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Q3 2025 | V 19 NO. 3

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## AI WITH INTEGRITY

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## AT A MOMENT'S NOTICE

Strategies for effective emergency response planning

## FROM INSIGHT TO ACTION

Improving physicians' performance with SurgIntel



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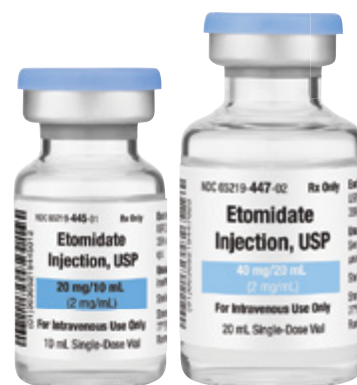
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<b>Award</b>	Private Label	Sole Award	Sole Award
<b>Description</b>	Single Dose Vial	Single Dose Vial	Single Dose Vial
<b>Strength</b>	20 mg per 10 mL	20 mg per 10 mL	40 mg per 20 mL
<b>Concentration</b>	2 mg per mL	2 mg per mL	2 mg per mL
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Clinicians and staff within HealthTrust member facilities are invited to share their expertise as part of upcoming stories. Readers are also invited to suggest other experts for interviews or article ideas for publication consideration. Preference is given to topics that represent:

- \* Performance improvement or clinical initiatives that exemplify industry best practices
- \* Innovation, new technology, insights from data and analytics
- \* Positive impacts to cost, quality, outcomes and/or the patient experience
- \* Physician Advisor expertise

Contact Faye Porter at [faye.porter@healthtrustpg.com](mailto:faye.porter@healthtrustpg.com) with suggestions. (Note: HealthTrust reserves the right to edit all articles and information accepted for publication.)

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### AT A MOMENT'S NOTICE

Strategies for effective emergency response planning.

HealthTrust Performance Group (HealthTrust) is a healthcare performance improvement organization owned and operated by health systems and dedicated to strengthening provider performance and clinical excellence through an aligned membership model and advisory solutions that leverage expertise, scale and innovation. Headquartered in Nashville, Tennessee, HealthTrust serves approximately 1,800 hospitals and health systems in the U.S. and the United Kingdom, and more than 85,000 non-acute sites of care, including ambulatory surgery centers, physician practices, long-term care and alternate care sites. HealthTrust has been recognized as a Top Workplace in Middle Tennessee for three consecutive years.

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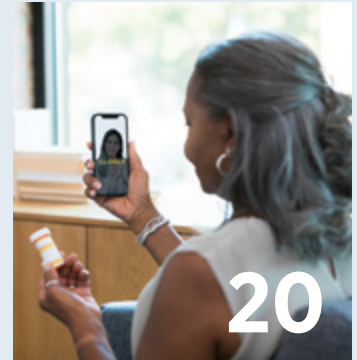
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## PUBLISHER

**Ed Jones**  
President/CEO

## EXECUTIVE PUBLISHER & EDITOR-AT-LARGE

**Lisa Garman**  
VP, Marketing & Communications

## EXECUTIVE EDITOR

**Faye Porter**  
Director, Member Education & Communications, Marketing

## MANAGING EDITOR

**Shellie Meeks**  
Senior Manager, Member Education & Communications, Marketing

## EDITORIAL & CREATIVE SERVICES

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## CEO perspective

# Greater Resolve & Innovation for Tomorrow

**In healthcare, grit is part of our DNA.** We become used to expecting the unexpected. And, we have summoned grit countless times throughout the years to meet challenges head-on. Such is the inspiration for this year's HealthTrust University Conference (HTU), with a slightly different definition: **Greater Resolve & Innovation for Tomorrow.**

Throughout our 26-year history, there have been a number of pivotal events, running the gamut from industry and global disruptions to natural disasters. All have revealed the need to create blueprints that prioritize risk mitigation, paving the way for future event response that finds us even better prepared.

As an organization, HealthTrust takes seriously our commitment to empowering healthcare systems to dutifully execute on their missions of delivering quality patient care both during crisis and emergency response, or when it's business as usual.

## MAXIMIZING YOUR MEMBERSHIP

If you are attending HTU in San Antonio, I invite you to visit the HealthTrust Village in the exhibit hall and talk with our team about how you can leverage our operator expertise to optimize outcomes and improve performance across your organization. For those not attending HTU, please contact your HealthTrust Account Manager to make sure this is the topic of your next conversation.

## IN THIS ISSUE

Over the course of the last 19 years, *The Source* has been proud to share member best practices and innovation throughout its pages in hopes that the solutions offered can spark discussion or maybe help your health system better navigate a particular issue. For Q3, consider these articles about:

► **Surviving M&As** | Mergers and acquisitions are on the rise as organizations seek to enhance care delivery, expand access and drive down costs. Delivering on the value of an M&A requires a strategic focus on operational efficiency and supply chain optimization. Beginning on page 12, Vice Presidents **Rick Phillips** (Advisory Services) and **Alia Schmidt** (GPO Implementations) share their views on how to use scale to fully realize the value of a merger or acquisition.

- **A bold business decision** | 15 years ago, HealthTrust opened its global sourcing office in Shanghai. Beginning on page 63, Vice Presidents **Roz Holloway** (Global Sourcing) and **Jenny Lu** (Asia Sourcing) reflect on the impact of the China team, including their help in navigating tariffs, stockouts and manufacturing shifts.
- **Responsible use of AI** | Hear from HCA Healthcare's **Michael Schlosser**, M.D., MBA, who leads the Digital Transformation & Innovation (DT&I) team. Starting on page 34, see how the organization is assessing all aspects of patient care and hospital operations to determine areas that could benefit from the vast potential of AI.
- **Controlling unnecessary variation** | Starting on page 28, MDM Vice President **Chris Stewart** and Assistant Vice President **Drew Torres** explain how HealthTrust's award-winning platform, SurgIntel, delivers an industry-differentiating approach to medical device management through cost transparency, provider alignment, clinical and financial variation reduction, and key service line performance indicators.



Ed Jones  
President/CEO,  
HealthTrust Performance Group  
Publisher, *The Source* magazine

Together with our member and supplier partners, we look forward to navigating the complex healthcare landscape with even greater resolve and innovation for tomorrow. As always, thank you for your trust in us. ●



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## Actionable Insights

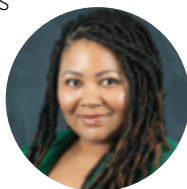
*Driving pharmacy financial transparency*

A regional, nonprofit network with more than 1,400 staffed beds across seven hospitals recognized that pharmacy services represented a significant opportunity—not only for supply expense management, but for broader strategic alignment across the enterprise. While there were efforts already in motion, leadership sought to go further. They engaged HealthTrust’s Pharmacy Solutions team to help transform the way their pharmacy department approached financial transparency, operational efficiency and long-term sustainability.

### THE OPPORTUNITY

The network’s pharmacy leadership team had already made strides in key areas, but like many integrated delivery networks (IDNs), they were seeking a clearer, more holistic view of their financial operations. Gaining that level of transparency is no small feat, especially when trying to align pharmacy data with how the C-suite interprets systemwide performance.

“Financial transparency is being able to articulate every aspect of a service line’s performance—from expenditures and reimbursements to savings opportunities and revenue capture,” says **Aigner George**, PharmD, AVP, Advisory & Pharmacy Solutions. “Without that visibility, you’re managing in the dark. The fantastic pharmacy leadership team had already captured a lot of data. The initial challenges were in alignment, data analysis and translating data into something meaningful for system executives.”



Leadership wanted to better understand its pharmacy spend and align it with broader financial and operational priorities—particularly around 340B optimization, biosimilars adoption and site-of-care strategies.

### CUSTOMIZING THE ROADMAP

The HealthTrust Pharmacy Solutions team collaborated closely with pharmacy leaders to conduct a detailed assessment of financial reporting, procurement practices and supply expense categories. Together, they tailored a roadmap to generate both short- and long-term ROI and began implementation over the six-month engagement.


Key components of the engagement included:


- ▶ **Formulary optimization:** Opportunities were identified in biosimilars adoption and 340B utilization. A payer-driven biosimilars financial impact calculator was developed to help the team visualize the effects of formulary changes.
- ▶ **Financial visibility:** A pharmacy supply expense dashboard was introduced, providing monthly reporting and spend categorization through aligned sub-accounts on the General Ledger. This allowed leaders to better track and communicate performance metrics at both the department and enterprise levels.
- ▶ **Procurement & supply chain efficiencies:** The team initiated consignment consolidation efforts focused on ensuring that they could sustain the work long after the formal project ended. “We always aim to leave members with a structure they can own and tools they can use on their own terms,” says George. “Our team is really good at keeping lines of communication open.” ●




## 3 STEPS TO SIGNIFICANT SAVINGS & A CLEARER VIEW

Financial transparency isn't just a goal—it's a discipline. HealthTrust's Pharmacy Solutions team suggests leaders looking to elevate their organization's approach start by asking these important questions:

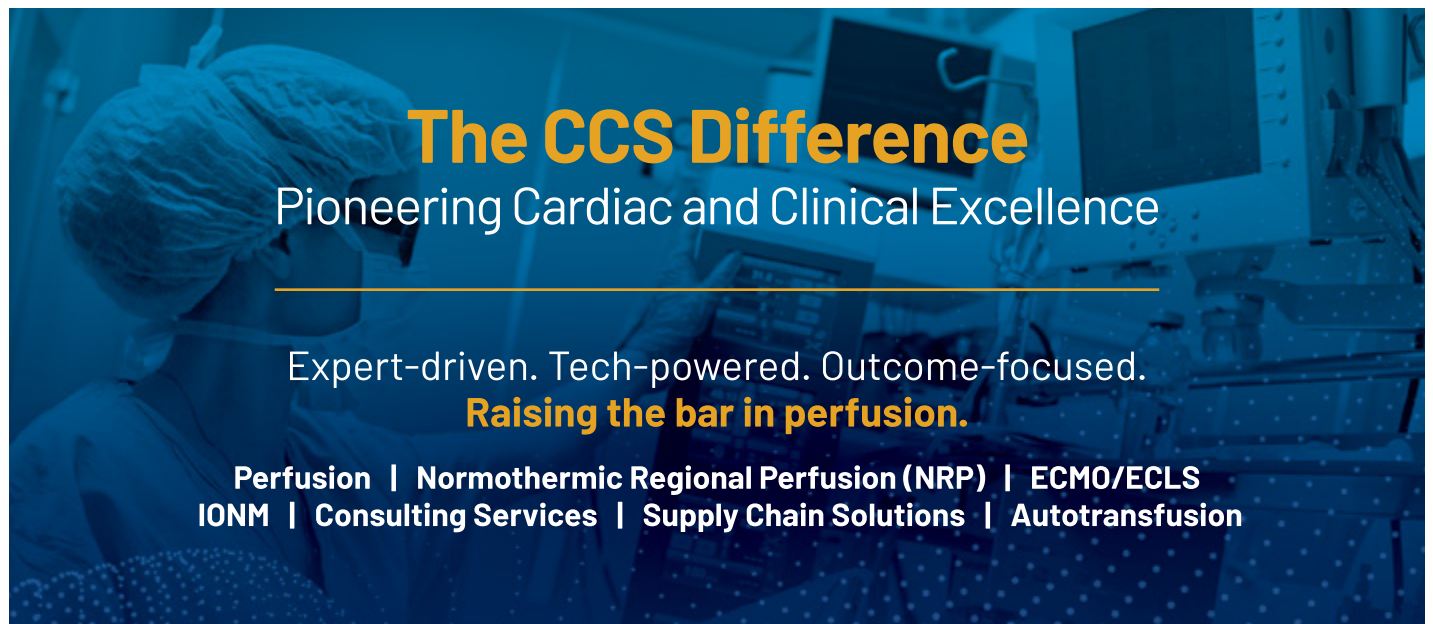
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**1 Do we have access to all the data that impacts our financial performance?** Without a full picture of expenditures, revenue & savings, it's difficult to identify what's working & what's not.
- 

**2 Do we understand how our executive leadership team wants to receive & interpret data?** Alignment depends on speaking a common language & tailoring insights to resonate with key stakeholders.
- 

**3 Can we clearly articulate our department's financial story?** If pharmacy leaders don't understand their supply expenses, no one else will.

**READY TO TELL A NEW PHARMACY STORY for your organization? Learn how HealthTrust can assist by contacting your Account Manager or emailing the team at [solutions@healthtrustpg.com](mailto:solutions@healthtrustpg.com)**



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# Playing Offense

## Risk mitigation strategies for food & water during a crisis

WHETHER IT'S A HURRICANE, WILDFIRE, CYBERATTACK OR WATER CONTAMINATION EVENT, when a crisis hits a healthcare facility, food and water services may be among the first to be affected. However, they are often the last to be fully planned for.

“Healthcare facilities do a great job when it comes to emergency preparedness, but maintaining the right amount of supplies is critical in food service operations during a disaster,” says **John Clayton**, MBA, RD, Assistant Vice President of Food & Nutrition Services at HealthTrust. Annually, as hurricane season\* approaches, the Food & Nutrition team at HealthTrust urges facilities to proactively build out their emergency preparedness plans, with food and water strategies playing a central role.

(\*The Pacific hurricane season runs May 15–Nov. 30; the Atlantic hurricane season runs June 1–Nov. 30.)

### IT'S MUCH MORE THAN STOCK

While bringing in extra shelf-stable stock is a key first step, having a stockpile is only part of the equation. “You also need the staff to prepare and serve those meals,” Clayton explains. In situations where roads are impassable or staff can't reach the hospital, Meals Ready-to-Eat (MRE) options become critical. These are higher-cost solutions, but companies like Meals for All (under HealthTrust supplier **Foodbuy's contract #43973**) offer options with a 10-year shelf life, which is ideal for long-term planning.

A recent example from a HealthTrust member facility on the Gulf Coast demonstrates how effective rapid response can be. With less than 24 hours before hurricane landfall,

emergency MREs were delivered in time to support uninterrupted care. Another member facility in California activated a similar strategy during a wildfire. Both scenarios highlight the importance of established supplier relationships when a disaster strikes.



### PLANNING FOR WATER LOSS

Water access is another vulnerability. Facilities must consider not just drinking water, but also what's needed for food preparation and handwashing.

Effective replanning also means ensuring physical logistics align with crisis constraints. For example, if the power is out or elevators aren't working, can your team access supplies? (See page 10 for key planning questions.)

### SIMPLICITY & FLEXIBILITY ARE KEY

Food service during a crisis often calls for simplicity. “Think about meals that can be prepared without power, or by staff who don't usually work in food services,” says **Kristie Schutt**, RD, LDN, Director, Food & Nutrition Services for HealthTrust.



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Emergency menus should be tailored to your specific population, with plans for how many days of service may be required and how to handle production limitations, which could be related to staff, equipment usage, lighting, water and more.

Even technical downtime needs to be considered. If patient diets and allergy information are stored online, do you have paper versions readily accessible? Do supervisors know how to place orders by phone if your system goes offline? (See the sidebar for more key planning questions and tips.)

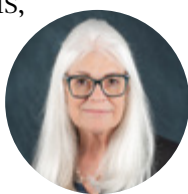
### ASSIGNING ROLES & OWNING THE PLAN

One of the most important planning takeaways is: Once your plan is in place, assign clear roles and responsibilities. Know what the facility is responsible for and what HealthTrust will handle. Establish ahead of time who contacts which suppliers and when.

Every member facility should complete a risk assessment based on its geographic vulnerabilities—whether that’s hurricanes, earthquakes, cyberthreats or infectious disease outbreaks.

“Preparedness is not just about sending communications, it’s about making sure people know what to do and how to do it,” says **Sam Potter**, MHS, RD, HealthTrust’s Senior Director of Food & Nutrition Services. Even the best-laid plans are only as effective as the people executing them.

A comprehensive risk mitigation strategy ensures facilities embed preparedness into everyday operations. Because when the next crisis hits, food and water aren’t operational—they’re essential. ●



**PREPARE TODAY BEFORE THE NEXT CRISIS HITS.**  
Reach out to the HealthTrust team by emailing  
[commercial@healthtrustpg.com](mailto:commercial@healthtrustpg.com)

## BEST PRACTICES CHECKLIST

**Make sure you are prepared before the next disaster strikes. Develop a plan that includes:**

- ✓ Emergency menus
- ✓ Policies & procedures
- ✓ Storage & access plans for food & water
- ✓ Communication protocols
- ✓ Supplier MOUs (Memorandums of Understanding)
- ✓ Staff role assignments

**Consider these questions during the planning process:**

### Water

- ▶ How much water is needed daily & for how many people?
- ▶ Where will water be stored?
  - Can it be easily accessed if elevators don’t work?
  - Who has access to those locations?
- ▶ Are containers manageable in size (gallons vs. individual bottles, etc.)?
  - Who has access to them?
- ▶ Have any MOUs been established with suppliers, such as the local beverage distributor, dairy vendor or secondary distributor for water?

### Food

- ▶ What are simple recipes that can be prepared without power or by staff who do not typically work in Food & Nutrition Services?
  - What is the plan for use of perishable food?
- ▶ Is there an emergency order on file with your primary distributor?
  - How far in advance must the order be placed?
  - Do you have more than one way to contact the distributor (for example, phone & email) & know their disaster plan/distance from the facility?
- ▶ Where will the food be stored?
  - Can it be easily accessed if elevators don’t work?
  - Who has access to those locations?
- ▶ Do you need to store extra disposable products if the dish machine cannot be used (plates, cups, takeout containers, flatware, napkins)?
- ▶ Do you update your Certificate of Insurance annually if you will need a refrigerated truck? (The HealthTrust team suggests updating every January so you know it’s taken care of at the start of each new year.)



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# INTEGRATION INTELLIGENCE



## Operational efficiencies & supply chain leverage are keys to lasting value

IN A FAST-EVOLVING HEALTHCARE LANDSCAPE, MERGERS AND ACQUISITIONS (M&As) continue to accelerate as organizations seek to enhance care delivery, expand access and drive down costs. For hospitals and health systems, delivering on the value of M&A requires a strategic focus on operational efficiency and supply chain optimization.

Vice Presidents **Rick Phillips** and **Alia Schmidt** lead HealthTrust's Advisory Services and GPO Implementations teams, respectively. Having worked closely with a number of member organizations through the years, they have amassed a wealth of knowledge. They offer compelling suggestions for hospitals and health systems to fully realize the value of a merger or acquisition.

### STRATEGIC IMPERATIVE OF SCALE

M&As allow health systems to achieve critical mass—unlocking cost savings, negotiating power

and greater consistency across both services and operations. However, scale also introduces complexities as a result of integrating disparate workflows, technologies and cultures.

Challenges around misaligned systems, fragmented data and conflicting organizational norms can create friction and inefficiencies that must be addressed with a shared strategy.

“Efficiencies don’t come from the merger itself—they come from what you do with the new scale you’ve created,” Phillips explains.

“That means shifting from reactive, siloed problem-solving to building coordinated

strategies that drive consistency, reduce variation and enable smarter, systemwide decision-making.”

The most effective integrations focus not just on size, but also on synergy—with both Phillips and Schmidt emphasizing the importance of early alignment on governance, data strategy and cultural fit. Creating stakeholder engagement and some quick wins can help to build momentum and create buy-in from day one. Phillips offers an example of this from a recent Advisory Services client engagement where the team was able to improve OR utilization post-integration by adjusting pre-op and post-op



*Continued on page 14*



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Continued from page 12

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—Alia Schmidt, Vice President, GPO Implementations & Account Executive



right post-deal strategies can drive real transformation in improving care delivery and preparing for a more agile future.”

And, whether your organization is navigating an M&A or it’s business as usual, two key takeaways are clear: Operational efficiency and supply chain leverage aren’t just back-end functions, they’re strategic levers for unlocking lasting value. ●

workflows—seemingly a small change, yet it unlocked capacity and reduced systemwide delays.

### INTEGRATING OPERATIONS

Streamlining operations is essential to delivering true clinical and financial value. Phillips emphasizes that, “The goal of integration isn’t simply to replicate how one organization operated before or to overlay one system’s standardization playbook over another. The goal is to build something better.”

This mindset shapes how HealthTrust supports members during a merger or acquisition. Phillips and Schmidt agree that sharing that visibility across a member’s enterprise enables their teams to identify new opportunities for creating more effective and improved operations.

One key strategy is leveraging centralized functions, such as unified scheduling and access centers, to ensure consistency and better resource allocation. There are also efficiencies in standardizing clinical pathways and administrative workflows, allowing the health system to track outcomes and make data-informed decisions.

HealthTrust focuses on measurable indicators such as patient access times, staff productivity and capacity utilization to spot opportunities and track progress. “We’re able to take out waste and redundancies and apply those learnings back across the entire system,” Phillips explains.

### SUSTAINABLE SCALE FOR THE LONG TERM

M&A is not a one-time event but a multiyear journey. It should begin with clear goals, investing in strong leadership teams and communicating frequently with both clinical and operational stakeholders.

Sustaining the benefits of scale requires a long-term strategy rooted in continuous improvement and cross-functional collaboration. “The success of a newly consolidated entity hinges on well-planned and strong execution,” says Phillips. “From consolidating supply chains to streamlining operations, the power of scale lies in how it’s used—not just how big a system becomes. The

## 6 STEPS TO SYNERGIZING YOUR SUPPLY CHAIN AFTER AN M&A

Following a merger or acquisition, Phillips & Schmidt share that realizing supply chain synergies is all about speed to value. Here are some of the ways that HealthTrust works with members to optimize their performance:



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**2** Approaching suppliers from a position of strength by accelerating alignment on standard contracts



**3** Standardizing services, supplies & equipment across integrated facilities advances quality & reduces variation



**4** Unifying product selection & streamlining SKUs improves both pricing & performance



**5** Leveraging data to drive just-in-time delivery models ensures the right products are in the right place—without overstocking



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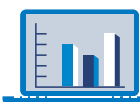
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<sup>1</sup>For eligibility requirements and more information, please contact a HealthTrust Account Team.

<sup>2</sup>Supplier must agree to accept payments from you through the American Express Buyer Initiated Payments portal.

<sup>3</sup>vPayment can help reduce the risk of fraud with transaction-level controls which allow your company to set a specific date range and pre-authorization amount for payments.

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# A NEW PERSPECTIVE

## Lessons learned as a leader & as a patient

IMAGINE LIFE AS A VIBRANT PHYSICIAN EXECUTIVE IN THE PRIME OF YOUR CAREER. You have made it a priority to balance long work weeks with family time. To that end, you say “yes” to an invitation for an indoor rock climbing wall outing with your husband and 23- and 25-year-old daughters. Little do you know at the outset, but your life is about to change in a drastic way. The silver lining, however, will forever alter the way you see patients and the care they receive.

Such is the story of **Ghazala Sharieff, M.D., MBA**, Chief Medical & Operations Officer at HealthTrust member Scripps Health. After losing her grip on the climb, Dr. Sharieff fell and, as a result, became temporarily paralyzed from the neck down.



Luckily, Dr. Sharieff’s story has a happy ending. After just six months, she was able to return to remote work at Scripps Health. However, her journey—from trauma center to ICU to inpatient rehabilitation and then outpatient rehab (which continues today)—opened her eyes to how patients and their families experience the continuum of care on the road from a serious injury to healing and recovery.

She recalls, “When I came out of surgery, my hands were ice cold—so much so that I used up the entire hospital supply of handheld hot packs. Our CEO reached out to Supply Chain, and they were able to secure more of these, even on Christmas Day. Another discovery I had as a patient was my inability to swallow a large acetaminophen tablet. As a result, Scripps added a capsule form of Tylenol to its formulary for other patients who have similar issues.”

“I truly believe that if it weren’t for our Supply Chain professionals who work so diligently behind the scenes, that I would not have had the equipment that was necessary for my emergency and critical surgery. I identified many unsung heroes during both my patient stay and throughout the COVID pandemic, and Supply Chain was definitely one of them,” says Dr. Sharieff.



Dr. Sharieff is pictured here with colleagues in the COVID command center at Scripps Health.

### LEANING INTO NEW OPPORTUNITIES

After COVID hit, Dr. Sharieff’s original patient experience and CMO role expanded to include the pandemic command center and then cyberattack response. After Scripps’ CFO retired, she assumed responsibility for Scripps’ Support Services, including Food, Environmental Services, Engineering, Disaster Management and Security.

As if these responsibilities weren’t enough, when one of Scripps’ chief regional executives was on medical leave after a cardiac event, Dr. Sharieff assumed management of three hospitals in Scripps’ northern region. The organization’s CEO then asked her to manage the two hospitals in the southern region, which in turn led to overseeing all five of them. Dr. Sharieff says, “I think if you do something well and for the right reasons, opportunities for growth present themselves.”

*Continued on page 18*



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“I identified many unsung heroes during both my patient stay & throughout the COVID pandemic, & Supply Chain was definitely one of them.”

—**Ghazala Sharieff, M.D., MBA**, Chief Medical & Operations Officer, Scripps Health

In addition to the organization’s regional chief executives, physician operating executives and chiefs of staff, she currently also has responsibility for Support Services, Information Services, Quality and the Employee Assistance Program. After another change in leadership, Supply Chain and Pharmacy also began reporting to her. She recalls it being an easy transition, given the close work she had done with those colleagues during COVID and a cyberattack that impacted Scripps. Dr. Sharieff describes the experience as the “honor of a lifetime to manage areas outside of a CMO’s normal scope.”

Not one to sit on the sidelines, Dr. Sharieff has also been known to roll up her sleeves and work alongside front-line staff when needed. She shares, “In addition to being Scripps’ CEO, my boss, **Chris Van Gorder**, also happens to be a licensed EMT. At the height of the pandemic, Chris and I were both out there with our clinicians administering COVID vaccines to the thousands of patients who drove through our transitory vaccine ‘clinic.’ ”



### APPRECIATING & EMPOWERING COLLEAGUES

It was the combination of Dr. Sharieff’s personal patient experience along with the COVID pandemic that revealed to her a newfound respect for the work of a hospital’s Supply Chain team. “Not only was their input critical in keeping track of PPE levels, but when elective surgeries were canceled, it was Supply Chain that helped us determine and prioritize what surgeries our facilities could still offer, by service line, based upon the equipment and supplies we had. We also changed the definition of ‘elective’ and reclassified cases as either critical, urgent, able to be temporarily delayed or truly elective, such as with cosmetic surgeries,” she explains.

When asked how she manages so many different areas of operations, Dr. Sharieff shares, “The people working for you are the key. I am surrounded by a great team of people who keep me informed. I believe in empowering your teams and not micromanaging them. Set the vision so your people see

Dr. Sharieff has also been known to roll up her sleeves and work alongside front-line staff. Here she is with Scripps’ CEO Chris Van Gorder, a licensed EMT, administering COVID vaccines to patients who drove through Scripps’ transitory clinic.

it. If there is an issue, we do sprints to evaluate the options. The team helps to problem-solve; oftentimes they come back with a solution from the front lines.”

### CLINICAL INTEGRATION

Dr. Sharieff shares that she is passionate about endorsing the importance of executive leadership involvement at the clinical level with the Supply Chain team. “The operational executive physicians within Scripps’ five acute care hospitals have responsibility for value analysis (VA). That work is critical to my role, which includes overseeing value-based purchasing across our entire health system. It’s an offshoot of the VA work,” she says.

Scripps is well positioned to respond to the changing healthcare environment, with Supply Chain helping to inform the organization's annual capital planning process. This includes physician involvement up front and prioritizing needs for the entire budget year. The regional chief executives, site chief operating executive, physician operating executives, corporate vice president of Support Services, and medical directors are all involved in these discussions. Supply Chain organizes their input into tiers. Those plans are then presented to both Dr. Shariieff and her CMO counterpart in the ambulatory care space. Together, they make decisions based on the recommendations from the Supply Chain and Value Analysis teams.

“As a result of my firsthand experience with those teams, I can confidently say that Supply Chain has been integrated with our physicians and clinical initiatives,” says Dr. Shariieff. “We have made this input part of our ongoing process. Now, all of the key stakeholders understand they are part of the systemwide operations meetings we hold every two weeks. Outside of this, if a physician has new technology they want us to consider purchasing, they come before our Medical Elective Review Committee to justify why they need it and speak to the clinical difference the proposed product will make on patient outcomes. This way, our decisions can be made based on evidence and what’s best for our patients,” she adds.

### MOTIVATION MATTERS

Dr. Shariieff indicates that she is still in therapy, continuing to work on her balance, walking and issues impacting her hands. “When I was in the hospital, colleagues from Scripps I didn’t even know sent me inspirational cards and signs. I’m not sure what I did to deserve that. My family put the cards and signs up on what we affectionately called the ‘wall of love’ in my patient room. Those messages motivated me to get up every day and keep fighting to get strong and walk again,” she says.

As a leader responsible for the care provided in Scripps’ acute care hospitals, Dr. Shariieff vows to never forget the perspective she gained during the

months she spent as a patient. She is also committed to championing initiatives that help the organization uphold its vital, clinically integrated supply chain. ●

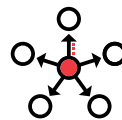
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# What's at RISK for TELEHEALTH?



Federal funding for remote patient visits in jeopardy

AS AN INFECTIOUS DISEASE PHYSICIAN AND HEALTHTRUST PHYSICIAN ADVISOR, **William Sistrunk**, M.D., has a lot of Medicare patients who live in rural areas. They may live two hours away, so when follow-up on infectious disease treatment is needed, they must drive four hours round trip to Mercy in Springfield, Missouri. Since the early stages of the pandemic, Medicare began reimbursing for many types of telehealth visits—mainly short appointments that could be handled remotely. This alleviated time and other requirements for patients to travel for routine medical care.

That is slated to change after September 30, 2025, when current “telehealth flexibilities” are scheduled to expire. Barring federal action, as of October, health systems



and providers will no longer be eligible for many telehealth service reimbursements. That includes the ability to provide these services regardless of the patient’s location—which currently allows patients to receive telehealth in their homes.

## HOW TELEHEALTH HELPS PROVIDERS & PATIENTS

Infectious disease physicians at Mercy also provide telehealth consultations for some of their organization’s smaller and rural in-patient hospitals, offering services that would be harder to obtain without telehealth.

Providing care in a manner that works for patients benefits both parties. “We can make sure patients are getting better at home without them having to travel so

*Continued on page 22*



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Continued from page 20

far,” says Dr. Sistrunk. “We have a way that may be less expensive for our patients when gas prices are high, and we can help manage our patients well and provide a better-quality oversight of care.”

For orthopedic surgeon **William Payne**, M.D., Franciscan Health’s Program Director for Orthopedic Surgery and a HealthTrust Physician Advisor, telehealth serves multiple functions in his practice. He has patients who live far away as well as those who travel as snowbirds. They may live in Chicago in the summer and Florida in the winter. With telehealth, he can maintain continuity of their care.

Dr. Payne shares that for his older patients, driving during inclement weather can be dangerous. Some patients also prefer to have postoperative questions or concerns addressed by telehealth, having him look at the incision on camera, answer their questions and make a decision about next steps.



Telehealth can also be used for medication refills that otherwise would require an in-person visit. Dr. Payne also uses the technology for preoperative planning with extended family members. Often family can be included in telehealth appointments, when they otherwise wouldn’t be able to attend an in-person visit because they would have to take time off work.

Another advantage is that the physician can often see the patient in their home environment, which helps in assessing their living situation. “If the patient is about to get a hip replaced or their spine fused, and we spot, for example, a lot of throw rugs, we can advise them to remove the rugs,” Dr. Payne says, as the patient could potentially trip on them, causing additional problems.

**Labib Haddad**, M.D., HealthTrust Physician Advisor and interventional radiologist at West County Radiological Group and Mercy Hospital in Missouri, adds that not every visit requires an



Continued on page 24



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# Beyond Rates: Driving total value for your healthcare logistics

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- ▶ **Understand hidden costs and blind spots** in your shipping practices
- ▶ **Improve supplier compliance** to identify savings opportunities and increase your managed spend
- ▶ **Optimize shipping modes** to lower costs while helping to ensure on-time delivery
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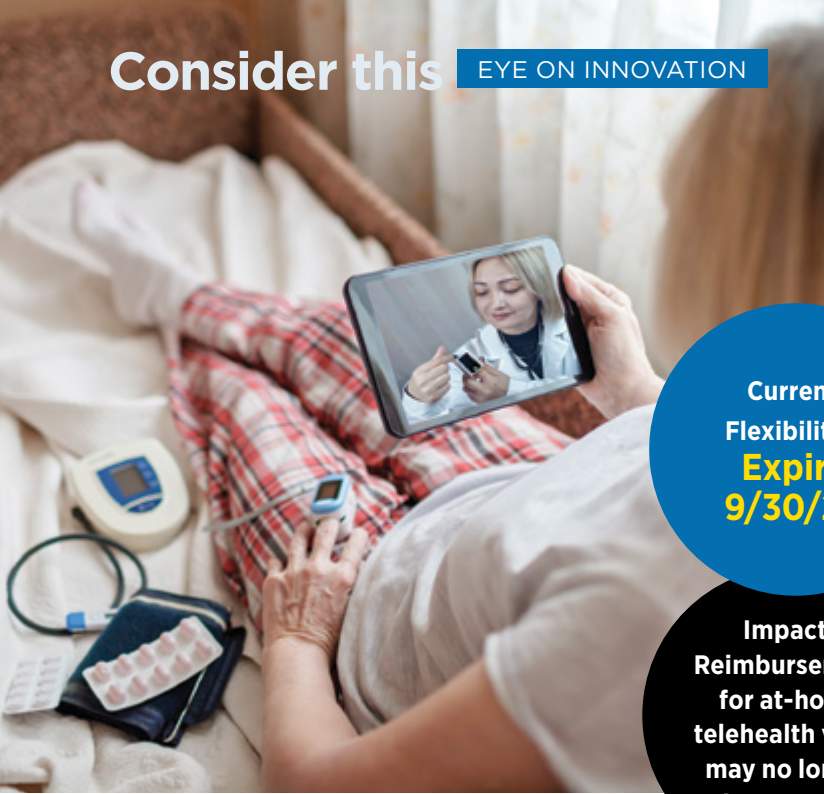
**Opportunities to save can come from the most unexpected places.** For example, data analytics revealed that a hospital system was needlessly using second-day air service between Indianapolis and Kalamazoo, Michigan, just a little over 200 miles away. Because of the short distance, OptiFreight® Logistics recommended reviewing shipping options. Our team identified a lower-cost mode for some shipments, while still delivering on time.

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## 5 SCENARIOS WHERE TELEHEALTH IS EFFECTIVE

- 1 Routine postoperative check-ins
- 2 Medication refills
- 3 Presurgical consultations with family
- 4 Chronic condition management
- 5 Rural patient care & home environment assessments

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in-person evaluation. An interventional radiologist physician exam may be of limited value prior to a lung biopsy, he says, as there is a plan based on past imaging, presentation to the referring doctor and patient history.

### HOW WILL LACK OF REIMBURSEMENT IMPACT CARE?

Telehealth is helpful in smaller cities and rural towns that may not have experts in infectious disease, cardiology or rheumatology on staff, Dr. Sistrunk adds. In addition to convenience, through telehealth, all patients have access to the specialists and expert care they need. However, if the government does not extend telehealth coverage for Medicare patients, it may have wide-ranging implications. “We’ll lose that ability to help manage patients in their home,” explains Dr. Sistrunk. “If we can’t do telemedicine, our patients will either have to travel to our clinic more frequently or go to a different type of facility to be able to routinely see a doctor. That includes possibly receiving antibiotic therapy at a skilled nursing facility instead of at home, so a practitioner can keep an eye on them.”

In many circumstances, eliminating Medicare coverage will reduce access to healthcare for some patients, says Dr. Payne. Some practices will require patients to come in, and if patients aren’t able to do that, it can lead to worse outcomes and more costly care. “It will be a big deal,” Dr. Payne adds.

While practices could opt not to charge for telehealth visits or ask patients to pay out-of-pocket, that’s not a sustainable strategy. “In a Medicare population, most

patients are on a fixed income, and they’re pretty price-sensitive,” Dr. Payne says, “and they generally want treatments and visits that are covered by their insurance.”

Ultimately, practices cannot sustain themselves without reimbursement for the visits, Dr. Haddad explains. The patient mix in many radiology practices is 50% to 60% Medicare. If reimbursement is affected too drastically, there can be a devastating downstream effect. There is already a shortage of radiologists, specialists and primary care doctors, and reimbursement issues could hasten the decline in access. He believes that removing telehealth coverage is short-sighted.

### KEEPING PROVIDERS INFORMED & PATIENTS AT THE CENTER

Providers and health systems continue to advocate for Medicare telehealth coverage through legislative comment periods. Also, “we make sure to update our providers on the current status so they are aware of the rules and regulations, so everyone can be compliant,” Dr. Payne says.

He hopes that the federal government will realize the value of telemedicine for patients. Dr. Payne has seen a lot of support for continuing with telemedicine from legislators and in the news. “The government wants medicine to be patient-focused, and I agree,” he says. Telehealth is a tool that can help in a lot of situations; not only does it make care more convenient, it provides more patients with access to expertise from specialists. ●

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#### References

1. Lippi G, Salvagno GL, Favaloro EJ, Guidi GC. Survey on the prevalence of hemolytic specimens in an academic hospital according to collection facility: opportunities for quality improvement. *Clin Chem Lab Med*. 2009;47(5):616-618. doi:10.1515/CCLM.2009.132. 2. Balasubramanian S, McDowell EJ, Laryea ET, et al. Novel in-line hemolysis detection on a blood gas analyzer and impact on whole blood potassium results. *Clin Chem*. 2024;70(12):1485-1493. doi:10.1093/clinchem/hvae135. 3. Lippi G, Fontana R, Avanzini P, Sandei F, Ippolito L. Influence of spurious hemolysis on blood gas analysis. *Clin Chem Lab Med*. 2013;51(8):1651-1654. doi:10.1515/cclm-2012-0802. 4. Lippi G, von Meyer A, Cadamuro J, Simundic A-M. Blood sample quality. *Diagnosis*. 2018;6(1):25-31. doi:10.1515/dx-2018-0018. 5. O'Hara M, Wheatley EG, Kozmierczak SC. The impact of undetected in vitro hemolysis or sample contamination on patient care and outcomes in point-of-care testing: a retrospective study. *J Appl Lab Med*. 2020;5(2):332-341. doi:10.1093/jalm/jfz020. 6. Werfen. GEM Premier 7000 with iQM3 Operators Manual. P/N 00000026407. Rev 00. Aug 2023. 7. Phelan MP, Husted FM, Good DM, Reineks EZ. Seeing red: blood sample hemolysis is associated with prolonged emergency department throughput. *J Appl Lab Med*. 2020;5(4):732-737. doi:10.1093/jalm/jfa073. 8. Wilson M, Adelman S, Maitre JB, et al. Accuracy of hemolyzed potassium levels in the emergency department. *West J Emerg Med*. 2020;21(6):272-275. doi:10.5811/westjem.2020.8.46812. 9. Milutinović D, Andrijević I, Litićina M, Andrijević L. Confidence level in venipuncture and knowledge on causes of in vitro hemolysis among healthcare professionals. *Biochem Med*. 2015;25(3):401-409. doi:10.11613/BM.2015.040. 10. Phelan MP, Ramos C, Walker LE, et al. The hidden cost of hemolyzed blood samples in the emergency department. *J Appl Lab Med*. 2021;6(6):1607-1610. doi:10.1093/jalm/jfab035.

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- Thrombosis may occur with immune globulin intravenous (IGIV) products, including octagam® 10%. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling vascular catheters, hyperviscosity, and cardiovascular risk factors.
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### **Important Safety Information**

Octagam® 10% is contraindicated in patients who have a history of severe systemic hypersensitivity reactions, such as anaphylaxis, to human immunoglobulin. Octagam® 10% contains trace amounts of IgA (average 106 µg/mL in a 10% solution). It is contraindicated in IgA-deficient patients with antibodies against IgA and history of hypersensitivity. In patients with chronic ITP, the most serious drug-related adverse event reported with octagam® 10% treatment was a headache. The most common drug-related adverse reactions reported in >5% of the subjects during a clinical trial were headache, fever, and increased heart rate.

**Please see accompanying Highlights of full Prescribing Information for additional important information.**

\*Store octagam® 10% for 36 months at +2°C to +8°C (36°F to 46°F) from the date of manufacture. Within this shelf-life, the product may be stored up to 9 months at ≤ +25°C (77°F). After storage at ≤ +25°C (77°F) the product must be used or discarded.

**HealthTrust Contract #4861**

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## HIGHLIGHTS OF PRESCRIBING INFORMATION

These highlights do not include all the information needed to use Octagam 10% safely and effectively. See full prescribing information for Octagam 10%.

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### WARNING

#### THROMBOSIS, RENAL DYSFUNCTION AND ACUTE RENAL FAILURE *See full prescribing information for complete boxed warning*

- Thrombosis may occur with immune globulin intravenous (IGIV) products, including Octagam 10%. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling vascular catheters, hyperviscosity, and cardiovascular risk factors.
- Renal dysfunction, acute renal failure, osmotic nephropathy, and death may occur with the administration of Immune Globulin Intravenous (Human) (IGIV) products in predisposed patients. Renal dysfunction and acute renal failure occur more commonly in patients receiving IGIV products containing sucrose. Octagam 10% does not contain sucrose.
- For patients at risk of thrombosis, renal dysfunction or renal failure, administer Octagam 10% at the minimum infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity.

## INDICATIONS AND USAGE

- Octagam 10% is an immune globulin intravenous (human) liquid preparation indicated for the treatment of chronic immune thrombocytopenic purpura (ITP) in adults; and for dermatomyositis (DM) in adults.

## DOSAGE AND ADMINISTRATION

### For intravenous use only.

Indication	Dose	Initial Infusion rate	Maintenance Infusion Rate (if tolerated)
Chronic ITP	1 g/kg daily for 2 consecutive days	1.0 mg/kg/min (0.01 mL/kg/min)	Up to 12.0 mg/kg/min (Up to 0.12 mL/kg/min)
Dermatomyositis	2 g/kg divided in equal doses given over 2-5 consecutive days every 4 weeks	1.0 mg/kg/min (0.01 mL/kg/min)	Up to 4.0 mg/kg/min (Up to 0.04 mL/kg/min)

- Patients with dermatomyositis are at increased risk for thromboembolic events; monitor carefully and do not exceed an infusion rate of 0.04 mL/kg/min.
- Ensure that patients with pre-existing renal insufficiency are not volume depleted; discontinue Octagam 10% if renal function deteriorates.
- For patients at risk of renal dysfunction or thrombotic events, administer Octagam 10% at the minimum infusion rate practicable.

## DOSAGE FORMS AND STRENGTHS

Solution containing 10% IgG (100 mg/mL)

## CONTRAINDICATIONS

- History of anaphylactic or severe systemic reactions to human immunoglobulin
- IgA deficient patients with antibodies against IgA and a history of hypersensitivity

## WARNINGS AND PRECAUTIONS

- IgA-deficient patients with antibodies against IgA are at greater risk of developing severe hypersensitivity and anaphylactic reactions to Octagam 10%. Epinephrine should be available immediately to treat any severe acute hypersensitivity reactions.
- Monitor renal function, including blood urea nitrogen and serum creatinine, and urine output in patients at risk of developing acute renal failure.
- Falsely elevated blood glucose readings may occur during and after the infusion of Octagam 10% with testing by some glucometers and test strip systems.
- Hyperproteinemia, increased serum osmolarity and hyponatremia may occur in patients receiving Octagam 10%.
- Hemolysis that is either intravascular or due to enhanced red blood cell sequestration can develop subsequent to Octagam 10% treatments. Risk factors for hemolysis include high doses and non-O-blood group. Closely monitor patients for hemolysis and hemolytic anemia.
- Aseptic Meningitis Syndrome may occur in patients receiving Octagam 10%, especially with high doses or rapid infusion.
- Monitor patients for pulmonary adverse reactions (transfusion-related acute lung injury (TRALI)).
- Octagam 10% is made from human plasma and may contain infectious agents, e.g. viruses and, theoretically, the Creutzfeldt-Jakob disease agent.

## ADVERSE REACTIONS

Chronic ITP: The most common adverse reactions reported in greater than 5% of subjects during a clinical trial were headache, fever and increased heart rate.

Dermatomyositis: The most common adverse reactions reported in greater than 5% of subjects during a clinical trial were headache, fever, nausea, vomiting, increased blood pressure, chills, musculoskeletal pain, increased heart rate, dyspnea, and infusions site reactions.

**To report SUSPECTED ADVERSE REACTIONS, contact Octapharma at 1-866-766-4860 or FDA at 1-800-FDA-1088 or [www.fda.gov/medwatch](http://www.fda.gov/medwatch).**

## DRUG INTERACTIONS

The passive transfer of antibodies may:

Confound the results of serological testing.

Interfere with the immune response to live viral vaccines, such as measles, mumps, and rubella.

## USE IN SPECIFIC POPULATIONS

- Pregnancy: no human or animal data. Use only if clearly needed.
- Geriatric Use: In patients over age 65 or in any person at risk of developing renal insufficiency, do not exceed the recommended dose, and infuse Octagam 10% at the minimum infusion rate practicable.

Revised: July 2021–

### Medical Affairs:

[usmedicalaffairs@octapharma.com](mailto:usmedicalaffairs@octapharma.com)

Tel: 888-429-4535

### Reimbursement:

[usreimbursement@octapharma.com](mailto:usreimbursement@octapharma.com)

Tel: 800-554-4440 | Fax: 800-554-6744

### Drug Safety:

For all inquiries relating to drug safety, or to report adverse events, please contact our local Drug Safety Officer:

Tel: 201-604-1137 | Cell: 201-772-4546 | Fax: 201-604-1141 or contact the FDA at 1-800-FDA-1088 or [www.fda.gov/medwatch](http://www.fda.gov/medwatch).



# From

# INSIGHT

## Improving physicians' performance with SurgIntel

HIGH-COST IMPLANT CLINICAL SERVICE LINES—often influenced by physician preference—are central to a health system’s annual contracting strategy. Following the implementation of implant construct formularies, suppliers sometimes steer physician choice toward higher-cost options. This has the potential to undermine projected savings and contribute to margin erosion for hospitals and ambulatory surgery centers (ASCs).

To address these and similar related issues, HealthTrust developed the Medical Device Management (MDM) SurgIntel platform. It was designed to enhance clinical performance—as well as improve margins—through provider alignment, cost transparency, reduction in clinical and financial variation, and key service line performance indicators.

Complementing medical device sourcing and physician engagement, SurgIntel actively manages high-value implants and supplies—building a foundation for physician utilization insights and collaborative engagement. This prepares health systems for sourcing events with aligned and engaged physicians.

“The goal is to drive performance improvement through meaningful, collaborative conversations with physicians,” says **Chris Stewart**, Vice President of Medical Device Management at HealthTrust. “Recognizing variability in implant utilization, we designed a technology-enabled solution powered by data to support evidence-based, value-driven surgical planning.”



# to ACTION

## DISSECTING PROCEDURE DETAILS

SurgIntel was developed by a team of clinical experts who created detailed product categorizations for various procedures, defining standard protocols and identifying typical devices, disposables and instruments.

“Our taxonomy and clinical attributes make this an industry-differentiating approach,” says **Drew Torres**, Assistant Vice President of Medical Device Management at HealthTrust.



For example, in a one-level anterior cervical discectomy and fusion, a spine surgeon typically uses one spacer, a plate, two or four screws, and a biologic. Torres explains that nothing additional should be needed. However, when extra supplies appear, SurgIntel highlights variations, enabling health systems to understand usage patterns and engage physicians in addressing differences.

## EMPOWERING HEALTH SYSTEMS FOR SUCCESS

MDM’s platform targets three major service lines—orthopedic, spine and cardiovascular—where costly implants drive spending. SurgIntel provides detailed analysis for procedures, including:

- ▶ Total joint replacements (hips, knees, shoulders)
- ▶ Cardiovascular (Cardiac Rhythm Management [CRM], coronary)
- ▶ Osteobiologics
- ▶ Spinal fusions

A new rebate-tracking feature allows users to evaluate and manage agreements, understand performance, identify higher rebate tier opportunities, and ensure timely supplier payments. While health systems access data via the SurgIntel dashboard, the MDM team conducts quarterly reviews to highlight trends and opportunities. “Sometimes we are asked to join physician conversations; other times, we uncover opportunities and recommend areas of focus,”

Torres explains, teaching members to leverage data for effective engagement.

The MDM team collaborates with administrators, service line and supply chain leaders to prepare for physician discussions. “Without clear opportunities and next steps, meaningful change rarely happens,” Stewart adds. SurgIntel pinpoints variation for reduction and measures post-change impact. For hesitant leaders, the MDM team provides support, including outreach through HealthTrust’s Physician Advisor Network as well as assistance in refining messaging to enable more confident conversations.

Designed with the end user in mind, SurgIntel offers tailored dashboard views: Physicians see their data, while stakeholders filter insights by role, variation type or owner. “SurgIntel integrates key data, enabling users to uncover insights and identify relevant stakeholders for each opportunity,” Stewart explains. Procedural-level data informs contract negotiations, empowering custom contracting teams with strategic market intelligence for competitive pricing on physician preference items.

“We are proud of the multidisciplinary team—the physicians, clinicians, former implant reps, service line leaders and hospital operators—who contributed to building SurgIntel’s proprietary attributes to best meet the real-world performance needs of today’s providers,” he adds.



## DATA-DRIVEN CONVERSATIONS

To foster open dialogue, SurgIntel compares like-for-like procedures and accounts for patient health status, easing concerns about skewed data from comorbidities. Physicians may initially question accuracy, but the depth and validation of data spark competitive focus on outcomes. Leaders can discuss evidence levels, questioning costly implant use in healthy patients when Level 1 evidence shows no need. “Presenting data fosters thoughtful questions and collaboration on implant selection, costs and peer comparisons, empowering physicians to manage cost, quality and outcomes,” Stewart explains.

SurgIntel’s informatics provide transparency and accuracy, preventing physicians from dismissing data over patient population or acuity claims. “When discussions aren’t seen as criticism, dialogue opens and relationships strengthen,” Stewart adds. Aligned physicians reduce unnecessary variation and then monitor data so they can sustain the improvements.

**TAKING CONTROL OF UNNECESSARY VARIATION**

Leveraging HealthTrust’s data from more than 1,800 hospitals and 85,000 alternate sites, SurgIntel accelerates value through quick wins, contracting strategies and monitoring to maximize supplier agreements.

Torres and Stewart share an example of the team’s work with Hospital Sisters Health System (HSHS) that used SurgIntel’s Orthopedic Analytics Dashboard to find savings. One insight: A reusable orthopedic reamer was billed as disposable, causing excess charges.

**Fixing this saved \$119,000 in two weeks.**

“We know controlling variation lowers supply spend,” Torres says. “SurgIntel was born to fill the gap in robust, physician-level optimization for device utilization and peer comparison.” Without it, systems typically rely on manual,

siloes spreadsheet analysis. In spine surgery, staff might open 15 cc of osteobiologics when 1 cc suffices.

“Once utilization aligns, preference card analysis drives cost avoidance, waste mitigation and savings protection,” Stewart reports. SurgIntel validates all data with case details for granular, accurate categorization.

**SUSTAINABLE RESULTS**

Torres and Stewart share another example from a 17-hospital HealthTrust member that used SurgIntel for provider alignment and cost transparency.

**By reviewing variability and benchmarking, the health system’s physicians adjusted their utilization, saving \$5 million in year one while maintaining care quality.**

Continued collaboration and data-driven decision-making through the SurgIntel platform led to an additional 6% in savings—approximately \$3.5 million—during the following year, as stakeholder alignment deepened and value-based strategies advanced.

“Once utilization aligns, preference card analysis drives cost avoidance, waste mitigation and savings protection,” Stewart says.

*Continued on page 32*

**RESULTS YOU CAN TRUST**

Two recent use cases illustrate the value of partnering with HealthTrust’s MDM team for an informative, SurgIntel-powered engagement.

**Client 1:** Hospital Sisters Health System (HSHS), with \$3 billion in annual spend across 13 hospitals & community centers  
**Engagement:** Utilized SurgIntel’s Orthopedic Analytics Dashboard to find savings  
**Results:** A reusable orthopedic reamer was billed as disposable, creating excess charges

**Client 2:** HealthTrust member with 17 hospitals  
**Engagement:** Utilized SurgIntel for provider alignment & cost transparency  
**Results:** By reviewing variability & benchmarking, physicians adjusted utilization

**\$119K**  
 Saved in two weeks by uncovering this error

24%  
 Cost variation reduction realized later in the spine service line

**\$5M**  
 Year-one savings

\$3.5M / 6%  
 Additional savings realized the following year





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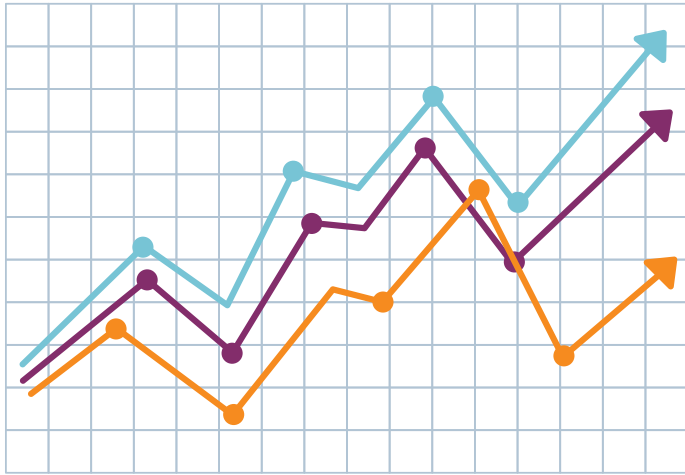
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**HealthTrust Contracts #746, 827**



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Continued from page 30

And, the opportunities for ongoing savings and efficiencies don't end after the initial work with the HealthTrust team. Post-alignment, SurgIntel monitors formularies and physician utilization to sustain gains. "We tell members to think of this as insurance for their contracts; it's a way to ensure they can realize their full value," Torres adds. ●

**Custom Rebate Insights**  
SurgIntel's rebate tracking tool helps members monitor progress toward tiers, which helps to hold suppliers accountable

**DRIVE SUSTAINABLE PERFORMANCE FOR YOUR ORGANIZATION WITH SURGINTEL.** Contact your HealthTrust Account Manager or email [corp.medicaldevicemgmt@healthtrustpg.com](mailto:corp.medicaldevicemgmt@healthtrustpg.com) for a personalized demo. Attending HTU in August? Visit the MDM team within the HealthTrust Village.

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# AI WITH

Putting artificial intelligence & enabling technologies to work for healthcare

ARTIFICIAL INTELLIGENCE (AI) HAS THE POTENTIAL TO ENHANCE AND IMPROVE both access and speed to information for many industries, including healthcare. This, along with process automation, can free up clinicians for direct patient care.

At its best, AI can positively impact clinical outcomes, empower the workforce, improve administrative and operational efficiencies, expand patient care capacity, and much more. This highlights the importance of responsible AI and human oversight.



# INTEGRITY

While AI is transformative, it's not perfect, **Jennifer Golbeck**, Ph.D., reminded us in a Q4 article in *The Source*. Goldbeck presented at 2024 HTU and has more than 20 years of experience with AI. "The idea of reducing the human presence in favor of AI is one that I hope we get past and instead move more toward asking how it can help us be more efficient," she says.

As HealthTrust members evaluate solutions that involve protected patient and health system data, it is imperative that they:

- ▶ Understand how data flows in between systems and software—when looking at third-party vendor solutions—to ensure patient and care team data is protected
- ▶ Establish organizational guidance, governance and policies to navigate AI solutions
- ▶ Evaluate and mitigate potential risks ahead of time before implementing any solution—Just because you can use AI, doesn't mean you should
- ▶ Keep in mind their facility's medical equipment—understanding if AI is used in those devices is essential
  - HealthTrust's security information protection agreement (SIPA) with medical device suppliers is currently being amended to specifically address AI. (*The Source* will cover that in more detail in the Q4 edition. In the meantime, read more about HealthTrust's security requirements for device suppliers at: <https://healthtrustpg.com/thesource/technology-innovation/technological-advancements/cyber-aware/>

## MEMBER CASE STUDY

One HealthTrust member, HCA Healthcare, is currently assessing areas within patient care and hospital operations that could benefit from the vast potential of AI. "As an industry, healthcare is really just at the beginning of this AI journey," says **Michael Schlosser**, M.D., MBA, Senior Vice President and Chief Transformation Officer of Digital Transformation & Innovation for HCA Healthcare. In 2021, HCA Healthcare formed Care Transformation & Innovation (now Digital Transformation and Innovation, DT&I) to accelerate technology integration and address current and anticipated challenges. As the organization began moving to a centralized model with all digital, AI and machine-learning efforts governed by DT&I, the department evolved to meet this expanded mandate, benefiting all areas of the organization—clinical, operational and administrative.



Utilizing a cross-functional, team-based approach, DT&I operates with dedicated business and technology staff collaborating with experts from other areas of the organization to solve business challenges, using a variety of technologies and solutions.

To deliver results, DT&I embraces a domain-based approach. "By targeting domains, we strike the balance between tackling all organizational challenges that slow progress, and individual use cases or pilots that generate interest but have limited impact," Dr. Schlosser shares.

## BUILD, BUY OR PARTNER?

As HCA Healthcare vetted solutions and suppliers that utilize AI, it became apparent that a responsible approach to AI needed to be established that outlined requirements for staff

members who wanted to recommend a solution, as well as a governance process for rigorously vetting those suggestions and suppliers. This also led to developing guidelines and specifications for third parties who may or may not need access to specific proprietary data they might be requesting.

“When a business need is identified that utilizes AI, the DT&I team goes through a process to determine if it makes the most sense to build a solution, buy it or partner with a provider to obtain it,” says **Michelle Grajales**, the organization’s Director of Responsible AI Programs. “A rigorous vetting process helps us to understand the reason for implementing an AI solution. Just because we can make use of something, doesn’t mean we should.”



When looking at third-party vendors, Grajales says it is even more important to understand how data flows in between systems and software to make sure patient and care team data is protected at all costs. And, it’s not just at the enterprise level that it should be mapped out. Understanding AI use in equipment is essential, as many now include AI features.

## SOLVING REAL-WORLD CHALLENGES

One of DT&I’s objectives is to champion a more agile organization as it determines how best to harness innovation and use it to solve some of the day-to-day challenges that healthcare providers across the country face in today’s environment. Yet healthcare’s adoption pace often lags behind rapid tech advancement.

DT&I has been able to leverage rapidly accelerating technologies like AI and machine learning to help create efficiencies in a number of areas, including documentation. In some cases, Dr. Schlosser says, “We can actually improve the quality of the data because we’re removing the manual variation that occurs when we ask individual caregivers to do this work. It’s a positive for patients as well since it enables caregivers more time at the bedside and less time spent on updating electronic health records.”

To enhance its agility, HCA Healthcare has established Innovation Hubs within two of its hospitals: UCF Lake Nona Hospital and TriStar Hendersonville Medical Center. Dr. Schlosser shares that these ‘laboratories’ find practicing physicians and nurses collaborating with DT&I and data scientists, technologists and staff from major supplier

**HEALTHTRUST MEMBER HCA HEALTHCARE IS FOCUSED ON DIGITAL TRANSFORMATION & INNOVATION TO SUPPORT:**

- ▶ Providing clinical teams with data-driven actionable insights to inform patient care
- ▶ Reducing manual workload via advanced technologies & automation
- ▶ Improving outcomes with AI-powered personalized treatment planning
- ▶ Empowering staff with cutting-edge digital tools
- ▶ Expanding patient care capacity by freeing up clinical team time
- ▶ Boosting administrative efficiency through streamlined processes & digital solutions

*Continued on page 38*

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Continued from page 36

partners Google Cloud and Palantir. Clinicians help shape technology solutions in real time through their iterative feedback. DT&I partners with these technology companies to build solutions that can be tested within the Innovation Hub hospitals and fine-tune them to determine scalability across the enterprise.

Here are some examples of how HCA Healthcare is using AI and enabling technologies to transform patient care:

- ▶ A platform that automates care team scheduling

- ▶ A nurse-designed digital tool for more accurate, concise shift handoffs
- ▶ A state-of-the-art EHR system, used across care teams, to enhance patient care from admission through discharge
- ▶ Ambient listening solutions that automate the clinical documentation process

**THOUGHT LEADERSHIP IN AI**

Members of the DT&I team are committed to

knowledge-sharing with governing bodies as well as with peer health systems. “If others can learn from our journey, maybe they can skip a lot of the initial groundwork that we had to cover and start further down the path,” says Grajales.

Invited to speak at a number of industry meetings and before Congress on responsible AI in healthcare, Dr. Schlosser shares, “The work of the DT&I team has been recognized by government and private partners as leading the charge in determining how to do this AI work well. We are committed long-term to safely and responsibly deploying AI and other technologies to transform care delivery—benefiting HCA Healthcare as well as the larger healthcare industry.”

As healthcare professionals try to navigate the AI waters there is some reassurance in knowing that experts like Golbeck emphasize that AI will never truly replace humans. “It was built to support humans as decision-support tools as opposed to autonomous systems that run themselves. Think more about how AI can help you gain efficiency.”

“If you’re an executive making decisions about AI, don’t let yourself be dazzled by the hype,” says Golbeck. “Look for the evidence and look to the skeptics. AI is going to change work and make us more efficient, but there is no evidence it will make us smarter.” ●

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\*Reductions stated are in comparison to a prior version of packaging design released in 2020 for global product launches. This prior packaging design was not made available in the U.S. References: 1. Wickboldt T. Assessment Report of Existing vs. New Centargo Day Set Packing. Amcor: January 4, 2024



At a

# MOMENT'S NOTICE

Strategies for effective  
emergency response  
planning

HOSPITALS ARE EXPECTED TO FULFILL THEIR LIFE-SAVING MISSIONS IN ANY CRISIS. But as emergencies grow more frequent and complex—ranging from natural disasters to supply chain disruptions—health systems must stay prepared for anything. How can providers maintain high reliability and operational resilience amid so much uncertainty?



## THE MORE THINGS CHANGE...

Hospitals and health systems have steadily advanced their emergency preparedness, implementing systems to ensure operational continuity during and after a crisis.

“What hasn’t changed over the years is that, regardless of the event, we keep our priorities the same,” says **Melissa Harvey**, Assistant Vice President of Emergency Preparedness for HCA Healthcare.



“Safety always comes first—ensuring patients, colleagues and visitors are safe. Then we address infrastructure to maintain patient care and IT systems. Finally, we ensure operations, making sure security and regulatory functions are in place so services can continue.”

What has changed is the breadth and complexity of emergencies—both in type and geography. “Historically, there have always been wildfires in rural California,” Harvey says, “but recently they’ve reached more urban areas, like Los Angeles County and Riverside. We’re used to hurricanes along the East Coast, but not in the middle of North Carolina. Storms seem to be lasting longer and hitting harder, so hospitals must be prepared to remain resilient for longer periods of time.”

In addition to extreme weather, healthcare systems increasingly face other types of crises, including cyberattacks, active shooters and infectious disease outbreaks. “Viruses such as COVID-19, Ebola and measles have spread more frequently,” Harvey says. “In the case of Ebola, what was once confined to remote areas now spreads more quickly due to how people live and travel.”

“The biggest change to the industry,” explains **Missy Pennington**, RN, B.B.A., Assistant Vice President of Clinical Resource Analysis at HCA Healthcare Supply Chain, “is that we’ve become more proactive.



We’ve gotten good at taking what we’ve learned from past emergencies and embedding it into routine operating procedures so we can pivot faster and with more confidence.”

This is especially critical when responding to so-called “black swan” events—low-probability, high-impact scenarios. Harvey recalls the 2014 Ebola outbreak in West Africa, which spread quickly in part because it occurred in a densely populated

“Community partnerships are vital. Hospitals should build relationships with local emergency managers & collaborate across health systems. Emergency response plans should not be considered proprietary.”

—**Melissa Harvey**, Assistant Vice President, Emergency Preparedness, HCA Healthcare

area. Today, enhanced mobility and synthetic biology further complicate effective containment of infectious diseases.

“Synthetic biology allows us to develop new treatments,” Harvey says, “but it also means that viruses can be altered digitally. That raises the risk of new strains and changing transmission patterns.”

However, despite the evolving threat landscape, the core principles remain. “People often ask how we manage all of this,” Harvey says. “I tell them it’s not about focusing on the threat—it’s about focusing on the response, the priorities of which don’t change much based on the type of emergency event.”

## LASTING LESSONS

The COVID-19 pandemic forced healthcare systems to rethink their emergency preparedness in real time. While previous outbreaks like H1N1 in 2009 and Ebola in 2014 had already prompted planning, the global scale and unknowns of COVID required constant adaptation.

“Our clinicians had to figure out how to do surgeries without transmitting the virus,” says **Damian Skelton**,



Vice President of FacilitiGroup at HealthTrust. His role focuses on resilience and infrastructure, ensuring that resources are available to keep operations functioning. Skelton has experience from a previous health system during COVID, and he and his team were able to use anterooms in an OR suite to ensure the OR air pressures could remain positive during cases on patients with COVID while still protecting the environment from the exhausted

air. “COVID brought creative solutions, and it has driven our ability to assemble the entire organization around the goal of responding in the event of an unknown emergency situation and managing it appropriately.”

One key innovation was finding new ways to manage workforce strain and resources. “We learned how to maintain the workforce and take care of each other,” explains Harvey. “To ease the burden on team members, we consolidated patients with COVID into one unit to both reduce staff burnout and limit transmission to the rest of the hospital.”

HCA Healthcare’s enterprisewide data systems also played a critical role. “Any time you can reduce strain on an individual hospital, patients will receive better care,” Harvey says. Hospitals shared the patient load across the network, transferring patients as needed to avoid overwhelming any one location.

The pandemic also highlighted the need for rapid clinical vetting of alternative products. “It was such a long event that we had the opportunity to tip the scale and be more proactive,” adds Pennington. “We had to quickly test products and decide if they were clinically equivalent. It may not have always been the exact item, but it was clinically equivalent.” Her team then supported HCA Healthcare’s Clinical Services Group in the development of staff educational material on product differences so clinicians could begin using them safely and confidently.

Communication was another essential pillar of the response. “We posted the updates on the HCA Healthcare website in a special COVID response section where anyone in the country could look for recommended practices,” says Pennington. Staff received daily updates, sorted by job role, with clear summaries of amended clinical practices and inventory lists.

**WEATHERING STORMS**

Preparedness today goes beyond weathering the storm—it’s about maintaining care delivery in the aftermath. Hospitals must be equipped to operate through extended times of disruption caused by natural disasters like hurricanes, wildfires or even volcanic activity.

There are important community resources that hospitals are uniquely situated to provide,



“On the supply chain front, readiness starts with inventory awareness.”

—Missy Pennington, RN, B.B.A.,  
Assistant Vice President, Clinical Resource  
Analysis, HCA Healthcare Supply Chain

Skelton says. It’s usually not the best option to exercise a closure unless absolutely necessary. However, when a facility becomes too high-risk to remain operational—such as during a major storm or fire—relocating patients can be the safest way to continue delivering care.

For example, at Alaska Regional Hospital in Anchorage, a potential volcanic eruption could trigger the need to shelter in place within four hours. To ensure readiness, the emergency response team is working on how to continue to maintain operations for 24 to 48 hours to meet the needs of that community, should an eruption occur.

Based upon HCA Healthcare’s national scale and local partnerships, hospitals are fortunate to have support during regional emergencies, Skelton explains. During recent hurricanes in Florida and flooding in Asheville, North Carolina, water tankers were deployed to maintain hospital water supplies.

While hurricane forecasts allow for advance planning, they can still bring unexpected challenges. “Outpatient dialysis centers often close for hurricanes, and those patients may come to the hospitals for their treatments,” says Pennington. Providers must be prepared to care for patients outside of their typical scope of services.

Disasters can also create ripple effects far beyond the storm zone. Flooding from Hurricane Helene forced the closure of Baxter International’s IV fluid manufacturing plant in Marion, North Carolina—the primary supplier for the country. The result was a nationwide scramble for IV fluids.

“We use IV fluids in medication bags and for irrigation required for surgeries, so it meant possibly having to cancel surgeries,” says Pennington.

To mitigate the impact, teams quickly identified alternative suppliers and communicated conservation strategies to staff.

*Continued on page 44*

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Continued from page 42



**Emergency preparedness starts with deliberate planning—thinking through what could happen & aligning teams, tools & strategies before it does—so response can be immediate & scaled appropriately**

“Thankfully, we were able to connect with manufacturers who helped supply IV fluids during the shortage.”

### MANAGING ECONOMIC UNCERTAINTY

Shifting global trade dynamics can introduce uncertainty into the healthcare supply chain. Leaders are evaluating how to mitigate the financial and operational impact of these changes.

There’s also a growing interest in domestic manufacturing. “During COVID, the need for domestic production of N95 masks became clear,” Pennington says, “and HealthTrust started manufacturing the Regard brand in North Carolina. Future expansion may include other high-demand items. However, that is not without difficulty either since raw materials often originate overseas—even if the final product is made in the U.S.”

Pennington emphasizes the importance of diversified sourcing strategies. “It’s about understanding where the manufacturers are located and creating a diversification plan,” she says. “Hospitals should consider partnering with suppliers that have more than one production site.”

### READINESS THAT LASTS

Emergency preparedness starts with deliberate planning—thinking through what could happen and aligning teams, tools and strategies before it does—so response can be immediate and scaled appropriately. Building cross-functional teams can surface blind spots and improve the effectiveness of response plans.

“We prepare for events that we hope will never happen; however, we have to plan like they will happen,” says Harvey.

“I have observed that HCA Healthcare does this really well, and we have partners to help us with recovery and remediation,” explains Skelton. “It’s not if, but when it will happen. It’s thinking through how quickly we can react and restore our facilities so we are able to respond to the community.” HCA Healthcare’s emergency operations plan brings together the right people and leverages the organization’s national scale to provide rapid support. During a recent volcanic threat in Alaska, for example, the corporate team coordinated the logistics for deploying patient cots—freeing up local staff to focus on care delivery.

## 8 TIPS FOR SUPPLY CHAIN PLANNING & DIVERSIFICATION



- 1 Keep 30 days of general supplies on hand
- 2 Keep 60 days of PPE (e.g., masks, gowns)
- 3 Stock alternatives for contracted & non-contracted items
- 4 Track “days on hand” for high-risk items
- 5 Monitor tariff exposure
- 6 Partner with distributors that can scale when needed
- 7 Evaluate domestic manufacturing options
- 8 Favor suppliers with multicountry/multisite production capabilities

Continued on page 46

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Continued from page 44

Metrics are another cornerstone of preparedness, as those benchmarks help identify gaps and prioritize needs, says Harvey. “HCA Healthcare evaluates its hospitals on 144 metrics.” Metrics enable the organization’s leadership to see the gaps across the entire health system and take a standardized approach to fill those gaps.

Hospitals can begin by evaluating their ability to respond to different scenarios—infectious disease, mass casualty incidents, severe weather emergencies—then working through the full cycle from response to recovery. “Thinking it through from end to end helps you see synergies and differences,” Harvey adds.

On the supply chain front, readiness starts with inventory awareness. “Think about those critical items, such as masks, that you may have trouble sourcing; you may want to keep a larger supply of those on hand,” says Pennington. At HCA Healthcare, the standard practice is to stock 30 days’ worth of general supplies and 45 to 60 days’ worth of critical supplies. “From day to day, hospitals should be thinking about the supply of both critical products and medications

and working with distributors so they can flex up when they need to.”

Community partnerships are also vital. Hospitals should build relationships with local emergency managers and collaborate across health systems. “You should be exercising and training together,” Harvey says. “Emergency response plans should not be considered proprietary.”

In the end, adaptability is key. “We often say with disaster events that the threat itself doesn’t matter too much because our response will be mostly the same,” Harvey adds. “While you may have to pivot your response 20 to 30% for the specificity of the event, the priorities stay the same: people, infrastructure and operations.” ●

**TELL US HOW YOUR ORGANIZATION** persevered during a recent emergency response situation, and we just might feature your story in an upcoming issue. Email: [thesource@healthtrustpg.com](mailto:thesource@healthtrustpg.com)



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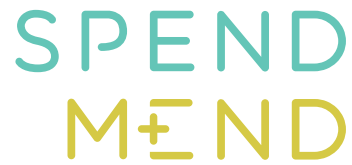


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Rolling Out a

# SMARTER STRATEGY

## Best practices for paper products & associated dispenser technology

OPERATIONAL CONSISTENCY AND COST CONTAINMENT ARE ESSENTIAL DRIVERS IN HEALTHCARE FACILITIES TODAY. For Environmental Services (EVS) leaders, product standardization has emerged as a critical strategy for advancing those goals. Within high-use categories such as paper products and dispensers, there are a number of opportunities to help teams meet and exceed their targets.

GP PRO, a division of Georgia-Pacific Consumer Products (GP PRO, **HealthTrust Contract #192**), recently partnered with a large health system member of HealthTrust on a standardization initiative. Some of the results are offered here as best practices for all members. While the standardization program centered on a seemingly simple product category, it advanced four strategic priorities for the IDN: cost effectiveness, supply reliability, operational efficiency and sustainability.

### COMMUNICATION INSPIRES ALIGNMENT

While the end results speak to the success of the initiative, such change requires a solid communication plan from the start, ensuring staff are aware ahead of time, explains **Matthew Oglesby**, Vice President of Support Services



with HealthTrust. “One of the biggest challenges members face when working toward standardization is change management. Change can be uncomfortable, and sometimes that discomfort hinders progress. We have found the key to overcoming it lies in communicating the ‘why’—explaining the need for standardization and the tangible/positive impacts facilities can expect as a result. When people understand the purpose and the benefits, they are much more likely to embrace the changes as they execute the initiatives.”

And, it is not just EVS staff who need to be aware of changes, adds **Bobby Self**, Director of EVS with HealthTrust Support Services. “Reaping efficiency and cost-containment benefits requires alignment across an organization.



You need to ensure product standardization does not compromise patient outcomes or staff satisfaction, which can be done by consistently communicating with both clinical and nonclinical stakeholders.”

### STREAMLINING FOR EFFICIENCY & COST CONTROL

Facilities participating in the case study initiative reported notable efficiencies in both labor and related products.

*Continued on page 52*

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## “When standardization becomes part of the mindset & not just a project, the long-term impact is significant.”

—**Abhi Jadhav**, Director of Market Intelligence & Sales Enablement, GP PRO

*Continued from page 50*

Converting to high-capacity enMotion roll towel dispensers and Compact coreless toilet paper systems reduced SKU counts, eliminated redundant tasks and simplified daily cart preparation.

According to post-initiative survey data, 71% of the healthcare system’s EVS leaders realized significant cost savings within two years; 90% of respondents indicated that product standardization streamlined operations, allowing for more efficient use of storage space.

### ENHANCING SUPPLY CHAIN RESILIENCE

For healthcare facilities across the country, the COVID-19 pandemic reinforced the importance of supply chain preparedness. Through standardization with GP PRO paper products, facilities in the case study gained the ability to forecast demand with greater accuracy, which allowed them to reduce inventory waste and more easily redistribute supplies across locations. Alignment with a centralized product formulary further enabled faster restocking and improved coordination with the supplier.

“Standardizing products or SKUs offers clear operational and financial benefits anytime,” shares Oglesby. “However, its value becomes even more critical during times of disruption. With fewer SKUs to manage, both customers and manufacturers can more accurately forecast demand and monitor availability. For example, it’s much easier to maintain control and consistency when you are focused on tracking 40 items instead of 200+. The greater the number of items in play, the higher the risk of missed signals or unmanaged variability. Standardization brings clarity and resilience when it’s needed most,” he adds.

### SUPPORTING SUSTAINABILITY GOALS

Enhancing environmental stewardship was also a key outcome of the member initiative with GP PRO. Automated, one-at-a-time dispensing and longer-lasting refill systems helped reduce overall paper consumption and waste going to a landfill. Many facilities transitioned to brown towels made from 100% recycled fiber, balancing cost efficiency and environmental performance without sacrificing absorbency or softness.

“By embedding sustainability into the standardization process—from reducing pilferage and product waste to

offering cost-effective recycled options like brown towels—we help facilities meet their environmental goals without compromising cost or compliance,” explains **Abhi Jadhav**, Director of Market Intelligence & Sales Enablement at GP PRO.



### KEYS TO SUCCESS

Standardization at scale requires early alignment, disciplined execution and clear metrics. Oglesby and Self attribute much of the case study members’ success to the strong supplier partnership with GP PRO.

“Members would not be able to achieve high compliance or manage their supplies with ease if it weren’t for a joint commitment to shared goals,” Self explains. Jadhav agrees, emphasizing the value of strong collaboration. “When standardization becomes part of the mindset and not just a project, the long-term impact is significant,” he adds. ●

### STANDARDIZATION DELIVERS

Product standardization has emerged as a critical strategy for advancing healthcare supply chain management goals. Within high-use categories such as paper products & dispensers, there are a number of opportunities to help teams meet & exceed their targets, positively impacting:

- ▶ Cost effectiveness
- ▶ Supply reliability
- ▶ Operational efficiency
- ▶ Sustainability



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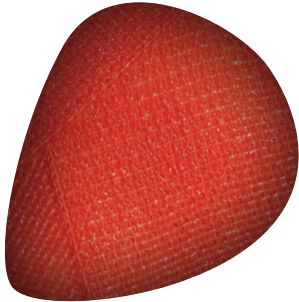
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# DIGITAL INVASION

Reducing risk amid a swarm of cyberthreats

THE HEALTHCARE INDUSTRY CONTINUES TO BE A HIGH-VALUE TARGET FOR CYBERCRIMINALS due to the potential for operational disruption. Cybersecurity experts predict the threat will remain high for the foreseeable future. With connected technology embedded across the healthcare ecosystem—from phones and medical devices to supplier networks—the industry is especially vulnerable to cyberattacks, says **Matthew Webb**, AVP, Cyber Risk Management, HCA Healthcare. “Healthcare continues to grow with so many more players, so the attack surface is more conspicuous than it ever has been,” he explains.

Rather than new kinds of threats, it’s phishing and ransomware attacks that providers must remain diligent in avoiding, says HealthTrust’s Director of Security Sourcing, **Marc Sammons**. “Today, there are even more people conducting attacks, and there are actually national cyber organizations targeting

different supply chain infrastructures with perpetrators looking to disrupt operations and extort money from the companies they victimize.”

Even if not the primary target, hospitals and health systems are still affected by cyberattacks. Webb and Sammons refer to a 2024 attack on a major blood supplier in Florida. Its system was compromised; its ability to deliver was jeopardized; and without blood flowing into the health system’s supply, emergency services were delayed and surgeries were postponed.



## MITIGATING RISK

Technology evolves constantly, so hospitals and health systems need to maintain basic security hygiene and take steps to be as resilient as possible.

Webb and Sammons share four best practices for foundational cybersecurity:



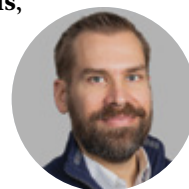
- ▶ Patches are routinely updated on all systems
- ▶ Complex passwords are in place; leverage multifactor authentication where possible
- ▶ Colleagues are educated to be cautious with email links and attachments; they should verify suspicious emails by contacting the senders directly
- ▶ Systems are backed up so there are “backups of the backups” should you need to rebuild

To bolster resiliency, Webb and Sammons recommend regularly testing your systems and conducting tabletop exercises to work through what would happen in various scenarios. “While it is hard to carve out time to do tabletop exercises, it’s advantageous to ensure you’re ready before an event happens,” says Sammons. (See sidebar on page 56.)

Another resilience approach involves giving suppliers limited system access to monitor or service their own equipment, says Sammons. If you go that route, be certain you understand what their security capabilities are and ensure that how they manage their equipment in your system is done as securely as possible.

## POTENTIAL POLICY CHANGES ON THE HORIZON

When evaluating security capabilities, it’s important to be aware of potential changes that could occur to the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act of 2009, says **Josh Lewis**, Director of Risk Governance & Reporting for HCA Healthcare.



Proposed changes from the Department of Health and Human Services would alter requirements for your electronic health information inventory and introduce new rules for business associate agreements—both potentially requiring contract renegotiations.

The comment period for the rule closed in March 2025. As of late July, no formal decision had been made. “If they do release the final rule, the industry will have 240 days to be in compliance,” Lewis says.

*Continued on page 56*



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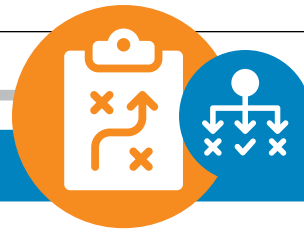
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Continued from page 55



### AN OUNCE OF PREVENTION

Hospitals & health systems can run an effective “tabletop” experience, suggest Webb & Sammons, by working through the following exercises:

- ▶ What are the ways we can be compromised? Are we doing the best we can, & are we invested in the best possible supports & resources to block or minimize attacks?
- ▶ If our system were compromised or down, what would we do to respond?
- ▶ If the primary system is down, is there a secondary system we can use?
- ▶ Is there offline storage?
- ▶ What, if anything, is air-gapped (i.e., backups logically separated from any network connections)? Do we have a resilient backup that we can access in order to rebuild?
- ▶ Are the right teams in place? Do we already have a contract with or connection to an incident recovery team?
- ▶ What is our communication plan? Do we know with whom we need to communicate? Have we established a communications tree?
- ▶ How are we vetting third-party suppliers & outside partners who need access to our systems?
- ▶ If a supplier we rely on is compromised & we can't get the supplies we need from them, do we have a backup or a number of back-up suppliers to provide what we need?
- ▶ If one of our payers is attacked & services are disrupted, are we prepared to go without payment for X number of days? Do we have enough cash on hand to ride things out?

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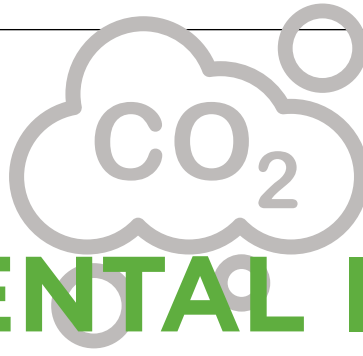
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1. Hess J, Semenova A. Emission Explorer: Tracking Greenhouse Gas Emissions from Chip Production (2015-2023). *Interface*. Mar. 17, 2025. <https://www.interface-eu.org/publications/semiconductor-emission-explorer>.

2. KARL STORZ. KS06371 / SSU Blades Initial (T0 & T0\*) Mechanical Safety Verification. 2024. Document No.C2.1.3.0001.F005d-RSTR-KS06371 SSU Blades Mechanical SafetyT0 & T0\*. Data on file.

# Minimizing ENVIRONMENTAL IMPACT



## Prioritizing sustainability as part of caring for patients & communities

THE WORLD HEALTH ORGANIZATION (WHO) ESTIMATES THAT 24% OF DEATHS GLOBALLY ARE LINKED TO THE ENVIRONMENT and according to the National Academy of Medicine, about 80% of health outcomes are driven by factors beyond healthcare, including the physical environment.

“The impact to human health from these outcomes, combined with the increase in extreme weather events, supply chain disruptions and financial risks, have led many healthcare organizations to make sustainability a strategic priority,” says **Jennifer Westendorf**, DNP, RN, CNOR, Assistant Vice President of Environmental Performance & Surgical Services at HealthTrust. “Implementing strategies to mitigate environmental impact is another way health systems can demonstrate care for the communities they serve while also enhancing their resiliency.”



### WHERE TO FOCUS

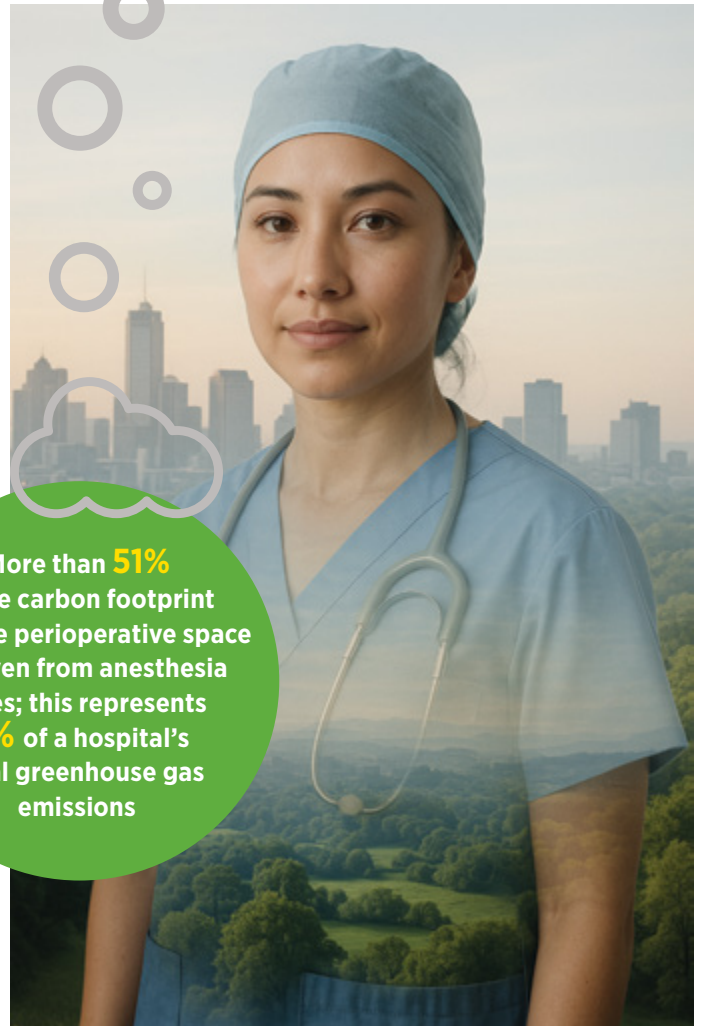
Health outcomes are also influenced by behaviors and social determinants of health (SDOH), which the WHO defines as the conditions in which people are born, grow, live, work and age—along with their access to power, money and resources. In addition to health, Westendorf encourages healthcare organizations to consider sustainability’s role in brand reputation and risk mitigation to boost resiliency, recommending the operating room as a strategic starting point.

The Association of periOperative Registered Nurses (AORN) indicates that the perioperative space is a substantial contributor to a hospital’s overall carbon footprint, producing about 70% of hospital waste and using considerable energy.

“Those who work in the perioperative space are well aware of the waste that is generated during each procedure—from sterilization wrap to unused products on procedure trays,” Westendorf says. Anesthesia gases make up 51% of this footprint, representing 5% of a hospital’s total emissions, according to AORN.

Through her work with HealthTrust’s Surgical Advisory Board and Environmental Sustainability Council, Westendorf shares that many member organizations are focusing their perioperative efforts on reducing environmental impact through the following strategies:

- ▶ Expanding their reprocessing programs
- ▶ Retiring the use of desflurane
- ▶ Decommissioning nitrous oxide medical gas pipes and replacing with e-cylinders



More than **51%** of the carbon footprint from the perioperative space is driven from anesthesia gases; this represents **5%** of a hospital’s total greenhouse gas emissions

- ▶ Utilizing low-flow anesthesia techniques
- ▶ Minimizing waste in turnover kits and procedure trays

### CLINICAL INSIGHTS TO ASSIST

HealthTrust has developed several Health Information Briefs available on the Clinical Knowledge Insights Portal. There, members can find briefs on related topics, including:

- ▶ Reprocessing of Single-use Devices
- ▶ Desflurane Elimination as a Sustainability Initiative
- ▶ Low-flow Anesthesia: Sustainability Initiative
- ▶ Decommissioning Piped Nitrous Oxide: Sustainability Initiative

### REMOVING DEHP

DEHP [di(2-ethylhexyl) phthalate] is a plasticizer used in medical devices for flexibility. Support for the removal of DEHP and other ortho-phthalates in intravenous tubing and intravenous solution containers is continuing to spread at the state level. In September 2024, California signed into

law a bill that, beginning January 1, 2030, prohibits the sale, distribution or manufacturing of intravenous solution containers with intentionally added DEHP. Effective January 1, 2035, the bill prohibits the sale, manufacturing or distribution of intravenous tubing made with intentionally added DEHP in the state of California.

Similar legislation is found in North Carolina and New York; is currently pending introduction in Michigan and Massachusetts; and is expected to be reintroduced in Pennsylvania. HealthTrust is monitoring the legislation and discussing supplier readiness for state timelines. Members can find a Health Information Brief on DEHP in the HealthTrust Clinical Knowledge Insights Portal.

### GET INVOLVED

Those with sustainability initiatives are encouraged to start or join discussions on the HealthTrust Huddle. Items tagged “sustainability” are shared with the HealthTrust Environmental Sustainability Council. ●

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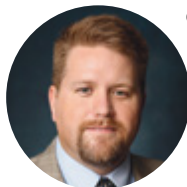


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# Unpacking Freight Savings

## How small shipping shifts can lead to big results

HOSPITALS AND HEALTH SYSTEMS SHIP AND RECEIVE HUNDREDS OF PACKAGES DAILY. These shipments hold major cost-saving opportunities, says **Jason Hanson**, HealthTrust’s Vice President of Supply Chain Solutions.



“Each time we’ve helped a member find freight savings, it’s been very meaningful to them financially,” Hanson says, “sometimes saving them millions.”

The HealthTrust Freight Management team looks at three overarching categories—hidden cost structures, shipment volume and logistics optimization—to find savings on freight costs, Hanson explains.

### HIDDEN COST STRUCTURES

Shipping has many nuances. For example, First Overnight guarantees delivery by 8:30 a.m. at around \$180, while Priority Overnight offers 10:30 a.m. delivery for around \$85–\$90. Standard Overnight, which delivers by 3:30 p.m., typically costs just \$55–\$60.

“A study done last year found that when a facility had a First Overnight and a Priority Overnight shipment, 97% of the time, those shipments arrived on the same truck at the same time,” Hanson says. “The facility paid \$180 for one of those packages and \$90 for the other, and yet they were delivered at exactly the same time.”

“With Priority Overnight, the carrier guarantees delivery by 10:30 a.m.; this typically means the

delivery is likely going to happen by 8:30 a.m.

anyway. Once members are informed, they can begin to make choices that unlock freight savings.”

Another subtlety is how unmanaged freight is charged, Hanson explains. Most goods that are ordered by facilities include shipping per their negotiated contracts; however, some goods fall outside contract parameters, and the supplier adds shipping for those items. This is called “prepay and add.”

When you allow freight to ship prepay and add, make sure you are using HealthTrust’s negotiated carrier rate vs. the supplier using its freight account. Otherwise, you are likely to pay four to five times more than what it should cost you. Start reaping those savings by telling your suppliers to use your freight account number instead of theirs.

The HealthTrust team also helps members understand the subtleties of the freight contracts. “Each service level has a different discount structure,” Hanson explains. For example, it may be cheaper to ship Standard Overnight rather than Two-day Air. “You would think having something delivered the day after tomorrow would be cheaper than having it delivered tomorrow, but that’s not always the case if your Standard Overnight contract is actually cheaper than your contract for Two-day Delivery.”

### SHIPMENT VOLUME

Additional savings can be found by ordering in

*Continued on page 62*

### SHIPPING SMARTER



**Did You Know?**

**97%**  
of Priority & First Overnight packages arrive at the same time

Ground Shipping = ~\$10 vs. Overnight = ~\$90 per box

“Prepay & Add” shipping can cost 4–5x more than necessary



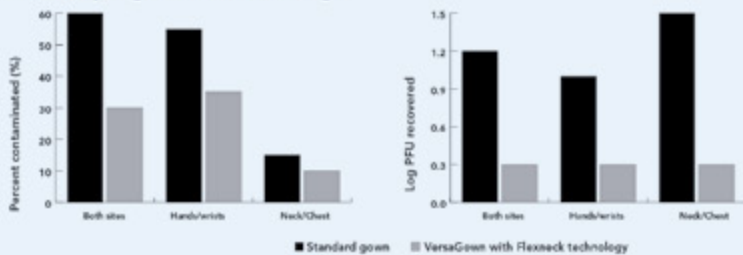
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\*Reducing Skin and Clothing Contamination of Healthcare Personnel by Improving Ease of Removal of Isolation Gowns, Thriveen Sankar Chittoor Mana, MS, Myreen Tomas, MD, Herleen Rai, MD, Christina Piedrahita, BS, Curtis J. Donskey, MD. *Open Forum Infectious Diseases*, Volume 3, Issue suppl\_1, December 2016, 1390.

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Continued from page 60

multiples. Facilities often ship items one box at a time. “We help members understand that for every one box they ship, they could technically ship three for the exact same cost,” he says.

With planning, facilities can order five times weekly instead of 28, lowering freight costs by about 60%.

### LOGISTICS OPTIMIZATION

“One of the most advantageous things the HealthTrust Freight Management team does is to look at network optimization for a facility,” Hanson says.

“A well-run inbound freight program is about 80% ground shipments, and 20% is expedited shipping,” he adds. “What we typically uncover is that most hospitals and health systems are more like 50% ground and 50% express.”

Often, these facilities default to overnight shipping. When the HealthTrust Freight Management team gets involved, they examine shipment origins to determine if a ground shipment arrives as quickly as an overnight shipment.

For shipments delivered at the same time via ground service as overnight service, the HealthTrust team works

with the specific suppliers to override the default overnight shipping. “We tell suppliers to ship these shipments via ground every time, even if the hospital orders overnight shipping,” Hanson says.

“When we do this maneuver, facilities see a huge shift in their freight costs—about 55% savings—even if we’re only affecting 30% of their shipping,” he explains.

HealthTrust reviews and explains ordering cycles. “Adequate lead time greatly impacts freight costs,” Hanson says. “The average healthcare box ships for \$10 ground as compared to the same box shipping overnight at \$90.”

With an understanding of the ordering cycle, the HealthTrust team helps facilities build lead-time triggers into their ordering systems so that the facility is taking advantage of lower priced ground shipping, rather than paying for expedited shipping because they waited too long.

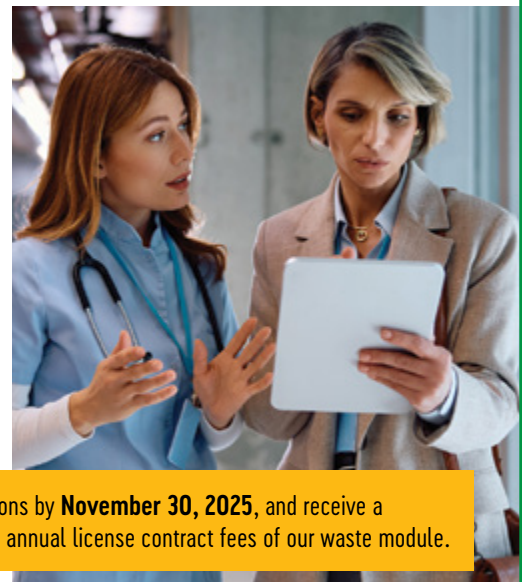
“Because we do these analyses for some of the largest providers in healthcare,” he says, “we know what we’re looking for and what we should expect to see based on statistical averages. When we don’t see them, then we know there’s an opportunity to go find savings there.” ●

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# HealthTrust Celebrates 15 Years in Shanghai

WHEN HEALTHTRUST OPENED ITS GLOBAL SOURCING OFFICE IN SHANGHAI, CHINA, IN JULY 2010, it wasn't just about establishing a physical presence overseas—it was about redefining how healthcare sourcing could work on a global scale. Fifteen years later, that bold move has paid off, delivering ongoing value to providers through deeper market insights, strategic supplier partnerships and a supply chain that starts with understanding, not just negotiation.

“Our Global Sourcing Office in China was never about buying and selling, it was about leveling the playing field,” says **Roz Holloway**, HealthTrust Vice President of Global Sourcing, who lived and worked in the Shanghai office from 2010 to 2013. “Most of the healthcare products our members use every day originate from Asia. If we wanted to bring real competition to the table and advocate effectively for hospitals, we needed to be closer to the source.”



## IN THE BEGINNING...

The early concept took shape sourcing products and creating new options for categories where pricing needed disruption. Over time, the office grew into a valuable strategic sourcing organization—with the ability to analyze raw materials, track commodity impacts and understand the entire production pipeline—from Southeast Asia to Latin America.

What emerged was a sourcing center unlike any other with a team who could break through industry norms and offer a different kind of conversation with manufacturers. “We weren't a traditional GPO,” Holloway explains. “When we walked into a supplier meeting, we weren't promising volume. We were offering something more valuable: insights into the U.S. healthcare market and a long-term opportunity to grow sustainably.”

That message resonated with forward-thinking manufacturers. Many have since launched their own brands in the U.S. market. Others simply gained a better understanding of the market, helping build a healthier and more competitive sourcing environment for all.

“We wanted to be a landing spot for innovation,” says **Jenny Lu**, Vice President of Asia Sourcing, who has led the Shanghai office since its inception. “If



a company had a smart idea but didn't know how to bring it to the U.S., they came to us. We helped them to shape, develop and sometimes even launch it.”

## REMAINING RELEVANT

That collaborative spirit has never wavered. The Global Sourcing team, now nine strong, many of whom have been with HealthTrust since the earliest days, has stayed true to the mission through every market shift, including the most turbulent time in recent history: the COVID-19 pandemic.

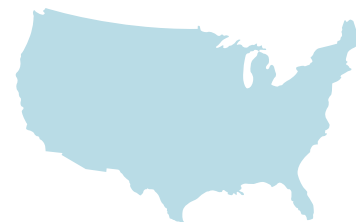
“I still get emotional thinking about it,” Holloway recalls. “The moment the team realized something serious was happening, they thought of us. They made a list of what we needed to stock up on and sent it immediately. That's what it means to understand the mission.”

Sequestered in their homes during citywide lockdowns before the pandemic had reached the U.S., the Global



“We've believed in this model from day one, and, we'll keep believing in it, because it works. It creates a better, smarter & more resilient healthcare supply chain. And, at the end of the day, that means better care for patients.”

—**Jenny Lu**, Vice President, Asia Sourcing, HealthTrust



Sourcing team didn't sit still. They continued tracking critical supplies, alerted leadership to impending shortages and even leveraged their sourcing expertise to organize food group buys to support their local community.

"I'll never forget the early days of COVID when Shanghai went into lockdown," recalls Lu. "HealthTrust made sure we were taken care of by delivering food to our homes and supporting us when we needed it most. We all felt incredibly proud to be part of the HealthTrust team."

**MAKING AN IMPACT**

Over the years, the Global Sourcing team has contributed to many significant wins. They've helped navigate tariffs, stockouts and manufacturing shifts. They've also extended their expertise into pharmaceutical sourcing, tracking active pharmaceutical ingredients (APIs) and starting materials with precision and insight. Their work helped shape HealthTrust's internal commodity tracker, giving the organization unparalleled visibility into cost drivers across the globe.

"We might not always have the capability," Holloway says, "but we've always had the courage. And that's what's kept us ahead of the curve for 15 years."

Looking ahead, the Global Sourcing office remains a cornerstone of HealthTrust's value to members, not only as a sourcing partner but as a trusted expert in a complex, evolving marketplace. As supply chains stretch, markets shift and innovation continues to emerge from every corner of the world, the Shanghai team's expertise is more relevant than ever.

"We've believed in this model from day one, and, we'll keep believing in it, because it works," Lu says. "It creates a better, smarter and more resilient healthcare supply chain. And, at the end of the day, that means better care for patients."

After 15 years, the vision that started with a handful of team members and a big idea has grown into something transformative. Not just for HealthTrust but for the hospitals, clinicians and patients who ultimately benefit. And, that's a legacy worth celebrating. ●

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