

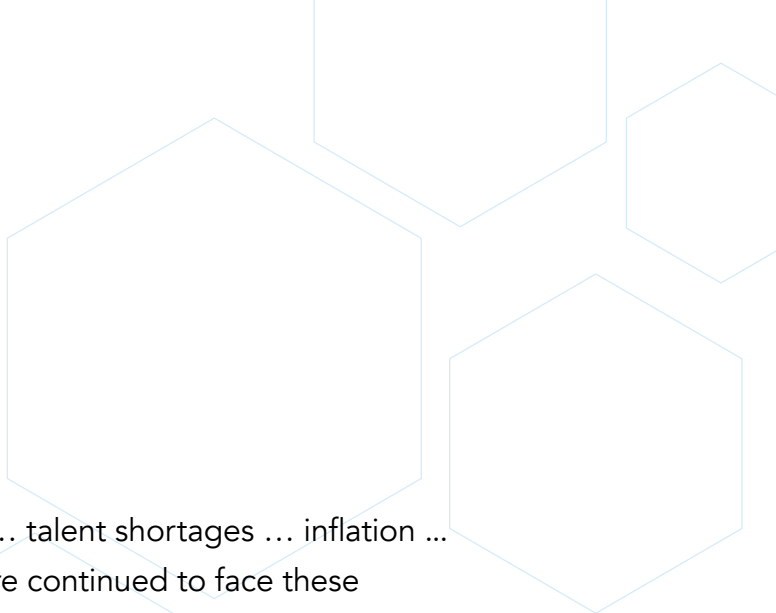


ANNUAL REPORT
2022

Our Mission

McLaren Health Care will be the best value in health care as defined by quality outcomes and cost.





Changes in health care reimbursement ... talent shortages ... inflation ... chronic COVID-19. McLaren Health Care continued to face these compounding challenges in 2022. But the experience we've gained in bringing commitment and value to providing quality health care not only saw us through the year but sparked a fresh approach to innovation.

This year's annual report highlights our commitment to "hit the reset button" and evaluate all aspects of our health care system in the context of current and future health care trends. Mastering this phase shift means combatting shortages in health care talent by "growing our own" through new education, training, and scholarship opportunities. It means leveraging technology to let patients schedule their own appointments, gain specialist care remotely, or have a telemedicine consult in their own homes. It means combining medical education with innovative research to shape health care progress and attract top researchers and research programs to our communities. It means reshaping our separate facilities to create an integrated, data-driven powerhouse that improves quality while trimming costs.

2022 was a "reset" year for McLaren Health Care bringing with it renewed confidence in proven strategies and assurance that we have the structure, tools, talent, and resources to remain successful in the year ahead.

Using Adaptability Skills to Reset How We Deliver and Structure Health Care

As I contemplate our company's clinical and financial performance for the 2022 fiscal year, and, frankly, that of the last several years, I am reminded of an observation made by Vince Lombardi, arguably the greatest football coach of all time. "The price of success is hard work, dedication to the job at hand, and the determination that whether we win or lose, we have applied the best of ourselves to the task at hand." January 2023 will mark the beginning of the fourth year of a pandemic that has shaped the lives of every person on every continent of this planet. We are now beginning to experience the effects of an overheated global economy with central banks moving to rein in a strong inflationary cycle with the financial brake of aggressive interest rate increases. In the face of, and perhaps, despite these challenges, McLaren Health Care has applied the discipline, learned and practiced for decades, required to respond effectively. Our efficiency and quality initiatives over the past decade have taught us to innovate to meet both daily challenges and long-term demands. And in 2022, we have used these adaptability skills to reset how we deliver and structure health care, meet emerging operational challenges, and plan for the future.

Like most health systems, our biggest challenge throughout this year has been, and continues to be, staffing. The COVID-19 era boosted a wave of retirements across the health care industry, creating personnel shortages in critical areas, further exacerbating employee burnout concerns, and triggering unprecedented growth in labor costs. Nursing and allied health professionals are perhaps the most visible component of our team that has been impacted by these industry, economic, and societal trends. But we also face shortfalls in other positions that contribute directly to our ability to provide care and services to our customers, patients, and families. Environmental Services. Dietary. Front office staff. Accounting. Patient admissions. Patient transporters. Few areas have been immune.

National demand for skilled health care clinical and administrative talent is high, leading to turnover and competition for leaders with these specialized skills. The law of supply and demand tells us how this talent market is hitting our operations. Wages are inflating, overtime costs are rising, and we have had to contract with outside agencies to fill demand, which sharply increases payroll expenses.

Ongoing reimbursement shortfalls exacerbate the issue. A study conducted by the American Hospital Association and released in November 2022 shined a light on the practices of many commercial health insurers that are undermining the ability of hospitals to care for their patients. Increasingly, their policies and administrative practices delay patient care, overburden clinicians, and withhold critical payments from providers. 95% of hospitals and health systems report increases in staff time spent seeking prior authorization approval. 84% report the cost of complying with insurer policies is increasing. And much of this effort and cost is unnecessary. 62% of prior authorization denials and 50% of initial claims denials that are appealed are ultimately overturned.

Those were the headwinds for 2022, but the ongoing reset of McLaren Health Care's structures and strategies have kept us growing and pointed toward the future. Our Value-Based Care approach is a blueprint for weaving together cost and quality, and this model saw us through a challenging year. Despite climbing costs and staffing issues, our clinical quality has held strong. Our patient safety dashboard scores exceeded our system target of 105, achieving an overall score of 113. This is a statement on the quality and commitment of our workforce, and I'm very proud of that.

As to staffing, expanded talent attraction and retention programs are tilting the numbers our way. We've centralized hiring operations for nursing staff system wide, added benefits such as student loan and career development support, expanded and improved our GME programs, and are innovating with recruitment overseas.



Philip A. Incarnati
President and CEO



Daniel Boge
Chairman, Board
of Directors

There was more good news for 2022. "Digitalizing" McLaren data systems for staff and customers is moving ahead well, improving quality, saving time and hassles, and cutting costs. Taking our system-wide appointment scheduling and billing functions online meets rising patient demand for these options. Surveys show as many as half of our customers want to communicate via phone and online tools, and we're responding. We're finishing the rollout of our McLaren One/Cerner digital platform, a system-wide data warehouse allowing instant access to health and billing records across all subsidiaries. This will allow us to integrate exciting digital tools like artificial intelligence to analyze data, improve outcomes, and discover new efficiencies.

After investing \$2 billion in capital expenditures over the past several years, we've reset some of our plans over the past year to meet current fiscal realities. On the upside, our all-new McLaren Greater Lansing campus opened in March with 240 inpatient beds, a Level III Trauma Center, a state-of-the-art birthing center, and a Karmanos Cancer Institute facility.

I would be remiss if I did not reflect on one significant loss to the McLaren family in 2022. Dr. Mike McKenna, our longtime executive vice president and chief medical officer, passed away in March. Mike was a remarkable, intelligent, and thoughtful physician and administrator who changed all our views on clinical quality, community health, and value-based care. He was a true gentleman and a personal and professional mentor for me. McLaren is a better organization because of his intellect and passion.

2022 defined itself as a period of retooling, resetting, and refining our strategies for success in meeting our mission ... "to be the best value in quality outcomes and costs." But what didn't change were the lessons we have all learned at McLaren in terms of resilience, hard work, and commitment to our professions. It was these qualities, I believe, that have seen us through these tough times. Challenges like staffing and reimbursement will not go away overnight, but as we move ahead in 2023, we remain focused on our core purpose — growing a health system that ensures affordable access to quality health care outcomes.

As Coach Lombardi said, "... we applied the best of ourselves to the task at hand."

PHILIP A. INCARNATI
President and CEO
McLaren Health Care

DANIEL BOGE
Chairman, Board of Directors
McLaren Health Care

Transformational Shift Leads to More Ambulatory Care and Improved Quality

Fueled by our steadfast commitment to improve quality, reduce costs, and enhance the individual experience for patients, new strategies reshaped health care delivery at McLaren in 2022.

"The past year has forced us to be more innovative and transform the provider side of operations like never before," notes Chad Grant, executive vice president and chief operating officer of McLaren Health Care.

A crucial part of this transformation has been shifting the site of care (where appropriate) away from traditional inpatient settings and more toward ambulatory, community, and home settings. Traditional health care models — and most of our funding structures — have historically been based around large, inpatient hospitals, with patients staying multiple days in a regimen of care for a specific procedure.

This model increasingly clashes with the realities of 21st-century best practice. Care reimbursement models originally shaped around older inpatient structures now often reward newer outpatient approaches. We still need hospital facilities to provide critical levels of care and treatment, but there is a growing shift toward accommodating a long-term, population-based care model that works best for chronic conditions and overall community health.

Smaller, dispersed ambulatory care facilities deliver on this strategy, offering essential walk-in and outpatient treatments without the expensive infrastructure of a comprehensive hospital facility. "We've been ahead of the curve on operating large ambulatory facilities," notes Grant, citing locations in Clarkston, West Branch, Cheboygan, and Fenton, along with plans to open a facility in Oxford in 2023, as



"We've been ahead of the curve on operating large ambulatory facilities. These types of ambulatory facilities and clinics improve access to care and are a key driver of quality. They're necessary for the health of communities today."

CHAD GRANT

executive vice president and
chief operating officer
McLaren Health Care

recent examples. "These types of ambulatory facilities and clinics improve access to care and are a key driver of quality. They're necessary for the health of communities today."

McLaren ambulatory care locations deliver this care where people most need it. "They're sort of a micro-hospital, with clinic facilities and their own emergency rooms," Grant observes. Ambulatory care is also proving ideal not only for our more remote communities, but for customer convenience in urban areas. "It's the front door to our patient experience," he notes. "When care is needed, patients are a lot closer to home ... that makes a big difference in both accessibility and patient satisfaction."



Chad Grant, executive vice president and chief operating officer, and members of the McLaren team

Along with improving access to facilities across the system, McLaren has also implemented programs that improve patient convenience in scheduling appointments.

“Our digital access initiative allows flexibility for patients to schedule appointments outside of picking up a phone,” says Grant. He noted the process is similar to the personal calendar applications that have grown popular online. The client logs onto the practice or physician’s calendar, finds an available time, and books an appointment. To add to patient

convenience, the appointment scheduling service operates 24 hours daily. “Schedule your own appointment” tools are rolling out across McLaren Medical Group (MMG) practices and proving highly popular.

“Our Ob/Gyn clinics transitioned to online scheduling, and we’ve seen great success in its use,” observes Sheila Windy, senior director of operations for specialty care at MMG. “Patients appreciate being empowered to schedule services at times that work for them.”



McLaren Medical Group senior directors Sheila Windy, Kirstie Goolsby-Rizzo, and Sarah Frye

The benefits accrue to both our patients and clinical operations, notes Grant, allowing for optimization of schedules.

“This makes for both a better staff and patient experience,” adds Sarah Frye, senior director of operations for primary care at MMG. “It definitely helps reduce friction on operations — patients can schedule directly into the software, even outside of office hours.”

This remote, on-demand access actually helps in getting more patients seen by doctors, sooner, notes Kirstie Goolsby-Rizzo, McLaren interim senior director of operations for cardio, ortho, and neuro care. “This lets us focus on getting patients back into the office, opening up schedules, and assuring appropriate scheduled time with providers.” The technology tools also allow quality checks on staff responsiveness. “We want patients to be aware we’re doing our best to answer phones and establish a service baseline for staff.”

Perspectives

TRACEY FRANOVICH
president and CEO of McLaren Oakland



After building a successful 25-year career in nursing and health care operations, Tracey Franovich joined McLaren Oakland as president and CEO in early 2022. As a new CEO, she shares her insights on ...

EARLY PRIORITIES Coming into the CEO position during COVID-19, I realized workforce stability was the number one priority. We assessed the current state of our workforce and focused on recruiting in key areas such as critical care and medical/surgical departments. We’ve had success over the past year with stabilizing the workforce and are now able to cover the departments with our own employees’ versus agency resources. By doing so, we have seen a direct correlation with improved quality and safety outcomes and overall better financial performance.

INPATIENT CARE TRENDS There’s been a significant shift to the outpatient setting from the acute care side. Inpatient needs in the hospital today are vastly different than when I was a bedside nurse. The acuity of inpatients today is so much higher, which requires more intense resources. With declining in-patient volume, reimbursement, higher costs of care, and limited resources ... it’s definitely a juggling act.

BALANCING INPATIENT AND OUTPATIENT DEMANDS The key to preserving inpatient volume hospitals have today is a robust ambulatory strategy across all our service areas. This is important if we want to capture, grow, and preserve market share, and manage patient care across the continuum. McLaren is well positioned for this transition. We’re focused on building a strong ambulatory strategy, while maintaining high-quality, accessible inpatient care.

GOALS FOR 2023 Moving forward, my team and I are focusing on growth and development in our key service lines. We’re currently developing a strategic plan for the next two to five years with a focus around improved access, service line growth, and improved outcomes, which will drive an increase in market share. In addition, we’re in the process of constructing a new 54,000 sq. ft. ambulatory facility in Oxford, to open in March. We’re also looking into a potential new 112,000 sq. ft. tower project that will modernize our hospital in Pontiac and ultimately improve the patients’ and care teams’ experiences.

Cheboygan Addresses Behavioral Health Needs

Since 2020, COVID-19, combined with economic and social stresses, have aggravated America's ongoing problems with emotional health issues and their undertreatment. It's estimated that one in five Americans currently deal with mental health concerns — but in Michigan, the problem is approaching the crisis level.

Laura Daniel, interim chief nursing officer for McLaren Northern Michigan in Petoskey, notes that, for acute mental health episodes, the situation is grimmer still. "There are only 32 psychiatric inpatient beds in McLaren's northern Michigan service area."

For McLaren Health Care, combatting this shortage was a vital aspect of our community care mandate that could not be overlooked. Cheboygan Memorial Hospital closed in 2012, though the facility was then purchased out of bankruptcy by McLaren and reopened for some outpatient services. In 2020, local leaders and McLaren Health Care administration started considering whether some of this unused space could be repurposed to improve mental health care in our northern service area.

"We were really fortunate to obtain a grant from the state of Michigan for the first step, which was planning and development," Daniel recalls. The proposal calls for a facility in several phases. Phase one includes an 18-bed adult inpatient unit in a renovated south wing of the Cheboygan facility. This will combine with a "step down" program to help patients return to daily life and avoid hospitalization. On-site physician support, medication management, and various modes of therapy will be included. This is planned for early 2023.

Phase two, still in the development stage, would bring new construction of a dedicated behavioral health unit on the Cheboygan campus, including 12 added inpatient beds. A crucial element in this



A ribbon-cutting ceremony celebrates the new inpatient Behavioral Health facility in Cheboygan.

phase will be shaping an "EmPATH" care unit. EmPATH — Emergency Psychiatric Assessment, Treatment, and Healing — is a system that provides space, staff, and care models to calm and stabilize patients dealing with acute behavioral health crises. "We would have nurses, nurse practitioners, social workers, and psychiatrists working together to de-escalate and evaluate these patients," says Daniel. Dedicated EmPATH units offer intensive, specialized care during a crisis, and have been shown to decrease patient hospitalizations by 60%.

Assembling this nexus for behavioral health care in northern Michigan could also provide a foundation for tackling other underserved area needs, such as addiction treatment.

The value of these services to northern Michigan has appealed to a wide range of funding sources, including foundations and private donors. Despite the personnel shortages plaguing health care, specialized staff hires needed for the new facility are in the pipeline and will be ready to launch services early in 2023.

"We're fortunate that McLaren leadership has been so supportive of this," notes Daniel. "They've worked with government offices to help ensure the grants we need and really paved the way."

Workforce Commitment to Quality and Safety Exceeds System Target

“Quality” in health care may seem difficult to define. Yet quality of care delivery, outcomes, and patient safety are measured with objective data, tightly scored, and closely monitored and evaluated by regulators, care funders ... and most of all, our own staff at McLaren Health Care.

A “dashboard” approach compiles data on everything from complications, to readmissions, to screenings for various health issues, to patient satisfaction. This data goes into great detail, right down to outcomes on specific procedures, and covers all McLaren facilities.

Across America, health care providers faced challenges in improving these quality care measures during the pandemic, which caused care disruptions and talent shortages. “Health care overall saw measures of quality and patient safety compromised during the crisis,” notes Dr. Justin Klamerus, McLaren executive vice president and chief medical officer. Regulators actually suspended some national care quality measures to cope with the rush of COVID-19 demands.

At McLaren Health Care, we have viewed quality challenges as quality opportunities and responded in kind. “Every corner of the organization rose to the challenge, with resilience and commitment to purpose,” Dr. Klamerus notes. In 2022, our system-wide care quality scores recovered from COVID-19 disruptions, and even improved. Our patient safety “dashboard” reporting system set a goal of scoring 105 on overall measures — but we stretched beyond that to achieve a system-wide score of 113.

“Many hospitals in the system hit really impressive quality improvement scores,” says Dr. Klamerus. McLaren Port Huron boosted its patient safety dashboard score by 35 points in 2022, and McLaren Bay Region was up 31.75. Some targeted measures set new records. For example, “preventable harm” is a measure of incidents that occur to patients under our care. For 2022, we cut this to the lowest level since compilation on these items began.

For 2023, new efforts will work to push patient safety and quality measures to new highs. Phyllis McLellan, currently manager of patient safety and clinical risk at McLaren Greater Lansing, will advance in January as patient safety director for the whole McLaren system. “She has a long history in patient safety, and will be leading new efforts for us,” notes Dr. Klamerus. The Institute for Healthcare Improvement has released a “National Action Plan to Advance Patient

McLaren Patient Safety Dashboard



**2022 TARGET SCORE
FOR OVERALL SYSTEM
MEASURES**



**2022 ACHIEVED
SCORE FOR OVERALL
SYSTEM MEASURES**



Chandan Gupte, vice president of clinical excellence and research, and Dr. Justin Klamerus, executive vice president and chief medical officer of McLaren Health Care

Safety,” with 17 recommended actions to improve quality. Dr. Klamerus confirms that McLaren Health Care will be active in putting these into practice.

When it comes to health care quality and patient safety, McLaren will not settle for

simply maintaining our good scores from 2022. “We can’t rest on the work we’ve done,” Dr. Klamerus concludes. “We need to keep making progress on improving quality, safety, and service. This is a high reliability journey, not a destination.”

Growing Our Talent Pipeline

Re-tooling the approach to retaining and recruiting talent at McLaren Health Care has a simple premise at its core.

“The demand for talent continues to be one of the most pressing issues for our industry,” states Kimberly Keaton Williams, vice president of talent acquisition and development and chief diversity officer at McLaren Health Care. “To have the quantity and caliber of talent we need as a health care system, we have to commit to developing the talent pipeline.”

Recruiting for nursing positions was a key focus in 2022 and will continue to be a focus

for the foreseeable future, as many nurses left the health care industry during the pandemic and others transitioned to a traveler nurse option. This left nurses who stayed with the organization often facing longer work weeks and subsequent burnout concerns. McLaren was able to fill some of the gaps by contracting with agencies that provide nursing and other clinical resources, but this was a costly and unsustainable fix.



Jennifer DiSanza, director of talent acquisition, Kimberly Keaton Williams, vice president of talent acquisition and development and chief diversity officer, and Cynthia Johnson, manager of McLaren's nurse recruitment team

“Using agencies for nursing support means going through outside staffing contractors whose markups are high,” notes Carissa Burton, McLaren vice president of human resources.

Motivated to mitigate these issues, McLaren’s recruitment and human resources teams devised innovative approaches to leverage its scale and scope to recruit, retain, and train the skilled people we need.

“Competition is extremely high for talent today, and people are more comfortable moving around,” notes Burton. “But we’re doing a number of things to bridge the gap.”

In FY 2022, the McLaren leadership team developed a plan to create a Centralized Nurse Recruitment Team that was implemented at the beginning of FY 2023. Under this structure, a team was established that is 100% dedicated to nurse recruitment for the system. Prior to adoption of this model, nurse recruitment was handled at the subsidiary level, and many recruiters also had other human resource responsibilities. By focusing solely on nurse recruitment and expanding the scope through a shared talent pool, the centralized recruitment model better ensures that qualified nurse candidates find placement somewhere within the McLaren system.

According to Keaton Williams, “speed is the name of the game,” with high accountability another feature of the restructured system. The new process dictates that candidates are contacted within one business day of applying; hiring managers provide feedback within one business day of the interview; recruiters extend offers within one business day of receiving manager feedback, and candidates receive high-touch engagement throughout their onboarding process.

Cynthia Johnson, manager for McLaren’s nurse recruitment team, says, “When speaking with candidates, our recruiters highlight that with one application and one phone screen they can be considered for any open position that they qualify for within the McLaren network. This is one of the many changes that we have implemented on our



Wanda Campbell, senior executive assistant, and Carissa Burton, senior vice president of human resources

team to improve the candidate experience and highlight McLaren as the employer of choice.”

In addition to this organizational structure change, McLaren saw positive trends in FY 2022 related to recruitment and retention:

- The bedside nurse vacancy rate has been declining.
- The overall turnover rate for nursing job categories has been declining.
- Agency usage for nursing positions has declined by 50% since March of 2022.

Another key program launched in 2022 at six McLaren subsidiaries was a student loan repayment program. The program is designed to help employees who are carrying student loans pay off their debts in a shorter time with reduced interest.

“We are finding that employees participating in the program leave the organization at a significantly lower rate,” Keaton Williams emphasized.

New programs are also underway to “grow our own” by supporting talent to climb the career ladder. “We help develop careers from the entry level,” says Keaton Williams. “Someone may hire in as a nurse aide, and then train to become a nurse.” Other examples include sterile processing technician and

Tracking Talent Acquisition Success

Full-time/Part-time RN

	External Hires	Internal Hires	Transfers	TOTAL
Nurse ER	155	144	7	306
Nurse ICU	100	117	7	224
Nurse Other	712	833	79	1,624
TOTAL	967	1,094	93	2,154

Casual RN

	External Hires	Internal Hires	Transfers	TOTAL
TOTAL	239	257	10	506

1,206

Total External RN Hires

1,351

Total Internal RN Hires

103

Total RN Transfers

medical assistant programs that help employees “earn while they learn.”

McLaren has initiated several programs to hire new employees, pay for their training, and pay them while they train. These are important investments in our employees, giving McLaren access to more diverse talent pools and improving employee retention.

“We value our employees and want to help them grow their careers with McLaren,” Keaton Williams summarizes.

Fresh talent programs are in the pipeline for 2023, including international nurse recruiting, additional improvements to the McLaren Careers Page, and an increased use of technology to improve the candidate experience.

Brian Gamble Named President of Karmanos Cancer Hospital

Brian Gamble was promoted to the position of President of Karmanos Cancer Hospital in July of 2022, succeeding Justin Klamerus, MD. Gamble previously served as chief financial officer at Karmanos since 2015. In that role, he led the accounting and finance activities and actively participated in strategic planning, joint ventures, and growth into new markets.

“As I step into this new leadership role at Karmanos, I am focused on continuing the work that Dr. Klamerus and our colleagues have already begun,” Gamble notes. “Over the last seven years, I have been part of the continued growth of Karmanos, from new therapies and treatments, clinic expansions, the purchase of leading-edge treatment equipment, development of the Karmanos Specialty Pharmacy, and continued investment in our staff. I look forward to working with our team members to expand access for our patients and to introduce new therapies and

treatments as we strive to cure cancer.”

“This is an ideal time for Brian to step into his new role as president, as Karmanos has made wonderful strides in cancer research and care, including treatment access,” says Chad Grant, executive vice president and chief operating officer of McLaren Health Care. “Brian has been instrumental in achieving these milestones for the organization, and we know he’ll be just as valuable in future efforts. With decades of experience in health care finance and operations and the accomplishments that Brian has made over the last seven years, we are confident in his abilities to continue leading Karmanos forward.”



BRIAN GAMBLE
president
Karmanos Cancer Hospital

Karmanos Celebrates New Facilities, Top Rankings

Karmanos Cancer Institute achieved significant milestones in 2022, setting the tone for enhanced growth in services and reputation.

Already the largest cancer network in Michigan, Karmanos expanded its footprint into northern Ohio with the April opening of the Karmanos Cancer Institute at The Toledo Clinic Cancer Center in Maumee.

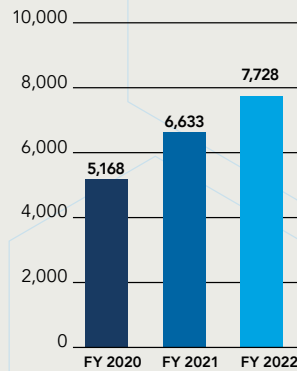
In Michigan, the Weisberg Cancer Center in Farmington Hills completed its expansion project, adding nearly 50,000 sq. ft. to the facility along with advanced technology and supportive space for programming. Karmanos Cancer Institute at McLaren Greater Lansing opened a new 46,000 sq. ft. facility in February featuring state-of-the-art radiation oncology and 38 infusion bays, among other services.

The quality of Karmanos services was endorsed through three major designations earned this past year.

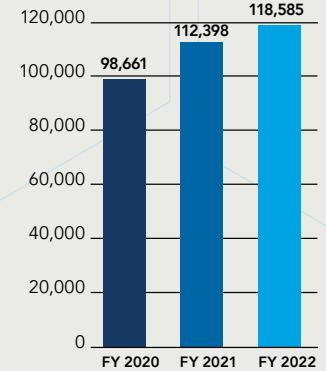
1. Karmanos Cancer Center in Detroit earned a five-star overall rating, the highest possible, from the Centers of Medicare & Medicaid Services. The

System-Wide Cancer Screenings

Lung Cancer Screenings



Mammograms



overall quality star rating compares the hospital's performance to others across the country.

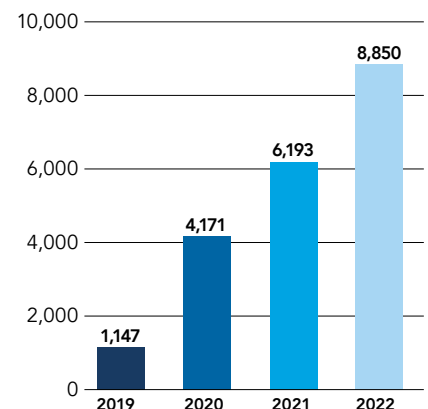
2. Karmanos was ranked the Most Preferred Cancer Provider in Michigan through a survey conducted by NRC Health.
3. Women's Choice Award® named Karmanos as one of America's Best Hospitals for Cancer Care for the 10th consecutive year. The award signifies that Karmanos is in the top 10% of 4,729 U.S. hospitals offering cancer care services.

McLaren Proton Therapy Experiences Record-Setting Year

As the largest proton therapy program in Michigan and one of only 38 in the country, McLaren Proton Therapy Center set new records for patient volumes and number of treatments performed in 2022. To accommodate this growing demand for services, the Proton Center is embarking on two major expansion projects. The first is the addition of 6,700 sq. ft. of work space for the engineers and technical team that maintains the beamline and equipment in the treatment rooms. This will free up clinical space on the main level to accommodate more patient treatments.

The second project involves building out the third treatment room to include two chairs, which will provide an upright proton therapy solution for patients. This project is a collaborative initiative with Leo Cancer Care, which developed this groundbreaking upright treatment technology. The new Leo Cancer Care technology will allow for increased patient throughput, comfort, and access to treatment.

Total Proton Treatment Fractions





Gary Wentzloff, Kim Hamm, and Dr. Michael Ziccardi

Promoting Healthier Populations

Accelerating an effective population health management structure remained a key focus of McLaren Physician Partners (MPP) in 2022. Implementation of programs that support transitions of care across a continuum of providers and allow patients to access services at home were major initiatives this past year.

“Our programs are designed to help manage the disease process itself,” says Andrea Phillips, director of care coordination for MPP. She cites keeping in touch with patients who have chronic conditions, teaching symptom management, and assisting patients after an acute care encounter manage their health from home among the elements that make population health management succeed.

“We have a team of nurses and social workers who work with patients to teach them about disease, management of symptoms, and to address barriers of care such as social determinant issues,” notes Phillips. “For example, symptoms of worsening heart disease often include weight gain and/or swollen ankles, so we ask heart patients to pay close attention to this problem.” In 2022, more than 16,500 patients were being monitored through this initiative.

This outreach and support approach features several programs. Transition of Care programs provide intensive support to patients for seven days after discharge from a hospital or skilled

nursing facility. Patients receive close follow-up in the days after discharge, when complications or inadequate aftercare are common problems. Chronic Care Management programs monitor chronic conditions to head off dangerous issues that otherwise could be delayed or missed. Health problems are caught early, before far more intensive (and costly) inpatient care is required. “Comprehensive Care Management” supports patients through advocacy and navigation of the health care system, and there is also support for patients discharged to skilled nursing facilities.

Other population health management elements target specific needs. The MyCare program delivers remote patient monitoring through phone, text, or email. Along with support by a personal care manager, “an artificial intelligence platform asks disease-focused questions and categorizes responses” to detect hidden problems or early signs of exacerbation, says Phillips. “MyCare expanded to 5,000 patients by the end of 2022 and allows us to keep eyes on thousands of patients.” In a new partnership, MPP joined with DaVita Kidney Care to help

patients with dialysis needs to monitor usage and avoid missed treatments.

The MPP population health management approach harnesses the economies of outpatient treatment and preventative care to make a big difference in outcomes. Patients who needed skilled nursing facility care, for example, fell from 51 per thousand to 48. This may sound like a small improvement, but with the thousands of McLaren patients receiving care, plus the hefty costs of skilled nursing facility care, “we’re actually talking about millions of dollars in savings,” says Phillips — and healthier lives.

From its inception 20 years ago, McLaren Physician Partners has grown to a network of 2,700 care providers responsible for a quarter of a million lives as an accountable care organization. By negotiating contracts with payors based on meeting quality care metrics, offering resources and tools to improve care delivery, and putting physicians ahead of the curve in the accelerating shift to value-based care, MPP physicians — and patients — benefit. In value-based health care, the amount of money hospitals and physicians receive is based on patient health outcomes, with the better the outcomes, the higher the financial reward. That differs from the traditional fee-for-service approach in which providers are paid for each service they perform.

“There’s heavy demand for accountability and cost control in care now,” notes Gary Wentzloff, president and CEO of MPP.

MPP has a proven track record of generating quality and cost outcomes that result in financial

rewards for its physician members. In 2021, McLaren High Performance Network distributed \$3.1 million to providers, with even better results expected for 2022, with MPP to take on more downside risk in its value-based contracts moving forward. In this model, MPP is at risk for the cost and quality of care for all providers as a group and must refund the payer for any incurred losses if it exceeds financial benchmarks. This also has implications for providers, with less acceptance of low performance and potential removal from the contract. However, Wentzloff noted MPP is well positioned to take on this added risk due to its performance history.

Expanding provider engagement was a key focus of 2022 as well. A Population Health Utilization Management Workgroup was launched along with Emergency Department and Hospitalist Physician Advisory Councils.

According to Wentzloff, these complement a trend in population health management toward an integrated care team approach not only focused on primary care, but with dedicated specialists for pharmacy, behavioral, and chronic condition management.

Turning these models into a practical reality requires close integration of care administration and delivery. “We have to change the physician mindset,” notes Dr. Michael Ziccardi, chief medical officer of MPP. “Physicians can no longer just take care of their daily schedule of patients and go home. Now, they may have 2,000 patients to care for, even when they’re not in front of them in the office. A diabetic isn’t a diabetic just a few days a year, so you must keep an eye on patients and stay engaged with them.”

“We’re all about getting physicians the tools into their offices to work as efficiently as possible,” says Kim Hamm, MPP vice president of clinical operations. “We do a lot of outreach, helping practices contact patients and identify care needs.” Constant communication, education, and quality support help MPP physicians gain the edge they need to boost quality scores in a tough environment.



**MIPS* APM
PERFORMANCE
PATHWAY FINAL SCORE**

**Merit-Based Incentive Payment
System score based on 2021 data*

Graduate Medical Education Expands Programs to Attract More Physicians

Michigan’s population is growing older, at rates higher than the rest of the country, with the added acute and chronic health care issues that follow. Yet, almost half of the next generation of physicians needed to provide this care leave Michigan after completing their training. McLaren’s approach to addressing this looming health care mismatch is to “grow our own.”

Progressive graduate medical education (GME) training makes McLaren attractive for young doctors, provides specialized, targeted educational needs, and then delivers the support needed to keep talent in our state. Dr. Robert Flora, McLaren Health Care chief academic officer, cites centralization of a systemwide GME structure as a crucial step in building and maintaining excellence.

“All residencies now operate under the corporate umbrella,” Dr. Flora notes. “This ensures all programs get the resources they need and gives residents many more opportunities. Reshaping this element of GME as a McLaren corporate service line was a long process, but it’s really changed the tone of the programs.”

For 2022, all McLaren medical residency programs, a total of 36, were fully accredited by the Accreditation Council for Graduate Medical Education. The scope of GME residency and training options have also been expanding fast at the McLaren teaching hospitals. Examples include pulmonary critical care at McLaren Greater Lansing and Flint, podiatry at Macomb, and anesthesiology, cardiology, and minimally invasive surgery at Flint. Coming in 2023 will be new internal medicine GME programs for Port Huron, Lapeer, and Bay Region, and planned expansions of hematology/oncology for Lansing and health psychology positions throughout McLaren. “We’ve seen significant growth in just the past year,” notes Dr. Flora.

Graduate Medical Education Programs

1 American Psychological Association Program

2 Council on Podiatric Medical Education Programs

2 Unaccredited Fellowships — Surgical Breast Oncology and Minimally Invasive Surgery

37 Accreditation Council for Graduate Medical Education Programs

486 Residents and Fellows

NEW GME PROGRAMS

McLaren Greater Lansing

- Pulmonary & Critical Care Medicine Fellowship Program (2021)

McLaren Northern Michigan

- Rural-Track Family Medicine Residency Program (2022)

McLaren Flint

- Anesthesia Residency Program (2022)
- Interventional Cardiology Fellowship Program (2022)
- Pulmonary and Critical Care Medicine Fellowship Program (2022)



Dr. Robert Flora with (from left) Dr. Kamal Rikabi, pulmonary and critical care Fellow; Dr. Khaing Htwe and Dr. Sajjad Gul, cardiovascular disease Fellows; and Eitan Scher Nemirovsky, anesthesia resident.

While these GME offerings address valuable specialty care needs, our growing primary and rural care training options fulfill some of the urgent care needs facing Michigan. A “rural track” family medicine residency, launched at McLaren Flint and McLaren Northern Michigan, uses the broad geographic footprint of McLaren Health Care to provide training. Residents combine training at our urban facilities for one year with rural training for two years. “We know that 25% of our residents want to work in rural settings, and we can now track training to rural practice,” says Dr. Flora.

At McLaren, we’re also working to assure young physicians not only learn health care, but also practice self-care. Medical residencies are notoriously demanding, but today, physicians enter into practice confronting a fresh set of stresses, from student debt, to new practice options, to the shifting economics of health care. “Our GME program is on the leading edge of aiding newly graduated medical students through

early assessment and support to build coping, critical thinking skills, and emotional intelligence,” notes Barbara Wolf, PhD, a psychologist in our department of family medicine. “This is valuable in decreasing and preventing physician burnout.”

Medical education that works to both train and retain talent in McLaren communities extends beyond physicians, however. Our nursing education program is innovating to meet this most urgent talent need. One example is our successful partnership with Grand Valley State University’s Kirkhof College of Nursing. Since its launch in 2018, this partnership has gained grants of nearly \$5 million to fund and train future nurses. “This really helps us expand nursing support in underserved areas,” says Lisa Zajac, director of clinical informatics, Karmanos Cancer Center.

“This is where health care needs to go,” concludes Dr. Flora. “By converting McLaren into a learning organization, we build better quality and safety, and significantly increase our research opportunities.”



McLaren Greater Lansing Opens a New Chapter of Patient-Focused Care

After breaking ground in 2018, McLaren Greater Lansing opened its \$601 million health care campus in March of 2022.

The project features a 240-bed state-of-the-art hospital that represents a consolidation of McLaren's two former hospitals in Lansing. The 562,000 sq. ft., nine-story facility is located on 39 acres adjacent to Michigan State University and features all private patient rooms. The entire campus was designed with technology and features to enhance the patient experience and provide innovative, high-quality care.



The hospital has a dedicated ambulance entrance, where there are four enclosed bays to unload patients, and a ground-level helicopter pad. The emergency department has all private rooms, specially designed trauma rooms and elevators, an observation unit, and mental health rooms with specific features designed for patient and staff safety, as well as CT, X-ray, ultrasound, and vascular imaging in the emergency room. McLaren Greater Lansing also includes an expanded ICU, and specialty services such as the Orthopedic and Sports

Medicine Institute, Heart and Vascular Institute, and Karmanos Cancer Institute.

"This new hospital provides hope and healing for our community," said Kirk Ray, president and CEO of McLaren Greater Lansing. "It was designed for the patients we have today and for generations to come. We have added many new features to accommodate any health needs our community may have. We are positioned to not only be the best health care provider in mid-Michigan, but well beyond."

Advancing World-Class Clinical Research

When community members are asked about McLaren Health Care, they'll likely mention their local hospitals and facilities, or a trusted physician who is affiliated. Mention "clinical research," and it may not be immediately top-of-mind.

The reality is that leading-edge, world-class clinical research, and the steady improvement in medical care it provides, is actually as close as your nearest McLaren subsidiary. This research brings new treatments, improved quality, and renewed hope to people throughout our coverage area. It is also essential to our safety and quality initiatives. Without a solid database on the outcomes of various treatments and care models, new and current, our quality improvement efforts would be limited to anecdotes. Through this relentless pursuit of research opportunities, McLaren patients can be first in line for coming innovations in health care.

It was a busy year for research at McLaren Health Care. The McLaren Human Research Protections Program is in the process of renewing accreditation through the Association for the Accreditation of Human Research Protection Programs (AAHRPP). According to Chandan Gupte, vice president of clinical excellence and research, "This accreditation assures that all clinical research conducted across our system meets the highest level of regulatory and ethical standards." AAHRPP accreditation requires site visits, plus extensive fact-finding, self-assessment, and data submission, but brings major benefits in attracting top-level research projects to McLaren.

McLaren's Center for Research and Innovation expanded its activities and began to focus on investigator-initiated research, in addition to industry-sponsored clinical trials. In the past, most research was limited to cardiovascular and neurological specialties, but fresh opportunities are expanding. For example, a grant is pending with the National Institutes of Health for treatment of Alzheimer's disease with McLaren's proton beam therapy. "We have exciting research underway in non-oncology areas, along with our ongoing focus on cancer research," Gupte notes.

Technology is also reshaping research and quality at McLaren in some unexpected ways. New software using artificial intelligence to help investigators recruit for research is being assessed. This will facilitate participation for investigators in new and innovative research that will propel better patient care and improve outcomes.



Proactive Solutions to Supply Shortages

The situation facing health care providers in the spring of 2020 was unprecedented as COVID-19 induced demands for personal protective equipment (PPE) and other supplies far exceeded available inventory. Fast-forward two years, and supply shortages are no longer a pressing issue at McLaren. That is because McLaren pulled out all the stops to source, produce, and innovate ways out of the crisis. “In 2020, most of our PPE was produced offshore, especially China,” recalls Dave Bueby, vice president of supply chain management for McLaren Health Care. To ensure product disruption had the least impact on patient care, McLaren Health Care took the direct route to source our own PPE. “We invested in Prestige Ameritech, the largest mask maker in the U.S.,” Bueby noted.

The mask investment proved so successful that McLaren is now working on direct sourcing and investment with our group purchasing partner, Premier, and other manufacturers for more high-demand items such as exam gowns and exam gloves. A company in Tennessee, DeRoyal, will become our primary source for procedure gowns in 2023, and a joint venture with a Honeywell subsidiary will be our source for exam gloves made in the U.S. as well.

“These are high-volume items, and we’ve had to make significant commitments, but we’ve been very successful,” notes Bueby. Sourcing these, and the thousands of other items required for McLaren Health Care operations, was one challenge, but another has been assuring they are readily available and well distributed throughout our subsidiaries. In the throes of COVID, McLaren had employed a single “COVID warehouse” approach, which centralized critical supply and allowed management to allot products quickly to meet spot demands. The easing of COVID, as well as supply bottlenecks, prompted a return to more hospital-based inventory. However, one lasting benefit of the centralized approach is the valuable consolidation of data and logistics functions. “We’re better able to track daily activity through technology and our centralized



Rachel Knox, director of corporate supply chain management, and Dave Bueby, vice president of supply chain management

database,” Bueby noted. “We can manage customer requests and receiving products, and we continue to tweak this system for even more functionality.”

Despite building new production capabilities and data tools for Supply Chain, Bueby notes that McLaren Health Care still wrestles with a few lingering COVID-provoked challenges, specifically regarding product availability and rising costs. “We are partnering more than ever with our distributors to ensure that manufacturers continuing to have issues with product availability are monitored and any gaps caused by them are mitigated.” Bueby further elaborated, “We’re always looking to include cost as a factor in obtaining product; however, in doing so, we never forget our staff on the front lines. We want to make sure they are always getting what they need.”

McLaren Health Care has one of the leanest supply chain operations of any health care system in the country, but this hasn’t stopped Bueby or his team from continuing to innovate and set higher goals. The McLaren Value Analysis Team has been reinvigorated to tackle new product requests on the basis of quality, cost, and driving standardization throughout the corporation. Additionally, a new team within Supply Chain, the Business Analytics Team, was formed to be able to support leadership and focus on proactive opportunities.

Accelerated Focus on Enhancing Experience

The COVID-19 pandemic transformed many areas of health care delivery, but perhaps most notably in its acceleration and adoption of patient-facing technologies, and the resulting comfortability in the patient and caregiver communities when using those technologies.

Expectations are rapidly evolving in several critical areas: patients interacting with their health care provider, how team members are supported by their organization, and the level to which patients value digital access and experience as a competitive health care differentiator.

“It is our mission at McLaren to be the best value in healthcare as defined by quality outcomes and cost,” said Derek Morkel, chief information officer at McLaren Health Care. “One of the most meaningful ways COVID-19 impacted our organization is the way it changed our perspective on what exactly defines a quality outcome. Once a testament to a metric-driven process measuring clinical outcomes, a ‘quality outcome’ for patients now increasingly includes an ‘ease of use’ component — specifically, how easy was it for the patient to plan, schedule, and manage their care journey.”

McLaren patients’ digital demand for convenient self-service is soaring to all-time highs, with record numbers accessing McLaren websites, making appointments online, checking in, and virtually visiting providers. McLaren team members and leaders are also increasingly turning to technology to help address staffing and operational challenges while the digital health care space continues to grow and expand. Global leaders in technology, data, supply chain, and retail with sophisticated understanding of consumers and seemingly unlimited resources (such as Amazon, Google, Apple, and Walgreens) are entering health care markets and emerging as potentially



“For a system as large and complex as McLaren, it’s both vital and challenging that our patients receive the same exceptional level of care and convenience at every touchpoint.”

DEREK MORKEL
chief information officer
McLaren Health Care

formidable competitors to traditional health care organizations.

Each of these factors represents singularly complex challenges that, when considered together, underscore the critical importance of simplifying the health care experience for the consumer through digital tools that create convenient access and seamlessly integrated experiences.

“For a system as large and complex as McLaren, it’s both vital and challenging that our patients receive the same exceptional level of care and convenience at every touchpoint,” said Morkel. “Advancing our integrations and experience for our patients is a top strategic focus, and while we’re pleased with the progress we’re making in this area, we also recognize we’ve got more to do.”

McLaren established a significant digital access and experience focus in 2022 with a team of multidisciplinary consumer experience (CX) leaders and subject matter experts from across the system. These individuals guided a comprehensive assessment of current system-wide technologies, capabilities, and experiences, while simultaneously exploring, mapping, and implementing long-term CX solutions and creative pilot initiatives. These steps made an immediate impact toward enhancing and standardizing the patient and team member experience while also developing a comprehensive vision for the future.

As patients sought more digital self-scheduling and reservation options, McLaren expanded and enhanced scheduling access for emergency, convenient care, and primary care. From expanding access to new locations and providers, to improving appointment transparency, accuracy, and availability, McLaren’s advancements in these areas resulted in record levels of patient self-scheduling and satisfaction.

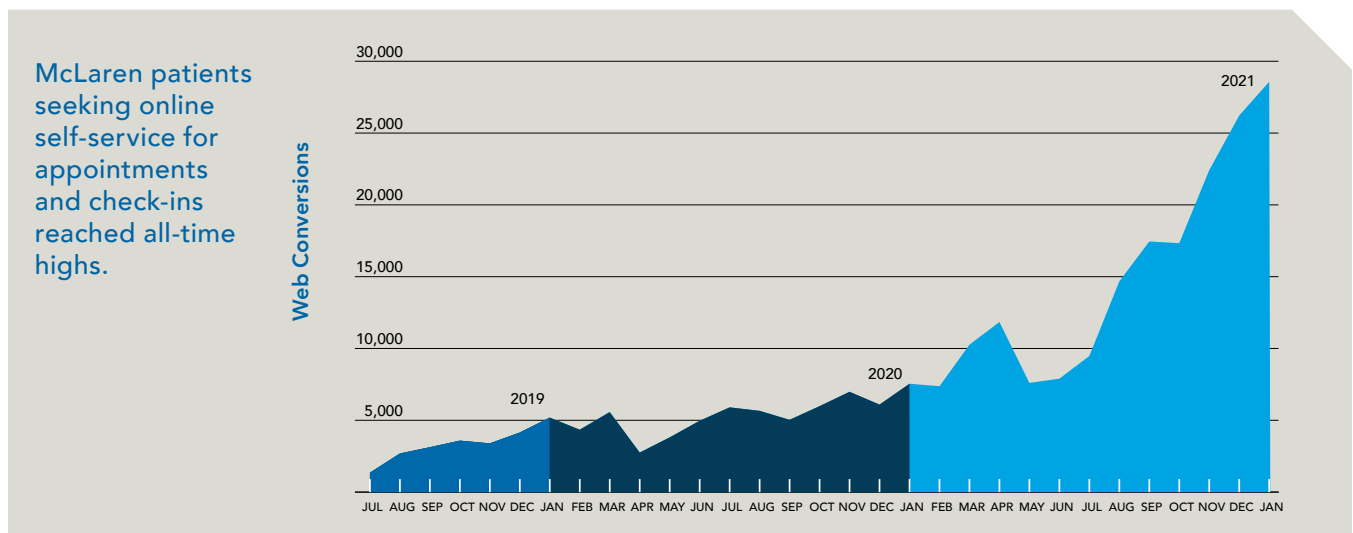
In June, McLaren launched online reservation availability for outpatient laboratory locations in Flint and Lansing regions. Historically a walk-in only service, laboratory draw station self-scheduling in these areas now prioritize STAT labs and scheduled appointments while

still welcoming walk-ins. More than 4,000 lab appointments were made in five months, with some locations experiencing “sell-outs” — or 100% of available appointments booked online — on a nearly weekly basis.

One of the most frequent ways patients engage with their provider and health management is through their electronic medical record (EMR) and online patient portal. McLaren made important strides in this area in 2022, transitioning three regions to the McLaren EMR standard and launching patient self-registration functionality in these areas.

While these initiatives are complex, McLaren is eager to implement these and future new technologies that will further support the patient and team member experience.

With forthcoming patient self-registration technology in primary care, lab, and imaging, soon patients can skip wait times while McLaren staff can reduce clerical burden. Research and development have begun in earnest on utilizing artificial intelligence and automation to support call center staff, further empowering patients to self-schedule and conveniently interact with their provider over the phone. As more patients, staff, and community members visit McLaren digital assets, thoughtful website navigation and user interface design will help visitors find what they need quickly — and easily.



Fore Charity and Community

The power of professional golf to drive philanthropic giving and community engagement was in full swing at the 2022 Ally Challenge Presented by McLaren.

From a record-breaking \$1.7 million raised for area charities to attendance numbers topping 14,000 on Saturday alone, the tournament exceeded expectations on all levels.

In its fifth year at Warwick Hills Country Club in Grand Blanc, the Ally Challenge Presented by McLaren has earned its status as one of the premier events on the PGA Tour Champions circuit. The tournament continues to attract the top golfers on the Champions Tour, with Steve Stricker taking home the winner's trophy this past summer. Enhanced visibility of the McLaren brand and services is a key draw, but the prime motivation for McLaren's involvement is the community benefit that is generated through this event. To date, the tournament has awarded more than \$6.2 million to support local charities in Genesee County and beyond. An additional \$300,000 has been raised for the McLaren Flint Foundation through a targeted program with our vendor partners.

With high-level professional golf at its core, the tournament added several special events in 2022 to extend its outreach and appeal. The



Steve Stricker — 2022 Ally Challenge Presented by McLaren champion

result was a 56% increase in attendance over 2021 and more than double the revenue from ticket sales. Country superstar Kane Brown drew record crowds for Saturday night's community concert, and the antics of ESPN's Jalen Rose during the celebrity shootout prompted Jack Nicklaus to give him a quick on-course lesson that attracted 9.2 million views on social media.

One other "first-time" event that elevated the tournament's inclusive focus was the McLaren Adaptive Golf Clinic. With input from Tracy Ramin, executive director of the National Amputee Golf Association, McLaren recruited five adaptive golf coaches from across the country to come to Warwick Hills and work with 20 individuals ranging in age from 10 to 80. Each one had a unique physical disability that required them to approach the game of golf in new ways, utilizing adaptive equipment and techniques the coaches provided.

While teaching new techniques is important, the best lesson adaptive golfers can learn





Country superstar Kane Brown fires up the community concert crowd

has everything to do with attitude, Ramin emphasizes. Ramin knows what he is talking about, after an accident in 1998 left him with his left leg amputated below the knee.

"If you think the world is over because of a setback, well, then, it may be," he says. "But, having clinics like these really do inspire people to understand that they can still live their lives and do what they enjoy."

And inspire it did. Words cannot describe the joy on the faces of these golfers as they realized they

could still participate in the game they love and thought they might have had to give up forever.

"Anytime you can get some independence back and do something to put a smile on your face, it is good for recovery," noted Tim, a clinic participant.

Grand Blanc resident David Aikens was an avid golfer prior to being diagnosed 13 years ago with a neurological disorder that limited his mobility. He decided to give golf one more shot at the Clinic.

"This clinic was fantastic," he notes. "I am encouraged for everything to change now. Once you can realize you're not too limited, it helps with your recovery. You're just out playing golf and being around the game."

Clinic participant Kevin Holland, who has cerebral palsy, summed it up, "It's called 'golf therapy' for a reason. My happy place is on the golf course." Funded through the McLaren Flint Foundation, the Adaptive Golf Clinic truly underscores the power of golf to bring people of diverse abilities, motivation, ages, and backgrounds together for a common purpose.

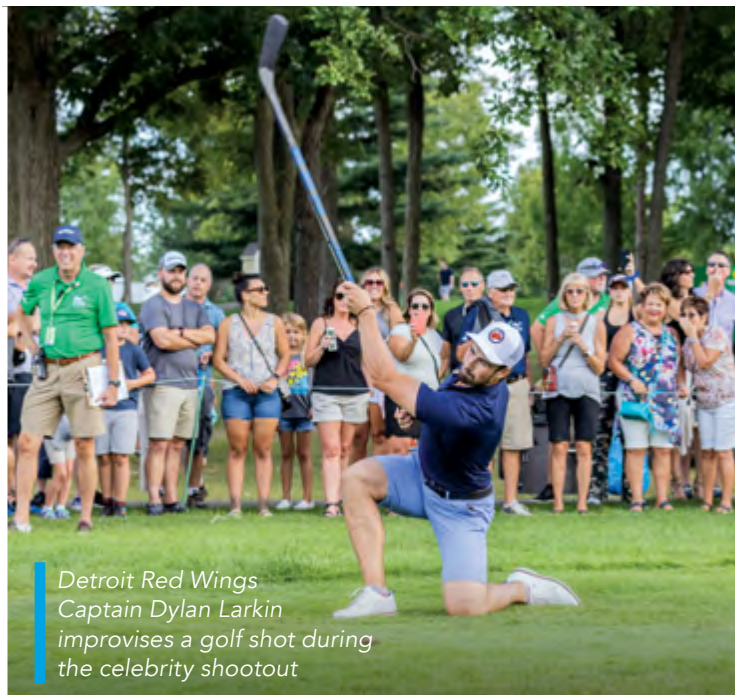
With our partners Ally Financial, the PGA Tour, HNS Group, and Warwick Hills, McLaren is committed to building on this momentum in 2023 and continuing to impact positive change and community stewardship.



PGA TOUR Champions pro Pádraig Harrington



McLaren Adaptive Golf Clinic coaches and participants



Detroit Red Wings Captain Dylan Larkin improvises a golf shot during the celebrity shootout

McLaren and the Detroit Tigers Team Up for Greater Awareness

McLaren's partnership with the Detroit Tigers has hit it out of the ballpark for three years running.

As the official health care system of the Detroit Tigers, McLaren blends the appeal and assets of Major League Baseball with expanded outreach for McLaren programs and services throughout Michigan. This includes collaboration with the Tigers on:

- Targeted cancer awareness games and activations throughout the season;
- Social media posts calling out McLaren programs and services;
- Promotional features on Tigers baseball radio and television broadcasts;
- Hundreds of game-day tickets for employee, physician, and patient appreciation;
- Fundraising initiatives for the Karmanos Cancer Institute Foundation;
- Support for cancer research;
- First aid stations on all levels of the ballpark featuring the McLaren brand and staffed by McLaren personnel; and
- Signage featuring McLaren and Karmanos logos in prominent locations both inside and outside the ballpark.

Headlining this past season's lineup was the popular Pink Out the Park initiative. On this annual night in May, Comerica Park was transformed into a sea of pink to promote breast cancer awareness. More than 25,000 fans attended the game to honor breast cancer survivors and pay tribute to advances in cancer treatment and services. Karmanos Cancer Institute and McLaren Health Care were featured

throughout the event, providing physician specialists for on-field interviews, frontline caregivers as the "starting 9," and staff to man educational booths throughout the concourse. Breast cancer survivors from Karmanos threw out the first pitch, provided media interviews, and lined the field by the hundreds for pre-game recognition. McLaren provided 1,000 complimentary tickets to patients throughout the statewide Karmanos network. Their enthusiasm was contagious and inspirational, as they banded together to share in support for each other, their caregivers ... and the Detroit Tigers, who capped the evening's festivities with a win.

McLaren and the Tigers also went to bat for prostate cancer awareness in July. The programs, patients, and physician specialists of Karmanos Cancer Institute were again featured in pre-event promotions as well as during game day. And 500 prostate cancer survivors from the statewide Karmanos network received complimentary tickets to join 23,000 other fans in the wave of support at Comerica Park. While the event was a sure win for prostate cancer awareness, the Tigers did their part as well, delivering a 12-4 victory over the San Diego Padres.

These are but two examples of the impact that has been achieved through this collaborative relationship, with extended goals ahead for 2023. The value of this partnership for McLaren goes well beyond the tangible assets by extending goodwill, enhancing health education and awareness, and promoting an improved quality of life in the communities we serve.



Service Area



By the Numbers 2022



389,217
ER Visits



768,193
Days of Inpatient Care
Includes Hospice Days



87,481
Discharges



252,942
Home Care Visits



121,849
Contracted Providers



4,010,473
Ambulatory Visits
Includes Home Care Visits



3,412
Licensed Beds



83,358
Surgeries



\$1,791,395
Annual Payroll in Thousands



5,488
Births



229,693
Hospice Days



\$6,459,651
Net Revenue in Thousands



27,280
Observation Stays



\$494.6 million
Community Benefit

SERVICE AREA KEY

- 1 McLaren Bay Region
- 2 McLaren Bay Special Care
- 3 McLaren Caro Region
- 4 McLaren Central Michigan
- 5 McLaren Clarkston
- 6 McLaren Flint
- 7 McLaren Greater Lansing
- 8 McLaren Health Management Group
- 9 McLaren Insurance Company, Ltd.
- 10 McLaren Lapeer Region

- 11 McLaren Macomb
- 12 McLaren Northern Michigan
- 13 McLaren Northern Michigan at Cheboygan
- 14 McLaren Oakland
- 15 McLaren Port Huron
- 16 McLaren Thumb Region
- 17 McLaren St. Luke's
- 18 Karmanos Cancer Hospital

- Karmanos Cancer Institute
- ★ McLaren Health Care Headquarters
- McLaren Medical Group
- Proton Therapy Center
- McLaren Physician Partners
- McLaren Health Plan
- MDwise
- McLaren CareNow Clinics at Walgreens

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Michael E. McKenna, MD Leaving a Legacy of Excellence

March 26, 1953 – May 9, 2022

McLaren Health Care lost one of its most steadfast and beloved advocates for quality care this past year, with the passing of Dr. Michael McKenna. During his 10-year tenure as executive vice president and chief medical officer, Dr. McKenna sparked a transformation in health care quality and value at McLaren, focusing on clinical best practices, smart use of data, and commitment. He was a resolute proponent of research and a respected mentor to hundreds of physicians, nurses, and health care professionals.

Dr. McKenna brought national recognition to the system through year-over-year improvement in clinical outcomes and expanded access to high-quality care throughout McLaren's three-state service area. Health systems from around the country reached out to Dr. McKenna for guidance as he earned the esteem of professional colleagues nationally.

His dedication to the advancement of medicine was surpassed only by his dedication to his family, including his wife, Susan, their four children, and seven grandchildren.



“Mike McKenna was a positive agent of change. What he was able to accomplish here in 10 years was remarkable and changed our views on clinical quality, health care, and value. He had a talent for getting independent doctors to work together on clinical quality and do what they knew was best. He was a true gentleman, and no challenge was too big that he wasn't ready to take the lead on it.”

— **PHILIP INCARNATI**, *president and chief executive officer*

“The passing of Dr. McKenna is a huge loss to the system. He was a dear friend and mentor, not just to me but to hundreds of people. There has been no physician in the history of McLaren who had a deeper impact on our physicians, and on overall care.”

— **DR. JUSTIN KLAMERUS**, *executive vice president and chief medical officer*



ONE McLAREN PARKWAY
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