

AnMed Health Clemson expands

ANMED HEALTH broke ground in October on a second building for AnMed Health Clemson at 885 Tiger Blvd./U.S. Highway 123 in Clemson.

The new 22,100-square-foot building will be home to primary care, specialty and outpatient services, a lab and CareConnect – an urgent care center for unexpected minor injuries and after-hours illnesses. The new structure will create more room for employees and patients, as well as additional diagnostic equipment.

During the construction period of about eight months, CareConnect and AnMed Health Clemson Family Medicine will continue to operate out of the existing building next door to the site. After they move to the new space, the existing building will be home for AnMed Health Carolina Cardiology, AnMed Health Carolina Kids and AnMed Health Clemson Specialty Care, a group of specialists who now rotate through an office on Wall Street.

“The demand for quality health care has grown in Clemson and so have our practices,” said Garrick Chidester, president and CEO of the AnMed Health Physician Network and AnMed Health executive vice president for network operations. “We’re excited to enhance our services to the Clemson community with a bigger, better office and new equipment.”

When construction is complete on



Members of the Clemson Area Chamber of Commerce help AnMed Health officials break ground on a second building for AnMed Health Clemson on Tiger Boulevard.

the new building and after the existing building is prepared for its new occupants, the AnMed Health minicampus will serve as a convenient location for five AnMed Health practices. The practices include AnMed Health Clemson Specialty Care, which brings in specialists in arrhythmia, obstetrics/gynecology and gynecologic oncology.

In addition to more than doubling the space for patients and staff, the new structure makes room for additional diagnostic tools. CareConnect offers urgent care services during extended weekday and weekend hours, and can connect patients to primary care and

specialty physicians throughout the AnMed Health system.

The AnMed Health Physician Network is home to more than 50 practices and includes specialists in family medicine, pediatrics, obstetrics and gynecology, orthopaedics, cardiology, vascular medicine, surgery and pulmonary and sleep medicine.



To learn more or to find a doctor near you, go to www.AnMedHealth.org.

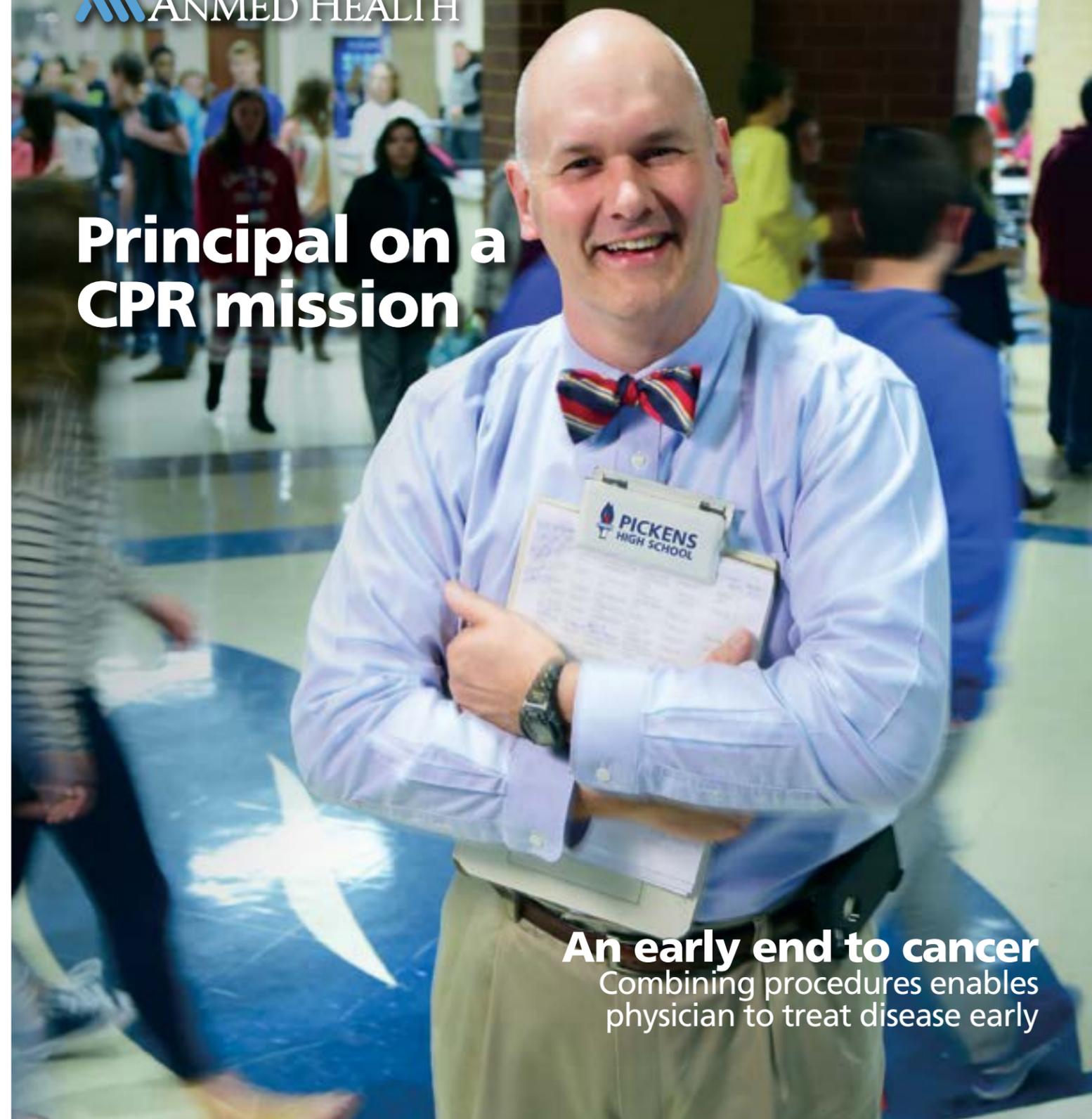
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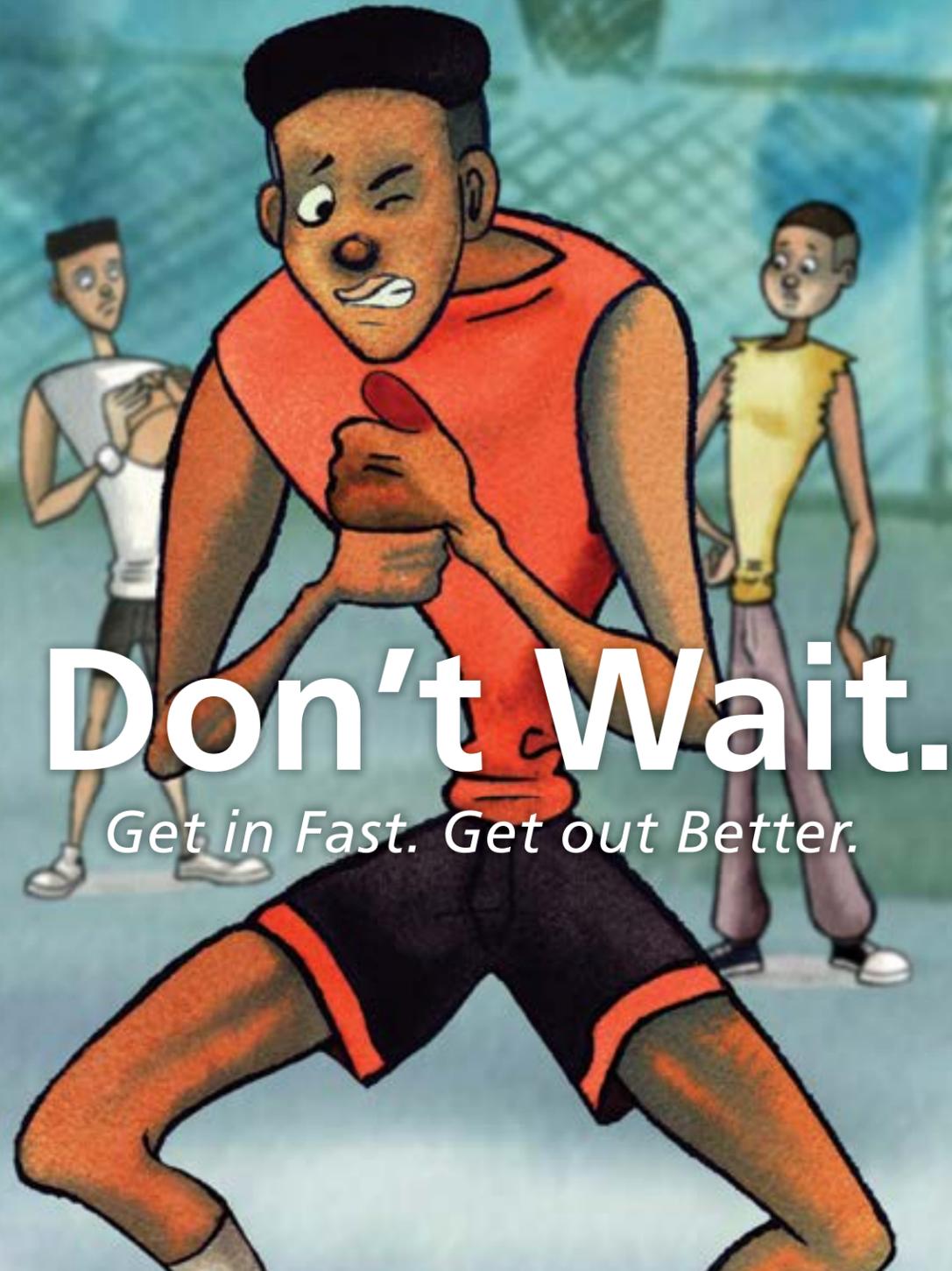
ANMED HEALTH

Frequent users of the ER find better living through HOP program

Principal on a CPR mission



An early end to cancer
Combining procedures enables physician to treat disease early



Don't Wait.
Get in Fast. Get out Better.

Visit CareConnect, where our team of medical professionals can help you start healing right away. Get in fast, get out better—come to CareConnect today. To learn more, visit careconnect.anmedhealth.org



AnMed Health moved forward on the strength of sound decisions

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ON THE COVER: Pickens High Principal Marion Lawson is glad to be back among the students after CPR saved his heart.

Inside ANMED HEALTH

Inside AnMed Health is published quarterly for AnMed Health staff, friends and the community.

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MISSION
To passionately blend the art of caring with the science of medicine to optimize the health of our patients, staff and community.

VISION
To be recognized and celebrated as the gold standard for healthcare quality and community health improvement.

ANMED HEALTH
We're in this together.

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DECISIONS: With a little more than a year as AnMed Health's CEO's, I marvel at the number of decisions required to make the AnMed Health System a successful organization. They're not all my decisions – not by a long shot. Our board makes a few key decisions, the executive team and leaders make a lot of decisions with input from department directors, nurse managers and supervisors, and the rest of our team – clinical and non-clinical alike – make an astonishing number of decisions every day, every hour, every minute. Many of the decisions, especially those in the hands of physicians and caregivers, determine life and health for members of our community.

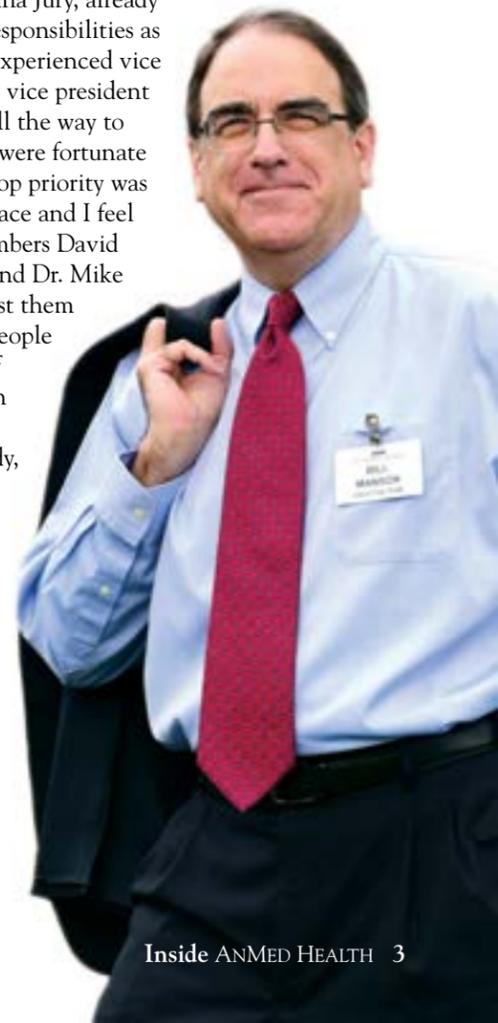
With so much at stake, I'm grateful that I don't need to worry about whether other people in our organization are making good decisions. I know they are.

Having the right people on board is crucial and it's why I knew my first priority as CEO was to make sure I put a solid executive team in place. We said goodbye in 2015 to a great deal of experience when, first, President Emeritus John Miller transitioned out of the CEO's chair, even though he has remained active with our Foundation. We also faced the retirement of our long-time vice president of Human Resources, Doug Douglas, and Jerry Parrish, our chief financial officer who retired after a 37-year career with AnMed Health. In addition, our VP of Medical Affairs, Tom Kayrouz, was recruited to a position in Virginia where he can live closer to his family.

The leadership team that has replaced them is a mix of home-grown talent and some who cultivated their craft elsewhere. For all of them, we picked the best we could find after a national search. Garrick Chidester and Tina Jury, already key to our executive team, took on even more responsibilities as the senior leadership. And we found a new but experienced vice president of nursing in Dianne Spoon and a new vice president of Medical Affairs in Dr. Brad Mock. We went all the way to Arizona to find CFO Christine Pearson, and we were fortunate to recruit a new HR chief in Rick Grooms. My top priority was making sure I had the right executive team in place and I feel very comfortable that – along with valuable members David Glymph, Tim Arellano, Michael Cunningham and Dr. Mike Tillirson – we have the right team in place. I trust them to make sound decisions and I trust the web of people throughout our organization to make the kind of decisions that help one another, our organization and, most of all, our patients and their families.

We grappled with a few major challenges already, including new requirements for providing mental health services, growth in our physicians network, improvements to the patient experience and the ever-changing complexities of paying for health care. All of this has kept us moving forward, one sound decision at a time, made capably and frequently by our team of thousands. I thank the AnMed Health staff for making great decisions every day.

Bill Manson



An early end to cancer

Combining procedures enables physician to treat disease early

JAN WRIGHT DID NOT EXPECT her stomach to be the problem when she went in for a regularly scheduled colonoscopy with gastroenterologist Dr. Manjakkollai P. Veerabagu. Because of her family history – her mother died of colon cancer when Wright was 39 – she was under Dr. Veerabagu’s care as part of an ongoing effort to monitor colon health.

Her mother died just 15 days after diagnosis, when a colonoscopy revealed that cancer was in the advanced stages by the time she sought out a doctor.

Wright decided to be proactive with her own health after that. At 42, she started regular visits that included colonoscopies and endoscopies. But soon she was caught up in raising her teenage grandson, spending time with her husband and working her 25th year at Clemson University. Wright looked at the calendar one day and realized she was two years overdue for a checkup, so she made an appointment with Dr. Veera – as he is known to most of his patients – for what she hoped would be another routine visit and clean bill of health.

Dr. Veerabagu used endoscopic ultrasound (EUS) a leading-edge technology that he brought to AnMed Health in the early 2000s, to scan through the wall of a lesion in Wright’s stomach to determine whether a new technique was feasible.

“I would like to think it was the good Lord taking care of me when I was placed in the care of Dr. Veera,” Wright said.

I was very keen on making those procedures available to our patients in this area.

“He found nine pre-cancerous polyps and biopsied stage 1 stomach cancer during that appointment. I didn’t know at the time, but he was trained to use a new technique to treat his patients and I was the first.”

Fortunately for Wright and other patients in the AnMed Health community, Dr. Veerabagu aggressively keeps up with the latest technology in his field. At the time of Wright’s diagnosis, he was one of the first in the state to use the new procedure called endoscopic submucosal dissection (ESD). Combining EUS and ESD, Dr. Veerabagu could see through the walls of the tissue and organs and then find and treat cancerous and pre-cancerous tissue. The technique enables the physician to stop cancer before it advances to a level that requires inpatient surgery.

Wright did not need radiation or chemotherapy after her procedure because Dr. Veerabagu found the cancer in the early stages and removed all of it from her intestines and stomach.

“In the past, the patients would have had surgical removal, which has higher morbidity, complications, expense and partial or complete loss of an organ,” Dr. Veerabagu said. “EMR (endoscopic mucosal resection) and ESD are non-surgical, meaning only endoscopic. These are organ-preserving procedures which are usually done as an outpatient procedure and come at a very reduced cost.”

EMR and ESD were developed by gastroenterologists in Japan, where gastric cancers are more common. Dr. Veerabagu learned ESD in a training program conducted by the American Society for Gastrointestinal Endoscopy and the Japanese Society for Gastrointestinal Endoscopy. Dr. Veerabagu was the first in the Upstate and only the second in South Carolina to use this method. For patients it means a treatment that is more cost effective, offers faster recovery time and is much more efficient at finding and

removing all of the cancer in one office appointment.

“I have always been a caretaker, so my first questions after receiving the diagnosis were how long would my recovery be and who would take care of me during that time?” said Wright. “But after the procedure, all I had was a small stomach ulcer to deal with. I felt fine and was able to go back to work in a couple of days. It was a relief to me that I did not lose time at work or have to depend on a family member to help me recover.”

Dr. Veerabagu is excited about being a part of AnMed Health where he can offer the kind of health care people in the Anderson area deserve and expect.

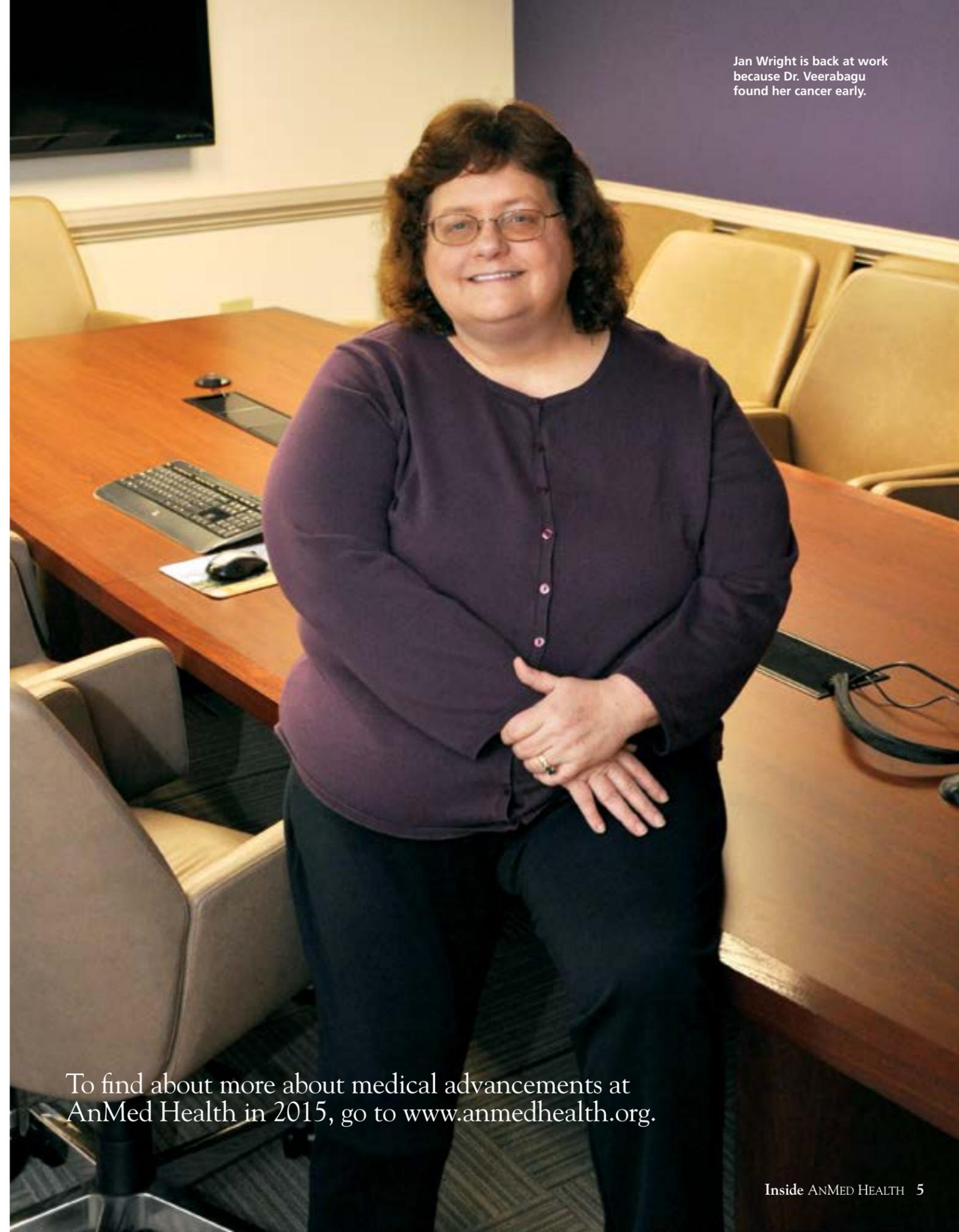
“I was very keen on making those procedures available to our patients in this area. These procedures and tests have helped several patients in our area already,” he said. “We have a great team and a wonderful facility through AnMed Health, which helped make this happen in our region. It means a huge difference for our patients. This was a long term dream for me, and it is happening right here in Anderson.”



A gastroenterologist specializes in digestive system disorders. Gastroenterologists see patients when they are experiencing problems with the gallbladder, stomach, intestines or pancreas. Dr. Veerabagu is a board-certified physician who specializes in gastroenterology, liver diseases, nutrition, endosonography and diagnostic and therapeutic endoscopic ultrasound.

See more on page 12-13

Jan Wright is back at work because Dr. Veerabagu found her cancer early.



To find out more about medical advancements at AnMed Health in 2015, go to www.anmedhealth.org.



Principal Lawson wants to make sure every student at Pickens High School is capable of delivering the kind of life-saving CPR that kept him alive.



For more information on heart attack warning signs or hands-only CPR, visit www.anmedhealth.org/SaveAHeart

See more on page 12-13

Pickens High principal inspires students to be CPR lifesavers

IN HIS 16 YEARS AS PRINCIPAL at Pickens High School, Marion Lawson has walked the hallways and seen students on their way to becoming the doctors, lawyers and teachers of the future. Now he sees hallways bustling with potential heroes.

Lawson, along with Pickens Fire Chief Chris Elrod, is spearheading an effort to train every student at Pickens High in hands-only CPR. Lawson was motivated after his experience at the David Hortman Run to Remember 5K in June 2014. He didn't just have a brush with death that day; Lawson met it head on. Over halfway through the race, he suffered sudden cardiac death in front of the library at Anderson University.

"The last thing I remember was handing my keys to my son's friend before the race," Lawson said. "I'm told I was lucky enough to run two miles and land 30 feet from the only counselor at the event who knew CPR."

That counselor was Ben Crocker, then a junior at Clemson who began the chest compressions that kept Lawson alive until paramedics arrived. Those paramedics worked on Lawson another 30 minutes before taking him to the AnMed Health Emergency Department.

The heart catheterization that followed took longer than the quadruple bypass surgery that Lawson required several days later. During the catheterization, doctors frequently stopped the procedure to restart Lawson's heart. The bypass surgery went much smoother, and by the next day Lawson was walking the halls outside his room. After three weeks at home and months of rehab, Lawson was back at work in time to greet incoming freshmen at Pickens High School.

"Everyone at AnMed Health was so honest with my family and candid about every step of my care, and we are so thankful for the excellent care we received," Lawson said. "The nurses told my wife Tracy about how diligently they had to work during the catheterization; they said they don't see many patients like me."

Lawson later learned that sudden cardiac



Marion Lawson with Ben Crocker, the man who saved his life and inspired a movement.

arrest strikes almost 360,000 Americans annually, and that only 8 percent survive when it happens away from a hospital. Only 3-7 percent of the survivors return to their previous level of physical and mental function.

AnMed Health Chest Pain Center Coordinator Kimberly Irby said the hospital system stresses the importance of both pre-hospital care and emergency care for sudden cardiac arrest. Prevention has been a major initiative at AnMed Health and includes providing education on and raising awareness of heart attack and stroke warning signs, hands-only CPR and automatic external defibrillators (AED). Irby said educating patients on the risk factors can go a long way toward prevention, but being equipped with skills to take action in an emergency is just as important.

"Hands-only CPR and AEDs are keys to saving lives," Irby said. "We provide excellent care within the hospital setting, but none of it matters if no one provides care immediately after a person collapses."

AnMed Health routinely hosts adult, child and infant CPR classes, and the hospital system has donated AEDs to Pickens High School and other key areas in the community to ensure cardiac arrest victims like Lawson are given the best

chance of survival.

For every minute without CPR and defibrillation, a sudden cardiac arrest victim's chance of survival decreases by 7 to 10 percent. On the other hand, immediate CPR or use of an AED before paramedics arrive increases survival rates to 38 percent. Lawson knows that Crocker's immediate response saved his life.

"I know how fortunate I was," Lawson said, "so it was clear to me that a good, positive message should come out of all of this."

Chief Elrod purchased 40 torso mannequins for use in CPR training, and the fire department, with the help of Lawson, started courses for eighth and ninth graders. Lawson, Elrod and the trainers also provided training with a local manufacturer and are seeking other opportunities.

Lawson said the school district, parents and students have supported the new initiatives just as they supported his recovery. Students and faculty held a prayer vigil the day he was admitted to the hospital. The school district's administration continues to demonstrate interest in sustaining the program long term.

Lawson received a clean bill of health a year after the race, and he even completed the David Hortman Run to Remember 5K in 2015, when he met and thanked the two EMTs who got him safely to the Emergency Department.

Lawson and Crocker later shared their stories during the first hands-only CPR training sessions at Pickens High School, where Lawson heard his own story for the first time from Crocker's point of view. Lawson said it was a surreal, powerful moment that reinforced how blessed he is to survive and create opportunity for others.

"I always tell my students that they don't know what the next day will hold," Lawson said. "I hope they don't need this training for each other, but they may need it for a family member or friend. They may even be able to do for a complete stranger what Ben Crocker did for me that day."



Kenneth Allen meets with Lindsey Sanders, who he says is now a friend in addition to being his health coach.

Frequent users of the ER find better living through HOP program

CONGESTIVE HEART FAILURE was killing Kenneth Allen. It invaded his body with a weakness that cost him his health, then his livelihood, then his home. Allen's life and health were in shambles.

Although he was long a hard-working soul, Allen held down the kind of jobs that provided a living but not health benefits. Due to poor health, he lost his long term job as well as the odd jobs that helped pay the bills. So when doctors gave him six months to live, little was left of his life anyway. Unable to pay for healthcare or mounting medical bills, he was homeless with few possessions, and health insurance

was the stuff of dreams for men like Allen. Against physician wishes, Allen checked himself out of the hospital after -- for the second time in a year -- fluid was removed from his lungs. A short time later he returned, barely able to draw breath. His prognosis was bleak. It was then that health coach Lindsey Sanders, LPN, walked into his room and into his life.

Sanders is one of three nurses who work for the Healthy Outcomes Plan (HOP), a program approved by the South Carolina General Assembly in 2013 as an alternative to expanding

the state's Medicaid program. The plan was originally designed to reduce the number of emergency room visits made by uninsured adults who rely heavily on emergency medicine for routine medical concerns. The program was expanded to cover those with multiple readmissions and/or multiple chronic diseases, with

90%
The decrease in likelihood that a patient would visit the ER for a non-emergency after enrolling in HOP.
See more on page 12 -13

a goal of reducing the cost of their medical care by placing them in a primary care medical home and keeping them healthier.

But it's a task that can have as many challenges socially as medically. Patients often juggle complex medicine regimens while they worry about more pressing concerns such as where to live or where to get a meal. Some don't understand how to follow orders or instructions for critical components of their care plan like medications; others may know how to handle the medication, but lack the means to pay for it. The health coaches get involved in everything from finding them new shoes to searching for a new home.

For Allen, Sanders did both and more. "She's a good lady," he said. "She's not just a caseworker; she's a friend. I don't know what I would do without her."

When Sanders first walked into his hospital room, she met a man who badly wanted to leave, but with nowhere to go. She found a place for him in a motel. Under her watch in the months that followed, Allen's heart function improved by 10 percent and his life expectancy was extended from six months to five years. With a longer life ahead of him, Sanders then helped him find a permanent place to live in a boarding house.

The HOP program is under the guidance of the Anderson Access to Care Coalition, which includes AnMed Health, the Anderson Free Clinic, Anderson-Oconee-Pickens Mental Health Center, Anderson-Oconee Behavioral Health and the nonprofit group AIM. The coalition currently provides assistance to nearly 500 people like Allen.

On a recent social visit with his health coach, Allen experienced weakness after climbing a few steps. In addition to congestive heart failure, he has high blood pressure and a prostate condition. When he couldn't walk farther, he stopped and held on to a parked car while he waited for his ride home to pick him up. He can't climb six steps, but has been denied disability insurance two times. Another challenge. His health coach -- his friend -- is helping him appeal that decision. If they're going to say no to his disability, they have to say it at least three times to Lindsey Sanders.

With Wellness in Mind

Healthcare is changing. As we move toward preventing illness as our first efforts at wellness, AnMed Health has adapted several strategies aimed at keeping people out of our emergency rooms. The HOP program explained in more detail at left is one of those. Two others are AnMed Health's efforts to reduce the need for emergency treatment due to congestive heart disease or COPD.

Larger CHF clinic helps more patients

The AnMed Health Congestive Heart Failure Clinic got a new renovated and expanded space in 2015 to accommodate the growing program.

The AnMed Health Congestive Heart Failure Clinic works to reduce hospital admissions for patients with Congestive Heart Failure by complementing the care provided by physicians. Nurses, social workers, nutritionists, pharmacists and others work together to help manage the disease in a safe environment. The Congestive Heart Failure Clinic staff helps improve the quality of life for these chronically ill patients.

The clinic, located at LifeChoice at AnMed Health's North Campus, works by coordinating the management of the overall health of the patient, while focusing on the immediate concerns associated with congestive heart failure.

258% Use of the Congestive Heart Failure Clinic has just about tripled in the last two years, from 621 in 2014 to an even 1,600 in 2015. *See more on page 12-13*

"We're looking at congestive heart failure concerns but we're looking at everything else, too," said Michael Gibson, nurse manager for LifeChoice. "We make sure they have the right medications. We often help them deal with other co-morbid conditions, and sometimes we also have to grapple with socio-economic issues. There is an education component, and we make sure they meet with a dietician."

The ultimate goal is to maximize medical therapy and improve quality of life.

Transition of care project reduces COPD admissions

AnMed Health worked with other medical and community organizations to keep patients living with chronic obstructive pulmonary disease (COPD) at home through a collaborative program called Preventing Avoidable Readmissions Together (PART). AnMed Health's COPD Transitional Care Pilot Program sought to reduce 30-day readmission rates for COPD patients.

The team developed personalized COPD action plans for patients and established a help line and clinical health coach team. After implementation, AnMed Health's readmission rates for COPD patients dropped from 20.2 percent to 13.7 percent, putting the organization safely within the top 10 percent of hospitals in the nation and resulting in a cost savings of more than \$600,000.

A cross-disciplinary team including nurses, Respiratory Therapy and Emergency Department paramedics worked through PART participants -- the South Carolina Hospital Association, BlueCross BlueShield of South Carolina, Health Sciences South Carolina and the Carolinas Center for Medical Excellence.

The program worked by empowering patients to self manage their disease. "Patients need to engage in their personal health in order to recover efficiently, so helping patients gain knowledge regarding their health and appropriate ways to care for themselves can be very powerful," said Tina Jury, executive vice president of hospital operations and chief nursing officer. "By incorporating health coaches and placing a higher emphasis on patient education, the health care professionals at AnMed Health have reframed how we care for our patients once they leave the hospital."

12.9% In the first 30 days of the program, readmission rates decreased from 18.8 percent to 12.9 percent. The cost of the program was under \$17,000, but saved \$447,934 in medical costs. *See more on page 12-13*

AnMed Health physicians grow in number and specialty

ANMED HEALTH works to attract talented physicians to the Anderson area. We recruit them from afar. We train them through fellowships and our Family Medicine Residency Program. We provide a hospital educational setting for medical students. In 2015 the first two students from the Medical University of South Carolina joined the Edward Via College of Osteopathic Medicine students who have been part of the AnMed Health campus since 2012.

We also welcomed into our network of physicians: AnMed Health Piedmont Surgical Associates; AnMed Health Spine and Neurosurgery; and AnMed Health Infection Management. AnMed Health's new physicians in 2015:

Venkateswarlu Chintagumpala, M.D.
Internal Medicine
Hospital Medicine Consultants of Anderson

Ping Gao, M.D., MPH, FACOEM
Occupational Medicine
Medical Director, AnMed Health Occupational Health, Employee Health and Wellness

Frances H. Graham, M.D.
Pediatrics
AnMed Health Pediatric Associates

Heidi Hendricker, M.D.
Cytopathology
Piedmont Pathology Associates

Catherine Smith Jeffords, M.D.
Cytopathology/Surgical Pathology
Piedmont Pathology Associates

Lisa Lichota, D.O.
Pain Management
Piedmont Comprehensive Pain Management and AnMed Health Cardiac and Orthopaedic Center

Thomas Barry Miller, M.D.
Anesthesiology
Anesthesiology Services of Anderson

Michael Edward Nash, M.D.
Hematology and Medical Oncology
AnMed Health Oncology and Hematology Specialists

Anna Neal, M.D.
Pediatrics Urgent Care
AnMed Health Kids' Care

Bethany A. Powers, D.O.
Family Medicine/Neuromusculoskeletal Medicine
AnMed Health Lakeside Family Medicine

John Charles Saunders III, M.D.
Orthopaedic Surgery
AnMed Health Community Orthopaedics

Matthew B. Sellers, M.D., M.S.
Electrophysiology/Cardiology
AnMed Health Arrhythmia Specialists

Michelle I. Tucker, M.D.
Obstetrics/Gynecology
AnMed Health OB-GYN Associates and AnMed Health Women's and Children's Hospital

William F. Wagner, M.D.
Pain Management
Comprehensive Pain Specialists

K. Chet Walters, M.D.
Pulmonary and Critical Care Medicine
AnMed Health Pulmonary and Sleep Medicine

Karen Y. Weise, M.D.
Urgent Care/Family Medicine
AnMed Health CareConnect, Anderson

Adrienne Westmoreland, D.O.
Family Medicine/Obstetrics
AnMed Health Williamston Family Medicine

Josef Williams, D.O.
Emergency Medicine
Anderson Emergency Associates

Francis J. Yanoviak, D.O.
Anesthesiology
Anesthesiology Services of Anderson

2015

Was a year that saw growth in the AnMed Health Physician Network, which added:

20

New physicians and

3

new practices, capping a two-year growth spurt that added five new practices and 30 new doctors, as well as

9

nurse practitioners and physician assistants.

The AnMed Health Physician Network is home to more than 50 practices and includes specialists in family medicine, pediatrics, obstetrics and gynecology, orthopaedics, cardiology, vascular medicine, surgery and pulmonary and sleep medicine. The network includes two locations of CareConnect, where urgent care is delivered without appointment during extended hours in Clemson and Anderson.

Doctors cross borders



Education and experience came from 5 countries and at least 21 states: China, India, Grenada and West Indies, and Arizona, Arkansas, California, Florida, Georgia, Indiana, Louisiana, Maryland, Missouri, Minnesota, Montana, New Jersey, New Mexico, New York, North Carolina, Ohio, Pennsylvania, South Carolina, Tennessee, Texas, West Virginia

Specialties are as diverse as internal medicine, neuromusculoskeletal medicine, electrophysiology, cardiology, cytopathology and surgical pathology, family medicine, obstetrics, gynecology, urgent care, pediatrics urgent care, pain management.

Evolve Opens

AnMed Health Evolve opened in 2015, offering medically-supervised training and care for athletes and non-athletes who seek to achieve goals for physical activity while preventing injury. Directed by a fellowship-trained sports medicine physician and former Olympic athlete Dr. Charles Edsall, Evolve is designed to meet the needs of serious and casual athletes and others who want to improve strength, power, performance and safety. AnMed Health Evolve services include gait analysis and physical therapy.

Residency program continues to send forth doctors

313

The AnMed Health Family Medicine Residency program has graduated 313 physicians since 1975.

34

They are practicing medicine in 34 states across the country.

133

More than a third of them are taking care of patients in South Carolina.

Definition: A Medical Student is one who has completed four years at a university or college and has entered a four-year graduate program in medicine. During the third and fourth years, the learning shifts from classroom-based to a clinical setting. The first medical students started learning at AnMed Health in 2012.

2

The first two medical students from the Medical University of South Carolina enrolled at the AnMed Health campus in 2015, joining medical students from the Edward Via College of Osteopathic Medicine.

12

The first dozen students in medical school at AnMed Health graduated in 2015. The students spend years 3 and 4 of medical school at the AnMed Health campus.

100% of them were accepted into residency programs across the country from Cleveland to Boston to Charleston.

24

The Medical Education program at AnMed Health has 24 medical students – 12 in their third year and 12 in their fourth.

2015 at a glance

AnMed Health is a 5 hospital system founded in 1908, anchored by AnMed Health Medical Center.

AnMed Health Medical Center, AnMed Health Women's and Children's Hospital, AnMed Health Rehabilitation Hospital, Cannon Memorial Hospital, Elbert Memorial Hospital

3915

Employees provide care for patients in an area that covers parts of two states.

Care is delivered by more than 900 nurses and 400 physicians.



AnMed Health is a Magnet® designated hospital, one of only 3 in the state.

116

Almost 120 nurses are working toward a BSN with help from the AnMed Health tuition assistance program.

50% of our nurses have earned a Bachelor of Science in Nursing.

30 The tuition assistance program is helping 30 nurses who are in pursuit of a Master of Science in Nursing.

23% of AnMed Health nurses have earned specialty certification.

Former President and COO Bill Manson took over as CEO in 2015. Although he continues to handle his old office himself, Manson filled three other open positions on the executive team and created a new vice president for nursing.



After the retirement of longtime CEO John Miller, former President and COO Bill Manson (center) was named CEO of AnMed Health. His executive team includes, left to right, David Glymph, Michael Cunningham, Dr. Mike Tillirson, Christine Pearson, Tina Jury, Tim Arellano, Dianne Spoon, Rick Grooms, Garrick Chidester and Dr. Brad Mock.

AnMed Health broke ground in 2015 on a new space to house a state-of-the-art hybrid operating room. The 11,475 square foot project includes a new canopy over the Admitting entrance and a new look for the front of the Medical Center.



1/3

COPD patients saw a drop in readmissions by one-third under a program to encourage patients to be proactive about their wellness at home.



400

More than 400 joints were replaced at the Total Joint Academy.

Definition: Percutaneous Coronary Intervention (PCI), commonly known as coronary angioplasty, angioplasty, or "the balloon."



Minutes Matter

Door-to-balloon time is a way of measuring how quickly a heart attack patient receives PCI. The quicker, the better to prevent loss of heart muscle.

90

The national standard for door-to-balloon time is 90 minutes.

43

AnMed Health door-to-balloon time averages 43 minutes.

77

Even when adding EMS, the time from first contact with EMS to PCI is 77 minutes.

3X

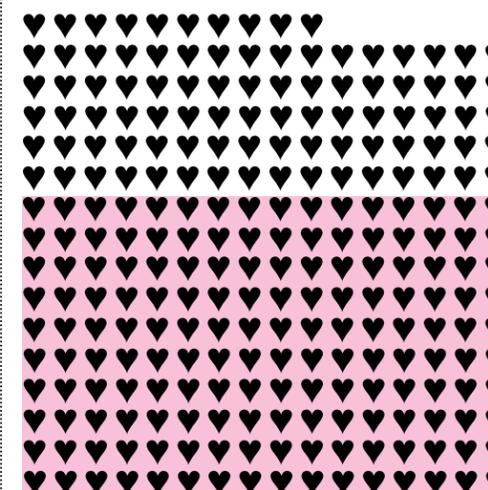
(or Triple)

More patients are taking advantage of the Congestive Heart Failure Clinic. There were 1,600 visits in 2015, compared to 621 the year before.



80,000

Approximate visits to the Emergency Department in 2015.



250 people were treated for heart attacks

160 of those needed PCI



The AnMed Health Cancer Center delivered 20,642 treatments in 2015.

Health Outcomes Plan (HOP)

50% The likelihood that one of the HOP patients would visit the Emergency Department was about 50 percent before they joined the program. Their visits dropped by 90 percent after joining HOP.

86.7% of enrollees have had no Emergency Department visit within the first 12 months.

A growing proportion of enrollee visits to the Emergency Department are for appropriate use of emergency medicine.



The Halls believe "home" reaches beyond their house and includes an entire community.

Foundation supporters working for a healthier community

TOM AND SHERRILL HALL sat in the sunlit living room of their Anderson home, nestled in a quiet cul-de-sac shaded by old trees. A nasty storm system fueled by Hurricane Joaquin had blown through the region the previous night. Leaves and broken twigs littered the sidewalk out front.

The damage left behind was much worse in other areas of the state, though, as floodwaters threatened and neighbors joined together to lend support. It's this belief in helping hands and second chances that motivates the Halls to

donate to the AnMed Health Foundation.

"I appreciate what the hospital system does for the community, for everybody," Tom said. "We really have a good hospital for our size county and we serve a lot of people outside of it."

The Halls became charter members of the Foundation's Five Star Society in 2006. Since then, their gifts have assisted others through the Greatest Need Fund and the Robert B. Claytor Patient Assistance Fund (formerly Chaplain's Fund), which helps provide prescriptions or medical supplies for low-income

patients discharged from AnMed Health.

In the case of the floods bearing down on people throughout the state, it's the Employee Financial Assistance Fund that could step in to assist those affected by the catastrophic event. Need has many faces, and the Foundation offers several avenues to meet it.

But when they heard about Healthcare Everywhere, the AnMed Health Foundation's campaign to raise \$1.2 million for the purchase of a Mobile Diagnostic Unit, the Halls felt it was a perfect fit. Perhaps as the Halls both

"We really have a good hospital for our size county and we serve a lot of people outside of it."

come from families with newspaper backgrounds, they realize the importance of getting the word out on the street and into the community.

Bringing help to those who might otherwise not receive it appealed to Sherrill.

"I'm a long-time volunteer with the Anderson Free Clinic so that was one reason why we designated (our gift) to the Mobile Diagnostic Unit, because I really see the underserved part of the community, the uninsured," she said. "We learned about what the Foundation was hoping to accomplish with the unit and we sort of fit into that vision."

The MDU will provide breast cancer screening and education in the workplaces and neighborhoods of women who are not seeking care at traditional medical facilities. In addition, it would offer screenings for other health risks such as stroke, aortic aneurysm, peripheral arterial disease and bone density problems.

Sherrill is optimistic about reaching that goal much sooner than later, as Andersonians have a heart for philanthropy and help out wherever and whenever they're able.

"Most people are generous. If they can be, they will be," she said.

And just the mere presence of the Mobile Diagnostic Unit on the streets will help increase the community's health awareness in general, Tom said.

"One thing the mobile unit may do is, even if people don't use it, they'll see it and be reminded that they need to go have a check-up," Tom said. "They might think, 'I need to call my doctor. I need to check myself out.'"

Walking out onto the front porch, Sherrill noticed the sun trying to peek through the clouds and commented that it would be a good day to get out and clean up what the storm left behind.

"It feels good to finally be out of the rain," she said, a comment that seems to fit the reason she and her husband give in the first place.

Tim Self named executive director of Foundation

TIM SELF has been named the executive director of the AnMed Health Foundation in 2015 after former CEO and President Emeritus John Miller served on an interim basis for most of the year.

Self previously served as director of development for major gifts and planned giving at the University of Tennessee Medical Center and UT Graduate School of Medicine in Knoxville, Tennessee. Self successfully led the medical center's fundraising efforts for an \$11 million expansion of a Level III neonatal intensive care unit to serve the families of premature babies and sick infants.

Self has served as associate director of development and church relations at the Holston United Methodist Home for Children, manager of special events at the National Kidney Foundation and district executive for the Boy Scouts of America.

Self received his Bachelor of Arts in Political Science and Non-Profit Management from Maryville College and earned certification in healthcare philanthropy from the Association of Healthcare Philanthropy's Madison Institute at the University of Wisconsin.

He is an active member of the Association for Healthcare Philanthropy, Association of Fundraising Professionals and Smoky Mountain Planned Giving Council. He has been an active volunteer for the United Way, Chamber of Commerce, Keep Tennessee Beautiful and the children and youth ministry at St. John United Methodist Church in Maryville, Tennessee. Additionally, he is a nationally recognized trainer and executive coach for the world renowned Dale Carnegie course in effective communication and human relations.



Tim Self

The AnMed Health Foundation reached the mid-point of its goal to raise \$1.2 million to purchase a Mobile Diagnostic Unit to take mammography and other screenings to people who aren't able to go to a doctor's office for screenings.

\$500,000

The AnMed Health Foundation received a half-million-dollar grant from The Duke Endowment to address the need for more rural primary care physicians in the Upstate for the medical residency program.

347 people turned out to see nationally syndicated newspaper columnist Sharon Randall speak at an event that raised \$7,267 toward the Mobile Diagnostic Unit.

OUR MISSION

To inspire generous charitable giving that strengthens and sustains excellent healthcare through the AnMed Health System.

About The AnMed Health Foundation: Established as a 501(c)(3) organization in 1992, The AnMed Health Foundation develops fundraising opportunities in support of healthcare programs and services at AnMed Health. Areas of support are Camp Asthmania, Cancer Care Assistance Fund, Robert B. Claytor Patient Assistance Fund, Peggy G. Deane Nursing Professional Development Fund, DoLink, Employee Financial Assistance Fund, Freedom Link, Mobile Diagnostic Unit, Pediatric Therapy Works and Safe Kids.