

HNI Healthcare Solutions in Practice

HNI empowers talented people and develops
intelligent technology to transform healthcare



HNI Healthcare's Solutions in Practice:

Evaluating Our Clinical & Operational Impact on Patients, Providers & Managed Care Partners Across 120+ Sites of Care

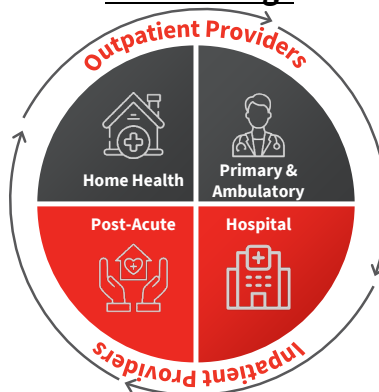
HNI at-a-Glance:

- + 500+ employed providers
- + Proprietary integrative technology – VitalsMD®
- + 120+ digitally & clinically integrated sites of care
- + ~750K Annual Encounters
- + 15 years delivering clinical excellence
- + Deep experience in risk-based arrangements
- + Supporting hospitals, providers & managed care partners
- + Recognized for quality & innovation

A Different Model for Coordinating Inpatient & Outpatient Care

HNI integrates exceptional clinical teams with intentionally designed technology to align providers, patients, hospitals and payors. We maximize patient safety and efficient clinical operations by enabling peer-to-peer connectivity across stakeholders.

Coordination Across Care Settings



Flexible Engagement Model for Partners



Network- Wide Clinical Quality & Patient Safety Results

HNI's 2024 Hospital Medicine Report Card - ~448K Encounters Across 75K Patients

11.7%

30 Day
All Cause RTA

1.08

Acute LOSi (O/E)
(0.97 when D/C to
home)

69.4%

Patients Ambulated to
Home ("PATH")

0.15%

Locum Tenens
Utilization
(as % of all shifts)

1K

Acute (Re-)
Admissions Avoided

7K+

Caregiver & Long-
term Planning
Discussions

Note: Results reflect programs where HNI employed or aligned physicians are providing HM inpatient care



HNI Impact: '24 HM/IM Operational & Financial Results

HNI enables long-term hospital success by aligning clinical discipline & operational efficiency

Targeting Resource Waste



\$39.0M

un-covered costs
from IP Bed Days Avoided
(LOSi alignment)



\$14.2M *waste*

from Reduced Hospital
Readmissions
(30-Day All Cause RTA)



\$4.1M *savings*

from Reduced
Provider Shifts
(LOSi alignment)



\$2.1M *labor cost*

from Avoided Locum Costs
(locum utilization rate)



\$59.4M+

“Hard Cost” Waste
Removed

Getting Patients Healthy & Home



39.0K

Hospital Days Avoided
by Controlling LOS



4.9K

Hospital Days Avoided
by Reducing RTA



43.9K

Patient days at home
instead of a hospital

Notes:

1. Results reflect programs where HNI employed or aligned physicians are providing HM inpatient care (unless noted otherwise)
2. HNI data elements based on internal reporting
3. Savings and improvement figures are estimated by comparing HNI results to available market data
4. Improvement from expected at representative sites

Sources:

1. Avg LOS – Definitive Healthcare
2. RTA Rate– NCBI & Natl Readmissions Database

HNI's Focus on Patient Safety & Clinical Quality

Creating change with individual & organizational commitment

Fundamentals for Driving Change:

- + Highly- focused and trained providers committed to patient safety & quality
- + Clear & comprehensive protocols for patient management
- + Teams- based clinical models that foster collaboration
- + Provider- facing tools that enable disciplined care planning and safe transitions
- + A patient- first mentality, always

Managing Inpatient Sepsis Mortality at Ascension St. Vincent's in Jacksonville, FL

Disciplined medical management and a focus on Sepsis protocols drove 16-20%+ year-over-year improvement in Inpatient Sepsis Mortality across the Ascension St. Vincent's health system

Location	YoY Improvement	Compared to Benchmark
SV - Clay County	16.2%	(11.8%)
SV - Riverside	20.3%	(11.8%)
SV - Southside	18.5%	(6.1%)
SV - St. Johns County	n/a	(24.0%)

Driving CAUTI / CLABSI SIR to 0% in <90 Days at Ascension Sacred Heart Bay in Panama City, FL

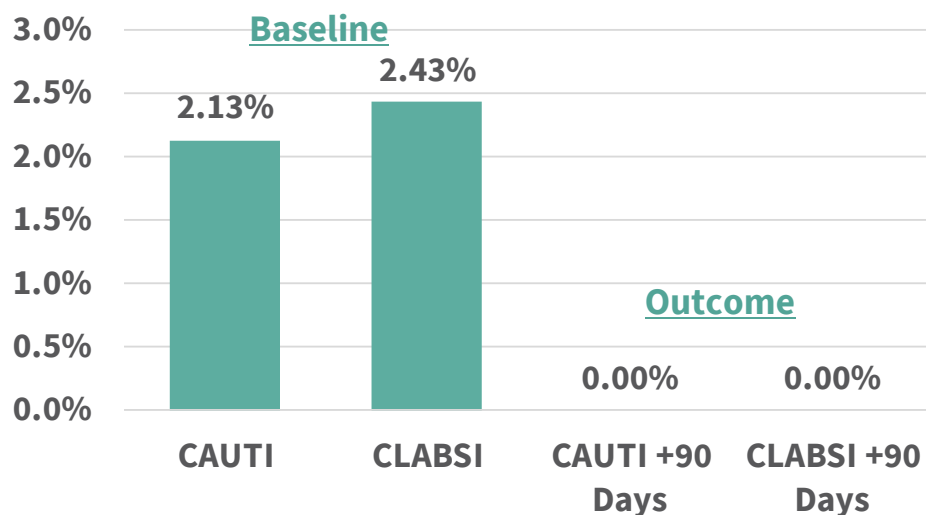
Within the first quarter of HNI managing both the ICU and HM providers, the Standardized Infection Ratio (SIR) for CAUTI and CLABSI were reduced to **ZERO**.

Taking Note



Sacred Heart & St. Vincent's were the only Ascension facilities and the only systems in Florida recognized in

Premier-PINC AI Top 15 Health Systems of 2024



Note: Based on hospital clinical quality & safety reporting

Expanding HNI's Impact as a Long-term Partner

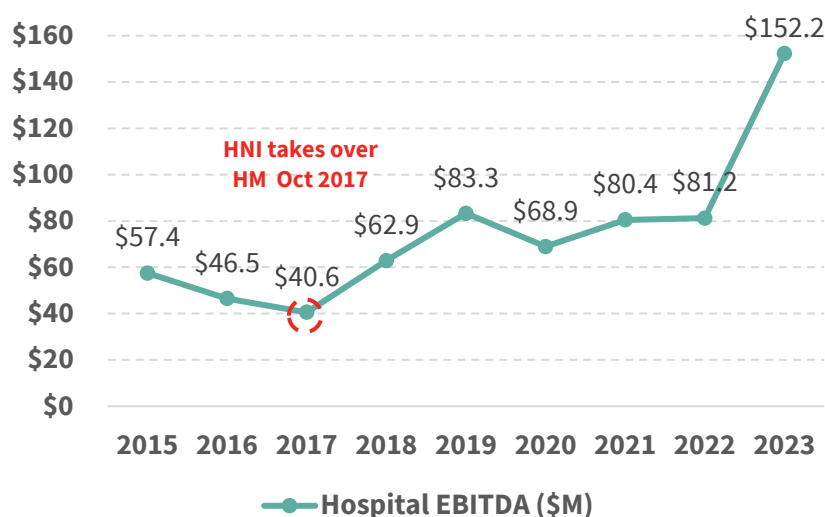
7+ Years as an Integrated Partner for a Large Regional Hospital

Hospital Profile:

- + 300+ bed regional anchor in for-profit health system
- + Rapidly growing market in the Southwest
- + 2024: 26K Encs & 4.5K D/C
- + GME program in IM / HM
- + HNI launched in Q4 '17
- + Exceptional clinical & patient safety results

Establishing Hospital Financial Stability

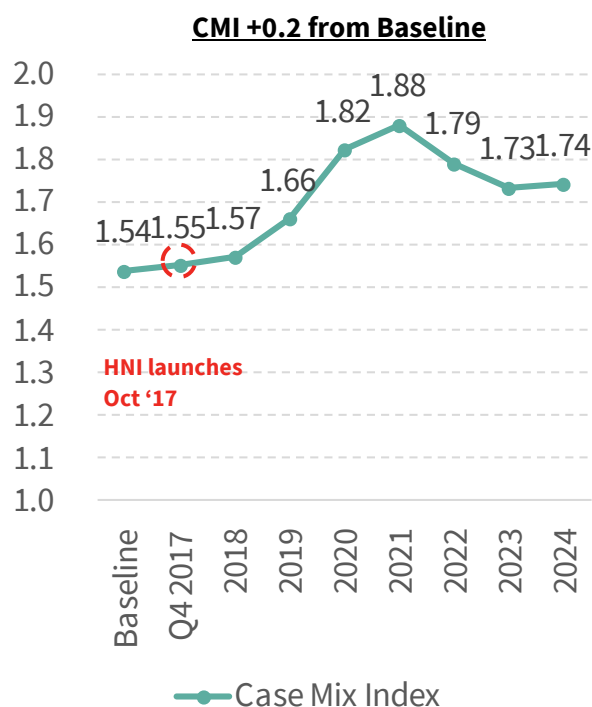
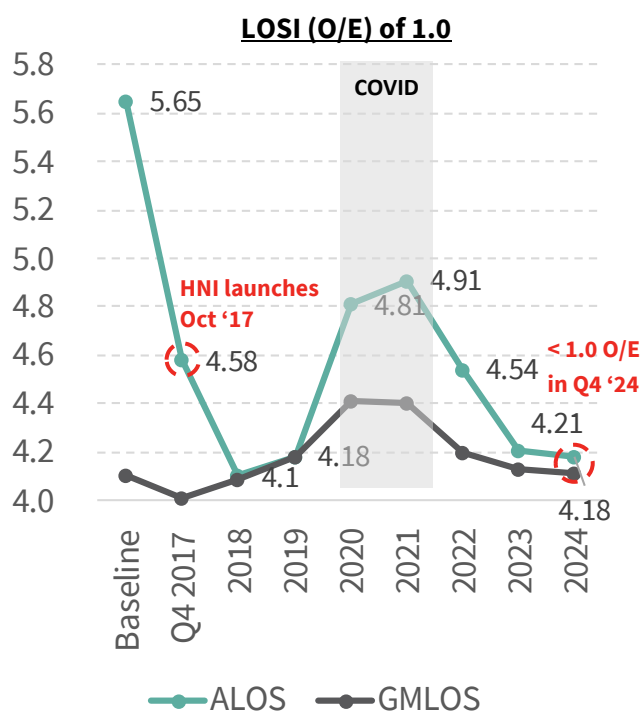
3.8x Expansion in Hospital EBITDA Over Six Years



Note: Based on reported financials per Definitive Healthcare

Aligning Length of Stay & Capturing Patient Acuity

Identifying patient risk & managing LOS is fundamental to providing sustainable quality care



\$11.6M Estimated Annual (Recurring) Impact from LOS Alignment & CMI Capture

Notes: (1) Actual reported patient LOS against GMLOS; data excludes outliers consistent with hospital-level reporting; Observed / Expected Length of Stay ("O/E") based on actual LOS divided by GMLOS; (2) Actual reported Case Mix Index

Aligning Academic & Clinical Missions With HNI

Building Graduate Medical Education in the Community Hospital Setting

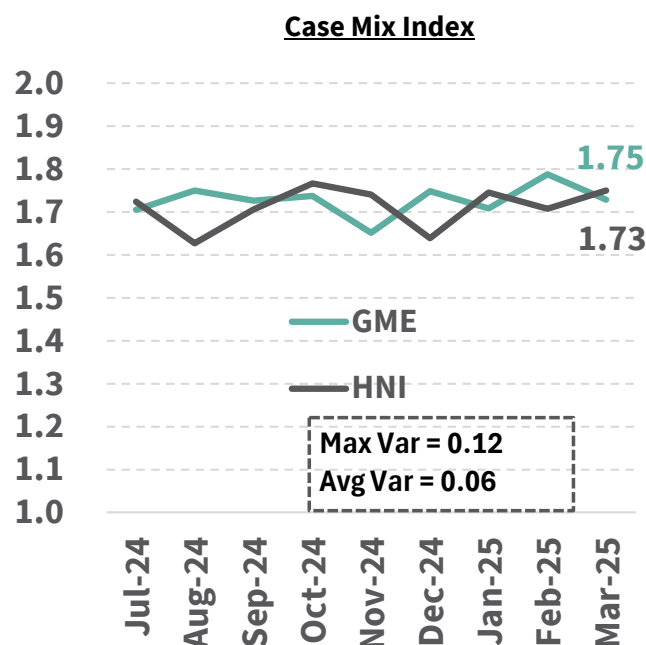
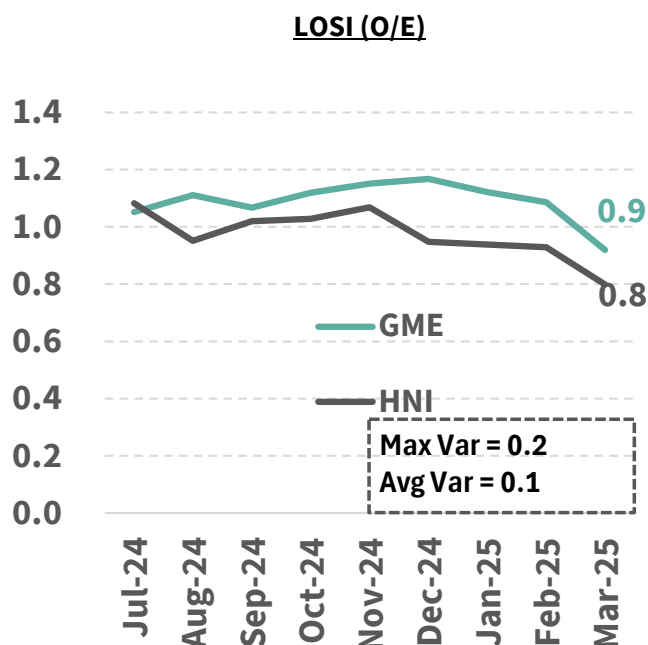
GME Matters... and Getting it Right Matters Too

GME & community health are mixed missions that require close coordination & management

GME Programs are Fundamental for Our Health Ecosystem:	GME Programs Come with Risks – Particularly in Community Hospitals:
<ol style="list-style-type: none">1. Expanding medical school enrollment2. Increasing hospital clinical capacity3. Building a pipeline of local doctors4. Financial incentives that support the program & investment in the system5. Community benefits from access to well- trained clinical resources	<ol style="list-style-type: none">1. Investment required to “fund the gap”2. “Burnout risk” applies to residents and community- based faculty3. Disruptions to workflow- overutilization, poor coordination & documentation4. Breakdowns can extend LOS & increase patient risk with higher cost of care

HNI’s VitalsMD® technology & effective clinical model makes us a highly- effective partner capable of supporting the dual mission of graduate medical education integrated within community health systems. We align performance to the highest standards and our metrics speak for themselves.

Measuring Clinical-Operational Alignment:



Notes: (1) Based on hospital & HNI reported operating metrics (9 mos of activity ending 3/31/2025); (2) Reflects multiple sites of care in one integrated GME program

Navigating Care in Bundled Reimbursement Models

HNI Drives Clinical Outcomes & Cost Savings in CMS & CMMI Bundled Payment Models

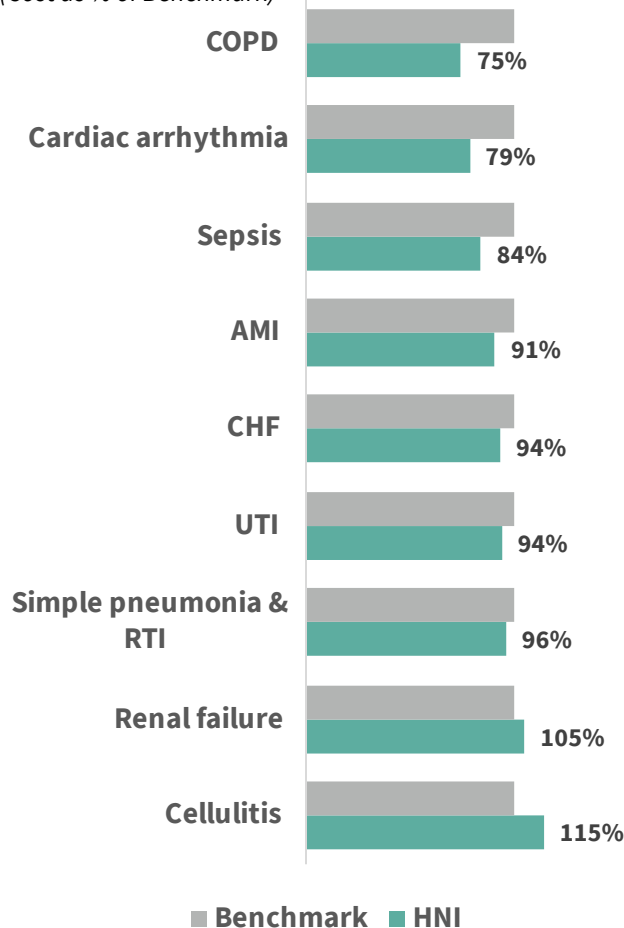
HNI is recognized as an innovator in developing tool- enabled clinical models that align cost with quality. We have aligned network utilization and enabled exceptional clinical outcomes by combining bedside software solutions with disciplined medical management – our results have been exceptional over the last 6 years:

- + Consolidated 2% NPRA savings (net of CMS 3% payment) from 2019-22
- + >7.5% NPRA savings expected in '24 despite trend factor adjustments
- + Performance exceeding benchmarks in 7 of 9 clinical episodes today
- + Continuous tools development & partnership with CMS, CMMI and the Lewin Group

HNI Has Prepared for CMS TEAM Model with 7+ Years Experience in Bundled Risk

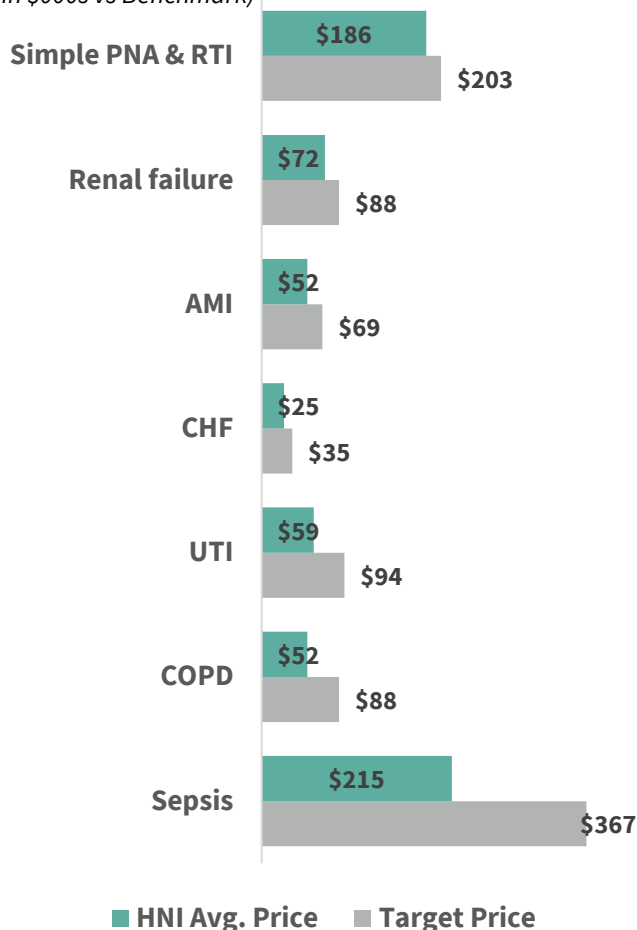
2024 BPCI-A Network-wide Results¹

(Cost as % of Benchmark)



Site- specific Performance²

(Cost in \$000s vs Benchmark)



Notes: (1) Based on CMS reporting and encounters through 9 months in 2024; HNI Average Payment compared to Target Price across all clinical episodes; excludes discontinued sites / programs; (2) Results are site- specific for 7 enrolled clinical episodes; excludes 2 outlier patient encounters

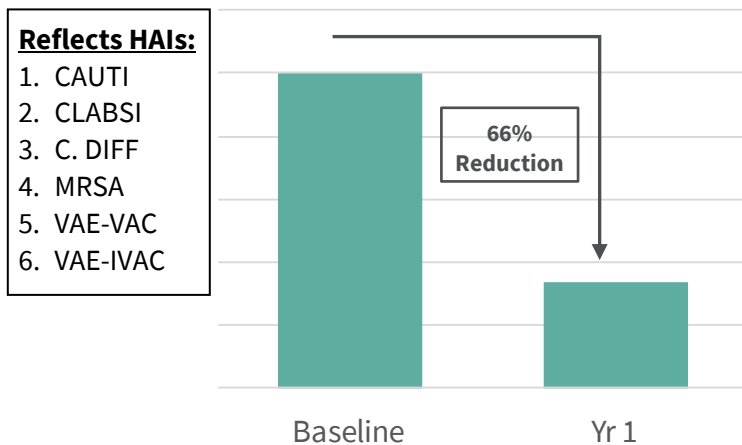


Patient Safety & Sustained Performance in Critical Care

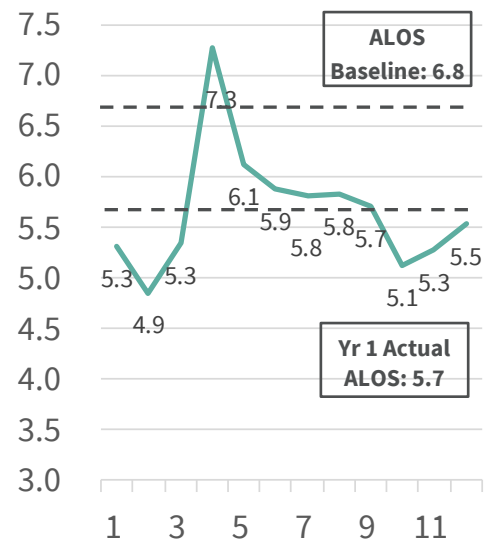
Exceptional Results in a High- Growth Program Over 7+ Years

Prior to HNI's engagement this hospital lacked an intensive care program committed to patient safety & quality outcomes. Our impact can be measured through the rapid improvement in clinical quality and the continued maintenance of a high standard of care in the face of exceptional external challenges and continued program growth.

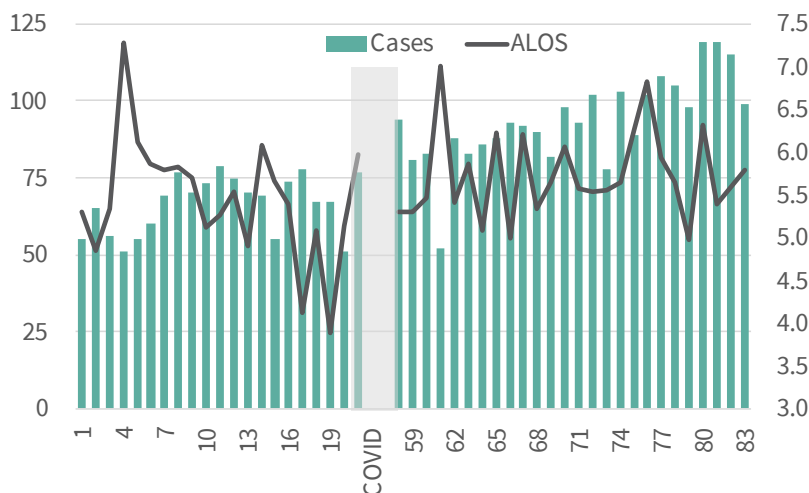
66% Reduction in Hospital Acquired Infections in First Year of Program:



Rapid Reduction in ICU Length of Stay:



Consistent Performance with Significant Volume Growth



\$3.3M Est. Annual (Recurring) Impact from LOS Alignment

Case volume increased ~100%+ with steady LOS

Note: Based on hospital reporting