



In-Office Screening Mammography

ASSOCIATED HEALTH SYSTEM IMPACT

Value Proposition:

In-office screening mammography with **Onsite Women's Health (OWH)** can be beneficial for hospitals and health systems. Market and internal data has proven that a health system's relationship with a practice utilizing OWH's in-office mammography solution has the opportunity to:

1. Address unmet demand which limits **screening mammography cannibalization**/share impact.
2. Improve share position of **downstream procedures** such as further diagnostic imaging, breast biopsy and surgery.
3. Penetrate new markets and realign downstream **without requiring capital investment**.
4. Promote **tighter alignment** with practice patients for greater downstream activity and revenue.

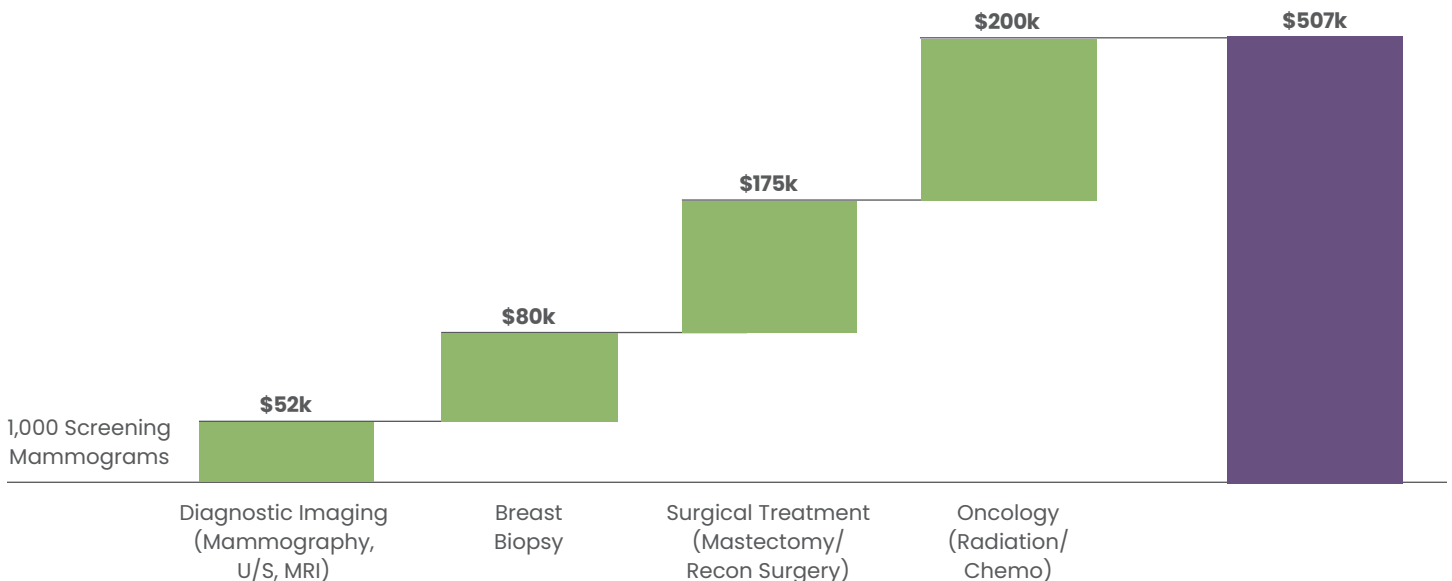
- Annual screening mammography is often self-referred and patient compliance rates are low (on average, ~50%)*
- Screening/imaging service options are typically distributed across the market (multiple options, multiple providers) and therefore creates fragmentation of downstream care delivery
- Most screening mammography is performed in a non-hospital setting (clinic, office or imaging center) due to price sensitivity and access
- Tying mammograms to the time of well-woman visits and offering screening in-practice, improves patient compliance rates by ~30-40%**
- The increase in compliance for screening mammography has shown to increase overall market demand for screening and downstream procedures, as seen in case studies
- OWH's clinical oversight and care coordination allows for tighter referrals within a preferred provider network and improves and sustains market position for affiliated health systems



*Source: Academic Radiology
**Per OWH historical data

Health System Downstream – Post OWH

Assuming 100% capture rate, every 1,000 screening mammograms can yield over \$500,000 in downstream revenue. The average OWH practice has a 90% compliance rate, yielding 2,500 screenings and over \$1.25M in downstream revenue for each practice per year.



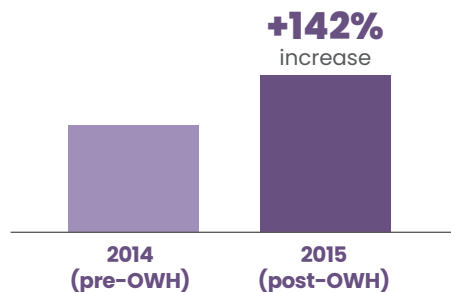
Downstream	Diagnostic M/US/MRI	Biopsy	Surgery & Reconstructive	Radiation & Oncology
Assumes 100% capture rate	10% of screening imaging patients require 1.75x in diagnostic exams	20% of diagnostic imaging patients	.05% of screening imaging patients or 25% of those who receive biopsies	.05% of screening imaging patients or 25% of those who receive biopsies
Avg. Commercial Reimbursement (Blended rate – facility only)	\$300	\$4,000	\$35,000	\$40,000
Estimated Downstream Revenue	\$52,500	\$80,000	\$175,000	\$200,000
Notes	~10% of screening mammograms require diagnostic imaging. Each patient receives almost 2 (1.75) diagnostic imaging studies	Almost 20% of patients who receive diagnostic imaging require biopsy	Less than 1% of patients (or 25% biopsies) who receive screening mammography are diagnosed with breast cancer & require treatment. (90% of positive biopsies require surgical treatment)	On average, patients who receive surgery, will receive a combination of radiation and chemo as a part of their initial treatment plan

CASE STUDY:

Independent Practice on Health System Campus

Independent practice located on-campus of a large health system aligned with OWH in 2015. That year, the overall screening mammography market volume increased by 142%, likely resulting from improved patient compliance and satisfying unmet demand. The on-campus affiliated health system experienced a slightly negative impact on its screening mammography market share, but conversely, experienced a positive (+500-600 bps) share impact in downstream procedures (breast biopsies and surgery) post OWH.

Total Market Screening Mammograms



Screening Mammogram Share*

	Pre-OWH 2014	Post-OWH 2015-2016
OWH Ob/Gyn Practice	0%	25%
Affiliated Hospital	39%	31%
All Other	61%	44%

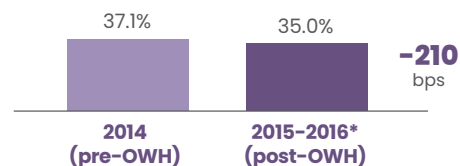
*Weighted Avg. Share

PRACTICE STATS

Onsite Women's Health in-office screening mammography service established in practice	2015
Screening Volume	~5,700 annually (22 patients per day)
Screening capture rate	90%
Services	Screening only
Practice Location	on-campus of affiliated hospital/health system
Competition (distance from practice)	University Health System (2 miles)

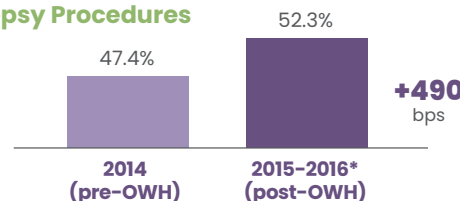
Affiliated Health System Downstream Market Share Growth (Medicare Only)

Diagnostic Imaging



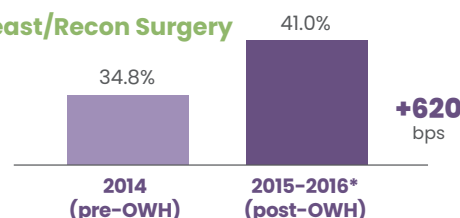
Pre-OWH	Post-OWH	Post-OWH
2014	1 yr	2 yr
37%	35%	36%

Biopsy Procedures



Pre-OWH	Post-OWH	Post-OWH
2014	1 yr	2 yr
47%	47%	59%

Breast/Recon Surgery



Pre-OWH	Post-OWH	Post-OWH
2014	1 yr	2 yr
35%	43%	39%

*Weighted Avg. Share

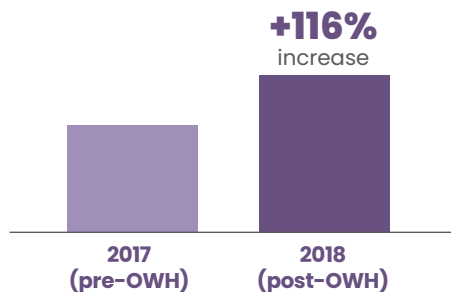
Source: CMS PUF data

CASE STUDY:

Independent Practice on Health System Campus

Independent practice located on-campus of a large health system aligned with OWH in 2018. That year, the overall screening mammography market volume increased by 116%, likely resulting from improved patient compliance and satisfying unmet demand. The on-campus affiliated health system experienced a minimal impact on its screening mammography market share (-10%) and experienced a significant positive share impact (almost 100% share) in downstream activity (imaging, biopsies) post OWH. It appears that most patients seek reconstructive care in the major metropolitan area approximately 1.5 hours north.

Total Market Screening Mammograms



Screening Mammogram Share*

	Pre-OWH 2017	Post-OWH 2018-2019
OWH Ob/Gyn Practice	0%	12%
Affiliated Hospital	88%	78%
All Other	12%	10%

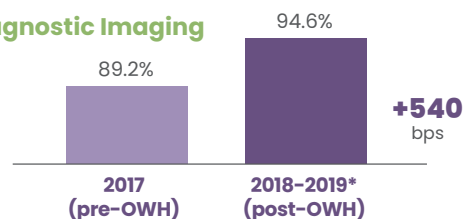
*Weighted Avg. Share

PRACTICE STATS

Onsite Women's Health in-office screening mammography service established in practice	2018
Screening Volume	~4,200 annually (16 patients per day)
Screening capture rate	97%
Services	Screening only
Practice Location	on-campus of affiliated hospital/health system
Competition (distance from practice)	Regional System (2 miles) Several Well-branded Regional Systems (90 miles) University System (90 miles)

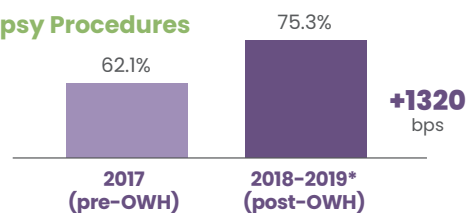
Affiliated Health System Downstream Market Share Growth (Medicare Only)

Diagnostic Imaging



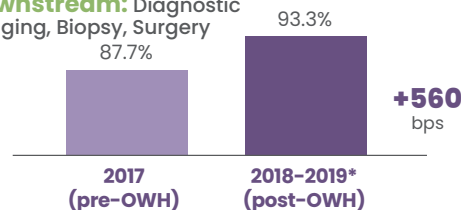
Pre-OWH	Post-OWH	Post-OWH
2017	1 yr	2 yr
89%	95%	94%

Biopsy Procedures



Pre-OWH	Post-OWH	Post-OWH
2017	1 yr	2 yr
62%	77%	73%

Downstream: Diagnostic Imaging, Biopsy, Surgery



Pre-OWH	Post-OWH	Post-OWH
2017	1 yr	2 yr
88%	94%	93%

*Weighted Avg. Share

Source: CMS PUF data

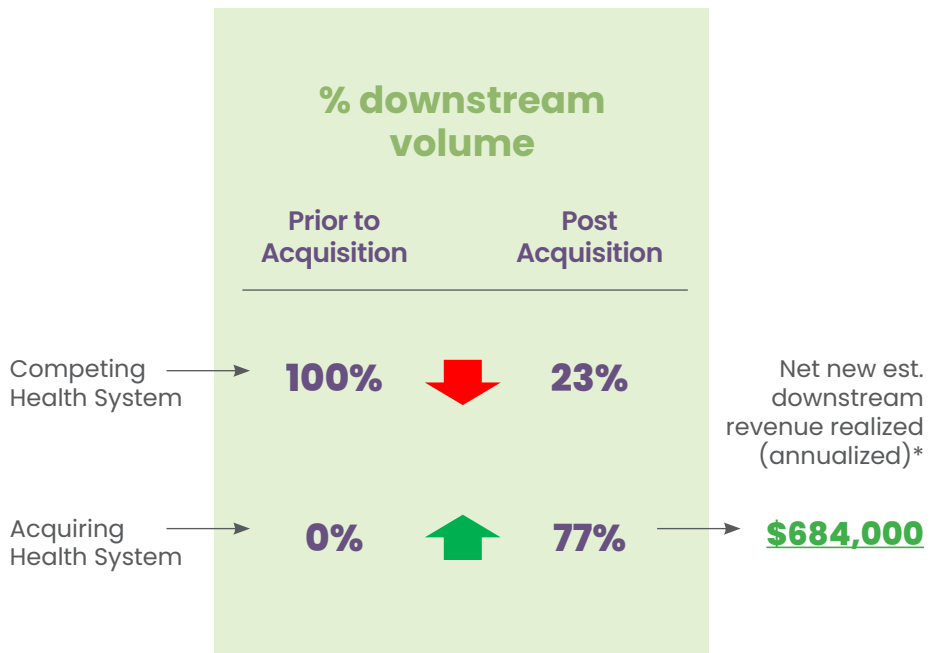
CASE STUDY:

Health System Acquired Practice

Health system 30 miles away acquired an OWH affiliated practice and has been able to realign over 75% of downstream volume, yielding over \$500k in annualized net new downstream revenue to the health system. The health system realized downstream revenue without having to spend capital dollars for the mammography service and achieved success in realignment despite competing with a very well-branded regional system less than 2 miles away from the practice. The health system is currently considering adding diagnostic imaging to keep the patients within the local community for imaging and achieve 100% downstream alignment.

PRACTICE STATS

Onsite Women's Health in-office screening mammography service established in practice	2019
Screening Volume	~1,750 annually (7 patients per day)
Screening capture rate	64%
Services	Screening only
Practice Location	30 miles from affiliated health system (practice acquired April 2023)
Partnership	Health system sends breast surgeon to clinic 1 day/week to tighten referral relationship
Competition (distance from practice)	Regional System (2 miles) University Health System (60 miles)

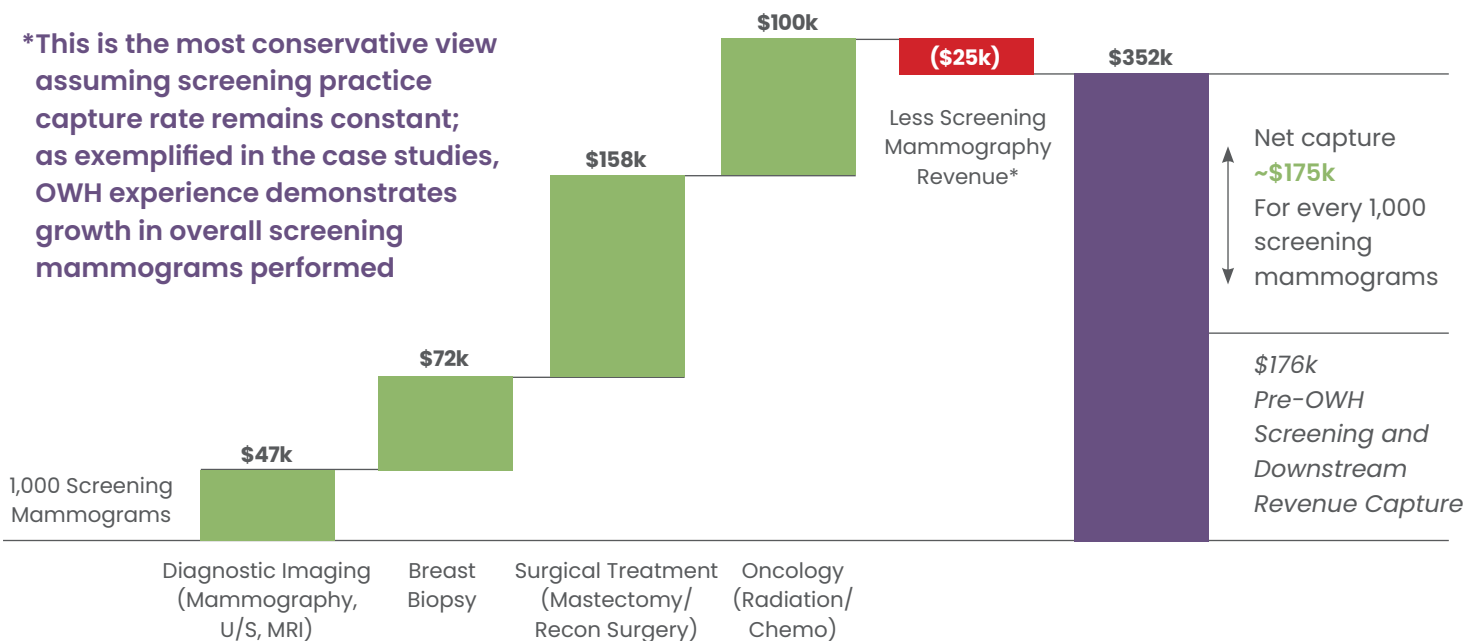


*Comparing 2022 and 2023 internal volume and applying downstream analysis model

Health System Downstream – Adding Market Share Assumptions – Post OWH

Leveraging the downstream model and applying market share assumptions, the typical affiliated hospital can capture over \$175k for every 1,000 screening mammograms and almost \$500k for each average-sized OWH-affiliated practice.

***This is the most conservative view assuming screening practice capture rate remains constant; as exemplified in the case studies, OWH experience demonstrates growth in overall screening mammograms performed**



Revenue by Service / Share*	Screening	Diagnostic Imaging	Breast Biopsy	Surgical Treatment	Radiation/ Oncology	Total Downstream
	10%/0%	33% pre-OWH/ 90% post-OWH			25%/50%	
Total		\$52,500	\$80,000	\$175,000	\$200,000	\$507,500
pre - OWH	\$25,000	\$17,325	\$26,400	\$57,750	\$50,000	\$176,475
post-OWH	\$(25,000)	\$47,250	\$72,000	\$157,500	\$100,000	\$351,750
Net	\$0	\$29,925	\$45,600	\$99,750	\$50,000	\$175,275

*Assumes health system 10% screening capture rate, 33% and 25% downstream – pre-OWH