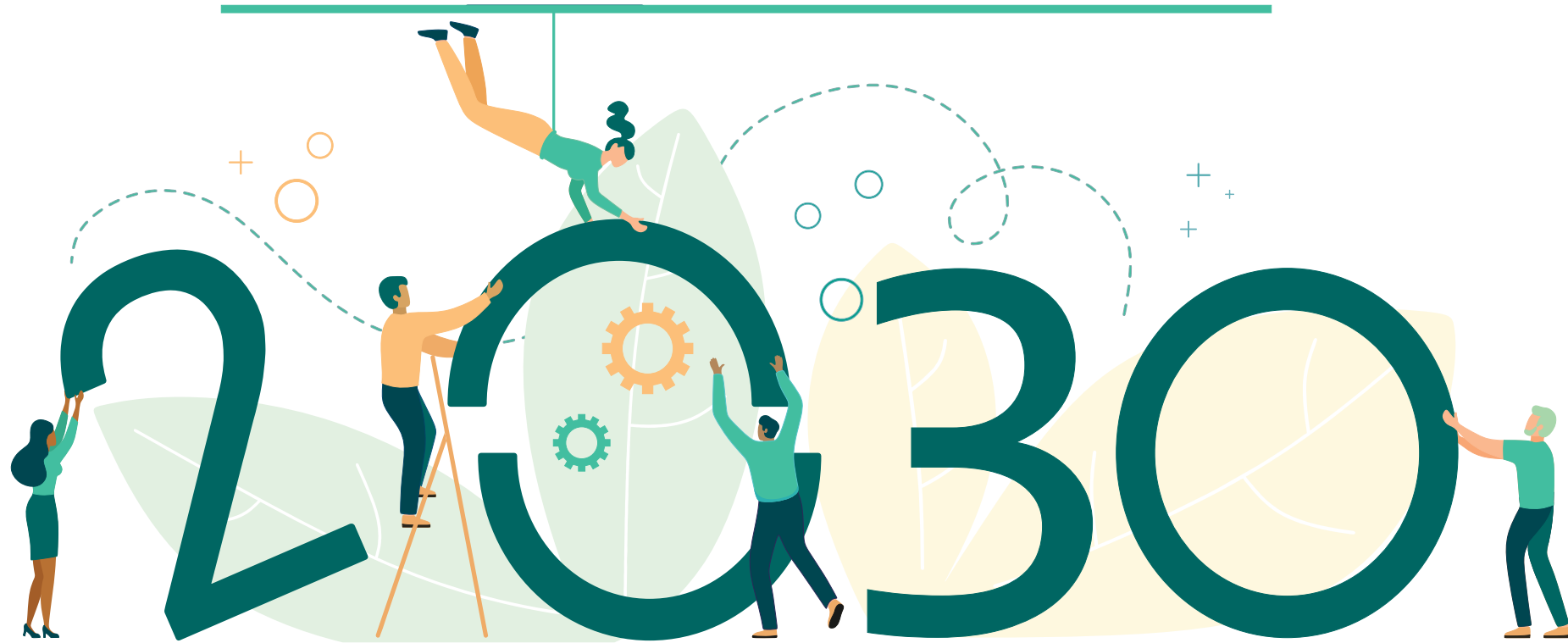
 **QUALITY**
Q'ed up: We provide high quality health care based on access, experience, and innovation

 **COMMUNITY**
Better together: We lead through partnership and collaboration within the health ecosystem

 **WORKFORCE**
A team: We are a talented, engaged, inclusive, diverse, equitable, and healthy team

 **GROWTH**
Think big: We expand access to care when, where, and how it is needed across the region

 **FINANCE**
Smart money: We are responsible stewards of our resources, investing in the health and wellbeing of our organization and community



Hallmarks of strategic planning

1. A shared and inspiring vision

2. Broad and deep stakeholder input

3. Timely and effective execution

Shared vision

Luminis Health's Reimagined Health 2030 workshop was held in April 2019 at the National Harbor in Prince George's County. There were three stated objectives for the workshop, which was designed with IFTF. These objectives were:

- Immerse ourselves in the practice of foresight and future-back strategies
- Build a shared understanding among the participants of the key directional shifts informing the future of health, health care and wellbeing by 2030
- Identify the necessary actions to systematically prepare for a reimagined health future

Stakeholder input

The following content and output was produced by workshop attendees:

- The key signals of change already visible in today's environments
- Future possibilities when we consider how signals and trends intersect
- Four external future forces that are shaping the next decade in health, health care, and wellbeing
- 2030 vision generated by the participants
- Roadmaps for how Luminis Health will bring those visions to life over the next 10 years

In addition to the retreat, many feedback and input sessions were held throughout 2019-2020. Full details of these sessions is in Appendix II.

Timely execution

A large group was convened in September 2020 to revisit the draft Vision 2030 plan. Consideration was given to the changes we were living in the world; to view Vision 2030 through the lens of providing care during a pandemic, refocusing on emergency preparedness, reinvigorating service excellence around patient safety and quality, reorganizing to facilitate system integration, redesigning our clinical model of care, reframing our commitment to diversity to appropriately prioritize equity in all of our goals. Our direction and goals were updated and the consensus was that "we have gotten back on track."

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A signal, according to IFTF, is a small or local innovation with the potential to scale in size, impact, and geographic distribution. While hard to focus on, signals allow us to shift our attention away from the mainstream and toward the margins of society to reveal emerging behaviors, technologies, ideas or attitudes at their inception. As science fiction author William Gibson explained, "The Future is already here, it's just not evenly distributed." Signals are a more systematic way to study and track the uneven distribution of indicators about the future.



Signal methodology and generation



Signals

The participants were able to identify some very important signals that, along with trends and discontinuities, improve our ability to anticipate the future. We determined that we exist within a broad health care ecosystem, which includes traditional providers of care as well as others who influence health and wellbeing, including business and government organizations that impact or provide housing, transportation, food, economic opportunity, education, and more.

Some of the signals we see in our health care ecosystem in 2019 include:

- Insurance companies as smart home builders
- Conference sessions for health professionals looking to change careers
- The growing presence of functional medicine clinics
- Non-pharma treatment and management of depression



Ideas

Combining signals and trends starts to tell a bigger story about the future. It is a lightweight tool that helps groups develop their ability to engage in combinatorial forecasting. A good combination should include disparate signals and non-obvious trends to break our familiar ideas about future possibilities.

Some of the ideas that the participants came up with included:

- Reimagined data capture
- Automatic dispatch of private or ride-share based ambulances
- Biometric devices
- Artificial Intelligence (AI) cardiac prevention
- Holistic health solution

Disruptive forces

Our facilitator, IFTF, defines external future forces as plausible, internally consistent, provocative forecasts of disruptions that will shape the next 10 years. Identifying and understanding these disruptive forces help to inform the shifts that must take place to be prepared for the future.



Algorithmic Health

- Bot therapy
- Predictive modeling
- Treatment matching
- Voice computing
- Digital assistants

While artificial intelligence and computer-based clinical changes are certain to be part of our future, these must be combined with the critical roles that human touch, compassion, and clinical judgment play in delivering patient-centered care. We must further consider the reach and accessibility of such changes in support of our commitment to ensure equity over equality.



Distributed Authority

- CRISPR (accessible gene modification)
- Consumerism

Rather than concentrated power, we envision a future where authority shifts from hospitals and health systems; device, pharmaceutical, or health care suppliers; and academic or government entities, to patients, buyers, and consumers.



Internet of Actions

- Better connection between humans and machines
- Human workers are algorithmically matched to a job or task
- Context based information
- Passive computing
- Automated coordination of resources

Significant concerns about privacy and security hinder our image of this future, but balanced with goals for quality of life and independence for people who are chronically ill, homebound or have limited abilities, this scenario offers transformative freedoms to many.



Community Health Ecosystem

- Recognizing that health is the essential ingredient for social and economic viability
- Improvement in the economic, social and environmental conditions for individuals and communities
- Addressing social determinants of health (poverty, sufficient healthy food, housing, transportation)

Truly reimagining health requires rethinking assumptions behind what a health care organization does, as well as how it customizes care, allocates resources and impacts the lives of its community members.

Jump the curve

The key to preparing for significant change is to take a systematic, proactive approach to building alignment and capacity for the future. Luminis Health will transform certain assumptions, norms and ways of doing things in order to address the threats facing our business and capitalize on the opportunities of the next decade. The two-curve futures tool helped participants delineate between visions of the future that can be realized through incremental changes and iterative improvement, and those visions and aspirations that require a thorough reexamination and creative re-imagination of the assumptions behind what our organization does - and the tools, resources, and processes we employ to execute on our work.

During the workshop, the participants worked to develop a transformative vision, one that would require us to focus on the 10-year horizon to bring it to fruition.



One theme that echoed during the Jump the Curve exercise was the desire that Luminis Health move from participating to leading in our community health "ecosystem." That we would help drive our consortium to focus on health outcomes and healthy living. We aspire to see Luminis Health leverage our partnerships to achieve enhanced health and create "total wellbeing." There was a notable consensus around a vision in which Luminis Health makes the transformative shift from providing health care to facilitating health.



Ways we are jumping the curve from today's way of doing things to Luminis Health's 2030 way of doing things

TODAY'S WAY	2030 WAY
Treatment of illness	Total well being
Health care system with a hospital, expensive care with systems defined methods	Seamless health ecosystem
Working within fee-for-service treadmill and a need to push volume	Facilitating community-based relationship-oriented medicine for the whole person
Health care as a service	Luminis Health as a quarterback for health and wellness, working with patients, families and physicians
Medical center	Healthy ecosystem
Health care services	Health outcomes
Delivery system	Health enhancement partner
Hospital focused (treatment and provider based)	Community consortium
Individual hospital	System of healthy living
Health care	Health

Strategies

Partnerships are a dominant strategy for Luminis Health to achieve its vision for 2030. In addition to existing relationships, Luminis Health should consider participation in novel partnerships with a wide range of community entities, including industry, government, state, transportation, faith-based, and housing organizations. One example of a desired outcome that could be realized through innovative partnerships would be the creation of a Luminis Health grocery store or food delivery service to address the challenge some within the community have of lacking access to healthy food.

As for internal preparedness, suggested strategies included a systematic and thoughtful redeployment of talent, a clinically integrated network, and a payment strategy model to pay for the future health strategies. Finally, it was recommended that any growth through innovation and teaching must support the vision articulated for 2030.

The following statements emerged from the Jump the Curve exercise:

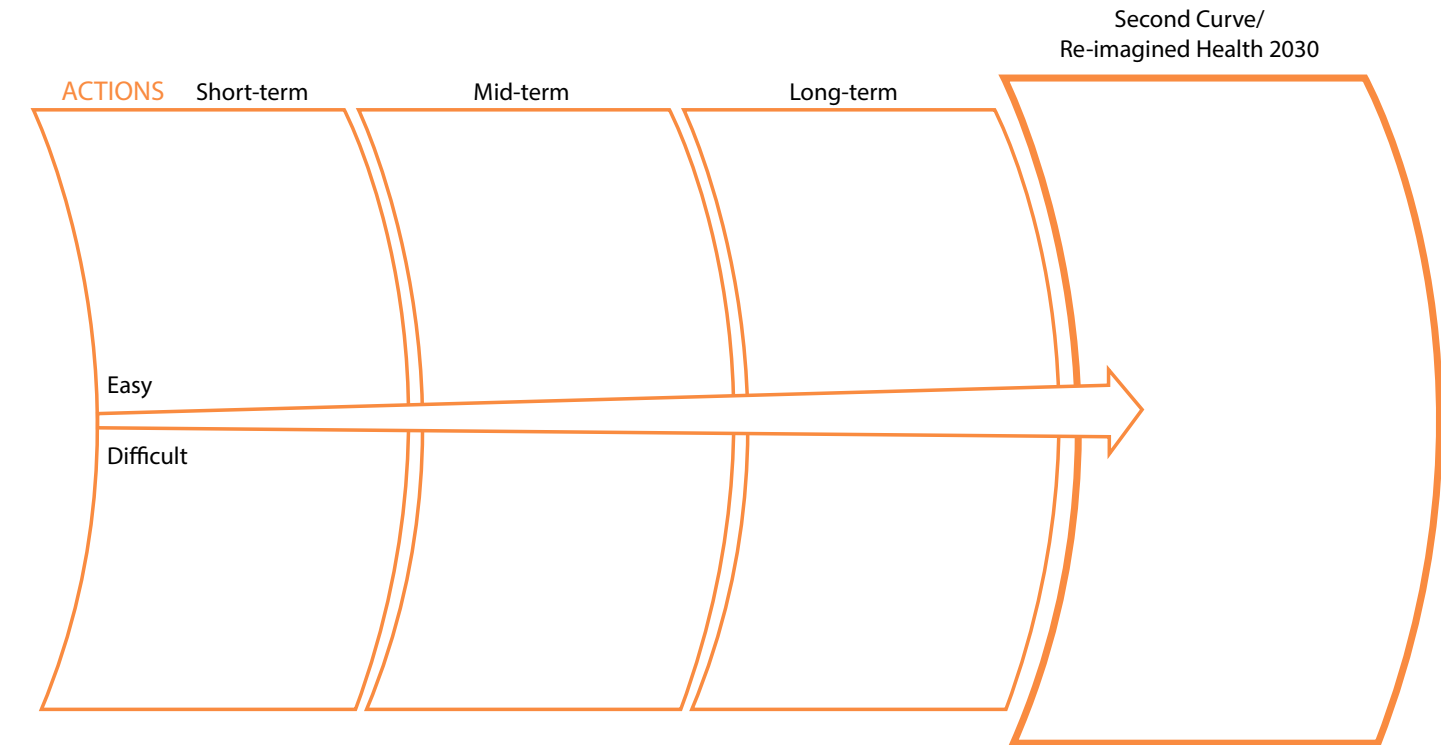
- Partner with industry and community organizations
- Retrain and redeploy talent
- Innovate to create partnerships, including outside our industry
- Help people obtain healthy food – Luminis Health grocery store
- Partner with government, state and industry
- Expand clinically integrated network
- Develop payment stream/model to pay for future health strategies
- Partner with transportation, faith based, housing, community organizations
- Grow a larger system through innovation and teaching
- Advocate for legislation to support public health

These strategy statements were the basis for the roadmaps, strategic imperatives, and key directional shifts.

Action roadmaps

Ten roadmaps were developed, built from Jump the Curve statements, shifting our focus from Vision 2020 to the goals of Vision 2030. Roadmaps include short, medium and long-term actions that would enable us to reach the future-state goals identified in Jump the Curve. The actual roadmaps and more than 60 meaningful comments and insights provided as feedback during the event are also provided in Appendix VII.

BUILD AN ACTION ROADMAP



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A woman with blonde hair in a ponytail, wearing a grey sweater and dark pants, is sitting in a meditative lotus position on a red yoga mat on a wooden dock. She is facing away from the camera, looking out over a calm lake. The sun is low on the horizon, creating a warm, golden glow and long shadows on the dock. In the background, there is a dense forest of evergreen trees and a power line tower. The overall atmosphere is peaceful and serene.

The strategic planning team synthesized the output from the retreat with the goal of distilling the information into meaningful elements to inform the 10-year strategy. We found three distinct imperatives that we believe Luminis Health must be prepared to face in order to achieve our Vision 2030.

Strategic imperatives

Shift Focus to the Health Ecosystem

There is strong consensus that, in the future, we will need to shift our focus away from delivering health care and toward supporting health and wellbeing for the communities we serve. Broadening our focus toward individual and community wellness requires an understanding of the entire ecosystem, including social determinants of health, finding the delicate balance between community health efforts and clinical expertise in fields such as joint replacements, emergency medicine, and women’s health.

Address Health through Social Determinants

Improving the underlying social and economic conditions for the people Luminis Health serves and our surrounding communities must be seen not only as a moral imperative, but as a strategic one for Luminis Health. This means our work must include ensuring our communities have nourishing food, safe and affordable housing, good jobs, economic wellbeing, reliable and affordable transportation options, and strong social ties. Luminis Health should also recognize that, over the decade, the social determinants and definitions of illnesses will continue to evolve. We should be prepared to address social ills such as equity, racism, poverty, and structural violence as health conditions, or, at minimum, contributors to poor health outcomes.

Adopt Technology Proactively

The pace of emerging technologies (AI, robotics, multimodal interfaces, etc.) will require that Luminis Health become proactive around technologies over the next decade. We must enhance our leadership’s understanding of the capabilities and benefits of the technologies, as well as sustain the workforce diversity that cultivates a culture that encourages innovation, experimentation with novel tools, methods, and approaches to care. Critically, this mindset around innovation has to include an embracing of failure as much as a celebration (adoption) of successes. Integrating foresight tools and practices systematically across Luminis Health will help our workforce keep pace with technological change. This could be as simple as implementing a “signals exchange” as part of routine meetings, or as involved as making innovation compulsory for teams.

Key directional shifts

Immediately following the Vision 2030 Retreat, Luminis Health leadership and our partners at IFTF reviewed the outcomes, signals, roadmaps, and feedback from the event to synthesize themes and understand our shared vision for the future. From these various outputs came five key directional shifts that were shared across groups.

It is our belief that we must address these key directional shifts over the next decade in order to achieve our vision for Luminis Health. Vision 2030 is centered on our shared understanding of the key directional shifts informing the future of health, health care and wellbeing by 2030.

 QUALITY	Advance excellence in high-quality care, equitably delivering what is important to our communities
 COMMUNITY	Optimize our role as a public health partner, engaging communities through innovation and collaboration to achieve health equity
 WORKFORCE	Create an environment of cultural appreciation and wellbeing to recruit and retain an inclusive, adaptable workforce with equitable opportunity
 GROWTH	Reimagine our role and expand our reach through innovation, technology, and diversification
 FINANCE	Strengthen our financial position through care redesign and portfolio mix to achieve high value

Strategic capital investment






Allocating resources over this planning horizon is a key component of execution. The long-range financial plan of Luminis Health reflects its priorities and commitments. Investments to impact health equity and reduce disparities by addressing social determinants of health, influencing the health ecosystem, and enabling emerging technologies demonstrate our alignment of resources to our Strategic Imperatives, allowing us to fulfill our mission and achieve our vision. Similarly, Luminis Health intends to drive strategic capital toward the endpoints we have identified with our Key Directional Shifts. While we retain our focus on these critical targets, we rely on the strategic planning and assessment processes to ensure our capital allocation is aligned with our long range Vision 2030 as well as our Annual Operating Plans and True North metrics.

Throughout Vision 2020, investments made in major capital projects totaled \$270M. As part of the Luminis Health integration, we committed to a minimum of \$138M in capital and operating investments on the DCMC Lanham campus and in Prince Georges County over 5 years. Strategic Capital and annual operating budgets will continue to be developed to reflect current conditions and priorities as well as our ongoing need to invest in our people, our most valuable asset. We must grow our workforce, help build the skills of our staff and leadership team in a manner that reflects new skills and competencies required for the next decade.

Bold goals

One of the challenges of futures thinking and the development of long-range strategy is the natural tendency of leaders to think in incremental change. Cognitive traps of availability bias, familiarity bias, and confirmation bias prevent people from thinking aspirationally. Luminis Health utilized a strategy of setting bold goals to inspire ourselves to be courageous in order to achieve meaningful change by 2030.

Through the strategic framework of Quality, Community, Workforce, Growth and Finance, Luminis Health will become a national model for diversity, equity, anti-racism, inclusion and justice by implementing the recommendations and achieving the goals set forth by the Health Equity and Anti-Racism Task (HEART) Force. In addition, we have outlined the following Bold Goals for Vision 2030.

 QUALITY	Eliminate maternal and infant mortality
 COMMUNITY	Eliminate suicides and opioid overdoses
 WORKFORCE	Become the #1 employer of choice in the region where 100% of team members find joy at work.
 GROWTH	Grow and diversify total operating revenue to reach \$5B
 FINANCE	Become Maryland's top ranked system for value, affordability and total cost of care

Communication and positioning

Vision 2030 is charged with all the possibility that a new decade brings to a forward-thinking, progressive organization. To capitalize on the momentum and energy that went into developing this plan, it is vitally important to effectively communicate Vision 2030 – to all stakeholders.

Communicating and positioning the 10-year plan for Luminis Health is critical if it is to be effective in execution. This foundational step will be undertaken with both internal audiences – creating energy, enthusiasm and buy-in – as well as with the community partners and consumers who will be needed to extend our reach.

Working toward and achieving the previously noted bold goals will set Luminis Health apart. This thought leadership is a significant opportunity for Luminis Health in itself and one that must be optimized. Shining a light on the goals, the milestones to reach them, the collaborations that drive progress, and the outcomes for real people will not only effectively establish Luminis Health regionally, but create additional opportunities for us to continue investing back in our mission.

To do this work, four key communication strategies will be employed:

- **Urgency** – The future is now, and urgency in communication creates buy-in for change
- **Consistency** – Vision 2030 is a long-term strategy; communications should reinforce, repeat, follow up and remind audiences about how we are executing against our goals
- **Celebration** – As Luminis Health transforms care delivery and executes on these key directional shifts, we will celebrate along the way to drive engagement
- **Clarity** – To be effective and achieve our goals, we must be clear about what we expect people to go and do; these details will cascade throughout Luminis Health

Updates

This 10-year plan will be updated periodically. Over the next ten-year period, in three-year increments, a shared vision, stakeholder input and definitive execution plans will be reaffirmed. The environment in which a health ecosystem exists is often characterized as VUCA: volatile, uncertain, complex and ambiguous. At Luminis Health we approach these differently.



These conditions dictate regular adjustments to long and intermediate term planning. An example of how this ten-year plan will be updated is shown.

Update Year
FY 2024

Planning Horizon
FY 2025, 2026, 2027

Update Year
FY 2027

Planning Horizon
FY 2028, 2029, 2030

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APPENDIX I

Vision 2020 achievements

As we enter the next decade, we reflect back on the many accomplishments we achieved under Vision 2020, Living Healthier Together. Below is a quick snapshot of some of our key growth metrics, demonstrating how Luminis Health grew under Vision 2020. Some of the data is shown as FY20 Projected, which includes annualized volumes from before COVID forced a reduction in services to help control the Pandemic and preserve personal protective equipment.

AAMC/AAHS volumes are shown for the entire time span of Vision 2020 and DCMC, which became part of Luminis Health in FY20, is provided for FY20, only, representing the time the organization was part of Vision 2020. In addition, we reflect on some of the key accomplishments from AAHS for each fiscal year under Vision 2020.

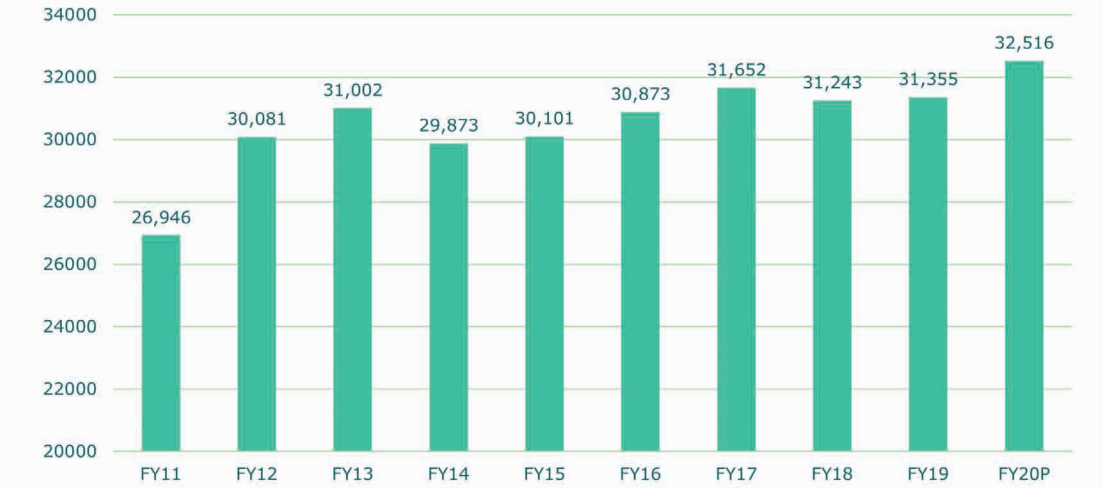


Quality clinical care

Admissions and Observations

21%
increase in admissions

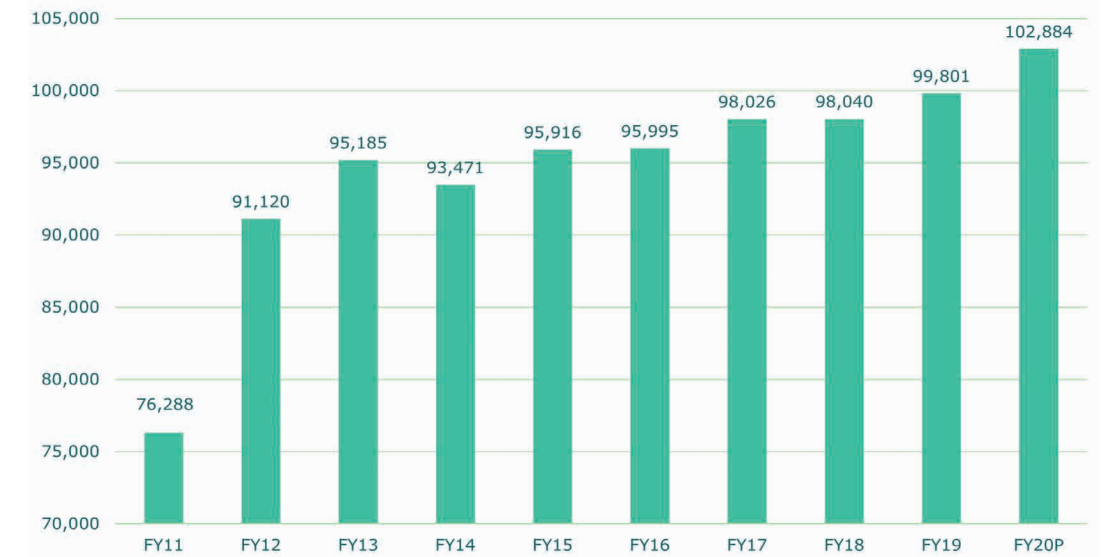
DCMC adds more than 18,000 Admissions and Observations beginning in FY20



Emergency Room Visits

35%
increase in ER visits

DCMC adds more than 58,000 Emergency Room visits beginning in FY20



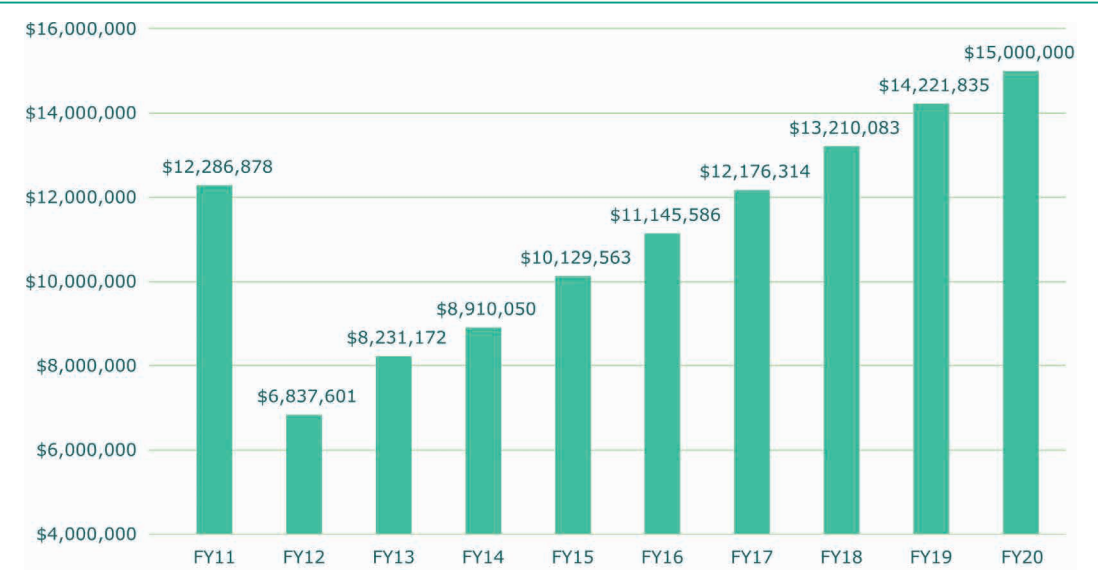
Focused on community

Annual Foundation Dollars Raised

22%

increase in dollars raised

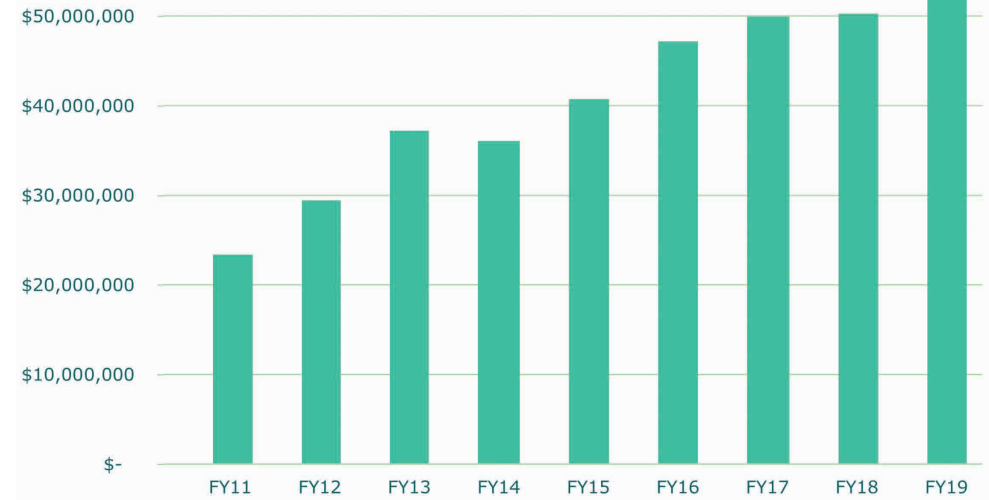
DCMC adds more than \$1 million in Annual Foundation dollars raised beginning in FY20. FY11 includes multi-year campaign.



Community Benefit

128%

increase in community benefit



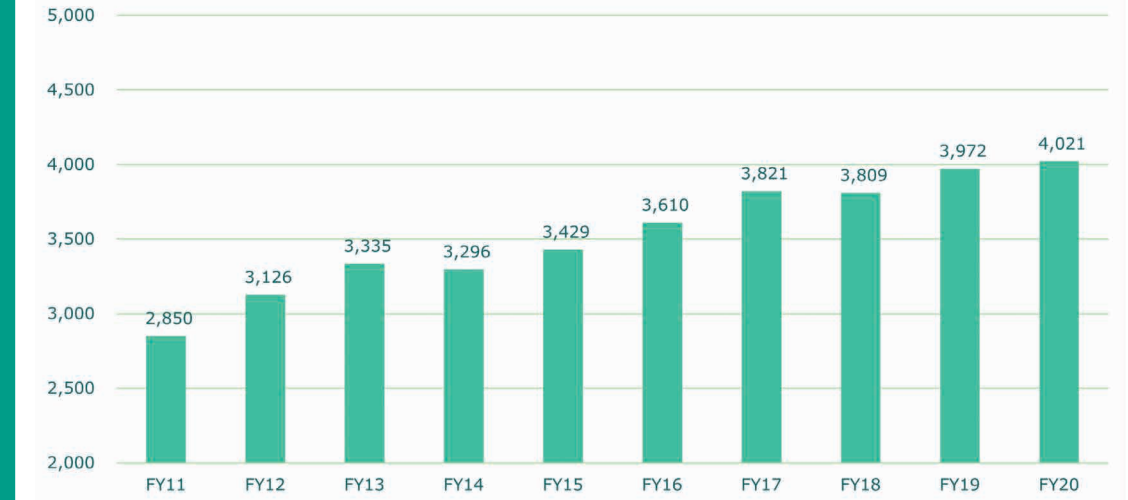
Engaged workforce

System Full Time Employees

41%

increase in employees

DCMC adds more than 1,400 system FTEs beginning in FY20.



Medical Staff (physicians only)

11%

increase in medical staff

DCMC includes more than 500 additional Medical Staff beginning in FY20.

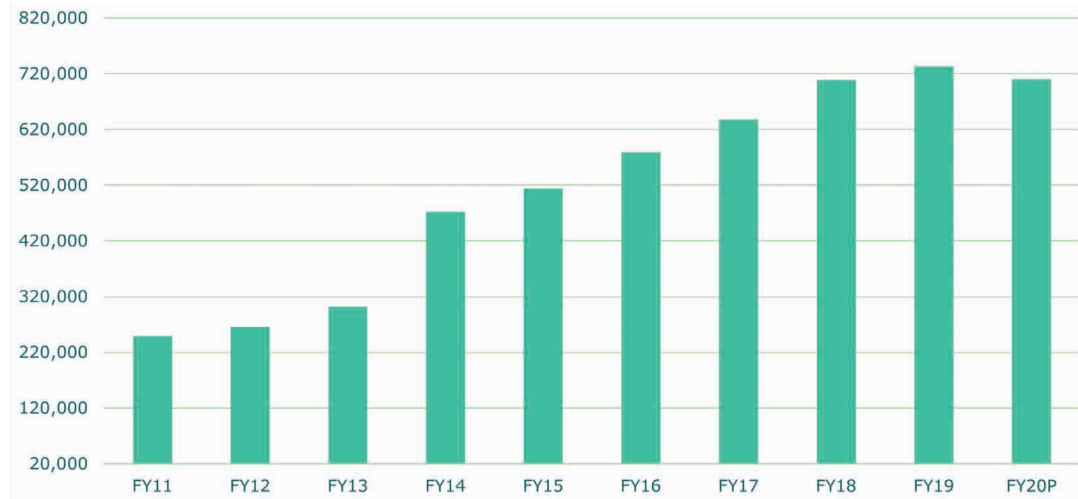


Growing access to care

Ambulatory Practice Visits

185%
increase in visits

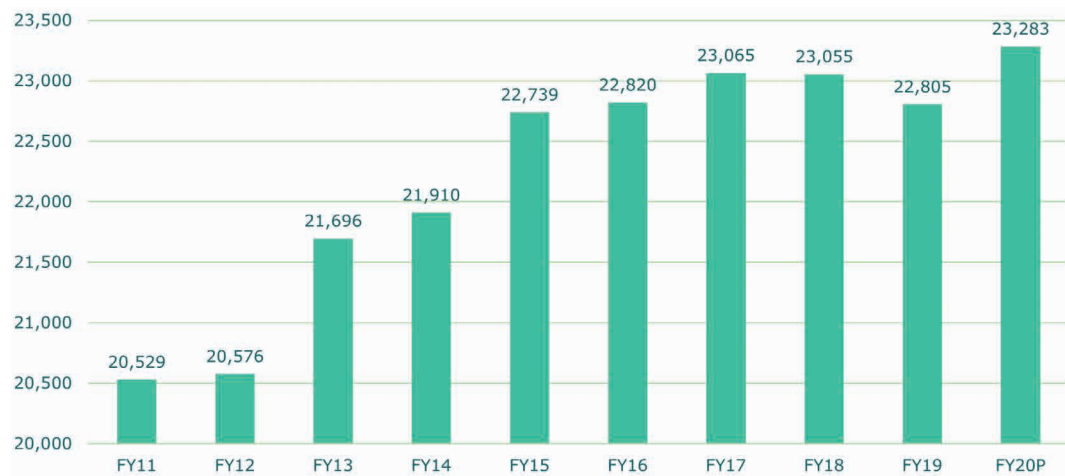
DCMC adds more than 18,000 visits beginning in FY20. Visits includes telehealth.



Surgical Cases

13%
increase in cases

DCMC adds more than 9,000 Surgical Cases beginning in FY20

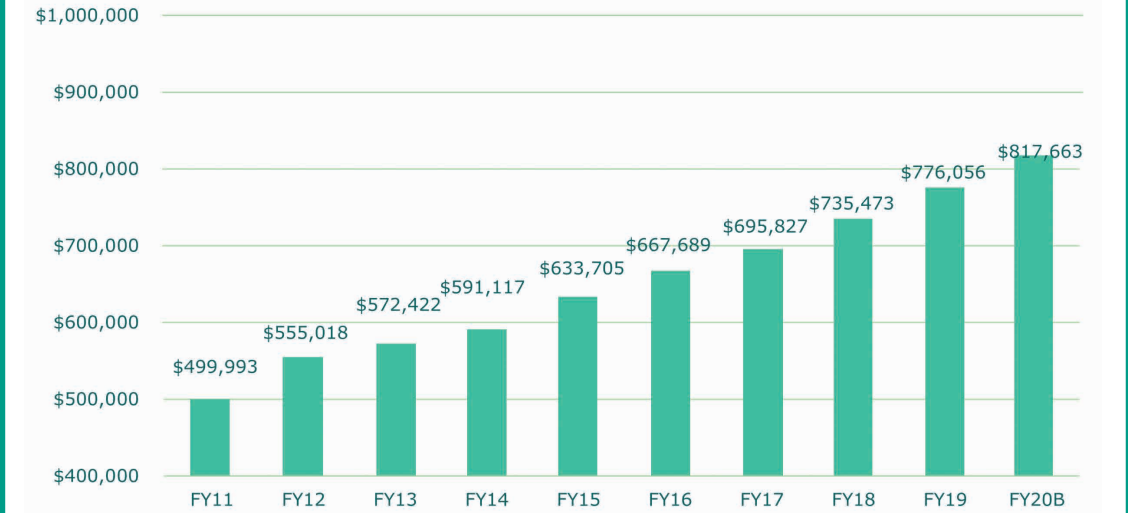


Financial strength

Operating Revenue

64%
increase in revenue

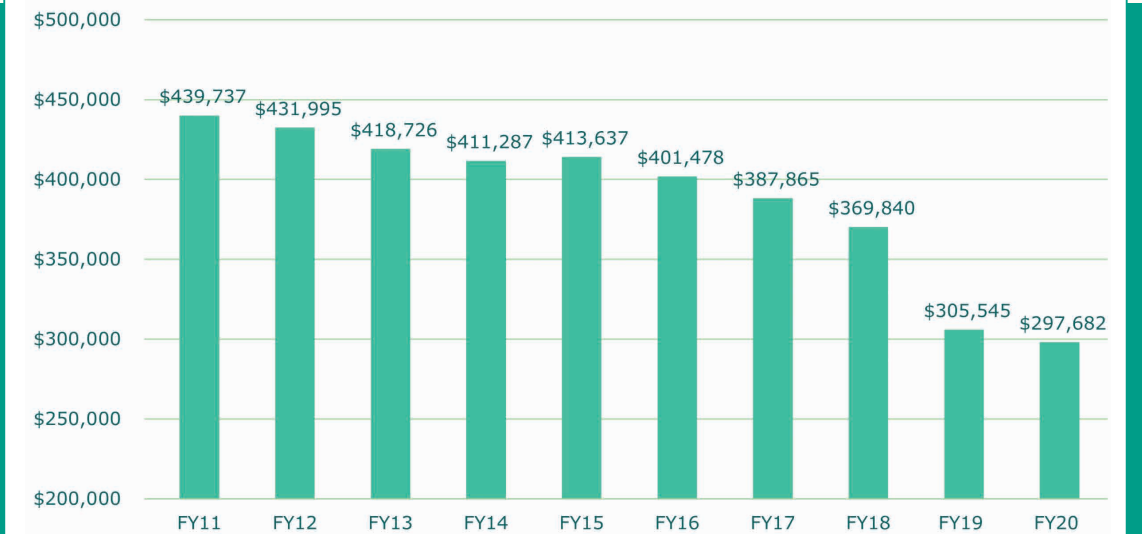
DCMC adds more than \$260M in total operating revenue beginning in FY20



System Debt

32%
reduction in debt

DCMC adds more than \$122k Total System Debt beginning in FY20



Fiscal year 2011-2015 achievements

FY11

- Implemented Pain Management and Palliative Care Program
- Construction was completed on the South Tower expansion and Garage A. This included 50 new beds, new pediatric Emergency Department, Emergency Department expansion, and 8 new operating rooms with associated preoperative and recovery space. (336 licensed beds) Achieved Leadership in Energy and Environmental Design certification for the South Tower.
- Opened Community Health Center on Forest Drive in Annapolis
- Developed a Physician-Hospitalization Organization (PHO)
- Rolled out Epic ambulatory and MyChart
- Implemented workforce diversity initiative. Committee completed a project charter, identified goals, selected the Future Work Institute as a corporate partner and conducted an executive and leadership council education session.
- Opened dedicated Heart and Vascular Unit
- Ranked in the top 5 hospitals in Maryland for growth

FY12

- Launched Better Together Congestive Heart Failure (CHF) Collaborative, reduced 305 readmissions of CHF patients and gained statewide recognition.
- Initiated Bedside shift report on all units
- Initiated Higher Quality, Lower Costs projects and culture. Conducted the first two value stream analyses, 17 workflow organization (6S) events, and Lean Methodology realizing \$1.6M in savings
- Established True North Metrics
- Attained Meaningful Use Stage 1
- Recognized as a Leapfrog Top Hospital
- Implemented Energize employee health and wellness programs.
- Joined Chesapeake Regional Information System for our Patients (CRISP), the statewide health information exchange
- Recruited Chair of Surgery, Perioperative Medical Director and minimally invasive Gastrointestinal surgeons
- Formed the Medical Staff Quality Review Committee to create an integrated approach to peer review and more effectively ties into the health system's quality program
- Developed transformational leadership and change management competencies

FY13

- Established the Center for Health care Improvement (CHI)
- Recognized with the Delmarva Quality Awards for CORE Measures
- Instituted OR calm and OR Time Out
- Recognized as a Leapfrog Top Hospital
- Designated a Medicare Shared Savings Program (MSSP) Accountable Care Organization (ACO)
- Initiated Leadership Exploration and Development (LEAD) Academy, subsequently named for AAMC Trustee and Board Chair, George Moran
- Opened the Hackerman-Patz hospitality House
- Opened James and Sylvia Earl Simulation to Advance Innovation and Learning Center
- Opened Acute Care for Elders (ACE) Unit
- Opened Odenton Medical Office Building
- Reduced total cost per equivalent inpatient admission by 4% demonstrating a remarkable ability to 'bend the cost curve'. The cost reductions were driven by our coordinated Higher Quality, Lower Cost initiative that began in February 2012.

FY14

- Opened the Morris Blum Community clinic through a \$800,000 Health Enterprise Zone Grant
- Recruited New Chief Strategy Officer and Chief Human Resources Officer
- Received 2014 Delmarva Foundation Excellence Award for Quality Improvement (2nd year in a row)
- Received Optum Platinum Award for Substance Abuse Care
- Name 3rd busiest hospital in Maryland
- Negotiated first Global Budget Reimbursement model
- Saved \$2.6M in Operating Margin impact and another \$2.7M cost avoidance through Higher Quality, Lower Cost Performance Improvement initiatives.
- Awarded \$500k in Bond Bill funds for new Cardiac Catheterization Lab
- AAMC hosts first class of Summer Research Internship Program
- Opened Pasadena Medical Pavilion

FY15

- Awarded Magnet designation
- Selected and funded as one of five Ebola assessment hospitals in Maryland for FY16
- Implemented Wellbeing: The Five Essential Elements.
- Created Team, Change, Business leadership framework
- AAMC became a Kaiser Permanente premier core hospital
- Ranked 2nd in the state for Patient Satisfaction
- Established Diabetes Program and recruited medical director
- Achieved Meaningful Use Stage 2
- Achieved blood independence
- Partnership with the Conversation Project to talk with patients about end-of-life resources

Fiscal year 2016-2020 achievements

FY16

- Achieved surgical residency American College of Graduate Medical Education approval
- Established the National Surgical Quality Improvement Program
- Awarded the first Organizational Patient Safety Certification in Maryland
- Awarded Stroke Gold Plus Achievement from the American Hospital Association
- Awarded \$2M in state funding for the Bay Area Transformation Partnership
- Launched Health Equity Task Force
- Established the Auxiliary Scholarship for entry-level employees
- Recruited Chief Nursing Officer and Chief Operating Officer
- Became Tobacco Free Employer
- All Anne Arundel Medical Group primary care practices were awarded National Committee for Quality Assurance's Patient Centered Medical Home recognition

FY17

- Introduced I.C.A.R.E Service Excellence Framework
- Awarded Quality Oncology Practice Initiative
- Launched the 1st annual Quality improvement showcase with more the 65 submissions
- Launched Preferred Provider Program to reduce total cost of care working closely with Skilled Nursing Facilities
- Created the role of General Council and Chief Legal Officer
- Administered the first Workforce Diversity Assessment, Unconscious Bias Training, and adopted the Rooney Rule
- Established Weapons Free Policy
- Awarded Certificate of Need for Cardiac Surgery
- Implemented People Soft
- Invested in JHM Medicare Advantage Health Plan

FY18

- Implemented RL6 and increased reported events by 30%
- AAMC was recognized as a finalist for the American Hospital Association's "Quest for Quality" award
- Partnered with the John A. Hartford Foundation to become an Age-Friendly Health System
- Awarded American Hospital Associated NOVA Award for innovation
- First hospital in the nation to sponsor "Coming to the Table"
- Recruited clinical chairs for Women's & Children's and Department of Medicine
- Launched Conexus Laboratories
- Initiated telehealth visits in 6 service areas
- Recognized as a Leapfrog Top Hospital
- Signed first value based agreement with Collaborative Care Network
- Negotiated Global Budget Revenue modification providing an additional \$14M in revenue

FY19

- Reduced Opioid Prescribing by 67%
- Achieved a 5-Star designation from Centers for Medicare & Medicaid Services
- Honored as the 2019 Carolyn Boone Lewis Equity of Care winner by the American Hospital Association
- Added Martin Luther King Jr Day as a Holiday
- Received accreditation Obstetrics/ Gynecology residency
- Acquired Doctors Community Hospital
- AAMC secured definitive approval on the cardiac surgery certificate of need
- Identified as the most efficient hospital in the state (combined ranking of hospital's performance in cost, quality, total cost of care growth)
- Recognized as a Leapfrog Top Hospital
- Upgraded by Fitch to "A" and affirmed by Standard & Poor's and Moody's
- Recruited Chair of Oncology

FY20

- Initiated Obstetric Certificate of Need at Doctors Community Medical Center (DCMC)
- Raised the minimum to \$15 across Luminis Health
- Awarded magnet re-designation at AAMC
- Recognized as a Leapfrog Top Hospital
- Awarded American College of Graduate Medical Education for residency program in Internal Medicine at AAMC
- Opened McNew Medical Center in partnership with Sheppard Pratt
- DCMC and Children's National Health System launched pediatric emergency care 7 days a week
- Initiated Epic and PeopleSoft at DCMC
- Named Chief Executive Officer of Luminis Health, and Presidents of AAMC, DCMC, and Luminis Health Clinical Enterprise (LHCE)
- Responded to the COVID pandemic by providing more than 24,000 residents with supplies and education, testing 2,000 community members for free, and raising \$1M for COVID Relief

APPENDIX II

Stakeholder input

	DATE	STAKEHOLDERS	OUTPUT	
2018	October 8	Retreat Pre-Session	Consumerism	
2019	January 14	Retreat Pre-Session	Caregiving	
	April 4-5	Vision 2030 Retreat	10-year plan	
	June 13	AAHS Board of Trustees	Review of retreat output	
	June 26	AAMC Executive Council	Review of retreat output	
	August 22	DCMC Executive Leadership Team	Input into Vision 2030	
	September 19	DCMC Executive Leadership Team	Input into Vision 2030	
	September 23	AAMC Foundation Board of Directors	Input into Vision 2030	
	October 7	AAMC Physician Ops	Input into Vision 2030	
	October 10-11	Luminis Health Exec. Leadership Retreat	Input into Vision 2030	
	October 14	Luminis Health Strategic Planning Committee	Input into Vision 2030	
	November 12	DCMC Medical Exec. Committee	Input into Vision 2030	
	December 16	DCMC Medical Exec. Committee	Input into Vision 2030	
	2020	March 26	Luminis Health Strategic Planning Committee	Presented and discussed
		June 11	Luminis Health Strategic Planning Committee	Draft Vision 2030
September 10		Vision 2030 Revisit Task Force	Recommendation to revisit Vision 2030	
September 24		Luminis Health Strategic Planning Committee	Updated Draft Vision 2030	
December 10		Luminis Health Strategic Planning Committee	Recommendation to approve Vision 2030	
December 11		Luminis Health Board of Trustees	Recommend approval of Vision 2030	

APPENDIX III

Mission, vision, values

The alignment of the previous mission, vision, and values from both AAHS and DCHS is clear, when viewed side by side, below.



The Mission, Vision, and Values of Luminis Health includes many of the elements of our prior entities' frameworks.



Background and bibliography

Consumerism in Health Care

The road to Vision 2030 began with a kick off session on October 8, 2018. Dr. Barbara Kahn, Professor of Marketing of the Wharton School of Business and author of the book [The Shopping Revolution: How Successful Retailers Win Customers in an Era of Endless Disruption](#), presented to members of the board of trustees, executive leadership, physician leaders and emerging administration leadership on the important trend in health care of consumerism.

Participants engaged in an exercise to apply the lessons of the retail industry, consumerism and disruption to the health care industry. See on next page.

Caregiving in 2030

A second pre-session was held on January 14, 2019 facilitated by the Institute for the Future. Rachel Maguire led a discussion on caregiving in 2030. She shared three scenarios for the next decade to address the aging population and need for caregivers.

- **Neighbors Care** explores a world where policy makers, the financial industry, and social innovators have acted to develop new markets and models of caregiving, a generation in which childlessness is normal is redefining what “family” caregiving means.
- **Angels in the Floorboards** examines the role of technology in supporting caregivers and why caregivers, care recipients, policy makers, and technologists need to work together.
- **The CARER Act** looks at the implications of integrating informal caregiving with the formal health care system

Suggested Reading and Advance Materials

Resources:

- [Anne Arundel County Community Health Needs Assessment](#)

Articles:

- [High-performance medicine: the convergence of human and artificial intelligence](#), Eric Topol, M.D.
- [The Three breakthroughs that have finally unleashed AI on the World](#), Kevin Kelly
- [Practice: Get there early](#) Bob Johansen

Books:

- [Prescription for the Future - the Twelve Transformational Practices of Highly Effective Medical Organizations](#), Ezekiel J. Emanuel, M.D.
- [Farsighted: How we Make the decisions that Matter the Most](#), Steven Johnson
- [Automating Inequality - How High-Tech Tools Profile, Police and Punish the Poor](#), Virginia Eubanks

Videos:

[Overview of the Institute for the Future](#)
[How Childhood Trauma Affects Health Across a Lifetime](#), Dr. Nadine Burke

Other Relevant Articles:

- [The Delicate Balance of Making an Ecosystem Strategy Work](#), HBR 11/19/19, Michael G. Jacobides - <https://hbr.org/2019/11/the-delicate-balance-of-making-an-ecosystem-strategy-work>
- [When Talking About Social Determinants, Precision Matters](#), Health Affairs, 10/29/19, Katie Green, Megan Zook, <https://www.healthaffairs.org/doi/10.1377/hblog20191025.776011/full/>
- [Grandmas’s Little Helper – An Aging World Needs More Resourceful Robots](#), The Economist, 2/16/19, <https://www.economist.com/international/2019/02/16/an-ageing-world-needs-more-resourceful-robots>

What can health care learn from the shopping revolution?

Strategic planning committee Vision 2030 kick-off pre-session with Dr. Barbara Kahn

BRAND	EXPERIENCE
AAMC, high quality/low cost, regional leaders (community)	Telemedicine (on demand), real time scheduling, home monitoring, exceptional customer service, personalized, alt therapies
Need to continue to build brand to avoid total commoditization, best outcomes +/- communicated	Concierge for all, cost transparency, web/social media, appts. ease, convenience, family experience too, care beyond the walls, access, sharing info 24/7/365
Brand=local community investment opportunity, works with community, leverage patient advisory groups, product benefits, community or conglomerate	Opportunity, standardize care, lower variability (know what to expect), MyChart Bedside, 3rd party apps
Trust, performance transparency, utilization of all touchpoints, online reputation management	Optimization, concierge, integration of services, relationships
AAMC, high quality – trust, alternative services, outcomes	Care, navigators, multi-spec, patient movement, PT center
Quality, safety or Px	Exceptional customer experience, telehealth, navigation, open access/sched., IN/Ont building (by age co-hort), design care around specialty populations, co-ord of care
	Compassion, personal, knowledge of the patient, AI, what matters
Preventive care – education, “Patient” first, caring for the caregiver	Redefine “waiting” room, define expectation of patient, collecting as much info ahead as possible (provided by the patient), improving scheduling, who does follow-up? patient satisfaction
Trust	Reviews, trust
Driven by success, in #1 & #2, reputation management	Family/Patient – staff instructions, timeliness/convenience, quality of care

COST	FRICITIONLESS PLAN
Optimize low cost centers Insurance Co., direct to consumer care, narrow network insurance product	EPIC, data utilization: Insurance, CRISP, patient encounters (EPIC) Increased locations - convenience
Lower waste (regulatory) in clinic and administration, preventive care, medical education reform, health res. reform	Appts. at patient convenience, billing transparency, home care, eliminate pharmacy M.M., DME
Leaders here (provide our own insurance product) – not low price – low price does not =low cost, loyalty program – eliminate co-pays, “Amazon prime care”	i.e. scheduling appointments – waiting in offices, make care accessible – Telemedicine, delivering tech to those that need it most, open notes, opportunity to collect data, patient education tools, ecosystem, recognize disparities for equitable access
Alternative cost structure	Access, iPhone experience – voice appointments, video experience, using “Siri” to manage appointments (enhance technology – automatic patient data to doctor), virtual medicine, AI
Transparency, online optimization – FTE reduc/expertise, re-envisioned clinical space, subscription – co-pay, concierge/navigator	Access/people/services/tele/online, self, centralized data – expensive people
Drugs, efficient ops	Only what’s necessary in hospital EMR (universal), use big data to continue to improve patient experience
Price transparency, expectations are crazy low	See a doc within 24 hours
Low prices, control costs with efficiency, transparency???	Technology – use to collect info before face to face
GBR, outpatient costs/ambulatory eliminate waste transparency	Access, home health, technology supported, mobile platform
	Technology (MyChart/MyAAMC), + Caregiver-Pt. relationship (balance), access, simplicity

APPENDIX V

Retreat participants and stakeholder input

Cathy Adelman
 Tim Adelman
 Laeeq Ahmad, MD
 Hitesh Amin, MD
 George Anderson, MD
 George Askew
 Brian Baker, MD
 Camille Bash
 Tori Bayless
 John Belcher
 Ann Brundige
 Tim Burke, MD
 Christine Cattaneo, MD
 Stephen Cattaneo, MD
 Jim Chambers
 Patricia Christensen
 Mary Clance, MD
 Stephen Clarke
 Jerry Collier
 Cathy Copertino
 Kevin Crowley
 Vincent DeCicco, MD
 Karen Drenkard
 Scott Eden, MD
 Jessica Farrar
 Loren Farquhar
 Carlesa Finney
 Lauren Fitzpatrick, MD
 David Florin

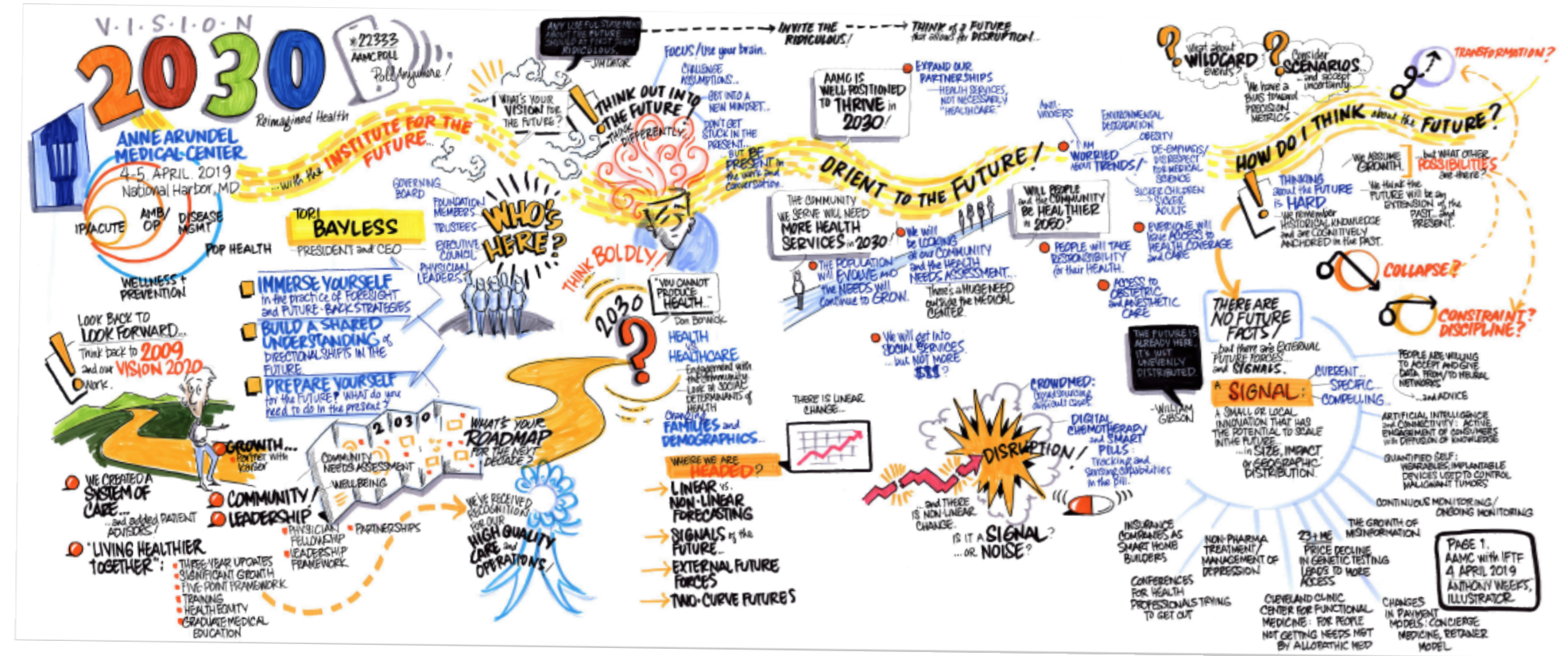
Lori Franks, MD
 Alex Gandsas, MD
 Jeff Gelfand, MD
 Paul Grenaldo
 Athena Groves
 Fred Guckes, MD
 Richard Ham
 Regina Hampton, MD
 Rob Hanley, MD
 Joyce Hanscome
 Jennifer Harrington
 Kim Harris
 Marianthi Hatzigeorgiou
 Raymond Hoffman, MD
 Niels Holch
 Pat Holle
 Kay Hoskey, MD
 Alan Hyatt
 Barbara Jacobs
 Joshua Jacobs
 Gary Jobson
 Monica Jones, MD
 Maulik Joshi
 Scott Katzen, MD
 Paul King, MD
 John Klune, MD
 Shirley Knelly
 Rene LaVigne
 David Lehr

Eileen MacDonald, MD
 Sunil Madan, MD
 Martin Makary, MD
 Pat Markel
 William Maxted, MD
 David McDermott, MD
 Andrew McGlone, MD
 Julie McGovern
 Barry Meisenberg, MD
 David Mooradian, MD
 Joe Morris, MD
 Nargiz Mугanlinskaya, MD
 Misti Mukherjee
 Kathryn O'Connell, MD
 Peter Odenwald
 Barbara Onumah, MD
 Adrian Park, MD
 Kanak Patel, MD
 Chad Patton, MD
 Sherry Perkins
 Ted Pincus
 David Press, MD
 Bob Reilly
 Mike Remoll, MD
 Jim Rice, MD
 Deneen Richmond
 Adam Riker, MD
 Suzie Rindfleisch, MD
 Sandy Robbins, MD

Heidi Rothenhaus
 Randolph Rowel
 Leisa Russell
 George Samaras, MD
 Mark Sanchez, MD
 Mitchell Schwartz, MD
 Jerome Segal, MD
 Earl Shellner
 Devinder Singh, MD
 Patricia Smith
 Garth Smith, MD
 Benjamin Stallings, MD
 Tamiko Stanley
 Lorraine Tafra, MD
 David Todd, MD
 Ted Torano, MD
 Janifer Tropez-Martin, MD
 Briana Walton, MD
 Michael Webb, MD
 Robyn Webb-Williams
 Paula Widerlite
 Alicia Wilson
 Angela Wilson
 Jan Wood
 Nikki Yeager
 Cathy Yurkon
 Sohail Zaidi, MD
 Bryan Zielinski

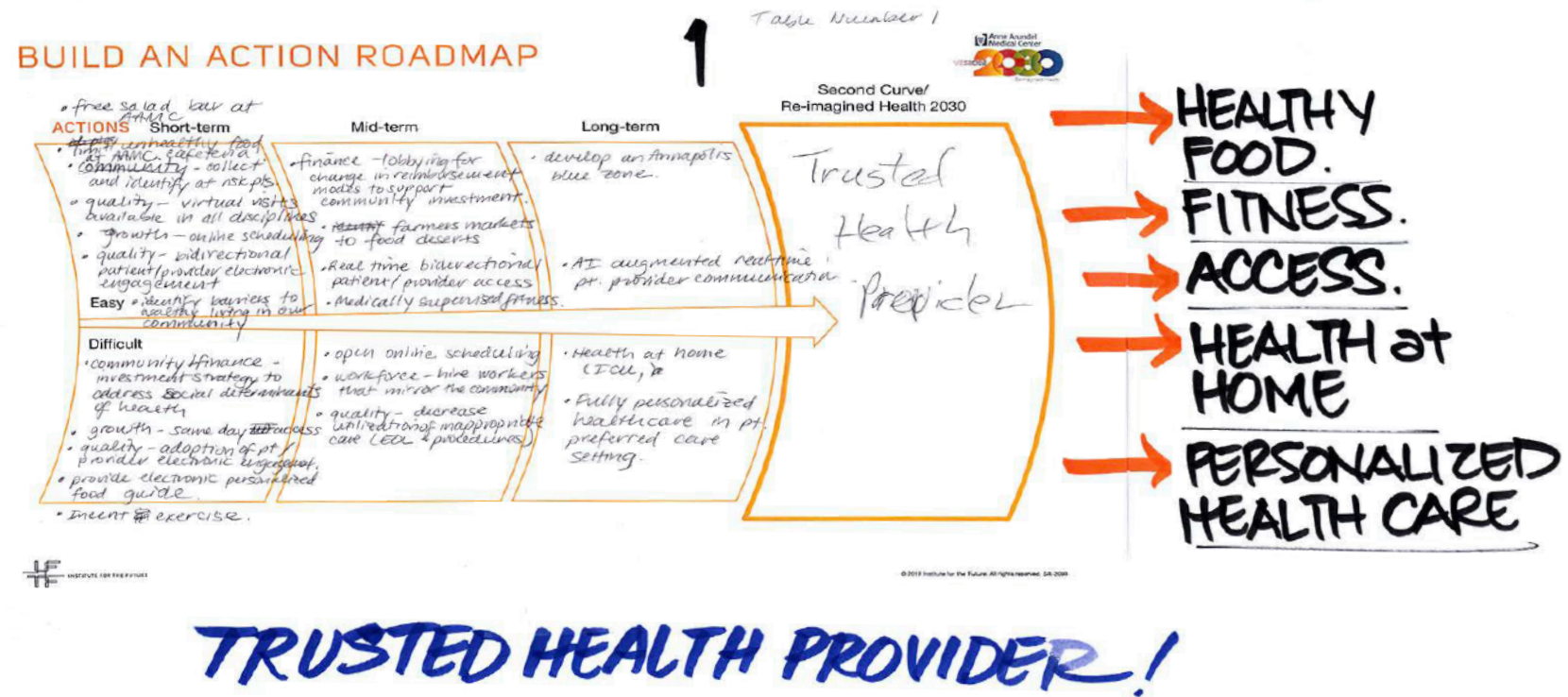
APPENDIX VI

Graphic recording

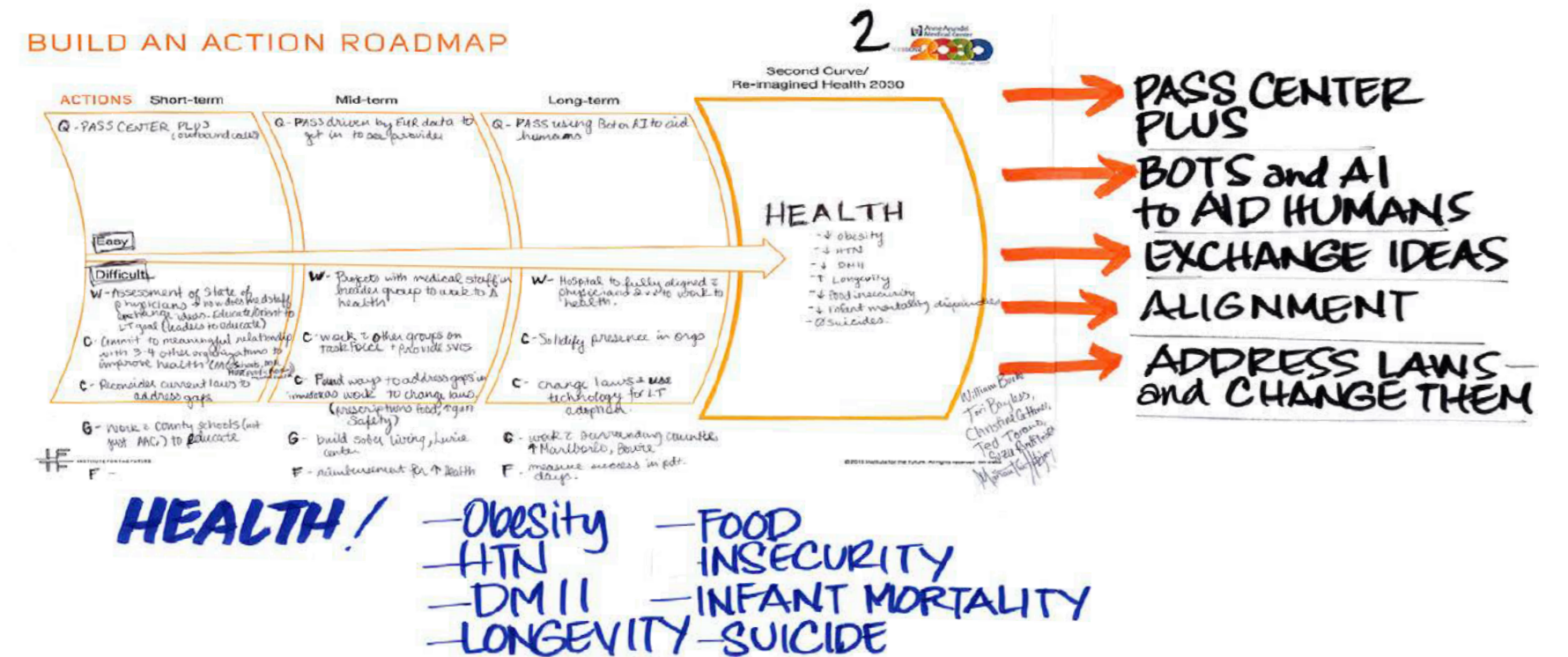


APPENDIX VII Roadmaps and feedback

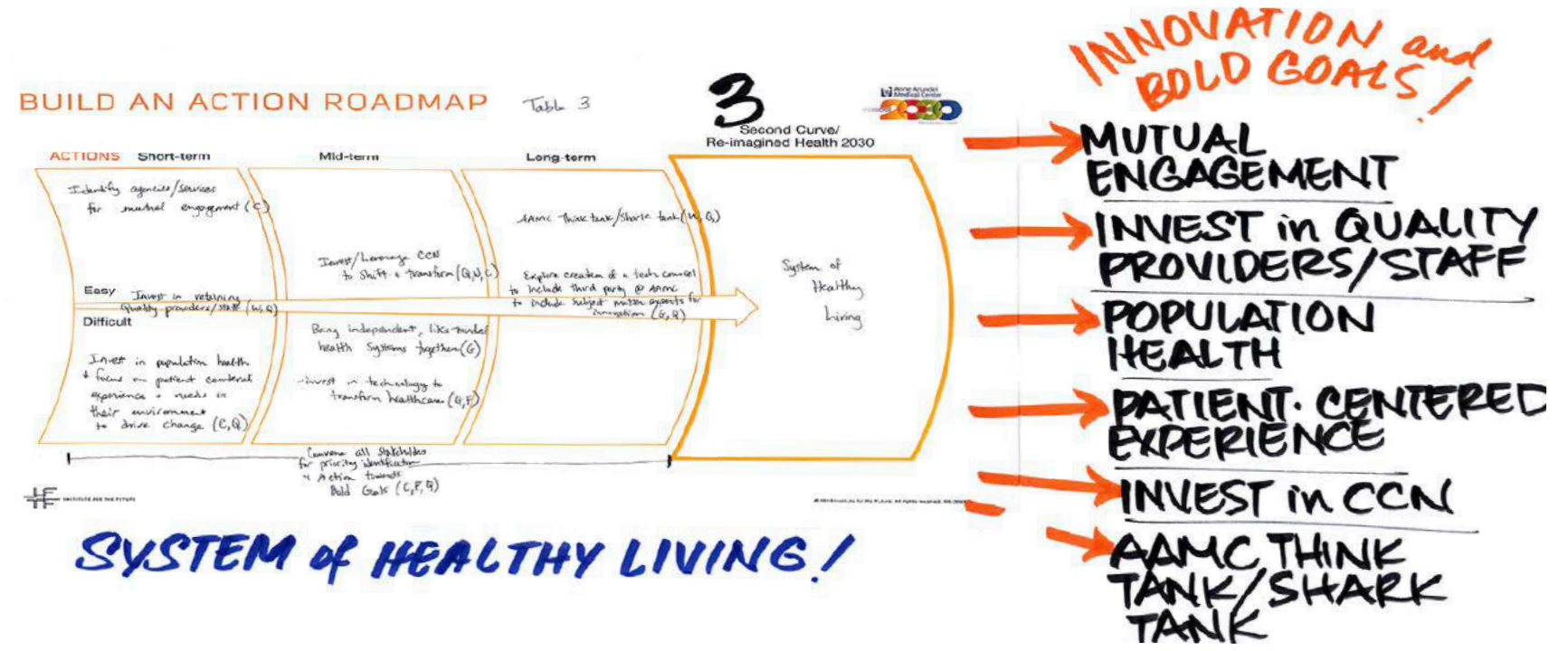
Roadmap 1 toward serving as a trusted health provider



Roadmap 2 toward delivering health



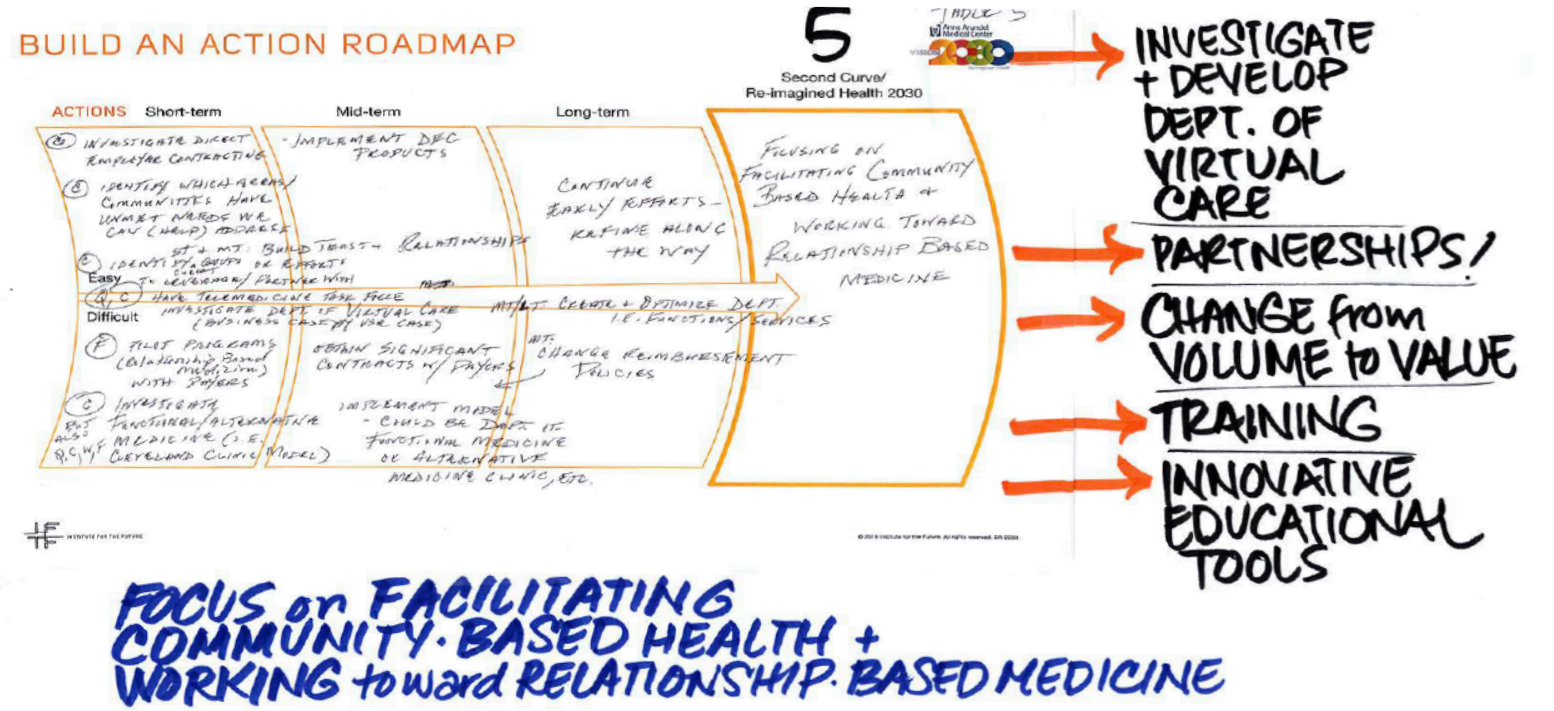
Roadmap 3 toward becoming a system of healthy living



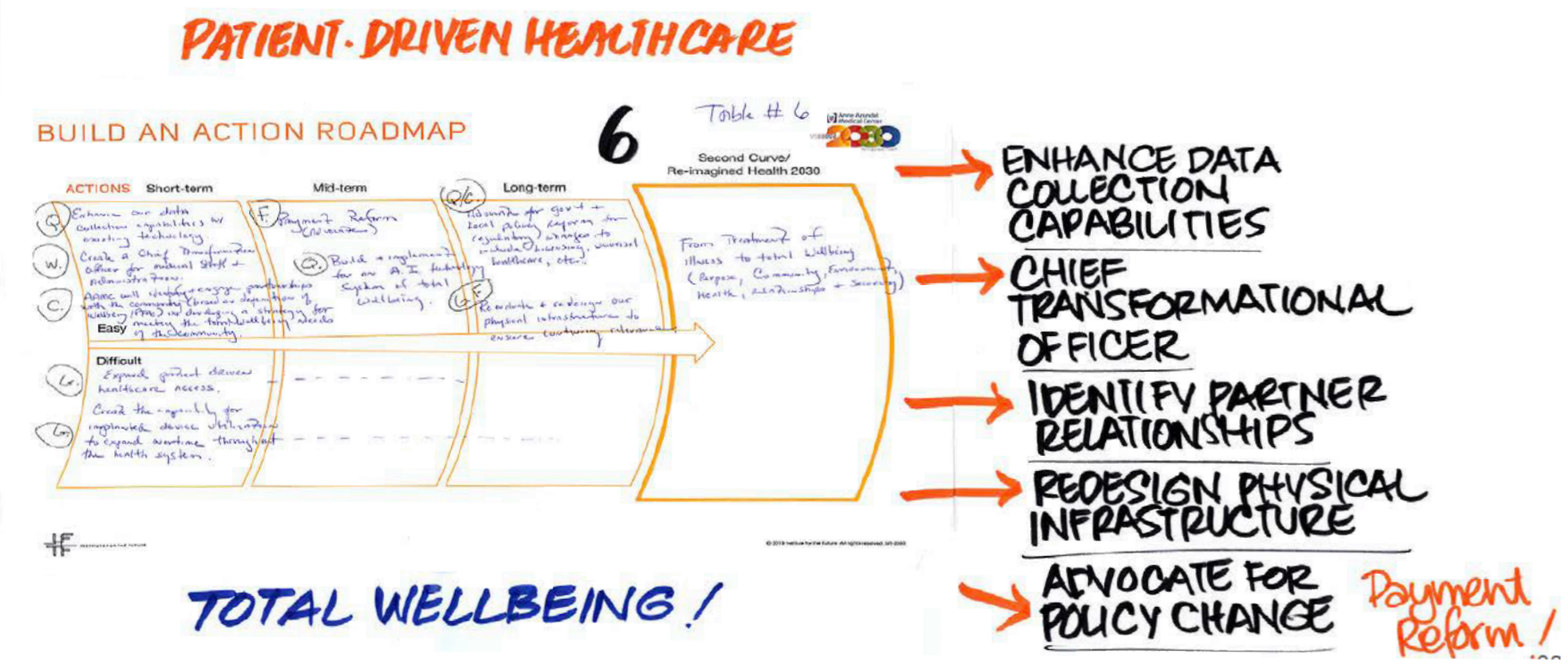
Roadmap 4 toward leading the healthy ecosystem



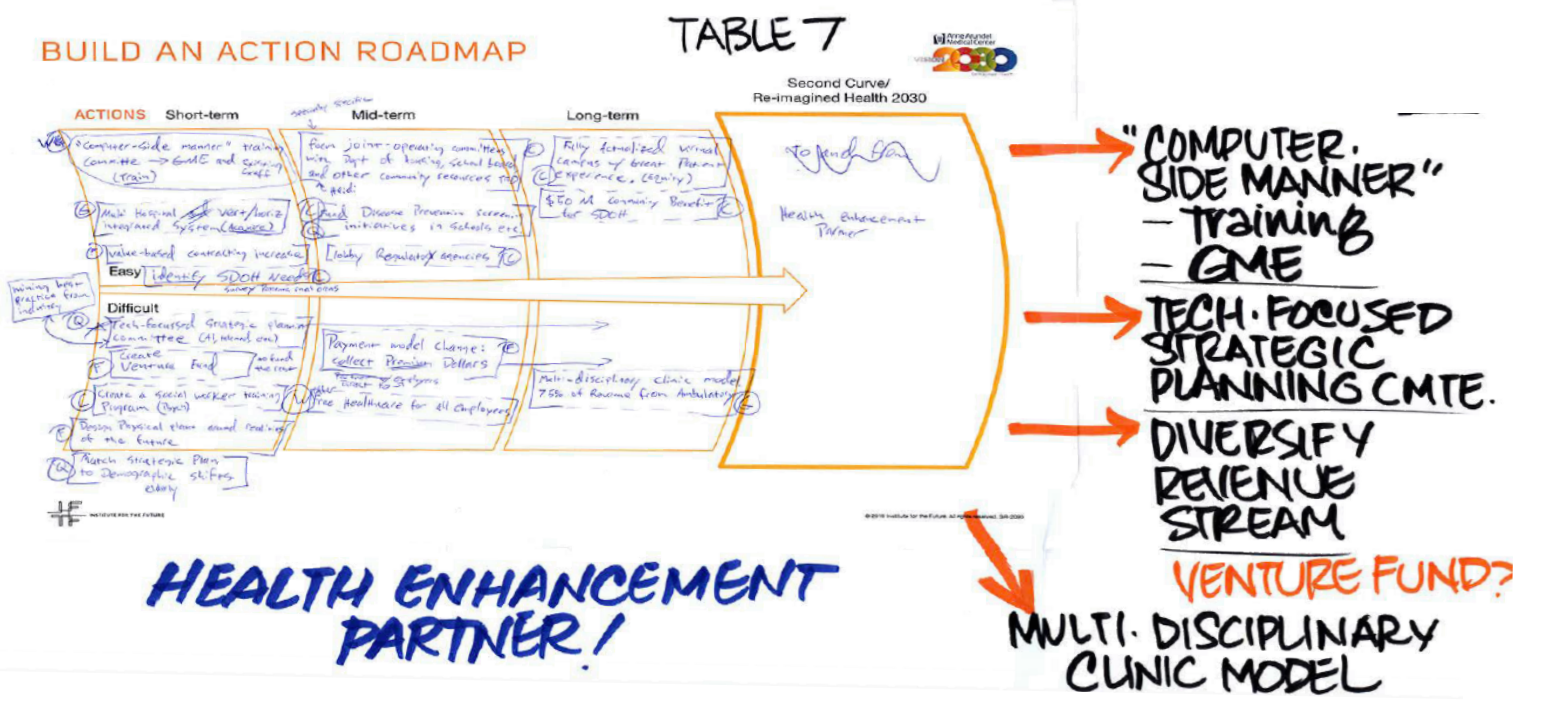
Roadmap 5 toward relationship-based medicine



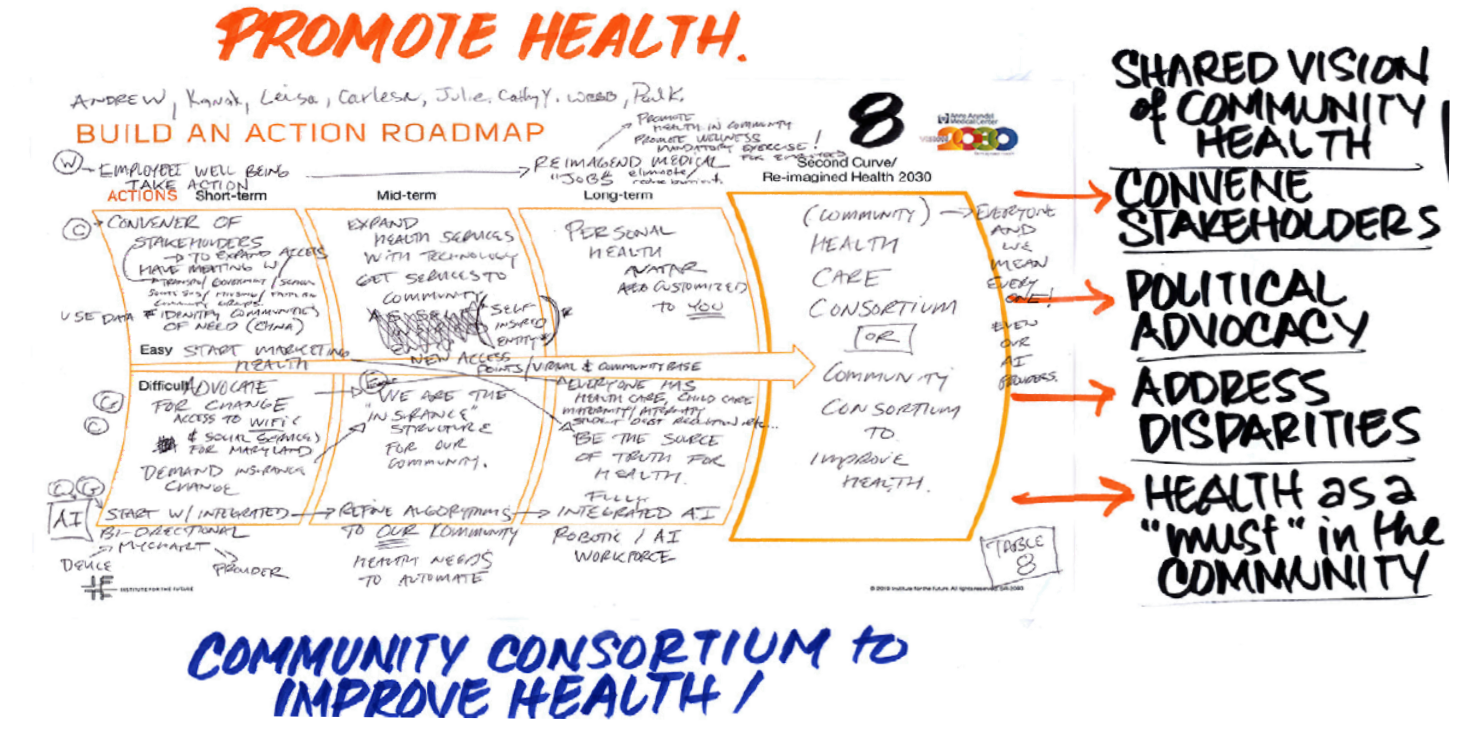
Roadmap 6 toward delivering well-being



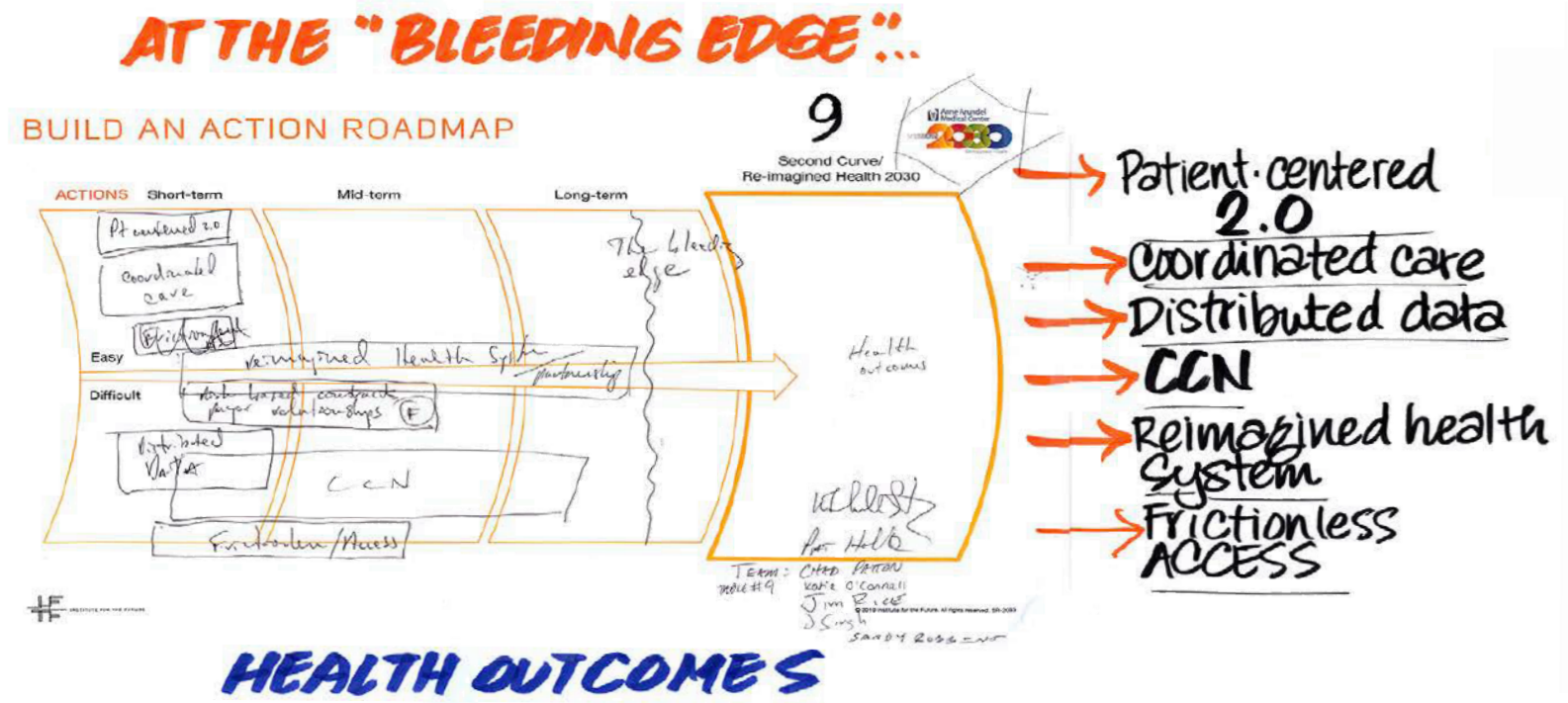
Roadmap 7 toward becoming a health enhancement partner



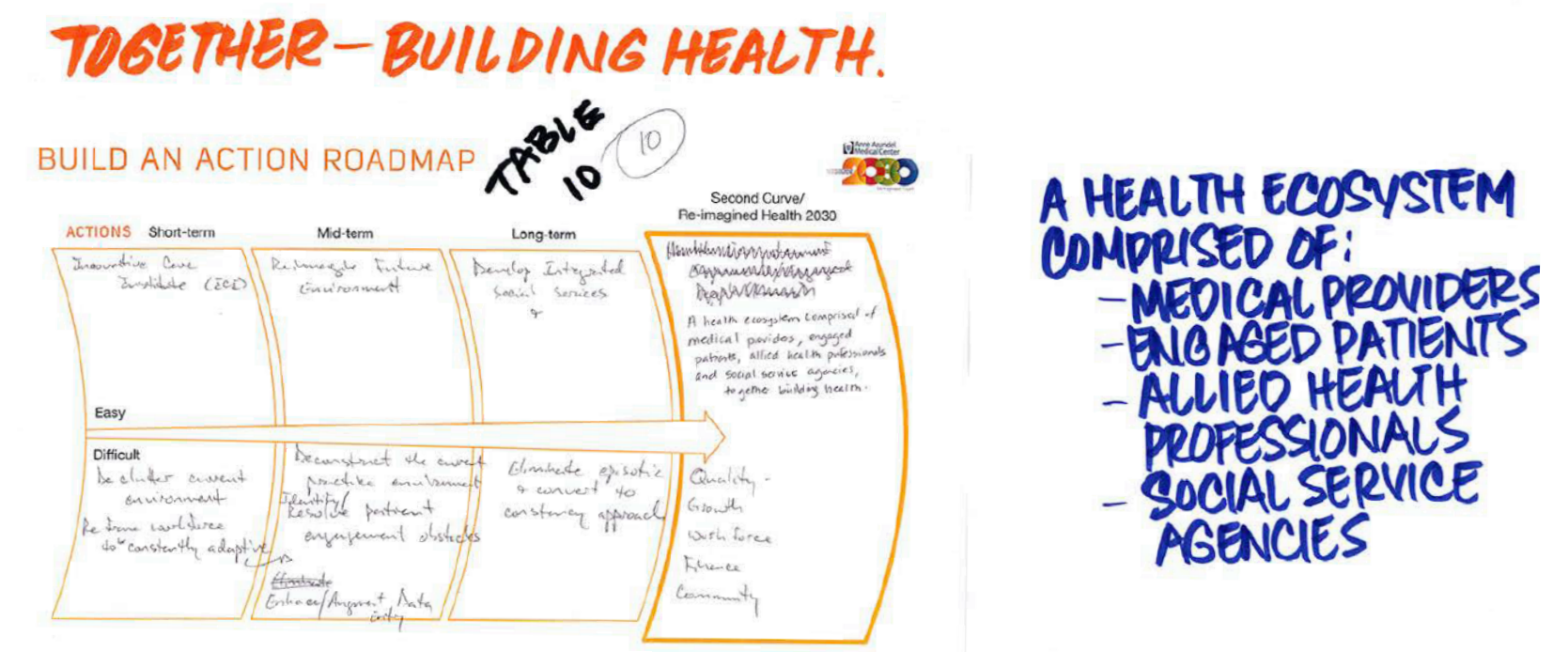
Roadmap 8 toward building a health care consortium



Roadmap 9 toward focusing on health outcomes



Roadmap 10 toward leading the health ecosystem



Feedback - ROADMAP 1	Goal Areas
Widespread support for Virtual Visits	Q, G
Lots of praise for Farmers Market and Food SDOH strategies	C
Also concern that it's not in our core competencies, has no revenue to support.	
Several points about leading by example - making AAMC food choices healthier	W
Improved/same day access was well supported	G, Q
Working with reimbursement or insurance to help generate revenue to pay for SDOH programs	F, C
Medically Supervised fitness had several supporters - as it addresses both healthy lifestyles and can be a non-reg revenue source.	C, G, F
Some mention of technology to help to address access.	Q, G

Feedback - ROADMAP 3	Goal Areas
Widespread support for expanding and leveraging CCN into next level of service.	Q, W, F
Support for AAMC think-tank, ways to get best ideas into the main stream and regular work.	G, Q
Many positive initiatives (growth, staff retention, health and wellbeing) requires a lot of investment.	G, W, F
Quality Workforce retention: this has not been emphasized but is critical to maintaining trust of community.	Q, W
Support for fostering innovation in healthcare and finance.	Q, F

Feedback - ROADMAP 2	Goal Areas
Goals are well recognized as lofty and meaningful, but there is much concern that they are beyond our skill set, lack strategy and tactics to achieve, and costly.	Q, C, F
Confusion over physician-aligned care.	
Financial concerns, including a lack of reimbursable work and need to negotiate with payers and regulators were common.	F
People like the use of technology to achieve goals - AI and Bots	Q
Several people mentioned leveraging the PASS program to support these goals.	Q, G, F

Feedback - ROADMAP 4	Goal Areas
Many people support the idea of strengthening and expanding the CCN and CCN platform to achieve community health goals.	G, W, Q
Much support for working with CMS to revise or redesign TCOC programs, but also a lack of confidence in our success.	F
Several comments focused on evaluating and supporting existing programs rather than recreating programs or creating too many, disparate programs to improve health outcomes.	C, G, Q
Many people support the idea of expanding the PFAC program into the community and increasing their scope to address community health.	W, C
Many questions about the ability to change the waiver program or find alternate funding sources.	F

Feedback - ROADMAP 5	Goal Areas
Overwhelming support for a department of virtual care. Specifically commenters addressed the benefit of having expert guidance on virtual care, rather than disparate, unskilled attempts.	Q, C, G
Several comments agree that there is a workforce talent gap regarding innovation, virtual care, and the next phase of care delivery. Investment is needed in education and workforce development.	W, F
Physicians widely support the concept of relationship-base medicine, alternative medicine, and functional medicine.	Q, C

Feedback - ROADMAP 7	Goal Areas
Mixed reaction to the idea of investing in a venture fund. Supporters like the idea that we would have early access to new technology and novel solutions. Others feel it's too risky and outside our primary skill sets.	G, F
Many people support the idea of community-based wellness and gave positive feedback about better integration of health services and community services. They like the idea of a warm handoff to ensure patients receive the right care and the right support services.	G, Q, C
Widespread support for diversification of revenue stream and changing focus from RVU to premium dollars, particularly among physicians. People support the idea of changing the revenue model.	Q, G, F
Several people like the idea of extending community support toward Social Determinants of Health and addressing problems farther up the pipeline to drive wellness.	Q, C, G
Several commenters support the idea of Joint Boards or commissions with community, NGO, and government partners.	C, Q

Feedback - ROADMAP 3	Goal Areas
Patient Centered Care, Patient Centered Access, Patient Centered Outcomes, and Frictionless Care all received positive remarks from participants. There seems to be a widespread understanding that this is key to AAMC's future care delivery.	Q, C, G
While there is support for redesigned access, commenters are concerned that they don't know what this actually means or how we can get there.	W, F
People like the idea of risk-based contracts, but don't feel confident that this change is going to happen in the near future.	F

Feedback - ROADMAP 6	Goal Areas
Many people stated support for the Chief Transformation Officer idea - sever key leaders do not think this is a necessary role and, instead, believe that transformation is part of everyone's job.	Q, G
Several comments support new access models and "patient driven" access, but there is no clear understanding of how this will work.	G
Some people like the idea of leveraging tech or AI to help drive wellness.	Q, G

Feedback - ROADMAP 8	Goal Areas
Many commenters support health promotion as the key to quality improvement.	Q, C
Several people support enhanced political advocacy - support for AAMC actively engaging to drive the changes we want to see.	C, F, Q
Commenters are concerned about the health disparities in our communities and want to see positive change.	C
Commenters lack confidence in AAMC's ability to lobby for political change or to bring about positive community health disparity reductions.	C, W
Many commenters support health promotion as the key to quality improvement.	Q, C

Feedback - ROADMAP 4	Goal Areas
Innovative Care Institute and the concept of deconstructing current processes and reinventing new, more efficient ones are widely supported concepts.	Q, C, G
Some believe the CCN could already help develop or evolve into the ICI.	Q, W, F
Support for the concept of adaptive workforce, integrating social services, easing access challenges and creating a more frictionless experience.	W, C, G, Q
One commenter addressed the need for tort reform to help decrease cost and increase quality by shifting physician focus.	W

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