

University of Illinois Hospital & Health Sciences System

Board of Trustees University Healthcare System Committee Meeting
January 18, 2012



Joe G. N. "Skip" Garcia MD
Vice President for Health Affairs
Vice Chancellor for Research
Earl M. Bane Professor of Medicine,
Pharmacology & Bioengineering



UNIVERSITY OF ILLINOIS
Hospital & Health Sciences System
— Changing medicine. For good. —

University of Illinois Hospital & Health Sciences System

Comparisons of Academic Hospital & Health System Leadership

Rush University Medical Center	Salary	University of Chicago*	Salary	Northwestern Memorial Hospital*	Salary
CEO & President	\$1,426,926	CEO	\$1,495,011	CEO & President	\$1,902,247
NA	\$0	President	\$865,600	NA	\$0
VP Medical Affairs/Clinical Prac.	\$416,448	NA	\$0	NA	\$0
VP CMO	\$546,090	VP CMO	\$632,970	VP CMO	\$1,523,118
Sr. VP Medical Affairs	\$297,647	NA	\$0	Assoc. CMO	\$592,162
VP Managed Care	\$397,414	VP Managed Care	\$376,267	VP Managed Care ¹	\$331,227
Sr. VP Strategic Planning & CFO	\$827,401	Chief Financial & Strategy Officer	\$977,603	Exec. VP, CFO, Treasurer	\$1,146,333
VP Hospital Operations	\$379,453	VP Chief Pharmacy Officer	\$297,198	VP Chief Pharmacy Officer ¹	\$286,530
VP Finance	\$339,323	VP Finance	\$393,466	VP Finance	\$459,439
VP Chief Nursing Officer	\$365,471	VP Chief Nursing Officer	\$441,615	VP Chief Nursing Officer	\$515,058
VP Clinical Nursing Services	\$251,102	VP Surgical Services	\$340,495	VP Surgical Services ¹	\$247,200
Sr. VP Hospital Affairs	\$647,644	VP Facilities	\$419,173	VP Operations	\$285,630
Sr. VP Corporate & External Affairs	\$1,585,447	VP Strategic Affiliations	\$561,413	VP Strategic Affiliations ¹	\$800,620
Exec VP & Chief Operating Officer	\$1,081,154	Chief Operating Officer	\$775,586	Chief Operating Officer	\$854,692
Sr. VP Information Services	\$505,294	VP CIO	\$529,823	VP CIO	\$612,016
VP Hospital Operations	\$318,651	VP Childrens	\$408,876	VP Childrens ¹	\$299,550
Chief Risk Executive	Unavailable	VP Risk Mgmt/Compliance	\$250,515	Chief Risk Executive	\$400,165
VP HR	\$310,894	VP HR	\$627,399	Senior VP HR	\$736,949
VP Strategic Planning & Mrkg.	\$296,220	VP Marketing	\$332,562	VP Marketing ¹	\$257,930
VP Government Affairs	\$276,725	Assoc. VP Strategic Affiliations	\$269,361	NA	\$0
	\$10,269,304		\$9,994,933		\$11,250,866

*2010 IRS Form 990 reported compensation (base & bonus only)

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Comparisons of Academic Hospital & Health System Leadership

University of Illinois	Grant Support
VP (Garcia)	(\$159,760)
CEO (DeNardo)	\$0
Asso. VP-Population Health (Krishnan)	(\$109,835)
Assoc. VP & CMO (Helmers)	\$0
Asst. VP-Prof. Practice (Becker)	
Director-Managed Care (Dorsey)	\$0
CFO & Asst. VP Finance (Devoney)	\$0
Director-Pharmacy (Donnelly)	\$0
NA	\$0
Chief Nursing Officer (Spunt)	\$0
Assoc. Hospital Director (Karman)	\$0
Assoc. Hospital Director	
Assoc. VP-Strategy (Jor)	
COO (Loffing)	
Asst. VP-CIO (Lussier, P)	
Assoc. Director-Nursing	
Director-Risk Mgmt (C)	
NA	
Exec. Director-Marketing (Baxter)	\$0
NA	\$0
Total Salaries:	\$5,348,062
	(\$319,520)

NIH Funding

- Joe GN Garcia MD
5 year NIH funding = ~\$15.4M
- Jerry Krishnan MD PhD *
Assoc VP Population Health
Science
5 year NIH funding = ~\$5.4M

Northwestern Memorial-- U of Chicago - Rush U Health System Leadership

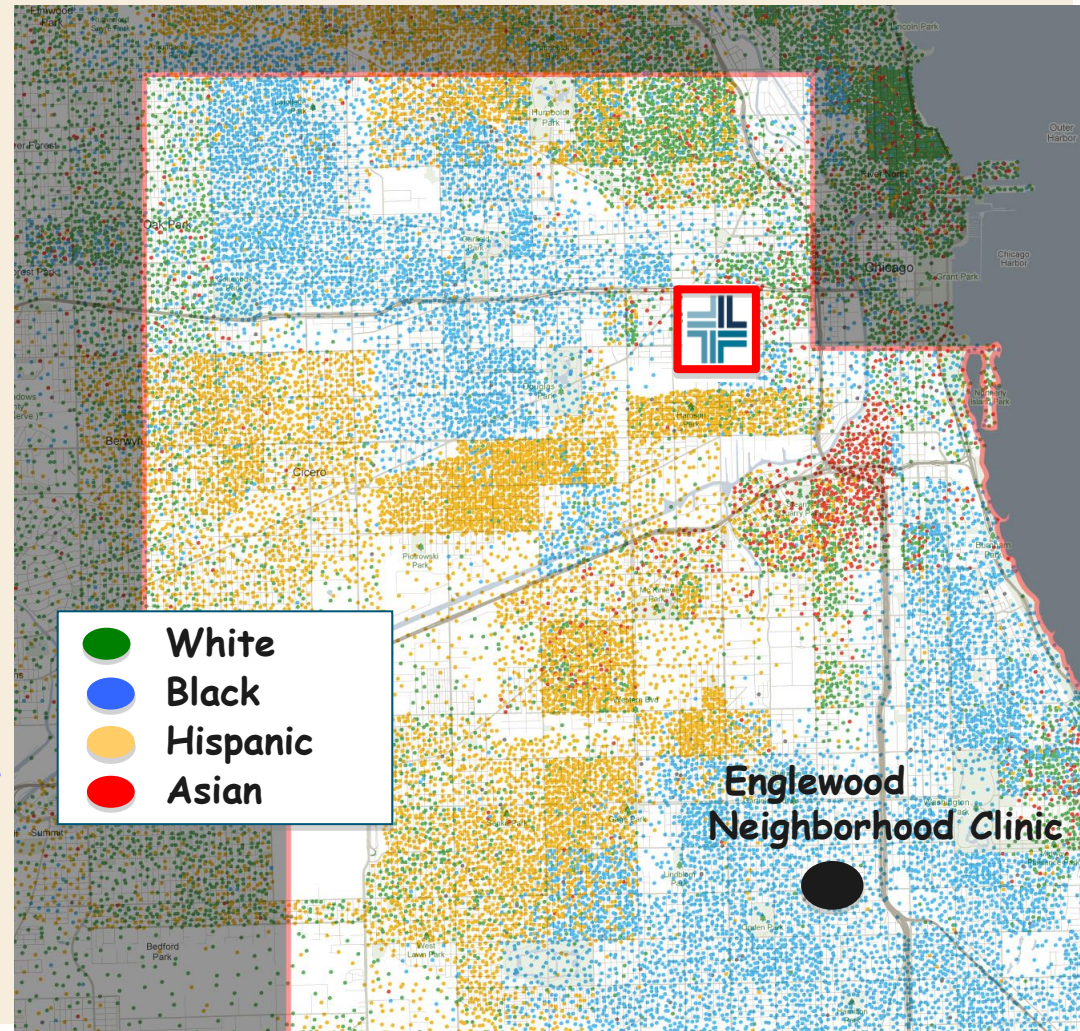
Federally Funded Salary Support- \$0
 Federally Funded Institutional Research- \$0



University of Illinois Hospital & Health Sciences System

New City Contract Awarded for Englewood Neighborhood

- 7 City Clinics Closing
- Collaboration between VPHA, CON, COM, COP, Mile Square
- Englewood Clinic, 1/1/12, 9000 visits, 3800 patients
 - Outpatient care for adults, women's health, prenatal care
 - Deliveries, hospital care, specialty care to UI
- Fits the UI Hospital and Health Sciences System mission to serve vulnerable populations





CMS Health Care Innovation Challenge- FOA released 11/2011-due 1/27/12

- \$1 billion program to test transformative models of service and payment for better health, better care, lower costs for high-cost/high-risk CMS beneficiaries
- Up to \$30 million over 3 yrs

VPHA encouraged multi-college projects (admin., financial support)

4 meritorious projects in development

1. Cheryl Schraeder (CON) - \$30 million - Comprehensive care coordination (with COM- Chicago, Peoria, Rockford, Urbana; COP, COSW, COAHS)
2. Stephen Brown (COM)- \$15 million - Preventive Emergency Medicine (with CON, COSW, COP, IHRP)
3. Denise Hynes (IHRP) - \$5 million - Coordinated care for dialysis patients (with COM, COP, SPH, COSW, COD)
4. Ben Van Vorhees (COM) - \$5 million - Dental and mental care for children (with SPH, COD, COSW, IHRP, COAHS)

A major challenge in addressing health disparities is the lack of epidemiologic data on these populations

FRAMINGHAM HEART STUDY

A Project of the National Heart, Lung and Blood Institute and Boston University

About FHS

Participants

FHS Investigators

Risk Score Profiles

FHS Bibliography

For Researchers



History of the Framingham Heart Study

- Longitudinal study started in 1948 in the town of Framingham, Massachusetts with a focus on cardiovascular health.
- This study was responsible for identifying the links between heart disease and risk factors such as cigarette smoking, high blood pressure, high cholesterol, and obesity.
- This was an overwhelmingly non-Hispanic white cohort.

Field Centers

Bronx

Chicago

Miami

San Diego



Hispanic Community Health Study / Study of Latinos

[SITE MAP](#)



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The Chicago "Framingham" Study of Latinos

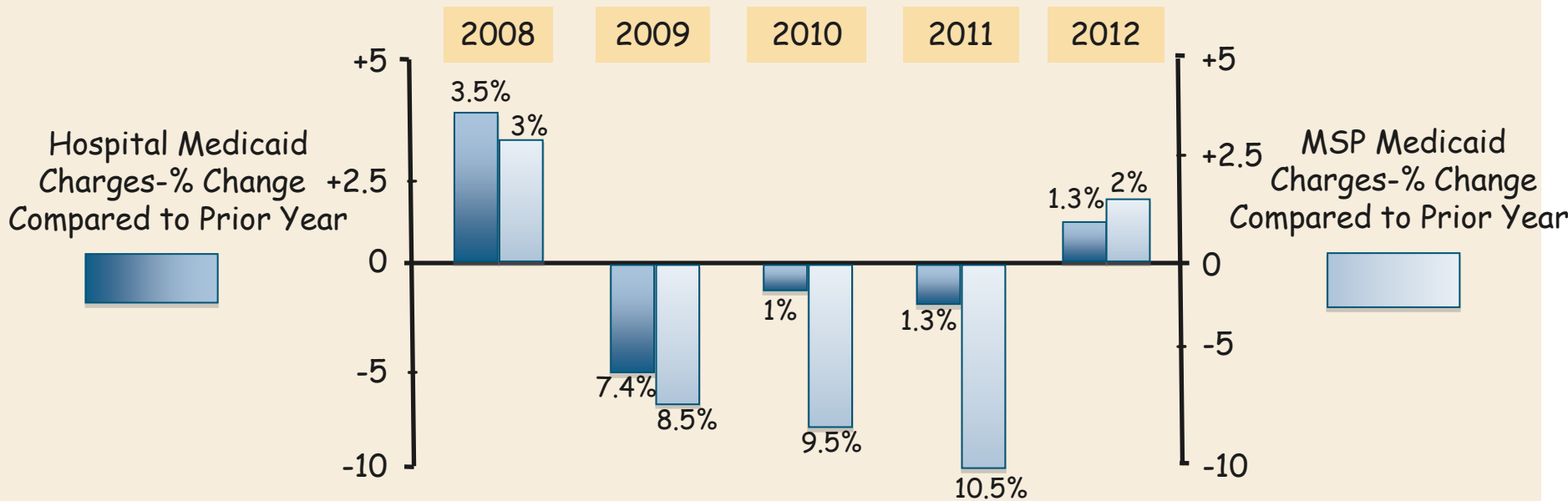
Martha Daviglius MD PhD - Professor of Medicine, Director of Institute for Minority Health Research.

5 year funding - \$15.2M

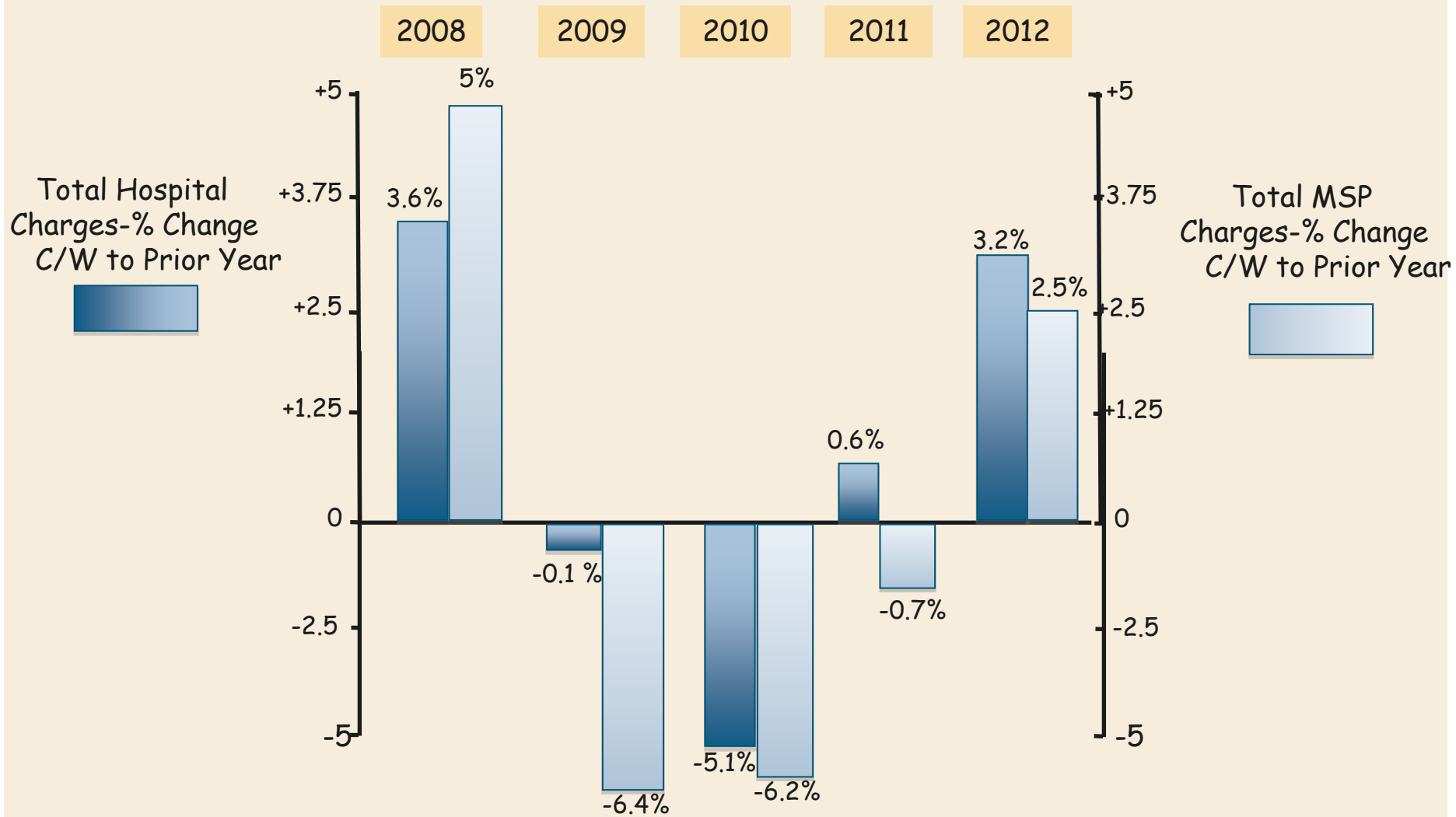


Martha will spearhead research efforts to improve Latino health and begin a large, longitudinal >20,000 person cohort study of Latinos in Chicago. The data generated will drive the epidemiology/prevention/care of asthma, obesity, diabetes, hypertension, heart diseases, and other high-risk health problems in Latinos.

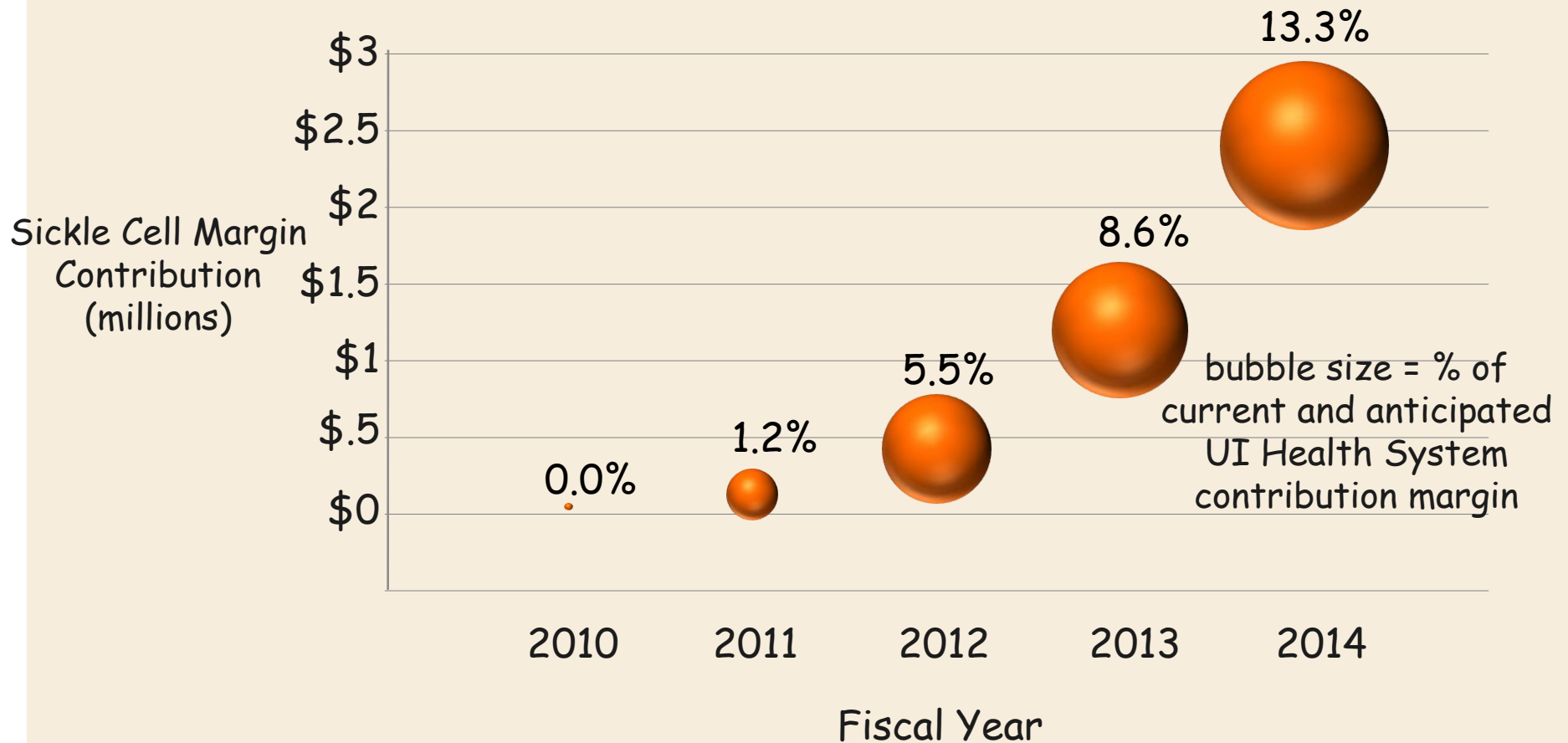
UI Hospital & Health Sciences System Financial Performance (FY12 December year-to-date)



UI Hospital & Health Sciences System Financial Performance (FY12 December year-to-date)



UI Hospital & Health Sciences System **Sickle Cell Program** Total Margin (\$) Contribution & % Total Margin



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Addressing Health Disparities in Sickle Cell Disease (SCD)

Hemoglobin (Hb)

SCD Complications

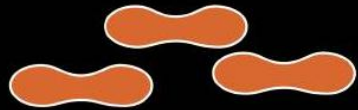
Normal (HbA)

CCT GAG GAG
-Pro-Glu-Glu-
5 6 7

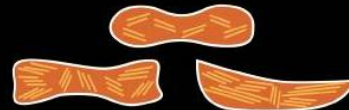


Abnormal (HbS)

CCT GTG GAG
-Pro-Val-Glu-
5 6 7



Normal RBC
120 day lifespan



Sickle RBC
15 day lifespan

Stroke, Meningitis

Post-Hypnema
Glaucoma, Retinal
Infarction

Acute Chest
Syndrome

Sickle
Hepatopathy

Splenic Sequestration
Splenic Infarction

Papillary
Necrosis

Priapism

Cholelithiasis

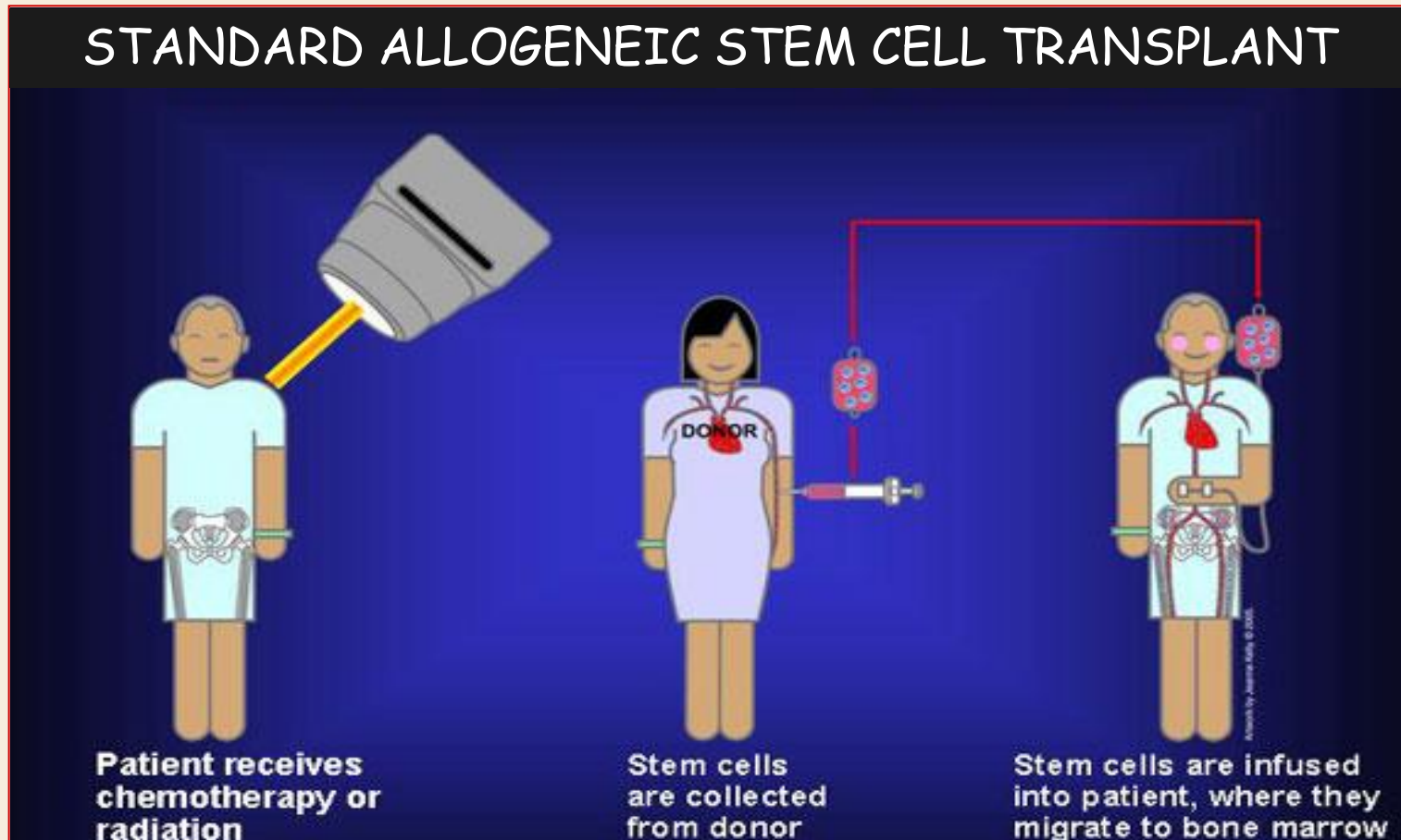
Bone Marrow
Infarction,
Osteomyelitis



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Why not do Bone Marrow Transplants in sickle cell disease to cure this problem?



Problem: Transplants in Sickle Cell Disease are limited by high mortality rates due to toxicity of the chemotherapy & radiation and by infection.

Bone Marrow Transplantation to Cure Sickle Cell Disease

The NEW ENGLAND
JOURNAL *of* MEDICINE

ESTABLISHED IN 1812

DECEMBER 10, 2009

VOL. 361 NO. 24

Allogeneic Hematopoietic Stem-Cell Transplantation for Sickle Cell Disease

Matthew M. Hsieh, M.D., Elizabeth M. Kang, M.D., Courtney D. Fitzhugh, M.D., M. Beth Link, R.N.,
Charles D. Bolan, M.D., Roger Kurlander, M.D., Richard W. Childs, M.D., Griffin P. Rodgers, M.D.,
Jonathan D. Powell, M.D., Ph.D., and John F. Tisdale, M.D.

Stem cells from **matched related donors** can engraft sickle cell patients using only immunosuppressive therapy and avoiding toxicity caused by chemotherapy

A Phase I/II Study of Allogeneic Stem Cell Transplantation For Aggressive Sickle Cell Disease

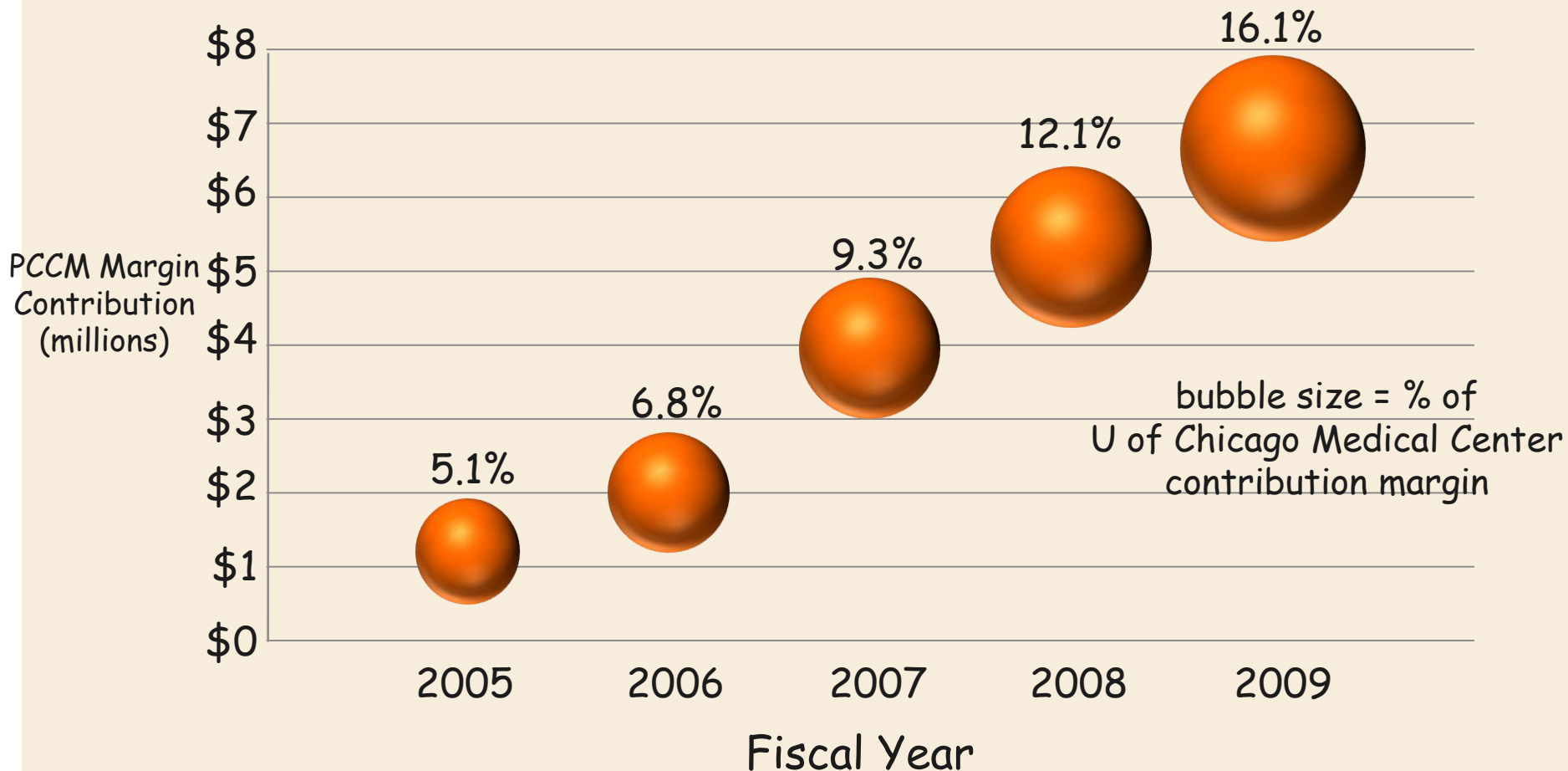
**First patient enrolled in November 2011
(100% engraftment!)**



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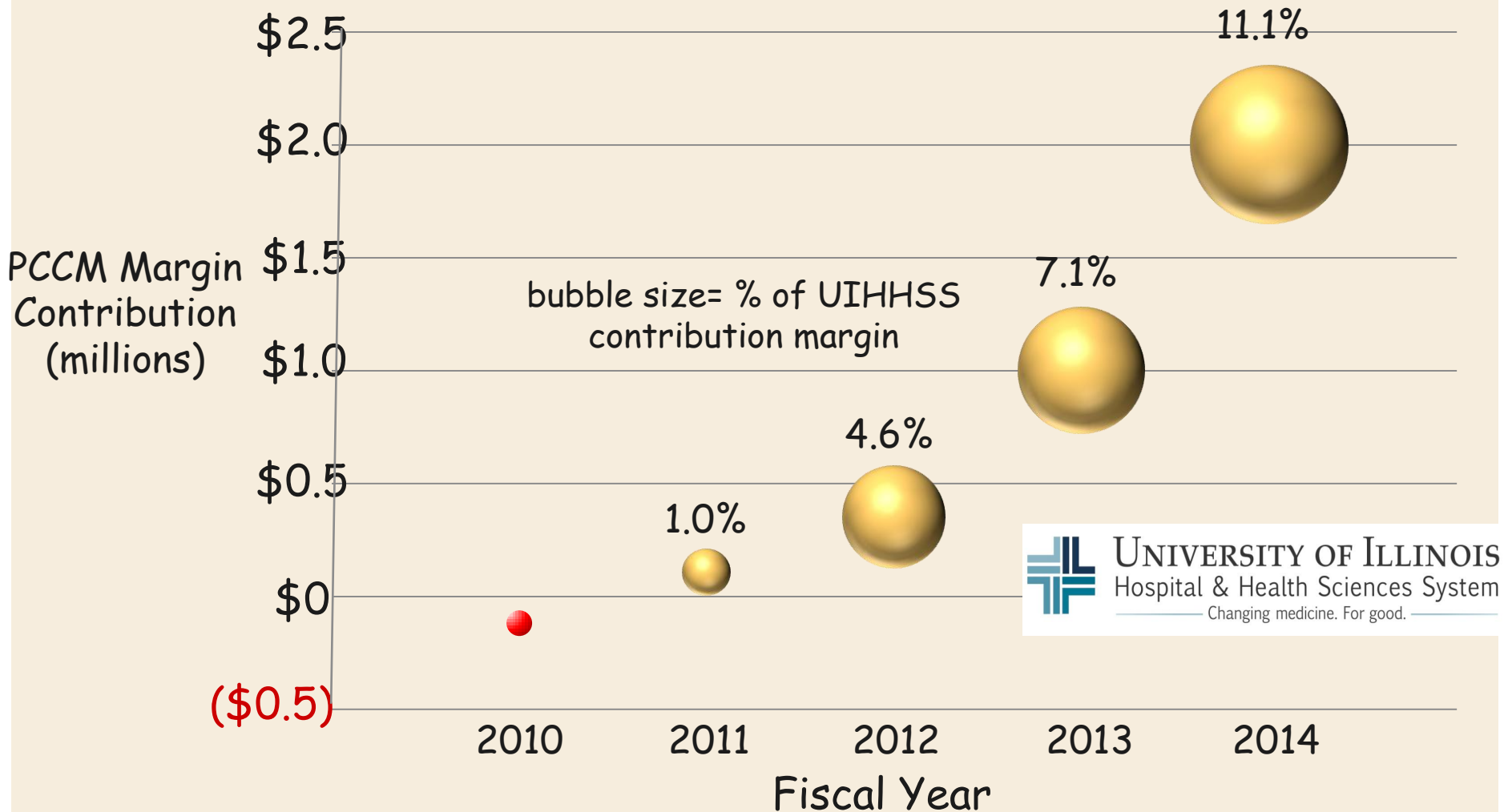


U. of Chicago Margin Contribution of Pulmonary/Critical Care Medicine



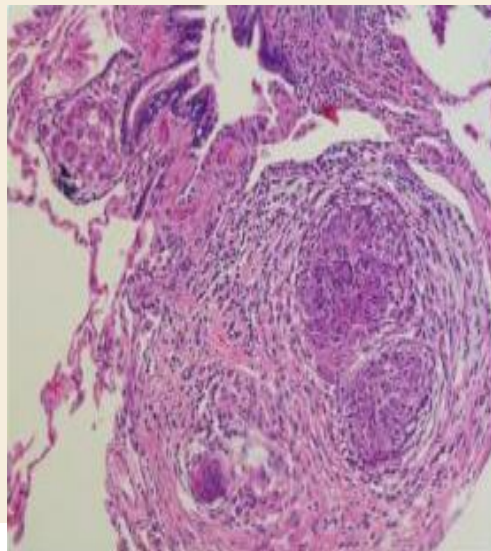
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Current and Speculated Margin Contribution of Pulmonary/Critical Care Medicine



UI Program in Sarcoidosis

- Sarcoidosis is a multi-systemic inflammatory disease **ALWAYS** involving the lung and potentially affecting the heart, eye, brain, and kidney.
- Many individuals have a spontaneous remission. However, in ~ 25% cases, despite therapy, the disease progresses to severe, potentially fatal, lung scarring (fibrosis) as well as serious cardiac and neurologic sarcoidosis (termed complicated sarcoidosis).
- Sarcoidosis is a disorder with significant health disparities: African Americans and Latinos have a higher likelihood of progressive complicated lung sarcoidosis
- Currently difficult to distinguish the patient likely to spontaneously remit from the patient destined to progress to "complicated sarcoidosis"





PLOS one

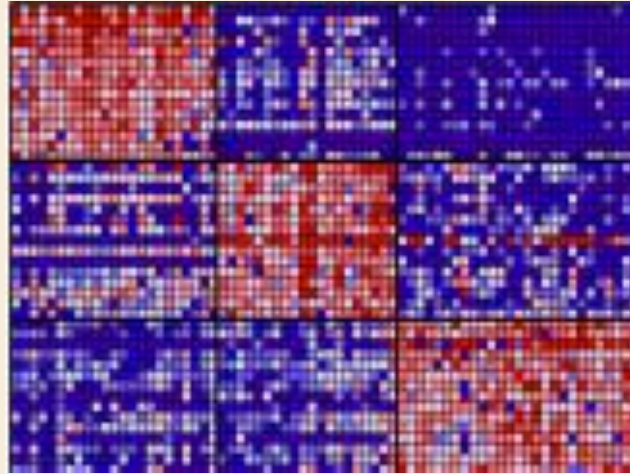
accelerating the publication of peer-reviewed science

Linkage of Type I interferon activity and TNF- α levels in serum with sarcoidosis manifestations and ancestry

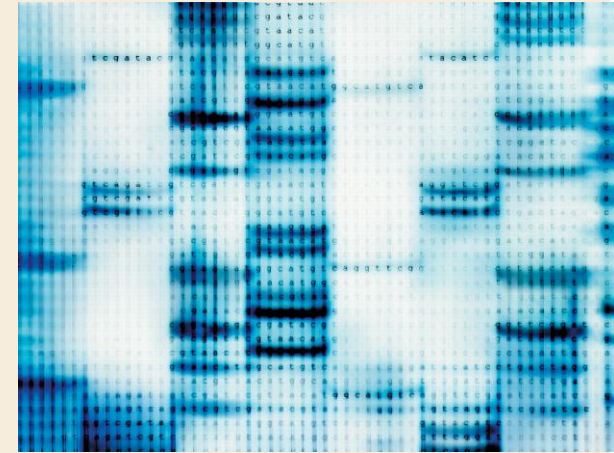
Swiss NJ, Franek BS, Kariuki SN, Moller DR, Patterson K, Girijala R, Vaisak, Baughman RP, Garcia JGN, TB Niewold

University of Illinois at Chicago

Clinical trials of novel sarcoidosis therapies



Molecular signatures in blood which predict potential lung, neuro & cardiac complications



GWAS - identify genetic variants as novel biomarkers & individualizing care

University of Illinois Bernie Mac Center for Sarcoidosis



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The
BernieMac
FOUNDATION

University of Illinois Hospital & Health Sciences System Marketing Launch



WE ARE
ONE.

A mural on a brick wall featuring stylized human figures in various colors. The text "WE ARE ONE." is overlaid in large, white, sans-serif capital letters.

So many strengths.
Imagine them
all pulling in one
direction.





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Introducing the University of Illinois Hospital & Health Sciences System, a revolution in healthcare based on a simple thought: combine all the University of Illinois health science resources to provide the latest research, care and innovations to the people who need it most. By bringing our resources together, we can begin bringing healthcare disparities to an end. At the University of Illinois, we're changing medicine. For good.



University of Illinois Medical Center | College of Medicine | College of Nursing | College of Dentistry
College of Pharmacy | School of Public Health | College of Applied Health Sciences



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



Introducing the University of Illinois Hospital & Health Science System. What you knew as the University of Illinois Medical Center is now part of a larger organization that also includes the university health science colleges. By bringing these resources together, we'll be able to make the best care accessible to those who need it most. Because we all deserve the best healthcare. The University of Illinois Hospital & Health Sciences System, changing medicine. For good.

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School of Public Health | College of Applied Health Sciences



Questions ??