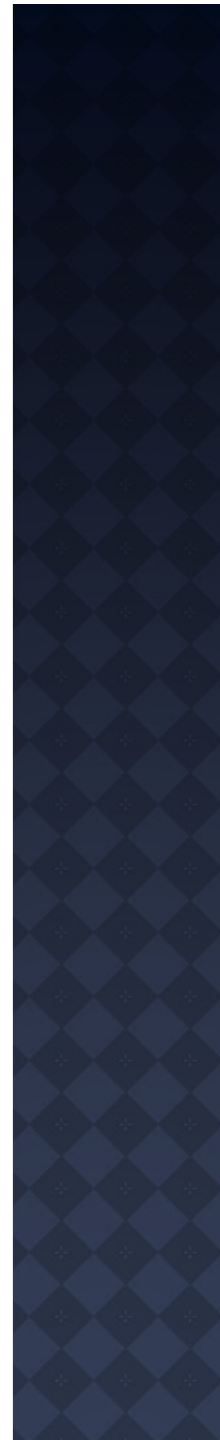




2016 Strategic Plan



DAYTON PHYSICIANS NETWORK
THE COMPREHENSIVE CANCER CARE NETWORK FOR THE
MIAMI VALLEY REGION

2016 Company Strategy

- Service
 - Focus on patient and referring physician experience
- Quality
 - Technologically advanced evidenced based care
- People
 - Embrace Mission/Vision and Core Values
- Finance
 - Prepare for Value Based Care
- Growth
 - Focus on patients, providers and payers

□ Service - Focus on patient and referring physician experience

- **Patient satisfaction scores above 2015 baseline**
 - Customer service training (phone scripting, front desk, etc.) implemented
 - Objective staff performance measures embedded in performance appraisals and quarterly goals
 - Phone system optimization
- **Referring Physician satisfaction surveys**
 - Accurate and timely communication in person between Dayton Physicians Network and Referring physicians via Call Center, faxed and other electronic methods (service compact)
 - 100% accuracy of referring and primary care physicians in NextGen
 - Improve access to providers
 - Schedule
 - Ancillary Providers (NP/PA)

□ Quality - Technologically advanced evidenced based care

- **Achieve MU2 and PQRS measures for 2016**
 - NextGen and other reports
 - System is optimized for efficient workflows and to gather required data
- **Involvement in legislative activities/meetings**
 - COA
 - Astro
 - LUGPA
 - OPA
- **Payer pathway clinical compliance**
 - Pathways are utilized when appropriate in accordance with payer guidelines
- **Benchmarking**
 - Oncology Circle survey
 - LUGPA benchmarking survey
- **Personalized medicine and immunotherapy initiatives**
- **Accreditation in National Organizations**
 - ASTRO - Apex
 - ASCO - QOPI
 - Specialty Pharmacy Accreditation - ACHC

□ People - Embrace Mission/Vision and Core Values

- **Reduced employee injuries by service line/location**
 - Safety manual/implementation
 - Training / site evaluations

- **DPN Physician and employee satisfaction surveys in 2016**
 - Problem areas identified and action plans to improve scores
 - Rounding with employees at each location
 - Documented interactions using standardized talking points template

 - Accountability for staff
 - Objective/measurable goals are embedded and part of performance review process by position/service line
 - CARES (see attached) embedded in performance reviews
 - Customer service training (phone scripting, front desk, etc.)

- **Reduced turnover by service line/location**
 - Succession planning - plan developed for physicians and leadership
 - Communication plan to ensure understanding of goals for entire staff
 - Operations Managers meetings
 - Service line meetings
 - Member meetings
 - Board meetings
 - Individual meetings

 - Revise on-boarding process
 - Revise hiring procedures (attitude - train for skill)
 - Review compensation and benefit plans
 - Wage ranges
 - Job descriptions
 - HRIS

❑ Finance - Prepare for Value Based Care

- **Net Income before Physician Expenses Exceeds Budget**
 - Staffing costs per physician FTE/location/service line
 - Overhead costs per physician FTE/location/service line
 - Inventory levels on par with benchmarks
 - 100% of assets are accounted for and in system
 - Operate within approved budgets
- **Pathways codes billed 100% of time when applicable**
 - Come Home
 - UHC - S codes
 - Anthem - S codes
 - Aetna - shared savings, S codes
- **Cash collection increased from 2015 baseline**
 - 100% accuracy by front desk staff for insurance and demographics
 - Drug margin increased
 - Co pay / Foundation assistance
 - Decreased time from claim filing to follow up on claim
 - Cash collection policy followed

□ Growth - Focus on patients, providers and payers

- Increased volume of new patients over 2015 by 2%
 - BMT Program
 - Prostate Cancer Program (Healthy Bone Clinic, Advanced Prostate and Zero Prostate Cancer Run)
 - Market OMH to referring physicians/health systems/payers
 - Targeted marketing to region Website enhancement, social media and content changes
 - Metabolic Stone Clinic
 - Oncology Service Line - breast/lung/colon/prostate
 - Co-Branding with PH and MD Anderson
 - Physician outreach and network with PH liaisons
 - AMC relocation of medical oncology to radiation oncology
- Expand strategic relationships between DPN, other physician practices and health systems (National Cancer Care Alliance, IPC, Hospice, ICS, etc.)
- Improved payer relationships
 - CMS Oncology Care Model or other alternative payment model
 - UHC - Improve premium designation
 - Anthem - Enhance current program to a pilot
 - Care Source - discuss pilot
 - Prepare cost analysis for bundled payments
- New Business opportunities
 - Transition pharmacy to retail licensing
 - Urology dispensing