



2018
ANNUAL REPORT



What's Inside

1

Foreword
Our relentless pursuit
of excellence

3

In One Day
At Atrium Health

5

Bringing the Best Together
Atrium Health + Navicent Health

7

First and Best
Achieving our vision
of excellence

15

Improve Health
Delivering world-
class clinical care

23

Elevate Hope
Bringing light to more lives

31

Advance Healing
Powering breakthroughs in
research and innovation

39

For All
Caring across our
community

49

Giving for Good
Advancing care through the
generosity of donors

53

Diversity and Inclusion
Providing care for all – by all

59

Key Stats
Leadership, facilities and
financial information

69

Awards and Recognition



Our Relentless Pursuit of Excellence

The healthcare field is undergoing rapid and fundamental transformation, accelerated almost daily by new entrants, mind-blowing technological advances and exponentially growing consumer expectations. 2018 clearly proved that standing still is not an option.

Against this ever-evolving backdrop, at Atrium Health, our Tree of Life remained firmly planted in the hearts of our communities while we continued our relentless pursuit of excellence.

Following a strong history of embracing change to better support the needs of our patients and communities, we began a new chapter for our organization and changed our name to Atrium Health. And this isn't just about a new name and a refreshed logo – it's about fostering a gathering ground where diverse thinkers come together and connections are made. It's about working in partnership with others to build something new. Most importantly, it's an opportunity to better more lives: to improve health, elevate hope and advance healing, for all.

Supporting this ambition and expanding beyond the Carolinas, we announced and closed the largest strategic combination in Atrium Health's history with Navicent Health in Macon, Ga.

Bringing our vision to life, more patients continued to select us for their care over any other health system in the region – more patients than ever before in our history. They chose us because we're committed to clinically excellent and compassionate care. They chose us because we open our arms to everyone, understanding that our responsibilities do not begin or end at the hospital door. They chose us because we help our communities heal – finding bright spots, instilling hope and amplifying new and life-changing work.

With this in mind, and as we envision a state-of-the art campus that is dedicated to specialty care, we announced the largest capital investment we've ever made – a more than \$1 billion commitment, so even more people can choose Atrium Health.

Recognized for excellence, we were named the #1 Military Friendly Employer in the nation, as well as a best employer for diversity, for new grads and for women by Forbes. In addition, Atrium Health was recognized by U.S. News & World Report, The Leapfrog Group and the American Nurses Credentialing Center as among the very best in the country, and honored by the American Hospital Association with the Equity of Care Award and one of the first-ever Quest for Quality honors.

Through innovative programs like Kids Eat Free, with Atrium Health University City serving as the first hospital in the state to offer free meals to children during the summer, to working in partnership with Healthy Cabarrus to conduct a community-based research study in one of our most vulnerable communities, all the way to expanding virtual and in-person care in many of our elementary schools – we shattered another Atrium Health record, providing more than \$2 billion, or \$5.6 million each and every day, in uncompensated care and other benefits to our community.

And from improving health as the first clinical trial site in the world to save a child's life through the use of a new medication that can stabilize blood pressure in life-threatening situations; to elevating hope by connecting our patients with food insecurities to available resources and support in the community; to advancing healing during a busy flu season through virtual care visits – together, we continued to spread our mission of FOR ALL in new and exciting ways.

All of these accomplishments are only possible thanks to the work of a dedicated team and the support of a passionate community. It's their tireless commitment, day after day, that helps us ensure our friends, family and neighbors have access to the world-class care they deserve. It's an honor to lead this extraordinary organization and my privilege to share with you our 2018 Annual Report. Enjoy!

sincerely

EUGENE A. WOODS
PRESIDENT AND CEO

In One Day at Atrium Health



37,800

patient encounters

(1 every 2 seconds)



700

home health visits



635

surgeries



\$5.67 million

each day in uncompensated care
and other benefits to our community



14,000

virtual care encounters



475

new primary
care patients



25,000

physician visits



91

babies delivered



3,900

ED visits



Bringing the Best Together

Atrium Health and Navicent Health team up to boost health across the region

As 2018 drew to a close, we kicked off an exciting new chapter in our legacy: joining together with Georgia-based Navicent Health to bring exceptional care to more communities.

As a result of the combination, Navicent Health has become a hub for Atrium Health in Central and South Georgia – keeping the local physician community strong, enhancing local access to advanced medical care, and boosting health for everyone we serve across the Southeast.

“This important milestone demonstrates our continued commitment to creating a personalized care experience for each and every patient and community we serve,” says Eugene A. Woods, president and CEO of Atrium Health.

Ninfa M. Saunders, president and CEO of Navicent Health, agrees. “The combination brings together two highly aligned healthcare systems with similar missions and cultures and promises to deliver enhanced levels of care throughout the region.”

The strategic combination builds on Navicent Health’s already extensive system of healthcare, including its nationally verified Level I trauma center, and increases support for its medical professionals. Working together, we’ll implement innovative treatment models like virtual care and telepsychiatry throughout central and south Georgia, creating the next generation of care for all we serve.

FIRST AND BEST

Achieving our vision
of excellence



Put to the Test

First septic shock treatment saves child's life at Levine Children's Hospital

In February 2018, Levine Children's Hospital (LCH) became the first clinical trial site in the world to test a new medicine for children that can stabilize their blood pressure in life-threatening situations.

For 8-year-old Lucas Judy, the timing couldn't have been more perfect.

Just weeks after LCH was approved to participate in the trial, Lucas had a deadly combination of influenza, pneumonia and a bacterial superinfection that caused him to go into septic shock. His blood pressure had dropped to dangerously low levels, and not even standard medications could maintain it.

Enter LJPC-501.

Developed by La Jolla Pharmaceutical Company, LJPC-501 was approved to treat

adults in shock with low blood pressure that doesn't respond to standard-of-care therapy. But it hadn't yet been tested in kids.

Lucas' condition fit the requirements for this investigational drug, and his family consented to his participation. Within three hours of taking LJPC-501, his condition stabilized.

"We believe we can save lots of lives with this therapy," says Dwight Bailey, DO, specialty medical director of pediatric critical care at LCH, who treated Lucas.

Thanks to LJPC-501, Lucas made a full recovery, and people like Dr. Bailey are helping make the study available to a larger population of kids around the world.





Opening New Pathways

Sanger Heart & Vascular Institute implants first-in-the-world stent

In 2018, we were proud to see the successful outcome of a surgical first from Sanger Heart & Vascular Institute: placing a new, never-before-used stent into a patient's vein.

The patient was suffering from deep vein obstruction, which happens when a blockage restricts blood flow in a vein, causing extreme pain and swelling.

When treatments like blood-thinning medication and clot removal aren't enough, doctors will insert a stent (or synthetic tube) to open the passageway. The problem? The stents normally used aren't as effective as they could be.

"They're actually created for other purposes," says Erin Murphy, MD, director of Sanger Heart & Vascular Institute's venous and lymphatic program, who performed the first-

in-the-world surgery with Gregory Stanley, MD, Sanger's fellowship director of vascular surgery. "But we use them because that's all we've had."

Thankfully, that may be changing. As part of an ongoing clinical trial, the Sanger team is investigating the effectiveness of the ABRE stent, a new stent specifically designed for deep veins. The hope is that the fit, flexibility and strength will vastly improve outcomes.

So far, that's proven true: Six months after the first-in-the-world surgery placing the ABRE stent, the patient was pain-free and had minimal swelling.

"We're hopeful that ABRE will be an improvement over current technology and will help veins stay open long-term," Dr. Murphy says.

A Strong Foundation

Musculoskeletal Institute launches, bringing subspecialty care together

One of our most exciting developments of 2018 was the formation of Atrium Health's Musculoskeletal Institute, which brings orthopedics, sports medicine and spine care under one umbrella.

Our team's vision is simple but bold: to enhance education, accelerate research and improve care by breaking down silos that surround traditional departments.

So far, we're off to a great start:

- In 2018, our orthopedic program was ranked one of the best in the nation by U.S. News & World Report.
- We're sought after for our expertise in limb-lengthening surgery, treatment for rare bone cancers and complex orthopedic surgery.

- Our orthopedic residency program – ranked 3rd in the Southeast by Doximity in 2018 – is attracting the most promising young doctors across the nation.
- Through innovative research, we're developing breakthrough treatments that will shape the future standard of care.

"We've brought together one of the nation's most comprehensive groups of subspecialists, united by the goal of collaborating to improve care," says Claude T. Moorman, III, MD, president of Musculoskeletal Institute. "This makes it easier for physicians to work together and evaluate patients from every angle to develop the best possible treatment plans."

We're excited to see what the future holds as we continue to build on this strong foundation.

“We’ve brought together one of the nation’s most comprehensive groups of subspecialists.”



IMPROVE HEALTH

Delivering world-class
clinical care



Art and Science

The right epilepsy treatment leads to a more vibrant life

Imagine having a blackout-causing, body-shaking seizure. Now imagine having hundreds and hundreds of them for years on end – sometimes three or more in a single day. This was Daniel's reality for most of his life, starting when he was diagnosed with epilepsy as a baby.

As a result, 27-year-old Daniel, who's also been diagnosed with autism, was constantly exhausted. And his caretakers – especially his family – were always on high alert. But despite their best efforts to treat Daniel, his seizures continued.

In 2012, Daniel was referred to Rajdeep Singh, MD, medical director for epilepsy and neurodiagnostics at our Neurosciences

Institute. Based on Daniel's history, Dr. Singh suggested adding a new medication to his regimen. He hoped that the carefully balanced combination would greatly reduce Daniel's seizures and improve his quality of life.

It worked better than anyone expected: As of 2018, Daniel has been seizure free for three years. "It's a whole new world, for him and for us," his mother, Elizabeth, says.

Instead of spending his time recovering, Daniel has the energy to enjoy his hobbies, like horseback riding and painting. Dr. Singh even has Daniel's artwork hanging in his office, serving as a daily reminder of the progress they've made together.

Pictured: A painting by Daniel



Back in the Game

With expert care and a clinical trial, teen scores a more active life

These days, you're likely to find Ben Aguallo out on the soccer field. But for the 14-year-old, the chance to be active hasn't always come so easy.

At 6, Ben was diagnosed by Levine Children's specialists with a rare genetic kidney disease. Called atypical hemolytic uremic syndrome, it commonly leads to kidney failure and even death.

With such a serious diagnosis, Ben's parents were eager to get him healthy again and back on the field. But at the time, there was no FDA-approved treatment for his condition. So, five times a week, he endured plasma exchange treatments to clean his blood – treatments that left him feeling sick and depleted.

When a new drug was approved, Ben's treatments were spaced out to every two weeks, and he started feeling better. Then, in 2018, his family got even happier news: Ben qualified to take part in a national clinical trial that could reduce his treatment visits from every two weeks to every two months.

Ben is the only Levine Children's patient in the study and just one of nearly 30 participating in the trial worldwide. His family is grateful to get advanced care at Levine Children's for such a rare disease – and he's happy the new trial is giving him more time and energy to do what he loves.

"With Ben, you wouldn't know there's anything wrong," says his mother, Beth. "He's like any other kid now."

“ He's like any other kid now. ”

Funding Big Discoveries

Major grants drive improvements in sickle cell disease care

People with sickle cell disease (SCD) often lack the support they need to cope with the chronic – and painful – inherited blood condition. But recently, the effort to improve SCD care and outcomes has gotten a tremendous boost.

In 2018, Levine Cancer Institute (LCI) worked on SCD-focused initiatives funded by two federal grants. The grants, totaling more than \$14 million, were awarded to impact SCD care across the Southeast region. As a principal investigator, Ifeyinwa Osunkwo, MD, MPH, is leading the efforts at LCI.

One of the grants – \$9.8 million from the Patient-Centered Outcomes Research Institute – aims to improve the challenging transition from pediatric to adult SCD care.

The second grant – \$4.3 million awarded by the U.S. Health Resources & Services Administration – is a collaboration among investigators across eight southeastern states. This grant is focused on increasing provider knowledge about SCD and equipping them with the tools to provide evidence-based care that's accessible to patients no matter where they live.

“We’re excited by the impact these two grants will have on improving access to care and quality of life for people living with sickle cell disease in our region,” says Edward Copelan, MD, chief of hematologic oncology at LCI.



ELEVATE HOPE

Bringing light to more lives



Braving the Storm

Teams band together in the face of Hurricane Florence

In September 2018, Hurricane Florence roared into the Carolinas, impacting multiple Atrium Health hospitals. The devastating storm hovered over the Carolina coast for two days, dropping more than 35 inches of rain and claiming more than 50 lives on its way to becoming one of the most damaging storms in U.S. history.

New Hanover Regional Medical Center, Columbus Regional Healthcare System, Southeastern Health and Scotland Heath Care System, all in Eastern North Carolina, bore the brunt of the storm. But by coming together, they were able to help each other – and help those in their communities who needed it most.

To get ready, the partners shared extra supplies, from food and oxygen to cots and medication – even breast milk. This sharing enabled each hospital to continue services for several days, even when they couldn't restock

supplies due to power outages and blocked roads.

The show of teamwork continued when locations across Atrium Health, including Carolinas HealthCare System Blue Ridge, sent additional nurses and respiratory therapists to New Hanover Regional Medical Center, whose own staff worked tirelessly for several days without leaving the hospital.

And in the wake of widespread post-Florence flooding that closed Pender County's local hospital, Atrium Health's Carolinas MED-1 mobile hospital rolled into town and set up shop in a local Family Dollar parking lot. The only open medical facility for more than 50 miles, MED-1 not only brought the community much-needed medical care, but had its first deployment that included a behavioral health specialist, who helped address people's emotional needs following the devastating storm.



The Power of Teamwork

Across Atrium Health, our teams joined hands to battle Hurricane Florence – and together, we made a big impact.



7,500

meal kits assembled by Atrium Health employees and sent to foodbanks on the coast



900

patients treated – including 3 surgeries and 2 births – at Atrium Health's Carolinas MED-1 mobile hospital deployed to Pender County, NC



419

free Virtual Visits given, allowing people in affected communities to get urgent medical care without leaving home or traveling in dangerous conditions



17

patients evacuated from the coast by MedCenter Air, Atrium Health's fleet of emergency transport aircraft



1 pound each

the weight of two premature infants, one 23 weeks and the other 25 weeks old, transferred from New Hanover Regional Medical Center to Levine Children's Hospital's NICU to ride out the storm



Against the Odds

Clinical trial gives more time – and more hope – in the battle against brain cancer

When 30-year-old Amanda Thomas was rushed to the hospital after a car accident in late 2017, she received unexpected and devastating news.

Doctors diagnosed her with H3 K27M mutant glioma – a rare brain cancer that’s notoriously difficult to treat. The outlook is usually grim, and doctors told her she might not have long to live.

It was understandably hard for Amanda and her loved ones to be positive. But Ashley Sumrall, MD, at Levine Cancer Institute, had hopeful news to share: Amanda qualified for a Phase II clinical trial of a drug that could give her more time, if not save her life.

The drug, called ONC201, aims to kill cancer cells by shutting down the pathways that help tumors grow. The treatment consists of a single pill, taken once weekly, that has no reported side effects.

Amanda started taking ONC201 in May 2018. Since then, she’s been able to enjoy life at home and do things she never would’ve imagined when she was first diagnosed, like writing and running around with her dog.

There’s still no cure for her brain cancer, but she and her care team are taking it day by day. And today, the goal is simple: to give Amanda more time to enjoy life, surrounded by the people she loves.

Up and Running

Mom soars from foot amputation to 5K in six months

What would life be like without one of her feet?

This thought consumed Jenn Andrews, a fitness buff and active mom, when she learned that she had cancer – a rare, life-threatening type of sarcoma – and it could only be cured by amputating her foot.

Jenn did all her favorite active things in the weeks before the surgery, but fear of the unknown was a constant companion.

Thankfully, when the amputation was over, she awoke in the recovery room with a deep sense of relief. Her foot was gone, but so was the cancer, and her future was whatever she wanted it to be.

From day one, Jenn gave her all in rehab.

“She’s very, very motivated,” says Will Freres, PT, her physical therapist at Atrium Health’s Carolinas Rehabilitation. “She came in and told me, ‘I’m running a 5K.’”

Freres and Jenn began with the basics. Before she could run, she needed to relearn how to walk with a prosthetic. Jenn’s work began with balance, then gait. Slowly, Freres’ sessions advanced from walking to running.

Just six months after her foot was amputated, Jenn ran her 5K, crossing the finish line with a smile of victory and a few tears.

“She came in and told me, ‘I’m running a 5K.’”



ADVANCE HEALING

Powering breakthroughs in
research and innovation



D is for Doctor

Innovative virtual clinic brings medical care to the classroom

Kids need frequent medical care, but that care isn't always easy to get. Barriers like a lack of transportation or parents' job schedules can make it hard for families to get their children to the doctor.

So to help ease the burden, we're bringing the doctor to them.

In 2018, we finished our first school year of providing virtual care at Graham Elementary School in Shelby, NC. Our pediatricians from Levine Children's Shelby Children's Clinic partnered with Cleveland County Public Health Center and Cleveland County Schools to embed a virtual clinic at the school, where our doctors connect with an on-site nurse to diagnose and treat everything from asthma and pink eye to stomach bugs and strep throat.

The virtual care program was recently recognized by the North Carolina GlaxoSmithKline Foundation as an innovative, sustainable approach to child health – and one that's delivering real results. On top of decreasing unneeded visits to the emergency room, the program has cut the number of illness-related school absences in half.

The virtual clinic model has since expanded to other schools across Cleveland County, bringing easier care access to even more of our community's kids. And thanks to \$750,000 in grant funding from Blue Cross and Blue Shield of North Carolina to support the program, it's poised to make an even greater impact.

Virtual Victories

2018 brought an array of new programs and fresh successes in the realm of virtual care.



26,000

admissions to our virtual ICU, which offers around-the-clock, real-time monitoring of patients needing critical care



9,600

Virtual Visits – live, face-to-face video visits with medical professionals, available 24/7 for minor illnesses



57 minutes

the 2018 door-to-needle time of our Telestroke network, beating the national average of 60 minutes. Telestroke offers fast access to neurologists with critical stroke expertise



6

hospitals piloting Atrium Health's Perfect Care initiative, a grant-funded virtual program aiming to eliminate disparities in follow-up heart care after surgery



100+

Atrium Health locations offering virtual behavioral health services



15,600

patients treated with virtual behavioral health services



2 out of 3

patients receiving virtual behavioral health services showed a 50% reduction in anxiety



On Target

Precision medicine fine-tunes the fight against cancer

For Allyson Boodram, MD – a healthy 40-year-old doctor who worked out, ate well and didn’t smoke – the diagnosis came as a complete surprise. She had stage 4 lung cancer, and it had spread to other areas of her body.

Not long ago, a stage 4 lung cancer diagnosis would have guaranteed a drastic cut in life expectancy. But thanks to a pill approved just a few years ago by the FDA, Dr. Boodram’s now showing near-miraculous signs of improvement.

Called osimertinib, the pill is a precision-medicine drug first tested as part of a clinical trial offered at Levine Cancer Institute. A highly tailored treatment approach, precision medicine enables doctors to target a specific genetic mutation within a tumor.

“Osimertinib has been shown to reduce the risk of cancer progression by more than half,” says Kathryn Mileham, MD, FACP, Levine Cancer Institute’s chief of thoracic medical oncology and Dr. Boodram’s primary oncologist. “It also provides benefit in the central nervous system, both treating brain metastasis and delaying progression to the brain. This is game-changing.”

Mere months after her initial diagnosis, her scans revealed that the large mass in her chest was dissolving and the cancer nodules that had spread throughout her body were nearly gone.

“Going through this has given me hope,” says Dr. Boodram, “that you can beat the odds when dealt something like this.”

Pictured: Dr Boodram (left) with her oncologist

Combating a Crisis

First-of-its-kind technology helps curb the opioid epidemic

Every day, our healthcare providers see the devastating consequences of America's opioid crisis firsthand. We've stepped up as a national leader in tackling the epidemic, and in 2018, we continued to make great strides.

PRIMUM (Prescription Reporting with Immediate Medication Utilization Mapping), our first-of-its-kind alert system, is helping healthcare providers recognize patients who may be at risk for opioid misuse. After three years of live use, the system has identified risk factors in 1 in 4 patients – ultimately preventing more than 43,000 high-risk prescriptions for controlled substances across our system.

“We designed PRIMUM not just for Atrium Health, but for other health professionals as well,” says Joseph Hsu, MD, vice chair of quality for Atrium Health's Musculoskeletal

Institute. “The tool is extremely versatile – it can integrate easily within many different electronic health records and care settings. If more hospital systems adopted PRIMUM, it would dramatically reduce the number of opioid prescriptions given to high-risk patients. This could turn the tide of the U.S. opioid crisis over time.”

We're not just preventing high-risk opioid prescriptions. We're continuing to tackle the opioid crisis from all angles, including:

- Supporting mothers and babies with opioid use disorders
- Decreasing opioid use for cancer pain
- Reducing opioid dependency in patients with sickle cell disease
- Treating opioid addiction with behavioral health support

“If more hospitals adopted this, it would dramatically reduce the number of high-risk opioid prescriptions.”



FOR ALL

Caring across our community



Boosting Health Beyond Our Walls

A look at our community impact in 2018

Giving as one



45,000+

hours volunteered in service projects by Atrium Health employees



\$3.6 million

contributed by Atrium Health employees to charitable organizations and other community-based entities

Supporting our community



64,000

interactions with our Community Resource Hub, a platform connecting community members to free or low-cost social services



4,400+

people received over-the-counter medications through our mobile pharmacies



\$2.8 million

received in grants to fund programs to improve the health of our communities

Making an impact



To have the greatest impact on our community's health, we focus our efforts in 5 areas:

- Access to care
- Obesity
- Mental health
- Tobacco use
- Social and economic disparities

Strengthening child health



2,600+

free screenings performed at Heart of a Champion Day, a health screening program for high school student-athletes

— \$2,000 in-kind value per screening



13,000+

students across 26 schools participating in Healthy Together, Atrium Health's evidence-based childhood obesity prevention program

Fighting hunger

In partnership with Second Harvest Food Bank of Metrolina:



2,200+

families received groceries at 12 locations across 3 counties



110,000+

meals prepared for children in 19 counties

For more about our community benefit contributions, **see page 68.**

Cutting the Stigma

Barbers trained to spot signs of mental health crises

Damien Johnson, owner and operator of Charlotte's No Grease Barber School, knows firsthand how mental illness impacts his clients. Damien says he hears stories day in and day out of men struggling – not with bills or relationships, but with substance use, depression and thoughts of suicide.

“As men, they don’t readily share these struggles,” says Damien. “But when they sit down in a barber chair, it’s a safe place where they feel comfortable telling it all.”

Damien wanted to offer his clients better support, so he jumped at the opportunity to connect with Atrium Health’s Mental Health First Aid (MHFA) initiative. The evidence-based, eight-hour course teaches participants

how to identify, understand and respond to signs of mental illness. Since launching the program, we’ve trained more than 15,000 people in MHFA.

After sitting in on a class, Damien realized it was a great partnership opportunity to provide training to students who are preparing to become barbers and hairstylists.

By the end of 2018, we’d trained more than two dozen No Grease barbers in MHFA, with more classes planned. The free course is now a part of No Grease’s curriculum, helping barbers recognize mental distress and get clients the support and resources they need.

**“ When they sit down in a barber chair, ”
it’s a safe place.**





Joining Forces for Health

Collaboration brings new resources to communities in need

We believe in bringing health to every corner of the communities we serve – and we know we can do more when we work together. In 2018, we proudly formed and strengthened partnerships that enabled us to make an even bigger impact.

In January, we launched our Community Resource Hub, which connects Atrium Health providers, social workers and Charlotte community members to organizations that offer free or reduced-cost social services, including legal assistance, transportation, housing and food.

For the launch, we partnered with 15 local organizations, allowing partners and providers to refer users to facilities and programs that meet individualized needs.

As the official community health partner of the YMCA of Greater Charlotte, we opened a

practice in the newly renovated Dowd YMCA, located just outside Uptown Charlotte. The practice offers rehabilitation, primary and on-demand care.

The new location not only supports wellness – it improves access to care. A quarter of the Dowd YMCA's 16,000 members earn an annual income of less than \$20,000. And like all our primary care practices, the Dowd YMCA office treats patients regardless of their ability to pay.

We remain dedicated to providing better access to services that reduce healthcare barriers. And together with our partners, we're able to extend care beyond our walls to improve health – and improve lives – in more places.

Happy, Healthy and Full

Summer meal program helps curb childhood hunger

In Mecklenburg County, over 165,000 people lived with food insecurity in 2018. More than a quarter of those people were kids. During the school year, many children get free or reduced-cost meals. But what do they do when summer arrives?

In 2018, Atrium Health University City launched its Kids Eat Free program, making it the first hospital in North Carolina to offer free meals to children all summer long.

“This program is designed to prevent children from experiencing hunger during the summer months when schools are closed,” says Elaine Jones, RDN, LDN, clinical nutrition manager at Atrium Health University City.

A driving force behind Kids Eat Free, Jones helped serve nearly 3,500 meals in 2018 – and was recognized by both the Charlotte-Mecklenburg Police Department and No Kid Hungry for her work.

Cooked by our food-services partner Sodexo, the meals follow USDA nutrition guidelines, but the program serves up more than healthy, hot meals. With community and state partners, Kids Eat Free also offers learning activities to help kids enrich their minds as much as their bodies, even when school is out.



GIVING FOR GOOD

Advancing care through the
generosity of donors





Gifts That Keep on Giving

Philanthropic gifts advance care for our patients and community

We're grateful to benefit from the generosity of so many people in our communities and beyond. This year, we celebrated the opening of a MIBG radiation therapy suite at Levine Children's Hospital, allowing children with rare tumors to get the advanced care they need right in Charlotte. This room is part of a **\$5 million commitment from the Isabella Santos Foundation** to create the Isabella Santos Foundation Rare and Solid Tumor Program.

Also this year, Atrium Health received:

- **\$1.8 million** from the Duke Endowment to support community health initiatives
- **\$1 million** from a grateful patient's family to create the Richard L. White, MD, Distinguished Chair in Surgical Oncology
- **\$750,000** from the HEARTest Yard, founded by Greg and Kara Olsen, for pediatric cardiology programs
- **\$500,000** from the Britton Foundation and **\$500,000** from Celgene to fund myeloma research
- **\$300,000** from the estate of former Atrium Health and Atrium Health Foundation board member Rusty Goode

Pictured: The MIBG therapy suite at Levine Children's Hospital

DIVERSITY AND INCLUSION

Providing care for all – by all



Our Diversity Agenda

For All

PATIENTS | TEAMMATES | COMMUNITY

The Diversity Agenda is the framework through which diversity initiatives are developed and implemented throughout Atrium Health.

Patients come first

Effectively provide care that responds to the unique needs of every patient

Teammates are the key

Promote diversity, engage teammates and help them grow, together

Every community matters

Develop lasting partnerships that support diverse and at-risk communities

The Aim for Equity

Data powers the quest to dismantle health disparities

The discovery was concerning: Colorectal cancer screening rates among our Hispanic and Latino male patients were lower than other groups. So in 2018, we set out to enhance their rates of screening and close the gap.

But how did we know? It's all thanks to our Demographic Data Wall – an electronic scorecard that includes selected population health, quality and clinical outcome measures, along with teammate and patient experience data. The dashboard groups the data by race, ethnicity, gender and location. The data wall helps illuminate existing disparities that might otherwise go unnoticed – and gives us the opportunity

to turn things around. The impact of our data wall, along with other efforts aimed at reducing healthcare disparities, garnered an Equity of Care award from the American Hospital Association – and we were just one of four honorees nationwide to receive this recognition.

Beyond gathering this assortment of information, we've also updated our intake systems to collect sexual orientation and gender identity (SOGI) data, further bolstering our ability to provide culturally competent care to patients from every background.

“By being able to stratify data by race, ethnicity, gender and location, we can monitor trends and proactively address them in ways that directly improve the health of all of our patients.”

– Kinneil Coltman, Chief Diversity Officer

Diversity and Inclusion

An Inside Look at 2018



Committed

to continue our work under the American Hospital Association Equity of Care Pledge by:

- Increasing collection of race, ethnicity and language preference data
- Increasing cultural competency training and education
- Increasing diversity in leadership and governance
- Enhancing community engagement and partnerships



3,800

teammates involved in Atrium Health system resource groups designed to engage and develop teammates from diverse backgrounds



873

teammates attended Atrium Health's Diversity Symposium, an annual learning forum attracting some of the nation's foremost experts in diversity and inclusion



7,500

metro-area employees, 55% of them people of color, impacted by our hourly minimum wage increase from \$11.50 to \$12.50



4 in 10

executive positions at Atrium Health (vice president and above) occupied by women by the end of 2018



19,800+

teammates who have completed cultural competency education since 2015



Launched scholarship

and work-flexibility program for certified nurse aides to become registered nurses



In support of our LGBTQ teammates, we hosted our first teammate pride celebration in 2018 – and over 100 teammates participated in Charlotte's annual pride parade, making us truly #AtriumHealthProud.

KEY STATS

Leadership, facilities and
financial information



Atrium Health Leaders



Eugene A. Woods, MBA, MHA, FACHE
President and Chief Executive Officer



Anthony C. DeFurio, MBA, MHA
Executive Vice President and Chief Financial Officer



Jim Dunn, PhD, DHA, DAST, FACHE
Executive Vice President and System Chief Human Resources Officer



Ken D. Haynes, MBA, MHA, FACHE
Executive Vice President and Chief Operating Officer



Carol A. Lovin, MHSA, MN
Executive Vice President, Chief Integration Officer and System Chief of Staff



Scott Rissmiller, MD
Executive Vice President and Chief Physician Executive



Rasu B. Shrestha, MD, MBA
Executive Vice President and Chief Strategy Officer



Keith A. Smith, JD
Executive Vice President and General Counsel



Armando L. Chardiet, MSW
President of Atrium Health Foundation



Ninfa M. Saunders, DHA, FACHE, MSN, MBA, RN
President and Chief Executive Officer, Navicent Health

**This list includes the names of leaders serving the organization as of July 1, 2019.*

Board of Commissioners and Board of Advisors

EXECUTIVE COMMITTEE

- Edward J. Brown III, Chair
- Malcom E. Everett III, First Vice Chair
- William C. Cannon, Jr., Vice Chair
- Vicki S. Sutton, Vice Chair
- Gracie P. Coleman, Vice Chair and Secretary
- Albert L. McAulay, Jr.
- Thomas C. Nelson
- Eugene A. Woods

BOARD OF COMMISSIONERS

- Donnie R. Baucom
- Amy Woods Brinkley
- Marshall Carlson
- Michael R. Coltrane
- Rush S. Dickson III
- Sanford Duke, M.D.*
- Nancy J. Gritter, M.D.
- May Beverly Hemby
- Hal A. Levinson
- James E. Mattei
- Thomas C. Nelson
- William T. Niblock
- Edward K. Prewitt, Jr.
- Michael D. Rucker
- J.W. “Bill” Tillett*
- Angelique R. Vincent-Hamacher
- Donaldson G. Williams
- Richard “Stick” Williams
- Ronald H. Wrenn

BOARD OF ADVISORS

- Felicia Hall Allen
- Charles F. Bowman
- Swati V. Daji
- Pamela S. Lewis Davies, Ph.D.
- G. Bryon Gragg
- Mark E. Reed

**This list includes the names of board members who were in office as of December 31, 2018, except for these two who were added February 5, 2019.*

2019 Facilities & Locations

69,800+
Teammates

50
Hospitals*

44
Urgent Care Locations

45
EDs

25
Cancer Care Locations

3,705+
Physicians

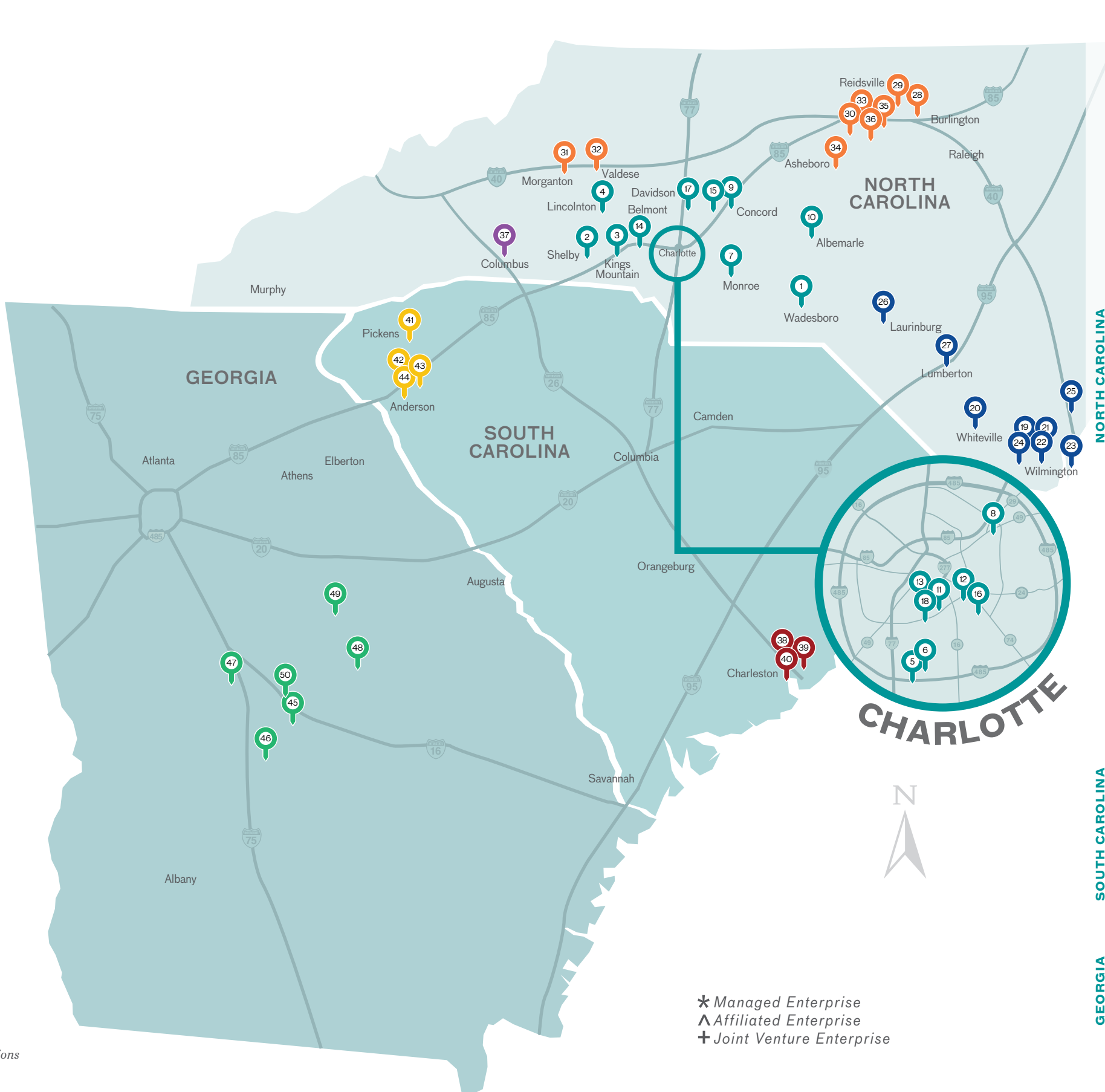
17,000+
Nurses

\$11.1 Billion
Net Operating Revenue**

\$2.9 billion
In last 5 years

Invested into renovations, new care locations, equipment upgrades and other capital projects

*Includes Joint Venture and Affiliated Enterprises
**As of January 1, 2019, includes Central Georgia locations



- CHARLOTTE**
1. Atrium Health Anson
 2. Atrium Health Cleveland
 3. Atrium Health Kings Mountain
 4. Atrium Health Lincoln
 5. Atrium Health Pineville
 6. Atrium Health Pineville Rehabilitation Hospital
 7. Atrium Health Union
 8. Atrium Health University City
 9. Carolinas HealthCare System NorthEast
 10. Carolinas HealthCare System Stanly
 11. Atrium Health's Carolinas Medical Center
 12. Carolinas Medical Center-Mercy
 13. Carolinas Rehabilitation
 14. Carolinas Rehabilitation-Mt. Holly
 15. Carolinas Rehabilitation-NorthEast
 16. CHS Behavioral Health-Charlotte
 17. CHS Behavioral Health-Davidson
 18. Levine Children's Hospital
- COASTAL**
19. Betty H. Cameron Women's and Children's Hospital^
 20. Columbus Regional Healthcare System*
 21. New Hanover Regional Medical Center^
 22. New Hanover Regional Medical Center Behavioral Health^
 23. New Hanover Regional Orthopedic Hospital^
 24. New Hanover Regional Rehabilitation Hospital^
 25. Pender Memorial Hospital^
 26. Scotland Memorial Hospital*
 27. Southeastern Regional Medical Center^
- TRIAD**
28. Alamance Regional Medical Center (Cone Health)*
 29. Annie Penn Hospital*
 30. Behavioral Health Hospital (Cone Health)*
 31. CHS Blue Ridge-Morganton*
 32. CHS Blue Ridge-Valdese*
 33. Moses H. Cone Memorial Hospital (Cone Health)*
 34. Randolph Hospital*
 35. Wesley Long Hospital*
 36. Women's Hospital (Cone Health)*
- WESTERN**
37. St. Luke's Hospital*
- LOW COUNTRY**
38. Bon Secours/St. Francis Hospital*
 39. Mount Pleasant Hospital*
 40. Roper Hospital*
- UPSTATE**
41. AnMed Health Cannon*
 42. AnMed Health Medical Center*
 43. AnMed Health Rehabilitation Hospital*
 44. AnMed Health Women's and Children's Hospital*
- CENTRAL**
45. The Medical Center, Navicent Health
 46. Medical Center of Peach County (Navicent Health)
 47. Monroe County Hospital (Navicent Health)*
 48. Navicent Health Baldwin
 49. Putnam General Hospital (Navicent Health)*
 50. Rehabilitation Hospital, Navicent Health

* Managed Enterprise
^ Affiliated Enterprise
+ Joint Venture Enterprise

Our Locations

NORTH CAROLINA

CHARLOTTE

Atrium Health Anson
Michael J. Lutes, MHA
President

Atrium Health Cleveland
Atrium Health Kings Mountain
Brian D. Gwyn, MBA
President

Atrium Health Lincoln
Peter W. Acker, MHA, FACHE
President

Atrium Health Pineville
Christopher R. Hummer, MHA
President, Atrium Health Pineville
Senior Vice President, Southern Division

Atrlum Health Union
• Jesse Helms Nursing Center
Michael J. Lutes, MHA
President, Atrium Health Union
Senior Vice President, Southeastern Division

Atrium Health University City
William H. Leonard, MHA, FACHE
President

Cabarrus College of Health Sciences
Dianne O. Snyder, BSN, MSN, DHA
Chancellor

Carolinas College of Health Sciences
T. Hampton Hopkins, BS, MS, EdD
President

Carolinas HealthCare System Behavioral Health, a facility of Carolinas Medical Center
• Charlotte Campus
• Mindy Ellen Levine Campus (Davidson, NC)
Martha Whitecotton, MSN, RN, FACHE
Senior Vice President

Carolinas HealthCare System NorthEast
Phyllis A. Wingate, MHA, FACHE
President, Carolinas HealthCare System NorthEast
Senior Vice President, Northern Division

Carolinas HealthCare System Stanly
• Stanly Manor
Brian L. Freeman, MHA, FACHE
President & Chief Executive Officer

Carolinas Medical Center
Chris Bowe
Interim President, Carolinas Medical Center
Vice President, Central Division

Vicki Block, MHA
President, Central Division
Effective March 27, 2019

Carolinas Medical Center-Mercy
D. Channing Roush, MHA
Vice President & Facility Executive

Carolinas Rehabilitation
• Carolinas Rehabilitation
• Carolinas Rehabilitation-Mount Holly
• Carolinas Rehabilitation-NorthEast
• Atrium Health Pineville Rehabilitation Hospital
Robert G. Larrison Jr., MBA, FACHE
President

Cleveland Pines Nursing Center
Brad Myers, MA, LNHA
Executive Director

Continuing Care Services
• Healthy@Home
 - Home Health
 - Home Medical Equipment
 - Home Infusion
• Hospice & Palliative Care Network
• Skilled Nursing Facilities
• Sleep Services
• Pain Services
• YMCA, Sports and Event Medicine
Collin H. Lane, MSPH, MHA
Senior Vice President

Huntersville Oaks
Scharee Majeed, MHA, NHA
Executive Director

James G. Cannon Research Center
George L. McLendon, PhD
Vice President, Research

Levine Children’s Hospital
Callie F. Dobbins, MSN, RN
Vice President & Facility Executive

Sardis Oaks
Colin C. Clode, NHA
Executive Director

NORTH CAROLINA

COASTAL

Columbus Regional Healthcare System
John Young
President & Chief Executive Officer

New Hanover Regional Medical Center
• Behavioral Health Hospital
• Betty H. Cameron Women’s & Children’s Hospital
• New Hanover Regional Medical Center
• New Hanover Regional Medical Center Orthopedic Hospital
• New Hanover Regional Medical Center Rehabilitation Hospital
• Pender Memorial Hospital
John Gizdic
President & Chief Executive Officer

Scotland Health Care System
• Scotland Memorial Hospital
Gregory C. Wood, FACHE
President & Chief Executive Officer

Southeastern Health
• Southeastern Regional Medical Center
Joann Anderson, MSN, FACHE
President & Chief Executive Officer

TRIAD

Carolinas HealthCare System Blue Ridge
• Carolinas HealthCare System Blue Ridge-Morganton
• Carolinas HealthCare System Blue Ridge-Valdese
• Carolinas HealthCare System Blue Ridge-College Pines
• Carolinas HealthCare System Blue Ridge-Grace Heights
• Grace Ridge Retirement Community
Kathy C. Bailey, FACHE
President & Chief Executive Officer

Cone Health
• Alamance Regional Medical Center
• Annie Penn Hospital
• Behavioral Health Hospital
• Edgewood Place at The Village at Brookwood
• Moses H. Cone Memorial Hospital
• Wesley Long Hospital
• Women’s Hospital
• Penn Nursing Center
Terrence B. Akin
Chief Executive Officer

WESTERN

St. Luke’s Hospital
David L. Pope, JD, MHA
Interim Chief Executive Officer

Michelle Fortune, MBA, BSN, RN, CAPA, FACHE
Chief Executive Officer
Effective March 4, 2019

LOW COUNTRY

Roper St. Francis Healthcare
• Bon Secours St. Francis Hospital
• Roper St. Francis Mount Pleasant Hospital
• Roper Hospital
• Roper Rehabilitation Hospital
Lorraine L. Lutton, FACHE
President & Chief Executive Officer

UPSTATE

AnMed Health
• AnMed Health Medical Center
• AnMed Health Rehabilitation Hospital
• AnMed Health Women’s and Children’s Hospital
• Elbert Memorial Hospital
William T. Manson III, FACHE
Chief Executive Officer

AnMed Health Cannon
Brandon P. Clary, MHA
President & Chief Executive Officer

CENTRAL

Navicent Health
• Carlyle Place
• Medical Center of Peach County
• Monroe County Hospital
• Navicent Health Baldwin
• Pine Pointe Hospice Navicent Health
• Putnam General Hospital
• Rehabilitation Hospital Navicent Health
• The Medical Center, Navicent Health
Ninfa Saunders, DHA, FACHE
President & Chief Executive Officer

SOUTH CAROLINA

GEORGIA

Financial Information

Total Enterprise

Schedule of Income and Expenses for the Year Ended December 31, 2018
(dollars in thousands)

	Primary Enterprise and Atrium Health Foundation ^A		Regional Enterprise ^B		Total Enterprise	
	DOLLAR TOTAL	PERCENTAGE OF TOTAL	DOLLAR TOTAL	PERCENTAGE OF TOTAL	DOLLAR TOTAL	PERCENTAGE OF TOTAL
Total Operating Revenues						
Tertiary & Acute Care Services	4,409,797	71%	3,110,090	76%	7,519,887	74%
Continuing Care Services	211,281	3%	138,349	3%	349,630	3%
Specialty Services	80,940	1%	110,127	3%	191,067	2%
Physicians' Services	1,166,564	19%	537,118	13%	1,703,682	16%
Other Services	349,906	6%	218,381	5%	568,287	5%
TOTAL	6,218,488	100%	4,114,065	100%	10,332,553	100%

	Primary Enterprise and Atrium Health Foundation ^A		Regional Enterprise ^B		Total Enterprise	
	DOLLAR TOTAL	PERCENTAGE OF TOTAL	DOLLAR TOTAL	PERCENTAGE OF TOTAL	DOLLAR TOTAL	PERCENTAGE OF TOTAL
Total Operating Expenses						
Wages, Salaries & Benefits	3,509,304	59%	2,114,428	53%	5,623,732	56%
Materials, Supplies & Other	2,074,266	35%	1,622,461	40%	3,696,727	37%
Depreciation & Amortization	326,565	5%	259,669	6%	586,234	6%
Financing Costs	77,454	1%	47,827	1%	125,281	1%
TOTAL	5,987,589	100%	4,044,385	100%	10,031,974	100%

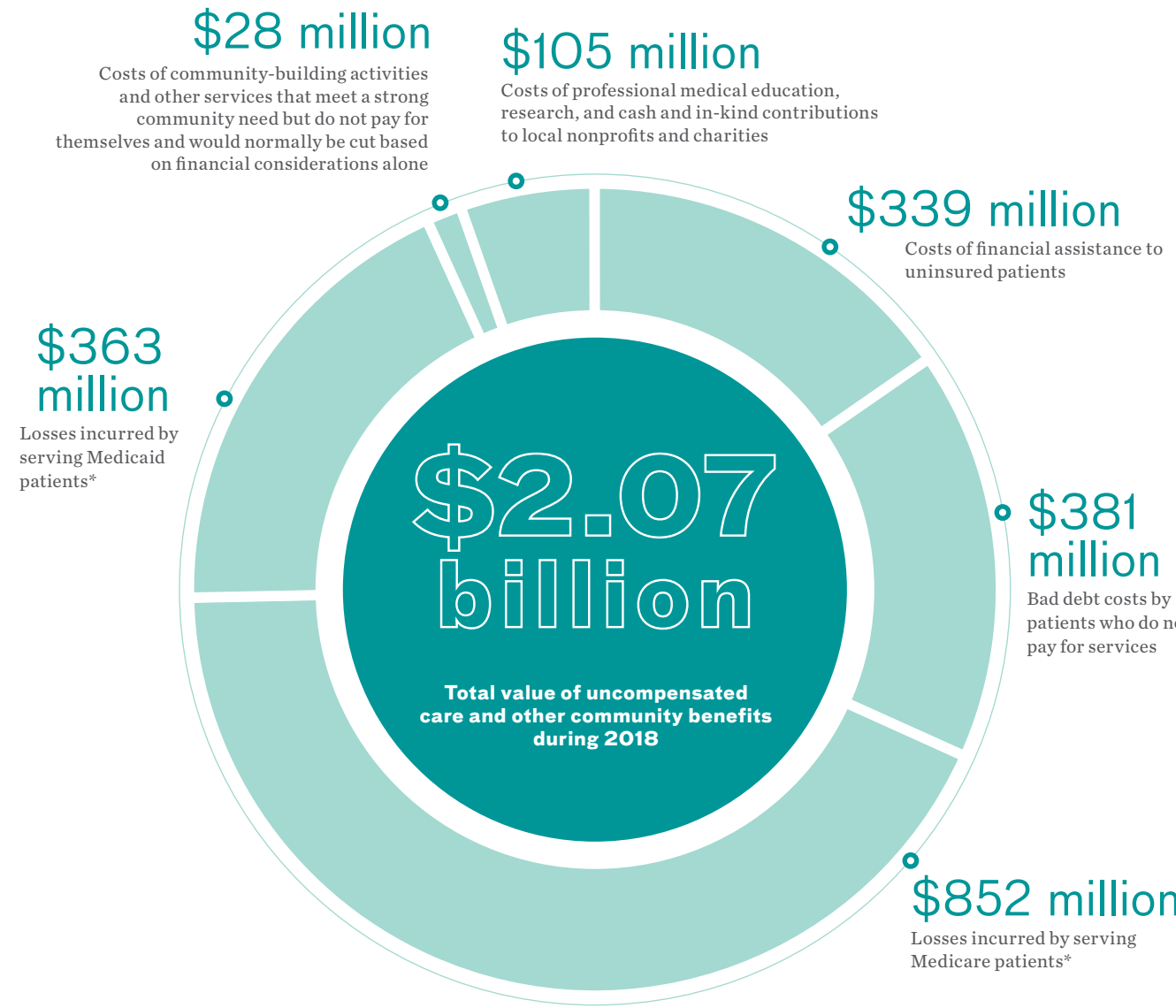
Operating Revenues less Operating Expenses	230,899		69,680		300,579	
Non-Operating (Loss) Income ^C	(338,830)		9,144		(329,686)	
Net Results	(107,931)		78,824		(29,107)	

^A Only the Primary Enterprise and Atrium Health Foundation, collectively known as the Obligated Group, have a direct obligation to pay amounts due with respect to Atrium Health bonds.

^B Regional Enterprise includes all Atrium Health managed facilities.

^C Consists primarily of investment results including realized and unrealized gains and losses.

2018 Community Benefit



20.7% Total value of uncompensated care and other community benefits as a percentage of operating expenses

*Medicare and Medicaid programs do not reimburse hospitals in a manner that compensates for the actual cost of treating their beneficiaries. Hospitals cannot turn these patients away or negotiate higher reimbursements. Government payers recognize this fact and expect hospitals to make up the difference through efficiencies and from other revenue sources. The financing of this unpaid government debt is considered a community benefit.

**Data included in the table above is unaudited as it is inclusive of the Atrium Health Total Enterprise.

AWARDS AND RECOGNITIONS



