Board of Trustees Retreat
Update on the University of Illinois Health System
July 21, 2011

Joe G.N. “Skip” Garcia MD
Vice President for Health Affairs
Vice Chancellor for Research
Earl M. Bane Professor of Medicine, Pharmacology & Bioengineering
History of the University of Illinois Hospital

1907- 110 bed hospital at Ogden, Wolcott & Congress

1924 - 50 bed University of Illinois Research & Educational Hospital on Polk, Wolcott and Wood

- First experimental gastric tube esophagoplasty (1904)
- First pneumonectomy in Illinois (1947)
- First sternotomy for open heart surgery in the world (1957)
- First autologous blood transfusion in the world (1963)
- First kidney transplant in Illinois (1968)
History of the University of Illinois Hospital

1980 - UIC Hospital opens at 1740 W. Taylor St.

1999 - Outpatient Care Center opens on Taylor

- First robotic surgeries in the US: robotic hepatectomy (2005); renal artery aneurysm repair (2008); parathyroidectomy without neck incision (2008)
- Miles Square received “Illinois Your Healthcare Plus” award for excellent CHF care.
- Institute for Patient Safety Excellence-$3M federal grant to expand 7 Pillars program to 10 Chicago hospitals (2010)
- Full JCAHO Accreditation (2011-2014)
Academic Health Science Center of the Future
Board Retreat Presentation July 2010

Home Health - TeleHealth Networks

High-tech, acute care inpatient tower
$600M

Illinois Medical District (JBVA, Stroger, Rush)

Community-based Primary Care, FQHCs, Critical Access Hospitals and ERs

Strategic Offsite Locations, Regional Sites (Peoria, Rockford, Urbana)

State Agencies Consultation & Evaluation
University of Illinois Hospital Challenges

3% Operating Margin Target

State Support Allocation (in Millions)

- One time prior yr payments
- Decreased expenses
- Hiring freeze & furloughs
- Capital expenses not realized
University of Illinois Hospital Challenges

Hospital Average Daily Census (1999-2011)

- Multifactorial: Nationwide outpatient trend
- Declining PSA Market share

- Aging hospital facilities.
- Need for improved patient satisfaction surveys.
- Need for integrated clinical billing.
- Need for improved clinical academic recognition (USNWR rankings).
- Need for improved indices of hospital quality.
University of Illinois Health Care System Challenges

- ~1 million community residents
- ~35% Hispanic/Latino
- ~35% African American
- 5 of the 10 poorest Chicago communities
- High acuity, elevated mortality rates for patients with diabetes, CHF, cancer and stroke
University of Illinois Health Care System Challenges
University of Illinois Health Care System Challenges

The New York Times, “Mapping America: Every City, Every block”
Estimates from the Census Bureau’s American Community Survey 2005 - 2009
Thematic Research Strengths at the University of Illinois at Chicago

- Community Disparities
- Biomedical Discovery
- Urban Resilience & Global Environment

Diversity
• African Americans & Hispanic Americans have disproportionately high morbidity & mortality from preventable diseases.

• “Of all the forms of inequality, injustice in health is the most shocking and the most inhumane.”

Dr. Martin Luther King Jr.
National Convention of the Medical Committee for Human Rights, Chicago 1966
University of Illinois Clinical Mission

To provide high quality, cost-effective health care for the people of the State of Illinois.

To harness University of Illinois strengths in technology & innovation to deliver “personalized medicine” to susceptible populations, particularly for medically underserved Latinos and African Americans within our primary service areas (PSA).
% Adults Diagnosed with Diabetes in Chicago

Twice the US average in some communities.

Low % in South Lawndale likely reflects lack of access to medical evaluation.

- Humboldt Park: H- 48%, AA- 47%
- West Town: H- 47%, AA- 9%
- South Lawndale: H- 83%, AA- 13%
- North Lawndale: H- 5%, AA- 94%
- Roseland: H- 1%, AA- 90%
- Norwood Park: H- 6%, AA- 1%

University of Illinois Primary Service Area

Southeast Chicago
Northwest Chicago
Age-Adjusted Diabetes Mortality Rate in South Lawndale & Chicago, 1981-2000

* National Center for Health Statistics, 2003
Asthma Disparities in Chicago

- Chicago and New York have the highest asthma hospitalization and mortality rates in the United States (Weiss 2007).
- The rates vary greatly by neighborhood in both cities.
- In Cook County, asthma mortality is 4 to 6 times higher for African-Americans and Hispanics than for Caucasians.

<table>
<thead>
<tr>
<th>Neighborhood</th>
<th>Physician Diagnosed Asthma</th>
<th>US 11%*</th>
<th>Chicago 13%*</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Lawndale</td>
<td>18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>West Town</td>
<td>19</td>
<td></td>
<td></td>
</tr>
<tr>
<td>North Lawndale</td>
<td>18</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Roseland</td>
<td>14</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Norwood Park</td>
<td>13</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Humboldt Park</td>
<td>73%</td>
<td></td>
<td></td>
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<tr>
<td>University of Illinois</td>
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</tr>
</tbody>
</table>

Higher % asthma in some underserved communities c/w US average.

Hispanic Groups:
- Mexican vs Puerto Rican
  - Humboldt Park: M- 24%, PR- 16%
  - West Town: M- 25%, PR- 18%
  - South Lawndale: M- 73%, PR- 1%
  - North Lawndale: M- 5%, PR- 1%
  - Roseland: M- 1%, PR- 90%
  - Norwood Park: M- 6%, PR- 1%
Lifetime Asthma Prevalence In Racial And Ethnic Groups

Lara et al, 2006, National Health Interview Survey

Average Annual Rates per Million

- **Mexican**: 11.3
- **Caucasian**: 15
- **African American**: 40.7
- **Puerto Rican**: 40.9

Homa et al. 2000

- Environment
- Socioeconomic
- Genetic factors
Percent Racial Admixture in Latino Ethnic Groups

Mexican volunteers have much higher % Native American admixture than Puerto Rican volunteers who have higher % African admixture.
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Does leveraging strengths in personalized medicine & community disparities improve the financial health of UI Healthcare System?
University of Illinois Clinical Enterprise

• We currently receive an enhanced reimbursement for Medicaid related services... makes fiscal sense.

• Increases in our PSA Market Share will increase our clinical volumes (ADC, outpatient volumes).

• Our Medicaid Accountable Care Organization (ACO) will soon be in play, resulting in increased # of Medicaid covered lives.

• It is our mission and the right thing to do!
How to improve the financial health of the Medical Center?

Clarification of the Clinical Mission
Leverage our strengths in personalized medicine and community disparities
Enhance “Enterprise”-wide thinking
How does “Enterprise-wide thinking” improve the financial health of the Medical Center?

- Allows clarification of Mission & Brand across entire enterprise
- Aligns incentives between providers and clinical enterprise
- Allows improved efficiency of support services
- Allows nurturing of marquee programs

EXPANDS THE REVENUE STREAM!!!
How to improve the financial health of the Medical Center?

Clarification of the Clinical Mission
Leverage our strengths in personalized medicine and community disparities
Enhance Enterprise-wide thinking
Rebranding
Where We’ve Been with Branding at the University of Illinois

- University of Illinois Research and Educational Hospitals
- University of Illinois Hospital & Clinics
- UIC Hospital
- UIC Medical Center

1. 2001: UI Board of Trustees approved name change to: University of Illinois Medical Center

The Response:
- “We were always delighted when UIC ran an ad our phone would ring.” – Marketing Director, University of Chicago
- “16% of respondents think UIC and U of C are the same place.” – Ogilvy Public Relations Worldwide Survey
<table>
<thead>
<tr>
<th>Provider Top of Mind</th>
<th>Total Hot Area</th>
<th>African American</th>
<th>Hispanic</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Awareness</td>
<td>Preference</td>
<td>Awareness</td>
</tr>
<tr>
<td>Rush University Medical Center</td>
<td>20%</td>
<td>20%</td>
<td>19%</td>
</tr>
<tr>
<td>Other Facilities</td>
<td>10%</td>
<td>13%</td>
<td>15%</td>
</tr>
<tr>
<td>Northwestern Memorial Hospital</td>
<td>5%</td>
<td>13%</td>
<td>2%</td>
</tr>
<tr>
<td>John H Stroger Jr Hospital</td>
<td>16%</td>
<td>9%</td>
<td>21%</td>
</tr>
<tr>
<td>Mercy Hospital Medical Center</td>
<td>11%</td>
<td>9%</td>
<td>1%</td>
</tr>
<tr>
<td>University of Chicago Hospitals</td>
<td>5%</td>
<td>7%</td>
<td>9%</td>
</tr>
<tr>
<td>Univ. of Illinois Medical Center</td>
<td>4%</td>
<td>7%</td>
<td>3%</td>
</tr>
<tr>
<td>Advocate Christ Medical Center</td>
<td>Tied for #7/#5</td>
<td>Tied for #6/#7</td>
<td>Tied for #4/#3</td>
</tr>
<tr>
<td>MacNeal Hospital</td>
<td>2%</td>
<td>3%</td>
<td>5%</td>
</tr>
<tr>
<td>Mt Sinai Hospital Medical Center</td>
<td>4%</td>
<td>3%</td>
<td>2%</td>
</tr>
<tr>
<td>Holy Cross Hospital-Chicago</td>
<td>11%</td>
<td>3%</td>
<td>8%</td>
</tr>
<tr>
<td>Resurrection Medical Center</td>
<td>2%</td>
<td>2%</td>
<td>2%</td>
</tr>
</tbody>
</table>

Source: NRC Ticker, 2010

Lowest Consumer Awareness among Academic Medical Centers within our PSA
The word “Hospital” is more strongly associated than “Medical Center” with patient care in both local focus groups of both Latinos and African Americans as well as in national surveys.

Hospital and Health Sciences System clearly had the most positive attributes among our PSA target audiences.

Name confusion persists with 41% of Hispanics, 24% African Americans saying UIC is part of University of Chicago.

UIC College of Medicine Clinical Chairs, UIC Health Science Deans, UIC Faculty Senate Conf. have supported potential rebranding to:

“University of Illinois Hospital & Health Sciences System”
University of Illinois Health Care System

THE BEST WAY TO TREAT A COMMUNITY IS BY TREATING THE PEOPLE WHO MAKE IT UP.

No two people are the same, so why treat them that way? At the University of Illinois, we’re looking at genetic, social, and environmental factors within a culture. It’s all about getting a closer look at what makes us up as individuals, and then bringing that knowledge to the community. We all deserve the most advanced healthcare. Which is why we’re offering the most advanced healthcare to everyone. That’s how we’re changing medicine. For good.

FIND OUT MORE AT ILLINOISHEALTH.ORG

University of Illinois Hospital + Health Sciences System

THE GREATEST ADVANCEMENT IN MEDICINE IS TAILORING IT TO THOSE WHO NEED IT MOST.

Sometimes the biggest revolution starts with a simple thought. For us, it’s treating the individual. Focusing on what makes them better. By treating the person, not just a population, we are zeroing in on the health issues that affect them most. Treating a city block by block, person by person. Personalized medicine. That’s how we’re changing it. For good.

FIND OUT MORE AT ILLINOISHEALTH.ORG

University of Illinois Hospital + Health Sciences System

Focus on reductions in health care disparities of “at risk” populations in our PSA

“That’s how we are changing medicine. For good”
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To focus strategic resources among select, academically distinct clinical programs (best in Chicago/region) that are tightly linked to the translational research mission.
University of Illinois Clinical Enterprise
Marquee Programs

“Best in Chicago”
- Liver and kidney transplantation
- Sickle cell anemia
- Stroke and neurovascular surgery
- Corneal & retinal disease
- Mental illness-autism & schizophrenia

Soon to be “Best in Chicago”
- Colorectal/prostate cancer
- Obesity, T2 diabetes, Bariatric Surgery
- Pulmonary hypertension
- Asthma
- Congestive heart failure
Harnessing Genomic & Genetic Approaches to Reduce Health Disparities

Newly established -- Institute for Human Genetics, Institute for Informatics, Institute for Personalized Respiratory Medicine & the Institute for Minority Health
UIC opens new sickle cell treatment center

Clinic allows patients suffering pain crisis, without complications such as shortness of breath, numbness or fever, to get immediate, specialized care.

UNIVERSITY OF ILLINOIS AT CHICAGO Sickle Cell Center

The Comprehensive Sickle Cell Center at the University of Illinois (CSCC) is committed to providing the highest quality, state-of-the-art, compassionate care to children and adults. This is done utilizing a holistic approach to care that includes:

- The latest treatment options available for disease and symptom management
- Participation in national clinical treatment trials
- Education and counseling for individuals with sickle cell disease and their families
- Transition into adult care

Our comprehensive sickle cell program, one of the only adult sickle cell programs in Illinois, had over 25 years of experience in providing services to individuals with sickle cell disease.
Addressing Health Disparities at the University of Illinois
Sickle Cell Disease (SCD)

Clinical trials of novel SCD therapies

Molecular signatures predict
-- lung/cardiac complications
-- sudden death

Identified genetic variants as novel biomarkers and for individualizing care

Within the next 2-3 years, UI Sickle Cell center will be THE premier SCD center in the country
Vice President for Health Affairs- The first 120 days?

“About the same here, how about with you?”
University of Illinois Health Care System
Transforming Lives through Innovation & Discovery

Thank You!
University of Illinois Clinical Enterprise
Marquee Programs

“Best in Chicago”
- Liver and kidney transplantation
- Sickle cell anemia
- Stroke and neurovascular surgery
- Corneal & retinal disease
- Mental illness-autism & schizophrenia

Soon to be “Best in Chicago”
- Colorectal/prostate cancer
- Obesity, T2 diabetes, Bariatric Surgery
- Pulmonary hypertension
- Asthma
- Congestive heart failure
Obesity, Type 2 Diabetes, Bariatric Surgery and Wound Care

The Chicago Diabetes Project - Global Collaboration For A Functional Cure

In the last 20 years, a vast amount of scientific knowledge has been gathered about how insulin-producing cells develop, function and survive in the normal human body and how they become compromised and destroyed in diabetic patients. In recent years, interest in diabetes has increased because it is nearing epidemic proportions: in 1985 there were 30 million diabetics; today that number has rocketed to more than 194 million. By 2025, diabetes is likely to affect 300 million people worldwide.

The need for a functional cure is critical and the most

The University of Illinois at Chicago Department of Surgery and the Angiogenesis Foundation Announce the Inaugural Meeting of the American College of Wound Healing and Tissue Repair

The Center for Wound Healing and Tissue Regeneration (CWHTR) is a unique community of researchers that specializes in the study of chronic wounds.
Visions of Community Based Health Care

**Acute Care 2 and 3**
- UI Health System
- XXXXX
- XXXXX
- XXXXX

**Traditional Community Care**
- Private Practice Doctors
  - FQHCS
  - Community Agencies

**Pre-Primary Care**
- UI Health System
- XXXXX
- XXXXX

**Community Interventions**
- Smoking
- Asthma
- Obesity/Diabetes
- Teen Pregnancy
- Mental Health
- Work Force Development
- Social Enterprise

**Provider:**
- Specialty Physicians

**Provider:**
- Lay Educator

**Providers:**
- Primary Care Physicians
- Nurse Practitioners
Thematic Research Strengths at the University of Illinois at Chicago

Informatics

- Community Disparities

Biomedical Discovery

Urban Resilience & Global Environment

Diversity
Academic Health Science Center of the Future

- Home Health – TeleHealth Networks
- High-tech, acute care inpatient tower
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