

# Baptist Memorial Health Care

## Delivering on the Mid-South Miracle



## Executive Summary

**In 2020, Baptist Memorial Health Care Corporation (BMHCC) made a bold public pledge to bring about The Mid-South Miracle: a 25% reduction in lung cancer deaths by 2030.**

But by 2023, the limits of the lung cancer screening and incidental pulmonary nodule programs they had in place became clear: outcomes still varied, staff were overwhelmed, and the system couldn't scale to meet the growing need.

In 2024, BMHCC partnered with Eon to reimagine their approach to lung cancer detection and management across all 100+ facilities where diagnostic imaging is performed. Rather than layering technology on top of fragmented workflows, they replaced manual processes with a single platform to centralize operations, support top-of-license care management, and deliver longitudinal outcomes at scale.

This wasn't a software implementation. It was a systemwide transformation.



## In just twelve months, the transformation was measurable:



**625**

**lung cancers identified**

enabling earlier diagnoses and curative intent therapies



**89%**

**of incidental pulmonary nodule patients returned for follow-up**

enabling curative intent therapies



**\$3.44M**

**in new direct margin**

driven by increased downstream diagnostic and procedural volume



**2-3**

**days from identification to provider review**

enabling faster time to treatment for high-risk patients



**41%**

**increase in monthly biopsy volume**

providing significant procedural growth



**16%**

**increase in surgical cases**

providing significant procedural growth



# The Mission

## Delivering a Miracle

BMHCC serves as a vital lifeline across the Mid-South. With over 20 hospitals, 100 sites with imaging capabilities, and over 3,000 staffed beds spanning Tennessee, Arkansas, and Mississippi, BMHCC has long recognized its unique responsibility in confronting the region's disproportionate burden of lung cancer.

In the Mid-South, **lung cancer mortality rates are nearly double the national average.** In response, BMHCC made a public pledge to reduce lung cancer deaths by 25% by 2030—what would be called “The Mid-South Miracle.” To achieve this goal, BMHCC would have to address systemic problems in its existing lung cancer screening and incidental pulmonary nodule programs.

## Reframing the Problem

This was more than a software issue—it was a structural one. The systems in place were not designed for longitudinal management and relied too much on manual effort from radiologists and navigators. They didn't dynamically adapt to new information, track progression, or keep care teams updated when something changed.

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***“Our goal is to ensure that community-based oncology in Booneville, Mississippi, delivers the same high standard of care available in metropolitan centers such as Memphis, Tennessee.”***

*Parker Harris, CEO and Administrator, Baptist Memorial Hospital-Tipton*

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What Baptist determined they needed was not just better tools, but a new way of thinking to **address structure challenges.**

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# The Challenge

## Variation in the Patient Journey

BMHCC's internal analysis revealed a truth that is unfortunately experienced by most health systems: a patient's entry point to the system inevitably impacted their journey. Some patients moved quickly through diagnosis and treatment, while others waited weeks or longer. The asymptomatic nature of early disease progression also meant that many patients did not pursue follow-up care because they felt healthy.

## Manual Work Was the Default

Though supported by a sophisticated EHR, BMHCC's workflow relied heavily on static lists built from keyword-based triggers in radiology reports. That meant a high rate of false positives and clinical teams spending more time validating data than acting on it.

Manual triage of weekend reports could take two full days. Some facilities couldn't get through a single shift's worklist in a shift. And highly trained navigators were often pulled into clerical tasks instead of patient care. These circumstances created a dangerous lag between identification and intervention and capped the number of patients the system could safely manage.

## Demand Outpaced Capacity

Even as BMHCC worked to improve early detection, demand quickly exceeded what their staff could handle. The reality was that the promised "Mid-South Miracle" would not be achieved by the current processes or by hiring more navigators to perform the same old inefficient processes.

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*“We lost staff over this stuff. Individuals were so frustrated with the manual workload to identify and pull patients, work them up, make sure they got on the right schedules, make sure they got reviewed by a provider. I mean, we're talking about lives here—and we had the potential of missing an early stage lung cancer that was potentially curable if we gave them the right care they deserve.”*

*Parker Harris, CEO and Administrator, Baptist Memorial Hospital-Tipton*

# The Evaluation

Overwhelmed by vendor pitches and internal demand, BMHCC partnered with an outside consulting firm to identify which oncology challenges should be prioritized to solve through the use of AI. They zeroed in on early detection as the most urgent, highest-impact opportunity. With that clarity, they began evaluating solutions.

To confirm the accuracy and validity of Eon's early detection platform, BMHCC commissioned a side-by-side analysis of 2,000 imaging studies. **Results revealed that Baptist's incidental pulmonary nodule prevalence of 0.36% was just one-sixth the rate that Eon's computational linguistics model detected (2.18%).** This data helped the leadership team quantify the scale of the opportunity to save lives, reduce clinician workload, and drive program growth.

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*“We saw some interesting pitches when we did the RFP process, but the combination of Eon platform's accuracy, automated workflows, and Care Management really set them apart.”*

*Ann Bishop, CEO and Administrator, Baptist Union County, Booneville*



Eon emerged as the clear leader because of its unique ability to combine validated AI-powered engines with expert navigation services to help Baptist deliver **personalized and adaptive care to the communities they serve.**

# The Solution

Together with Eon, BMHCC re-engineered their approach around three mission-critical objectives.

## 1 Systemwide Standardization

With care processes, experiences, and outcomes varying by site, BMHCC knew they needed a centralized framework that would support equitable care across the system. In partnership with Eon, BMHCC leadership developed clinical decision aids to embed directly into workflows via the platform, ensuring that navigators across all sites followed the same evidence-based protocols. This was a cultural shift. By aligning operations with clinical intent, BMHCC eliminated the variability in the patient journey.

## 2 Intelligent Automation

Before Eon, care teams were bogged down by noisy data and inefficient systems. Staff were overwhelmed by patient worklists cluttered with false positives that did not require follow-up, and important findings could be buried within various data sources. Sorting through the noise was time-consuming and could lead to delays in care.

The Eon platform gave navigators a purpose-built dashboard with an enriched view of each patient, based on the clinical characteristics of their nodule and EHR data. Bi-directional integration allowed data to flow seamlessly between Eon and the EHR, enabling the identification of patients at risk for non-adherence due to missed appointments or the unexpected receipt of clinically relevant imaging that impacted their care needs. That meant no more toggling across systems. No more hours spent revalidating lists. Just accurate, actionable information, delivered instantly and proactively.

## 3 Increased Program Capacity

Even the best workflows can only succeed if the system has the capacity to deliver. In their first year using the Eon platform for incidental findings, Baptist more than doubled the number of nodules identified. The improved accuracy of the incidental pulmonary nodule program and its expansion to all sites conducting imaging meant that BMHCC was finding at-risk patients no matter how they interacted with the health system or how the radiologist dictated their report. But Baptist navigators were stretched thin, and scaling manually wasn't a realistic option.

Eon's Care Management services ensured that every patient was managed through their care journey, owning the validation and triaging of patients, amongst other duties. Local navigators were freed to work at the top of their license, focusing on patient engagement and clinical decision-making—not clerical work.



# The Results

With Eon, BMHCC's bold 2030 vision is now within reach. More patients are caught earlier. More care is delivered in-network. More lives are saved. In just months, BMHCC redefined what was possible. Their partnership with Eon has delivered measurable clinical, operational, and financial results at a scale that few systems achieve even over years.

## Clinical Impact:

### Faster Care, Earlier Detection

BMHCC's most pressing goal has always been to detect more cancers earlier, especially in underserved regions across the Mid-South. With Eon, have exceeded their typical annual volume of diagnosed lung cancers—625 cases (October 1, 2024–September 30, 2025). Patients move through the system faster than ever, and more cancers are being diagnosed in early stage.

## Operational Efficiency:

### Scaling Without Staffing

Before Eon, BMHCC's navigators were drowning in manual work—chasing down false positives, validating findings, and coordinating care by hand. By partnering with Eon Care Management services to manage low- and moderate-risk patients:

- ✓ Manual review by local staff was eliminated for the majority of patients
- ✓ Evidence-based care plans were consistently generated and tailored to patient risk
- ✓ Care gaps and unexpected clinical changes were flagged and escalated in real time
- ✓ Local navigators were enabled to operate at top-of-license, focusing on complex, high-touch cases

## FY25 Results

**16.5K**

incidental pulmonary nodules identified FY25 compared to 7.1K in FY24

**53%**

incidental pulmonary nodules patients identified with nodules >8mm

**89%**

IPN patient adherence to follow-up care

**2 days**

from incidental pulmonary nodules identification to provider review

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***"This year we identified 16,500 incidental pulmonary nodules - over 2x from last fiscal year. Without Eon's Care Management, we would be a broken system."***

*Parker Harris, CEO and Administrator, Baptist Memorial Hospital-Tipton*



## Financial Impact: Proven ROI in Under 8 Months

BMHCC recouped its full investment in Eon in under eight months, without even factoring in downstream oncology revenue. With Eon, they generated \$3.44M in new direct margin (above their projected growth rate), unlocking resources to reinvest in care and sustain program expansion. In addition, 89% of incidental pulmonary nodule patients and 77% of lung cancer screening patients are returning to BMHCC for the next step in care, leading to more patients completing follow-up, more early-stage cancers identified, and more downstream services retained in-network.

## 12-Month Direct Margin Increase Attributed to Eon

Intervention	Full year projection without Eon	Growth with Eon	Total
<b>PET-CT</b>	\$2,470,824	\$1,602,576	\$4,073,400
<b>Biopsies</b> (interventional pulmonology)	\$2,199,275	\$1,323,250	\$3,522,525
<b>Biopsies</b> (interventional radiology)	\$502,232	\$497,547	\$999,779
<b>Surgeries</b>	\$951,027	\$20,585	\$971,612

\*This Eon direct margin analysis includes only four procedure types: PET/CTs, interventional radiology procedures, interventional pulmonary procedures, and thoracic surgeries.

## Systemwide Growth: Capacity Unlocked Across 20+ BMHCC Hospitals

**41%↑**

interventional  
pulmonology biopsies

**69%↑**

interventional  
radiology biopsies

**46%↑**

monthly PET/CT  
volume

**16%↑**

monthly  
surgeries

These numbers represent real patients, getting the  
curative-intent care they need sooner than ever before.



## What's Next

### Extending the Miracle Beyond Lung Cancer

For Baptist Memorial, the “Mid-South Miracle” was never just about improving metrics on paper. It was about delivering on a mission and promise to the communities they serve. And while lung cancer was the first focus, it won't be the last.

Having seen the impact across 20 hospitals and more than 19,000 lung patients, BMHCC is now looking ahead to additional oncology cohorts. For the “Mid-South Miracle,” this is just the beginning.



*“We established a goal back in 2019 to reduce lung cancer mortality across the Mid-South by 25 percent over the next 10 years. This tool is going to help us do that.”*

*Parker Harris, CEO and Administrator, Baptist Memorial Hospital-Tipton*

### About Baptist Memorial Health Care

Baptist Memorial Health Care is one of the country's largest not-for-profit health care systems and the largest provider of Medicaid in the region. Consistently ranking among the top integrated health care networks in the country, Baptist Memorial comprises 24 affiliate hospitals in West Tennessee, North and Central Mississippi and East Arkansas; a freestanding emergency department; more than 7,000 affiliated physicians; Baptist Medical Group, a multispecialty physician group with more than 1,500 providers in 50 specialties; Baptist Cancer Center; home, hospice and psychiatric care; walk-in and urgent care clinics; a network of surgery, rehabilitation and other outpatient centers; and an education system that includes Baptist Health Sciences University and a college of osteopathic medicine. Baptist employs more than 23,000 people, and in fiscal year 2024 contributed more than \$388 million in community benefit and uncompensated care to the communities it serves.



## About Eon

Eon is a healthcare technology company focused on supporting health systems in the identification and ongoing management of patients at risk of cancer and other life-threatening conditions. Powered by condition-specific clinical AI, Eon's longitudinal care management platform extracts incidental findings documented in radiology reports and helps ensure patients receive timely, guideline-based follow-up and remain in appropriate surveillance over time.

More than 70 health systems across over 1,200 facilities rely on Eon and its care management services to scale early detection programs, enable earlier diagnosis and treatment, and support sustained patient engagement—outcomes that also carry meaningful financial implications for health systems.

## Ready to Transform Your Incidental Findings Management?

See how Eon can help your health system achieve results like BMHCC's.

Request a consultation and learn more at [eonhealth.com](https://eonhealth.com)