

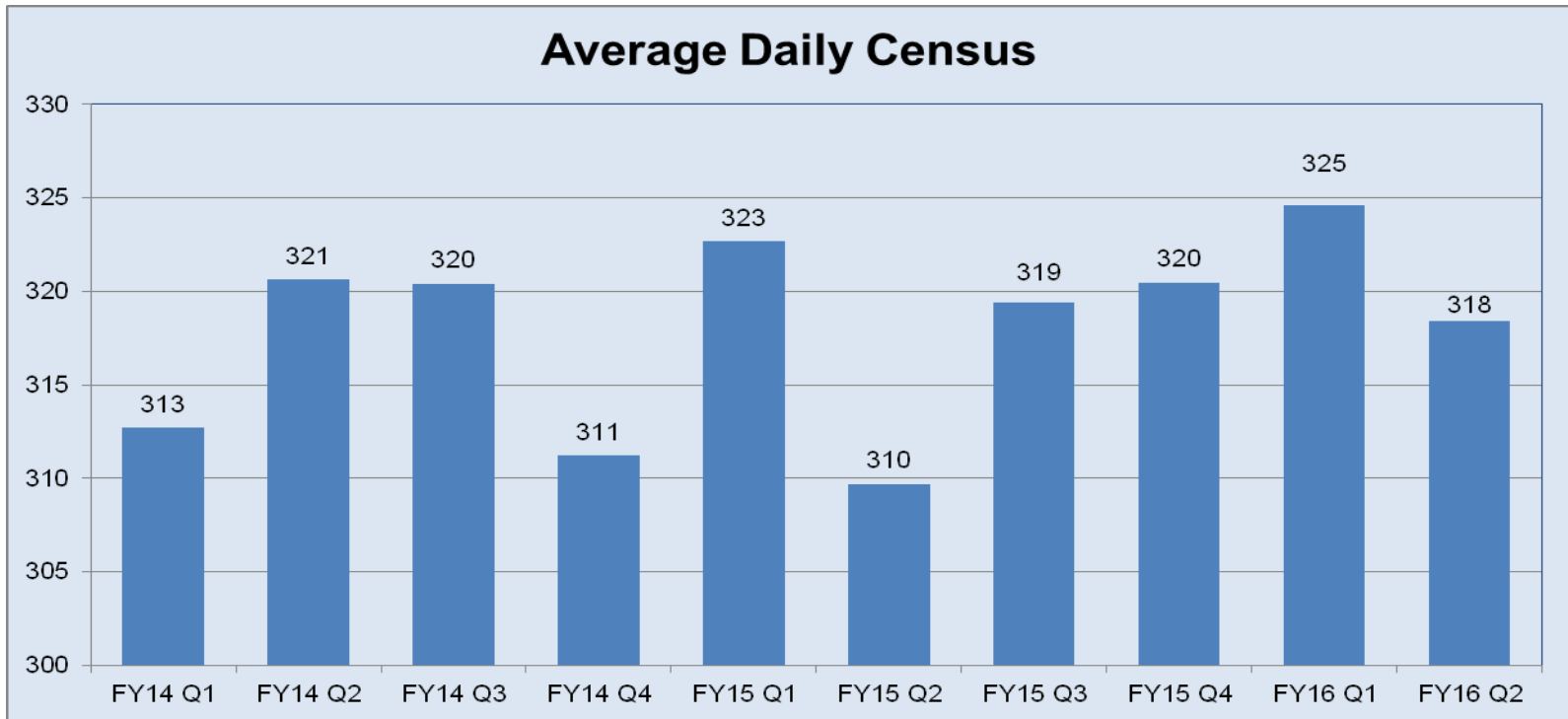


UNIVERSITY OF ILLINOIS HOSPITAL & HEALTH SCIENCES SYSTEM

HOSPITAL DASHBOARD

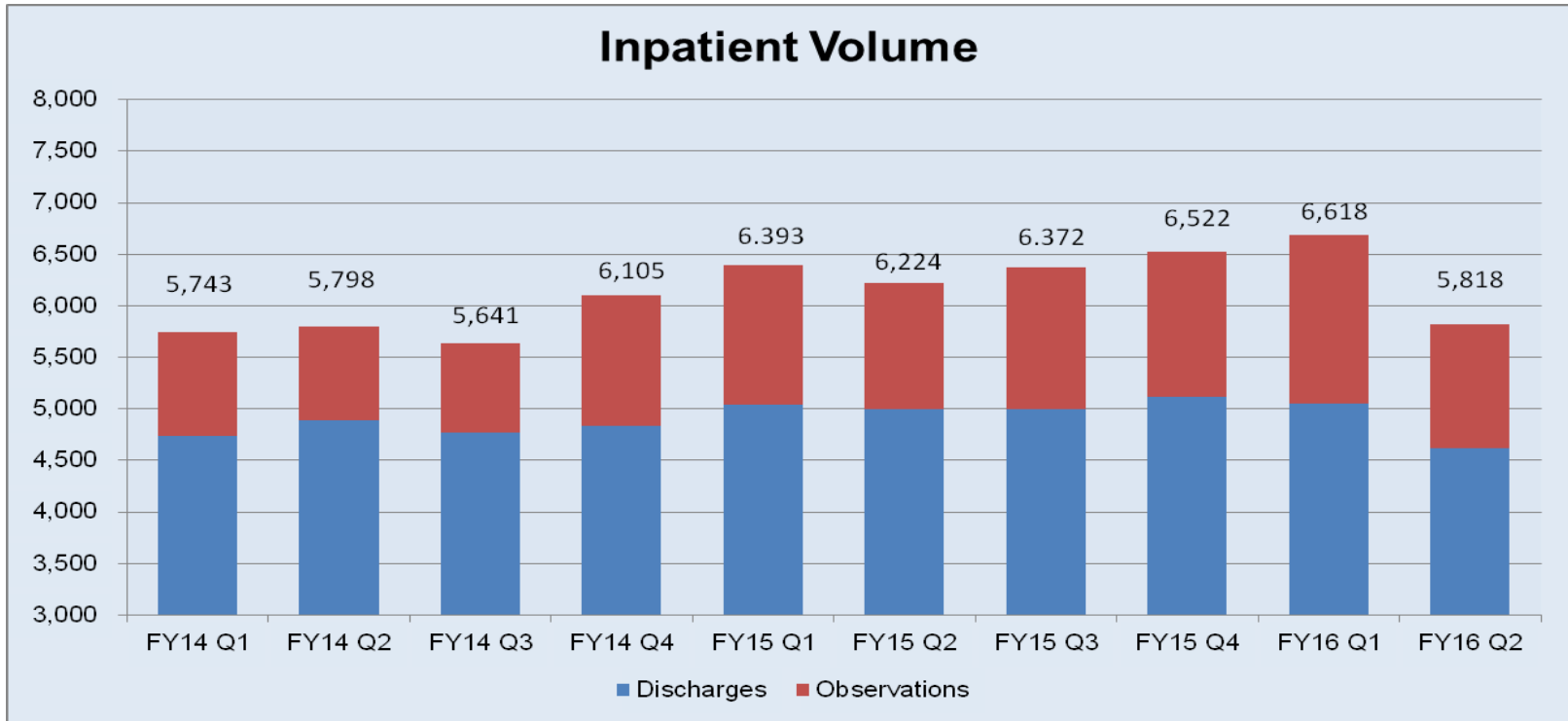
Reported to the Board of Trustees
March 16, 2016

UI Health Metrics	FY16 Q2 Actual	FY16 Q2 Target	FY15 Q2 Actual	2nd Quarter % change FY16 vs FY15
Average Daily Census (ADC)	318	317	310	2.6%



ADC in December 2015 was 305 vs. 322 in December 2014.

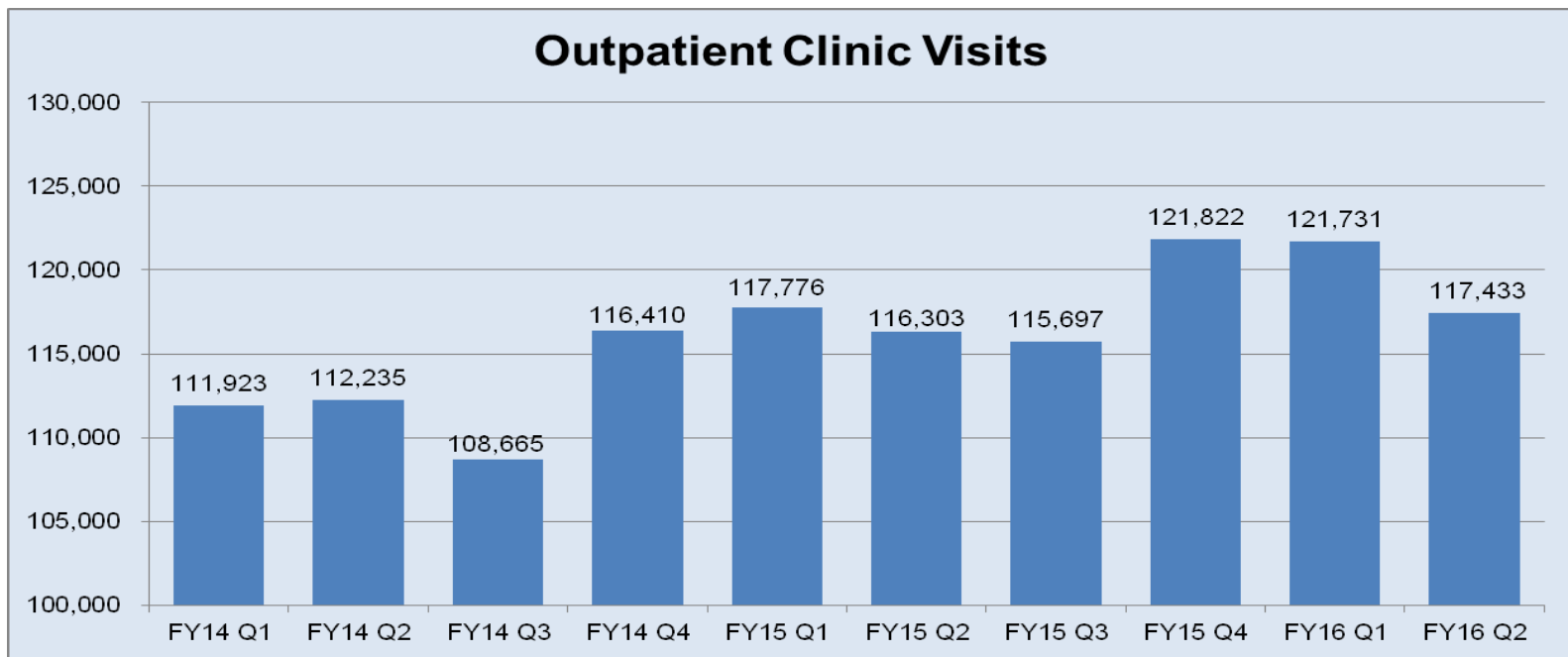
UI Health Metrics	FY16 Q2 Actual	FY16 Q2 Target	FY15 Q2 Actual	2nd Quarter % change FY16 vs FY15
Discharges	4,614	5,266	4,992	Combined -6.5%
Observation Cases	1,204	1,389	1,232	



Combined Discharges and Observation Cases for the six months ending December 2015 are 3.3% under budget and 1.3% greater than last year.

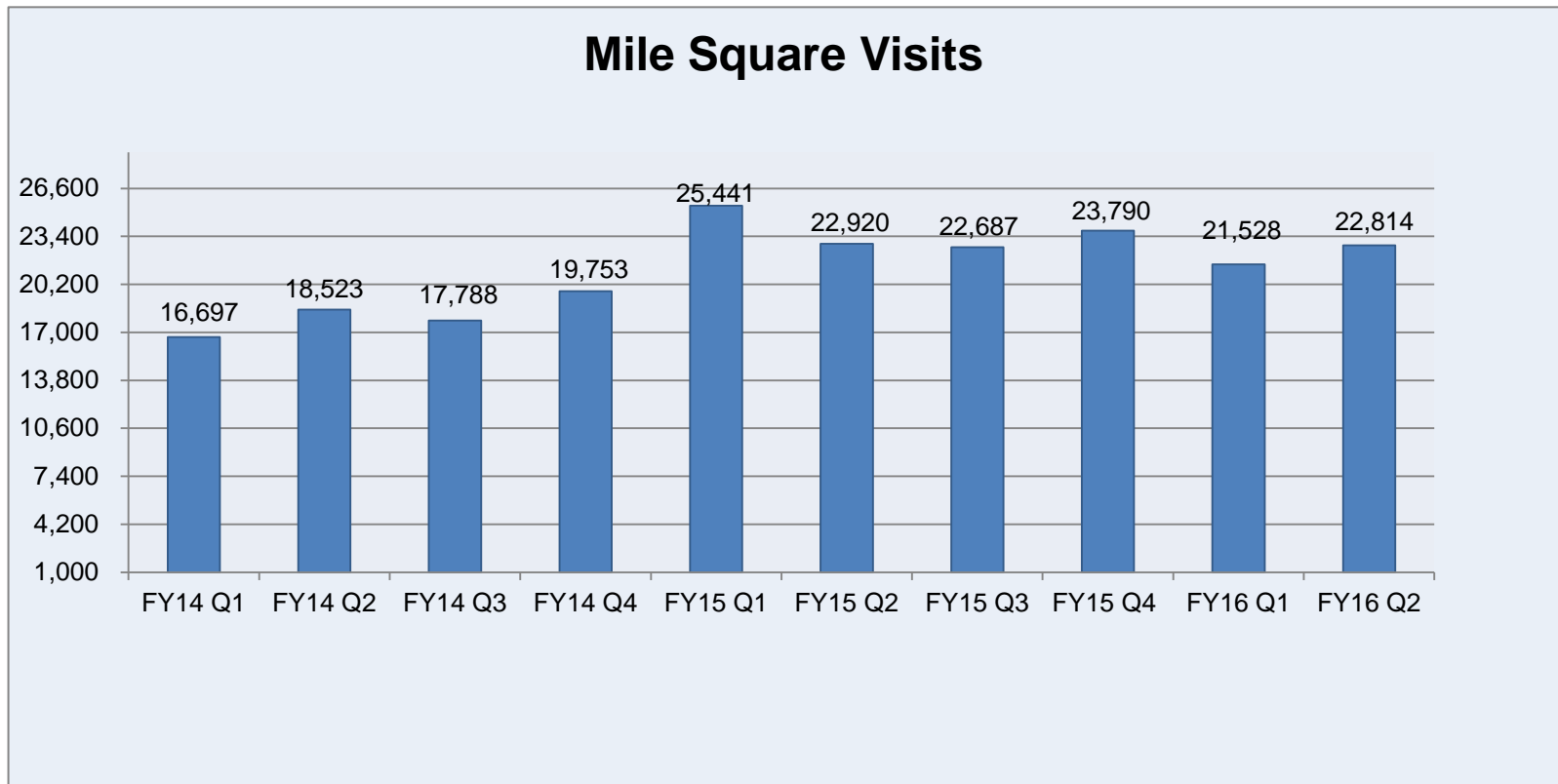
UI Health: Patient Volume

UI Health Metrics	FY16 Q2 Actual	FY16 Q2 Target	FY15 Q2 Actual	2nd Quarter % change FY16 vs FY15
Outpatient Clinic Visits	117,433	119,646	116,303	1.0%



Clinic visits for the six months ending December 2015 are 0.3% under budget and 2.2% more than last year.

UI Health Metrics	FY16 Q2 Actual	FY16 Q2 Target	FY15 Q2 Actual
Mile Square Visits	22,814	26,349	22,920



Mile Square visits are below prior year quarter 2 and lower than target.

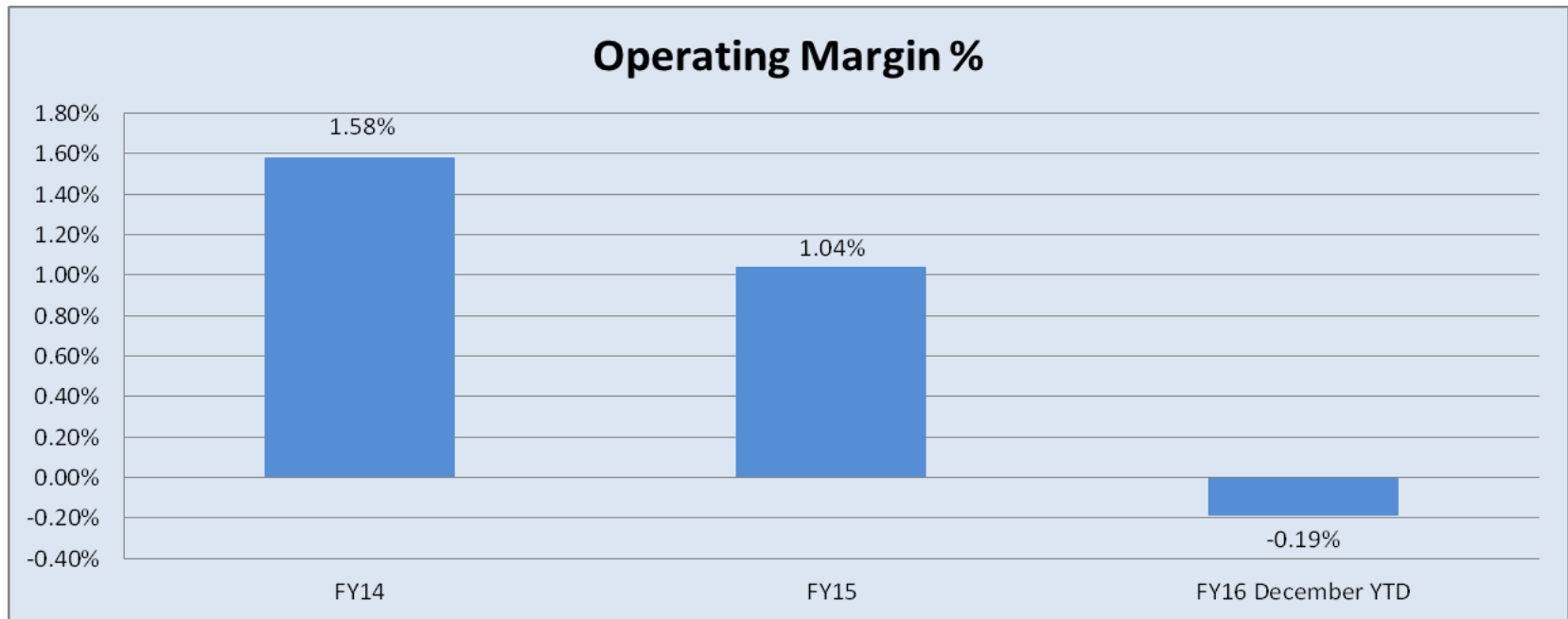
**UI HEALTH
MISSION PERSPECTIVE:
FINANCIAL
PERFORMANCE**

STATEMENT OF OPERATIONS – DECEMBER 2015

(\$ IN THOUSANDS)

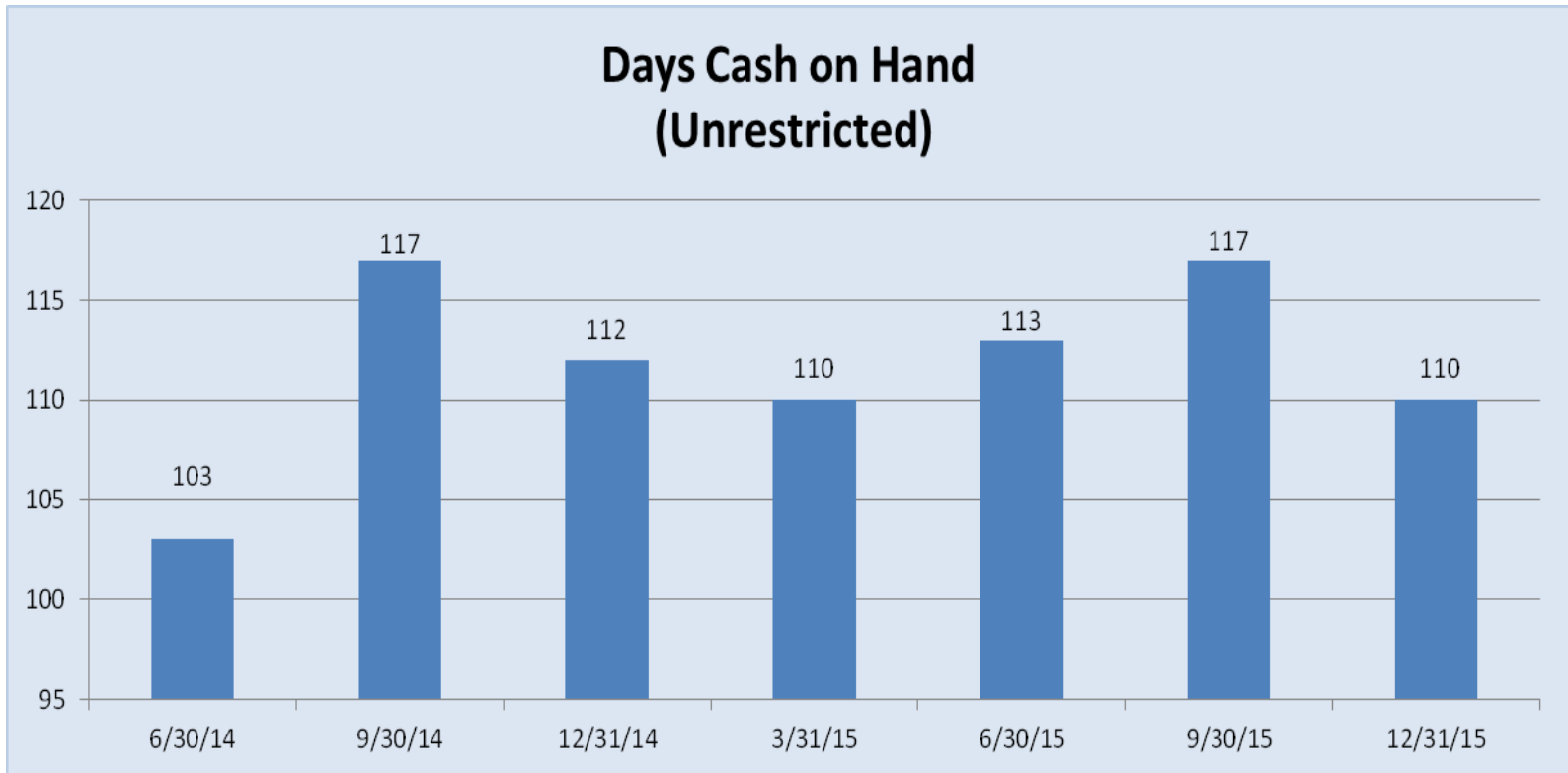
Month					Year-to-Date					
Actual	Budget	Variance		Prior Year		Actual	Budget	Variance		Prior Year
		\$	%					\$	%	
\$ 49,207	\$ 48,855	352	0.7%	\$ 45,243	Net Patient Revenue	\$ 293,976	\$ 292,388	1,588	0.5%	\$ 272,826
20,928	22,377	(1,449)	-6.5%	21,205	Other Revenue	129,711	134,219	(4,508)	-3.4%	127,834
70,135	71,232	(1,097)	-1.5%	66,448	Total Revenue	423,687	426,607	(2,920)	-0.7%	400,660
25,926	25,696	(230)	-0.9%	25,298	Salaries & Wages	152,846	152,446	(400)	-0.3%	148,583
17,119	17,126	7	0.0%	17,083	Employee Benefits	102,676	102,733	57	0.1%	103,004
24,295	24,403	108	0.4%	23,165	Department Expenses	146,965	146,749	(216)	-0.1%	134,513
3,667	3,667	0	0.0%	3,415	General Expenses	22,002	22,002	0	0.0%	20,486
71,007	70,892	(115)	-0.2%	68,961	Total Expenses	424,489	423,930	(559)	-0.1%	406,586
\$ (872)	\$ 340	(1,212)	-356.5%	\$ (2,513)	Operating Margin	\$ (802)	\$ 2,677	(3,479)	-130.0%	\$ (5,926)
(423)	(61)	(362)	-593.4%	285	Net Non-operating Income/(Loss)	(1,968)	(368)	(1,600)	-434.8%	1,471
\$ (1,295)	\$ 279	(1,574)	-564.2%	\$ (2,228)	Net Income/(Loss)	\$ (2,770)	\$ 2,309	(5,079)	220.0%	\$ (4,455)

UI Health Metrics	FY16 YTD Actual	FY16 (12mos) Target	FY15 Actual
Operating Margin %	-0.19%	0.74%	1.04%



Operating Margin includes Payments on Behalf for Benefits and Utilities. YTD Margin was adversely impacted by lower volumes and high pharmaceutical costs.

UI Health Mission Perspective: Financial Stability

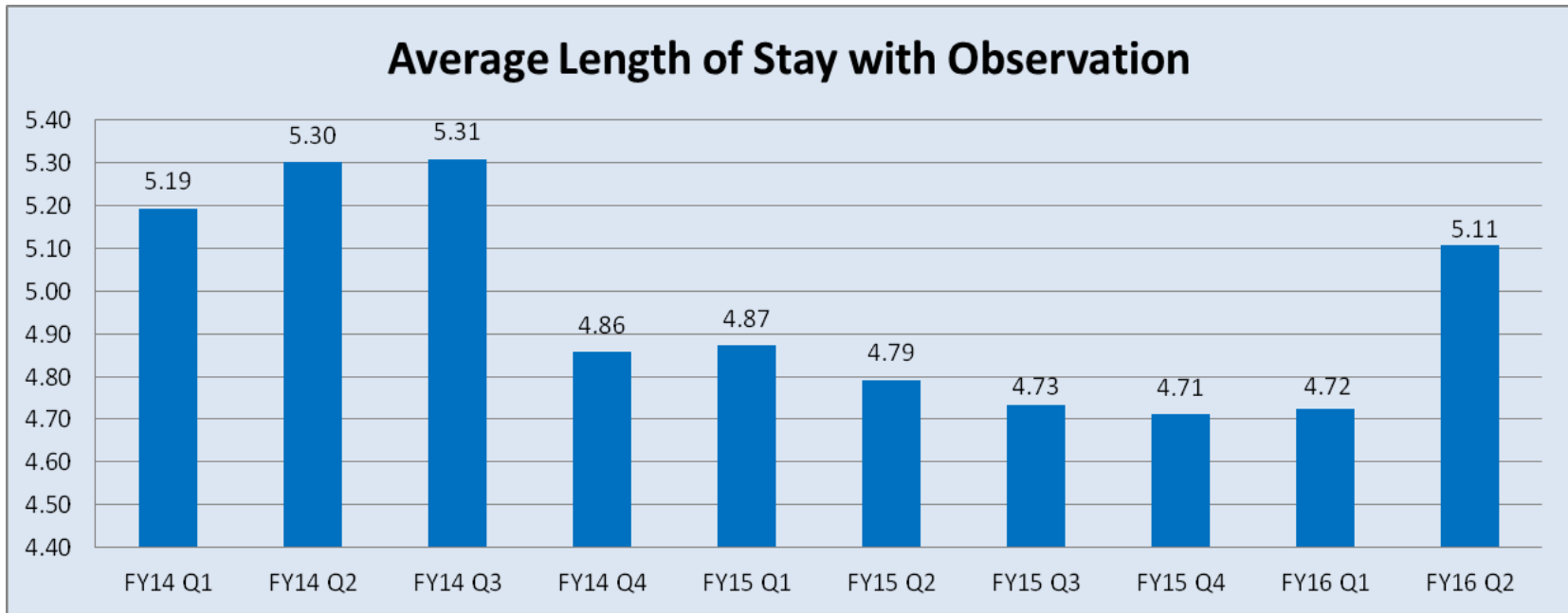


Median Unrestricted Days Cash on Hand for UI Health’s Bond Rating Category (S&P “A” and Moody’s “A2”) is 252 days.

UI Health Mission Perspective: Financial Stability

**UI HEALTH
MISSION PERSPECTIVE:
OPERATIONAL
EFFECTIVENESS**

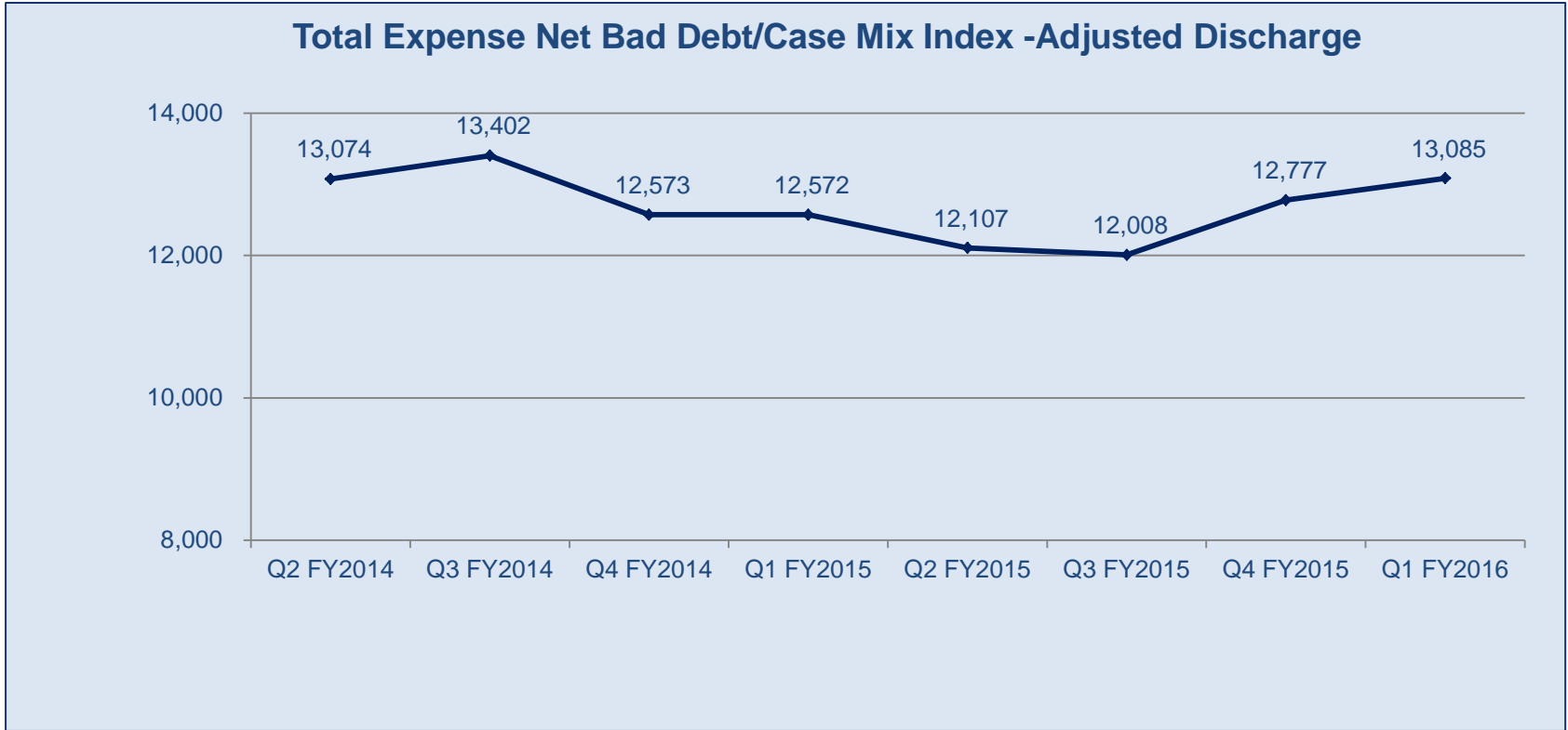
UI Health Metrics	FY16 Q2 Actual	FY16 Q2 Target	FY15 Q2 Actual
Average Length of Stay with Observation (Days)	5.11	4.56	4.79



FY 16 Budget Target is to be at 4.30 days by year-end.

UI Health Mission Perspective: Operational Effectiveness

UHC Metrics (FY16 Q1, July- Sept 2016)	N (Sample Size)	UIH 8 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Total Expense Net Bad Debt/Case Mix Index (CMI)- Adjusted Discharge	N/A	12,700	13,085	9,995	60/69

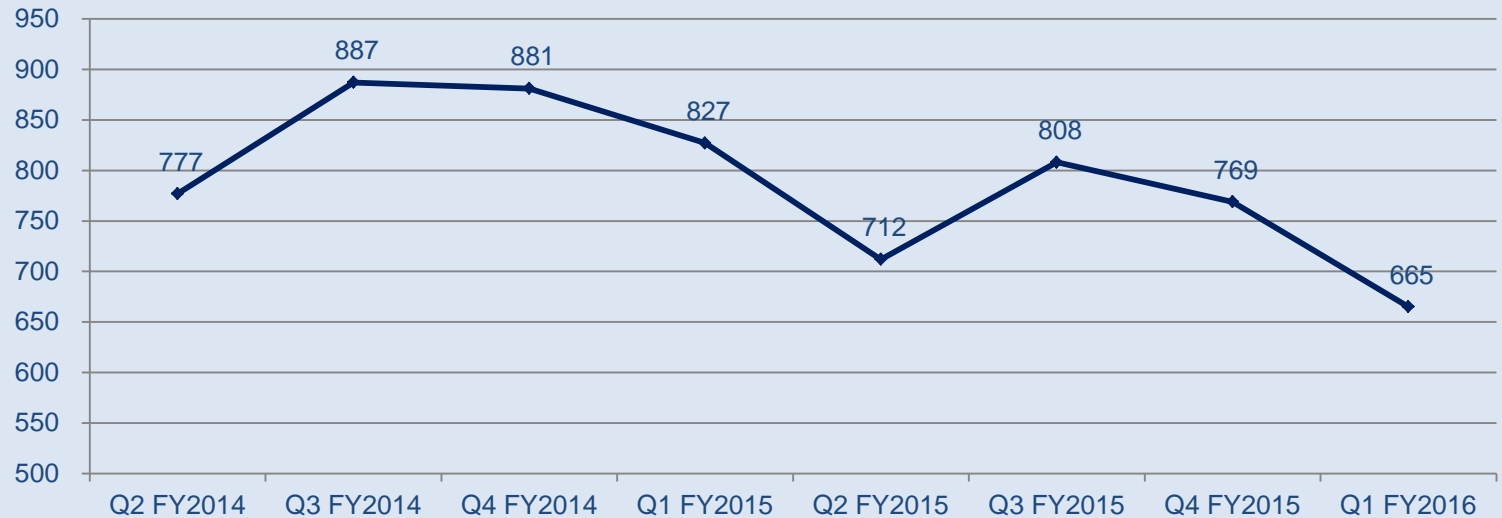


Q4 FY 2015 and Q1 FY 2016 has showed an upwards trend.

UI Health Mission Perspective: Operational Effectiveness

UHC Metrics (FY16 Q1, July – Sept 2015)	N (Sample Size)	UIH 8 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Supply Expense (less Drugs) / Supply Intensity Score Adjusted Discharge	N/A	791	665	799	43/63

Supply Expense (less Drugs) / Supply Intensity Score Adjusted Discharge



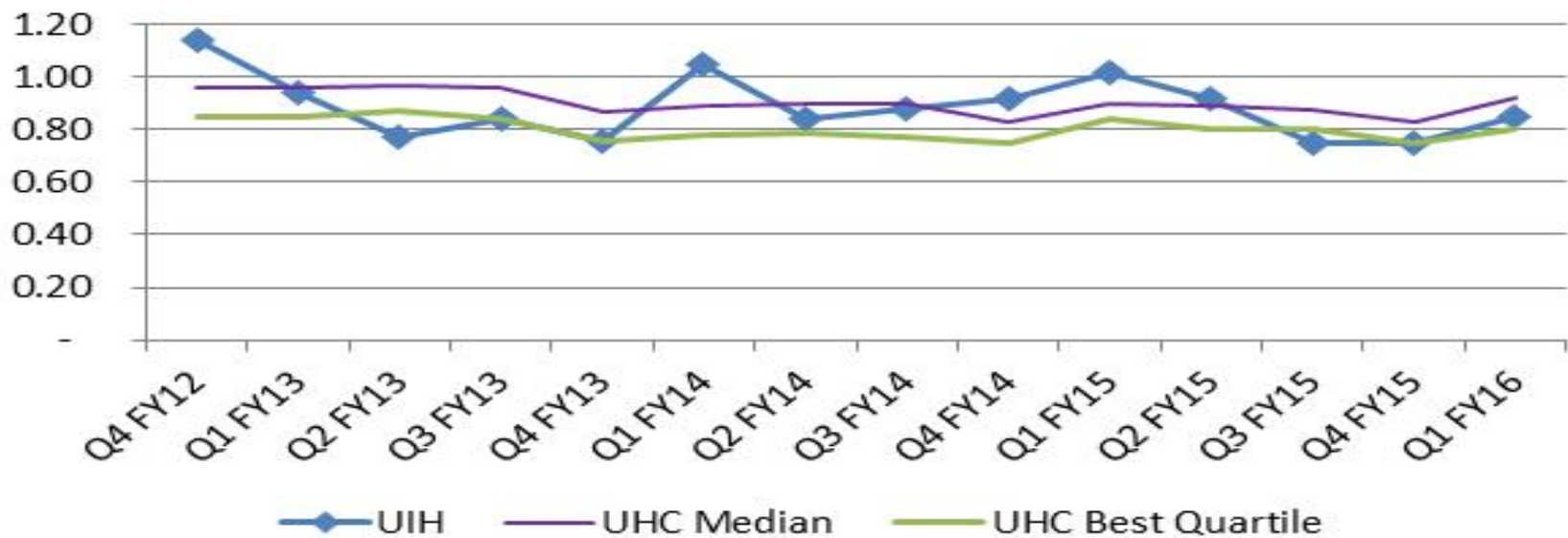
There was a decrease in Q1 FY16, which is lower than UHC median.

UI Health Mission Perspective: Operational Effectiveness

**UI HEALTH
MISSION PERSPECTIVE:
QUALITY AND SAFETY**

UHC Metrics (Q1 FY16, Jul - Sep 2015)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Total Inpatient Mortality Index (Observed/Expected Ratio)	76	0.82	0.85	0.92	47/135

**UI Health Total Inpatient Mortality Index
(Observed/Expected)
Q4 FY12 - Q1 FY16**

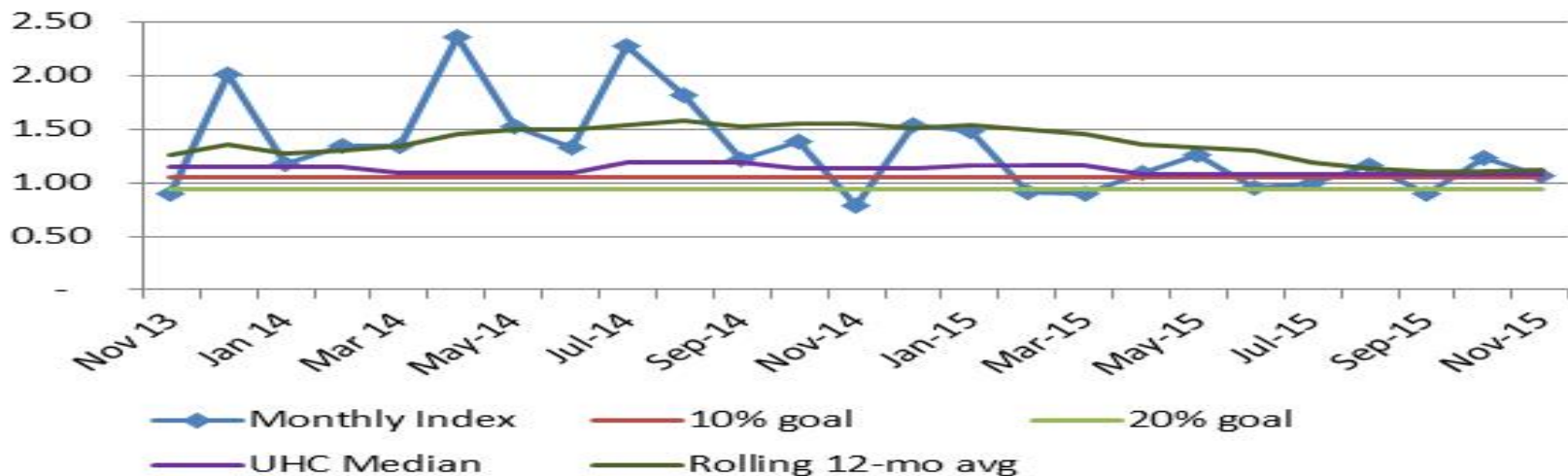


During Q1 FY16, UI Health's Total Inpatient Mortality Index (observed/expected deaths) increased slightly. Our performance remains better than the UHC median. We do not have a specific FY16 improvement goal for Total Inpatient Mortality.

**UI Health Mission Perspective:
Quality and Safety**

UHC Metrics (Q1 FY16, Jul - Sep 2015)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Sepsis Mortality (Observed/Expected)	36	1.22	1.16	1.15	70/135

**Monthly Sepsis Mortality Index
(Observed/Expected) Nov 2013 - Nov 2015**



	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15
Number of Sepsis Cases by Month	55	66	61	70	61	82	83	83	83	89	102	102	70
Number of Sepsis Deaths by Month	6	16	11	9	8	12	11	9	12	11	13	13	9

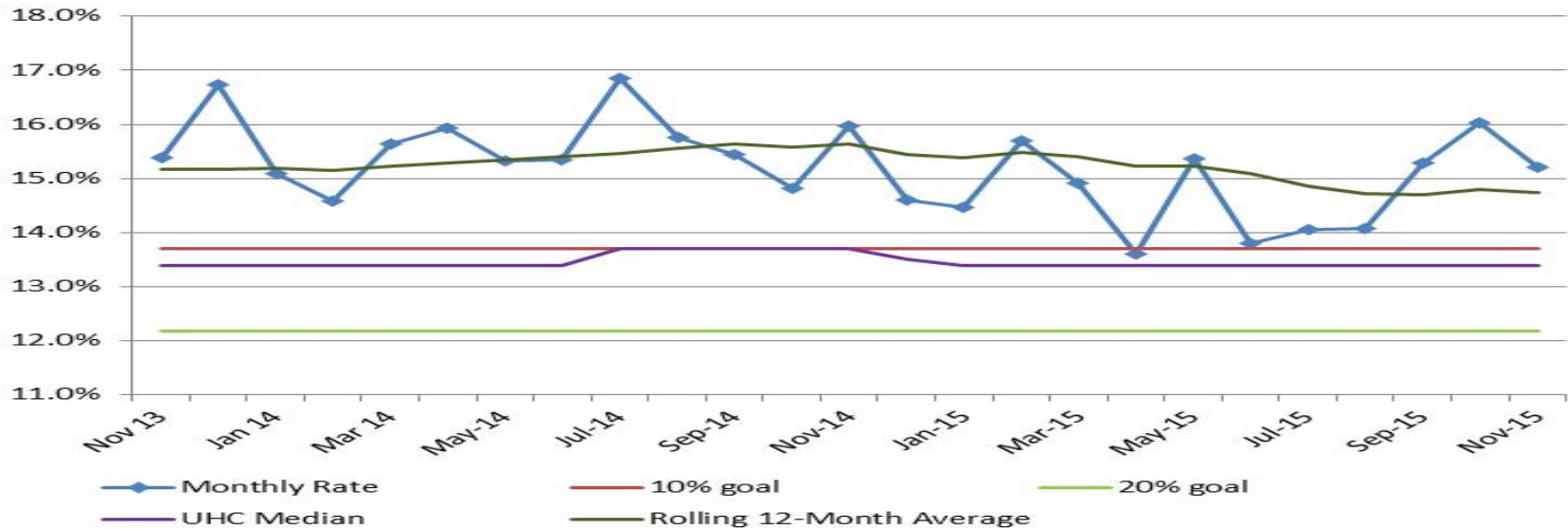
During November 2015, UI Health’s Sepsis Mortality index (observed/expected deaths) was 1.07, an improvement in performance from the previous month and better than the UHC median.

Our FY16 goal is to reduce our Sepsis Mortality by 10 to 20% by June 2016 as compared to our June 2015 performance. This will require lowering our rolling 12-month Sepsis Mortality Index to 1.05 or below.

**UI Health Mission Perspective:
Quality and Safety**

UHC Metrics (Q1 FY16, Jul - Sep 2015)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
30-Day All-Cause Readmission Rate	443	18.1	17.5	13.6	132/135

UI Health 30-Day All-Cause Readmission Rate Nov 2013 - Nov 2015



	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15
Number of Readmissions by Month	266	284	266	263	277	245	284	250	261	250	275	273	244

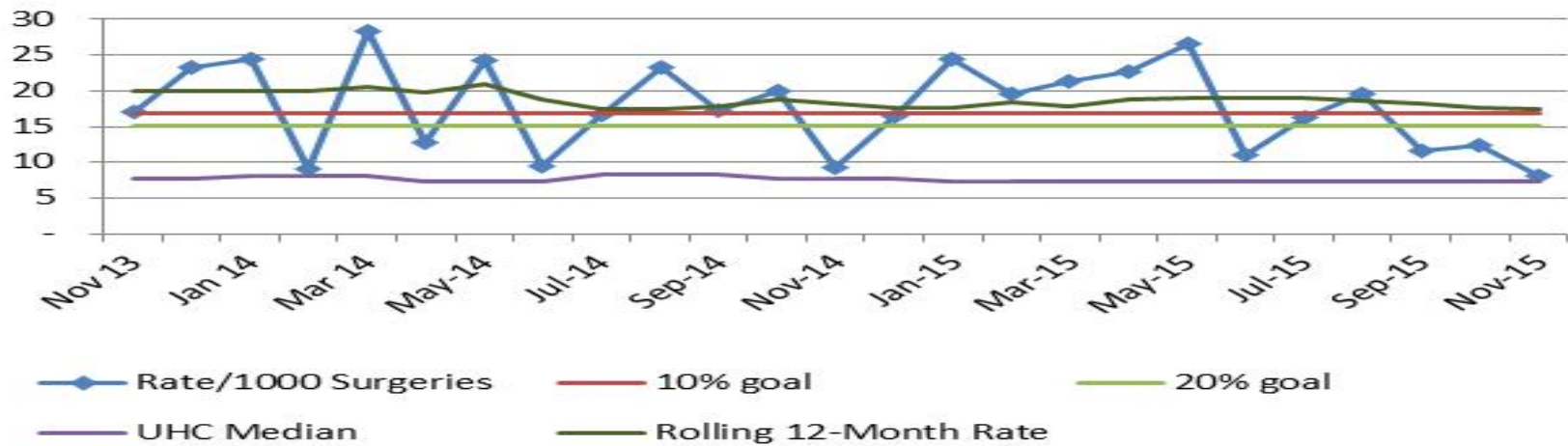
During November 2015, UI Health’s 30-day all-cause Readmission Rate was 15.2%, a slight improvement in performance from the previous month and worse than the UHC median.

Our FY16 goal is to reduce our 30-day all-cause Readmission Rate by 10% to 20% by June 2016 as compared to our June 2015 baseline. This will require a rolling 12-month Readmission Rate of ≤13.6%.

UI Health Mission Perspective:
Quality and Safety

UHC Metrics (Q1 FY16, Jul - Sep 2015)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Patient Safety Indicator 12: Post-operative Pulmonary Embolism or Deep Vein Thrombosis (rate per 1000 surgical patients)	18	18.2	15.5	6.83	129/135

UIH Post-Op PE* or DVT** per 1000 Surgeries Nov 2013 - Nov 2015



	Nov 14	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15
Number of Post-Op DVTs by Month	3	4	3	3	4	4	4	1	5	4	1	4	2
Number of Post-Op PEs by Month	0	3	6	3	4	5	6	3	1	3	4	1	2

During November 2015, UI Health's post-operative PE/DVT rate improved from the previous month to 8.09 per 1000 surgeries, our best-ever performance since we began tracking this metric in 2012.

Our FY16 goal is to reduce our post-op PE/DVT rate by 10 to 20% by June 2016 as compared to our June 2015 rate. This will require lowering our rolling 12-month average Post-Op DVT/PE Rate to 16.9 or below.

**UI Health Mission Perspective:
Quality and Safety**

*PE = Pulmonary Embolism

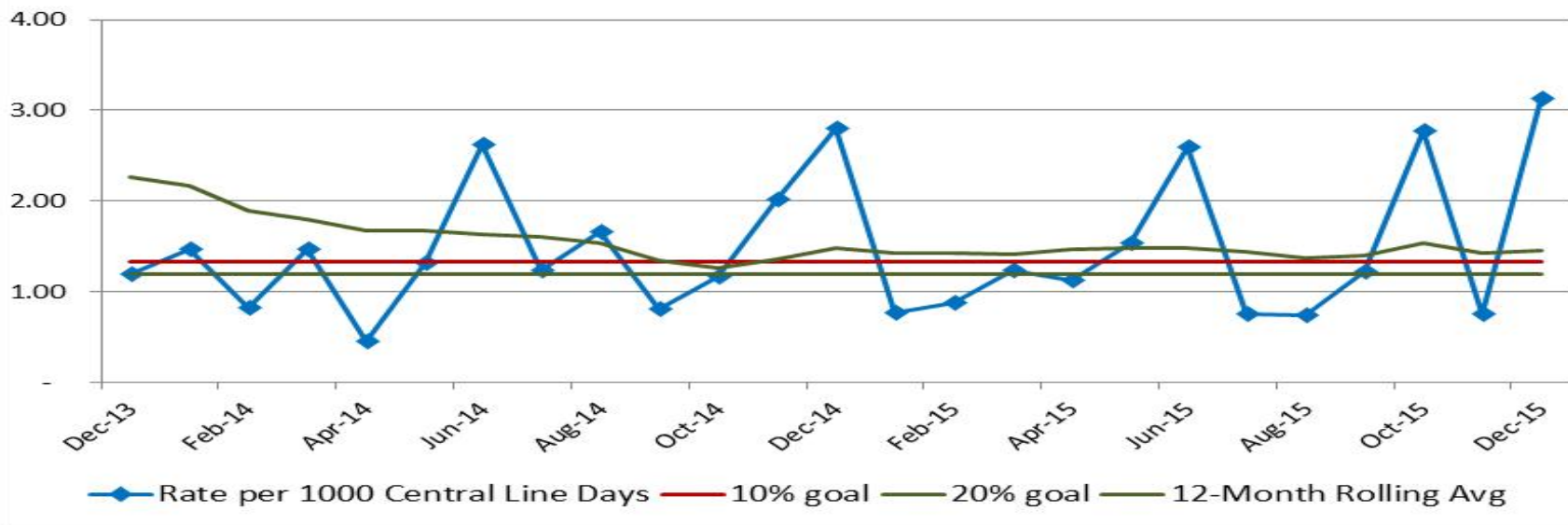
**DVT = Deep Venous Thrombosis



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UHC Metrics (Q1 FY16, Jul - Sep 2015)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Central Line-Associated Blood Stream Infections	1	0.74	0.37	0.21	93/135

Central Line Associated Blood Stream Infections*
Dec 2013 through Dec 2015
Rate per 1000 Line Days, All Inpatient Units Combined



	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sept 15	Oct 15	Nov 15	Dec 15
Number of Infections by Month	7	2	2	4	3	4	7	2	2	3	8	2	8

Our CLABSI rate worsened in November to 1.23, with a total of 8 CLABSIs house-wide.

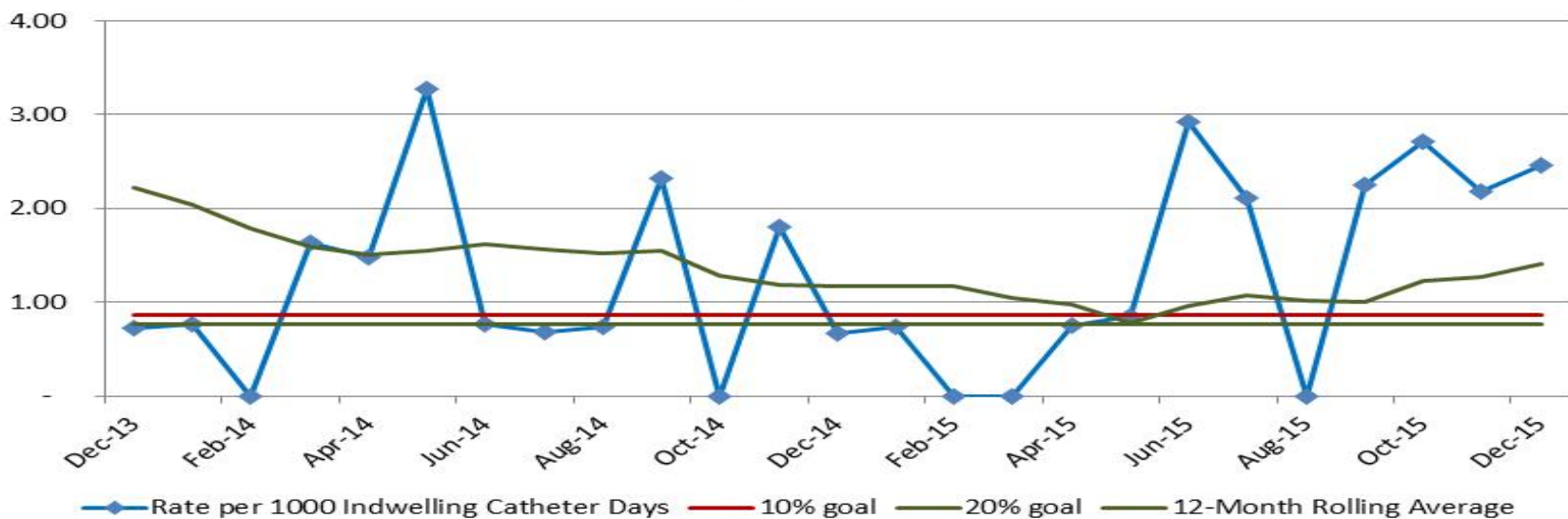
Our FY16 goal is to reduce CLABSIs by 10% to 20% by June 2016 as compared to our June 2015 baseline. This will require lowering our rolling 12-month CLABSI rate per 1000 line days to 1.34 or lower.

UI Health Mission Perspective:
Quality and Safety



UHC Metrics (Q1 FY16, Jul - Sep 2015)	N (Cases)	UIH 4 Quarter Average	UIH Latest Quarter Available	Compared Among All UHC	
				UHC Median Score	Current UIH Rank
Catheter-Associated Urinary Tract Infections	3	0.39	0.66	0.55	77/135

Catheter Associated Urinary Tract Infections*
Dec 2013 through Dec 2015
Rate per 1000 Catheter Days, All Inpatient Units Combined



	Dec 14	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15	Dec 15
Number of Infections by Month	1	1	0	0	1	1	4	3	0	3	4	3	3

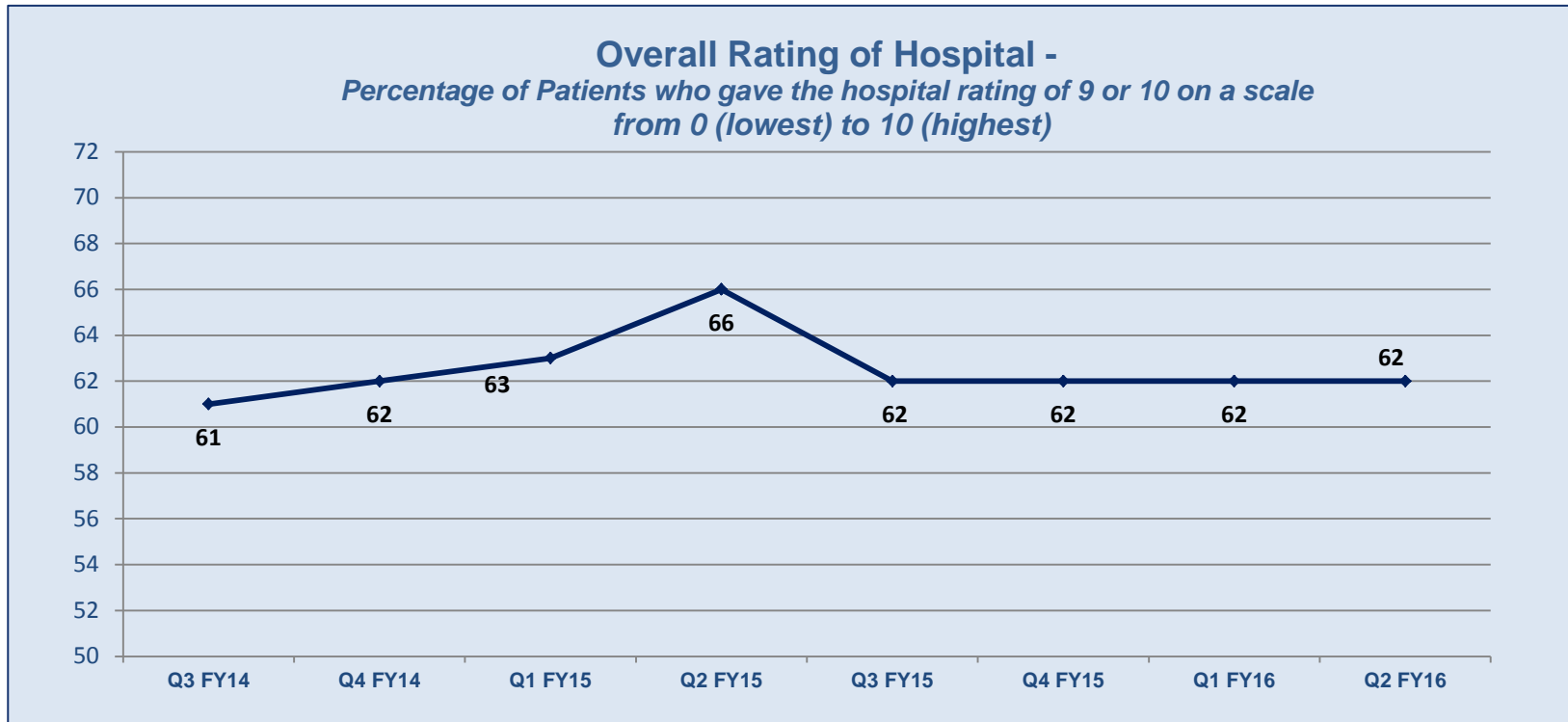
Our CAUTI rate in November worsened to 2.5, with 3 CAUTI infections for the month.

Our FY16 goal is to reduce CAUTIs by 10% to 20% by June 2016 as compared to June 2015. This will require lowering our rolling 12-month CAUTI rate per 1000 indwelling catheter days to 0.86 or lower.

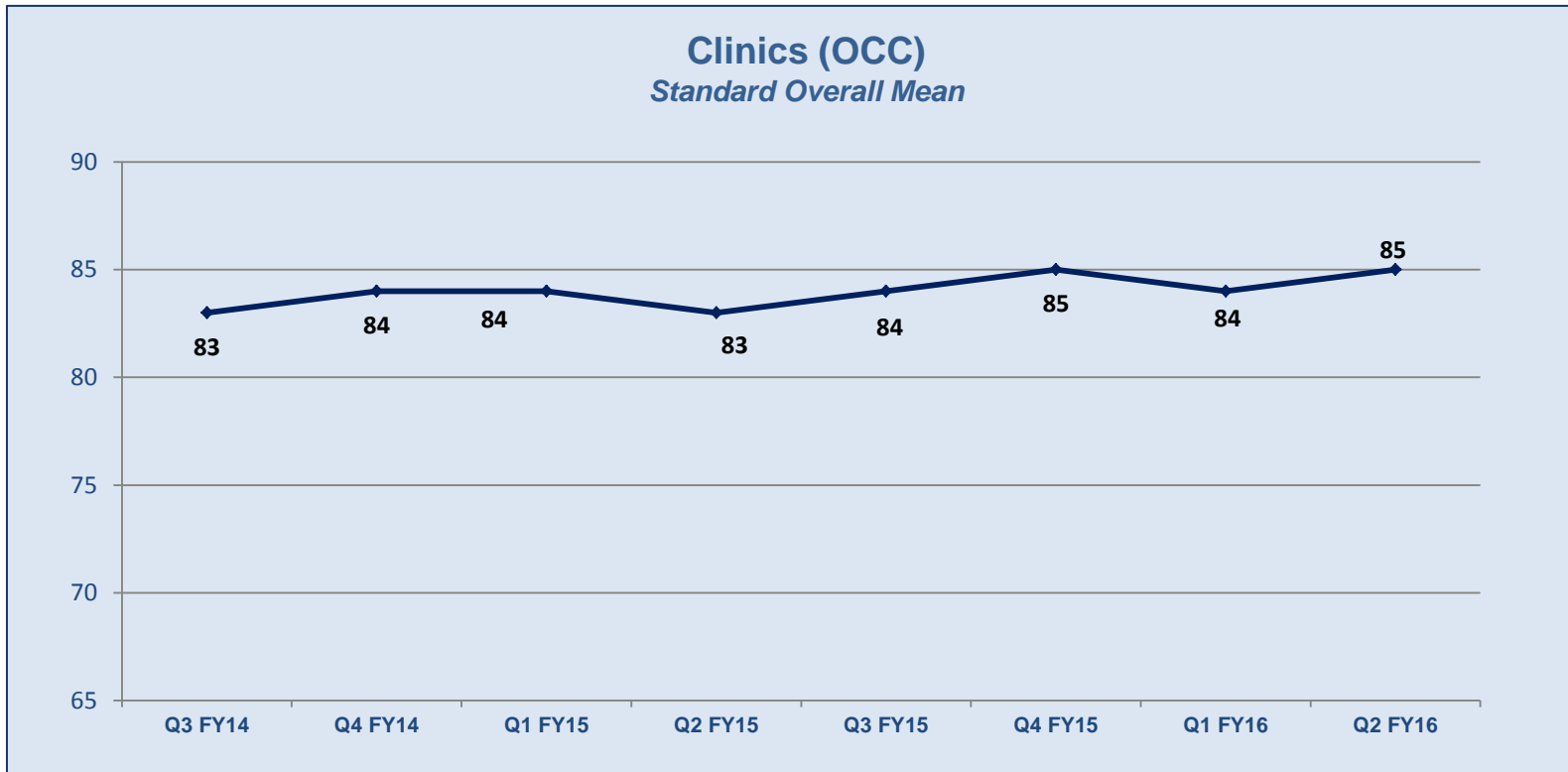
UI Health Mission Perspective:
Quality and Safety

**UI HEALTH
MISSION PERSPECTIVE:
CUSTOMER**

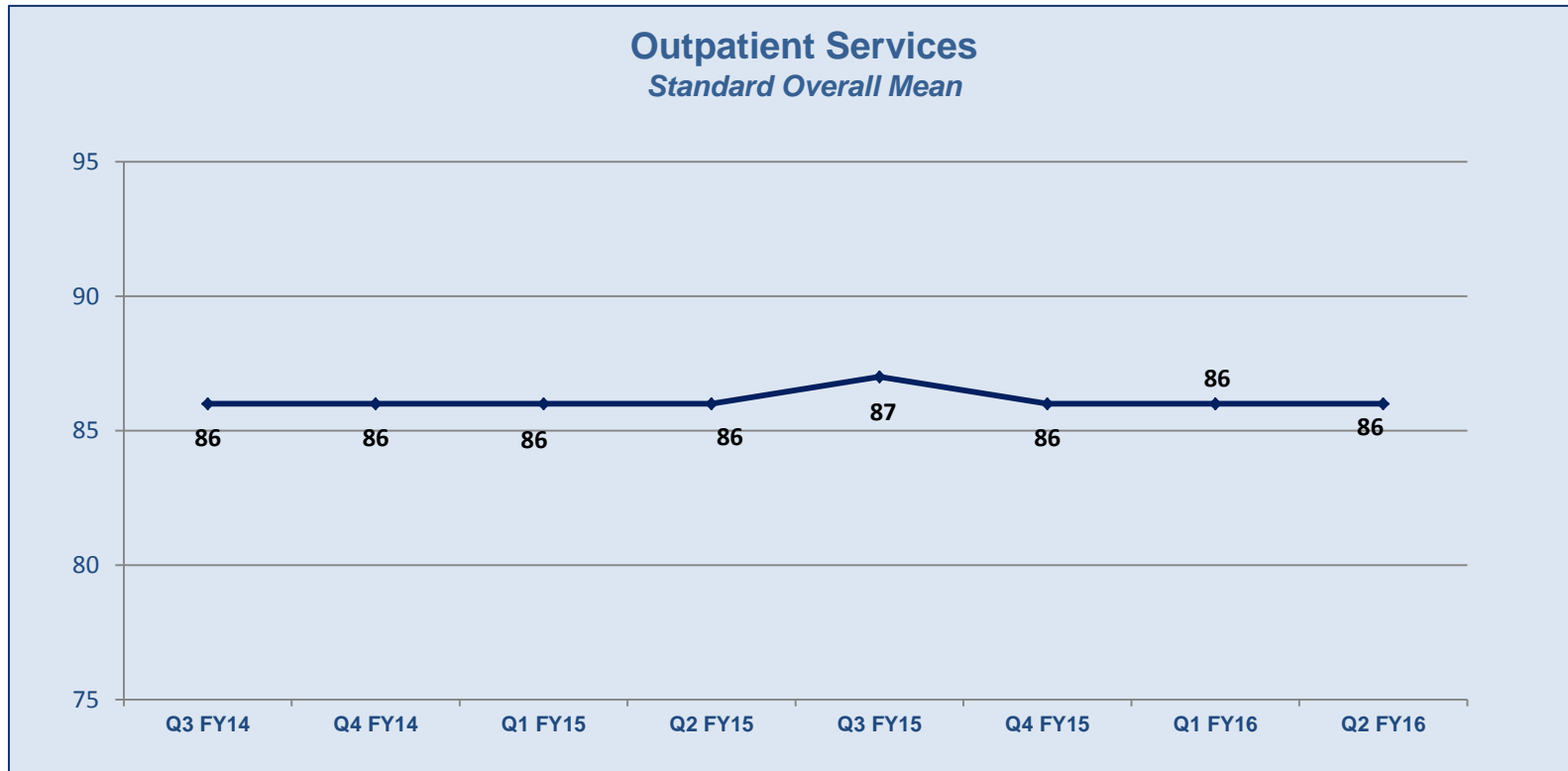
UI Health Metric	Current Quarter Q2 FY16	Prior Q2 FY15	UIH 8 Quarter Average
HCAHPS (Overall Rating of Hospital)	62	66	63



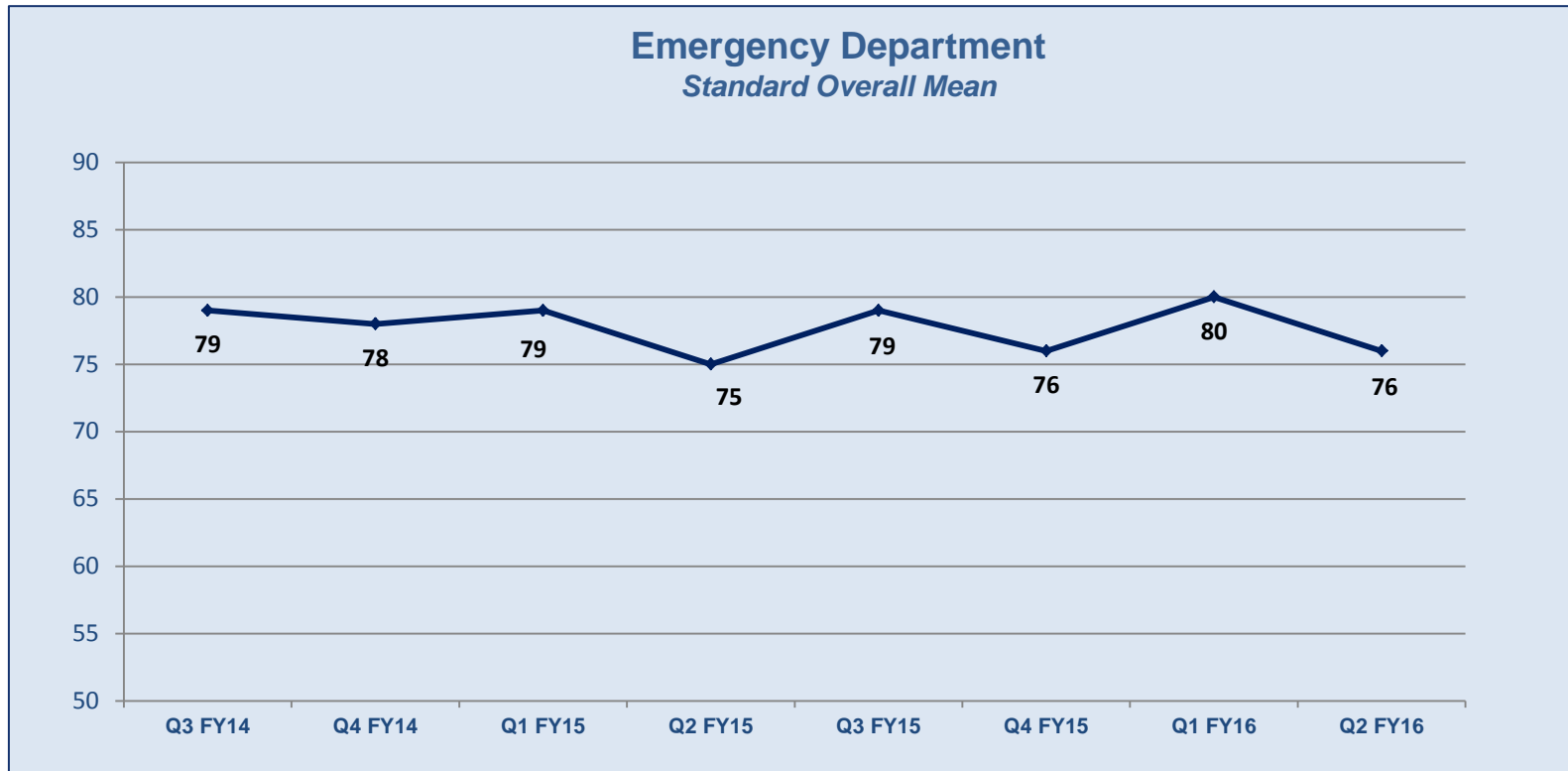
UI Health Metric	Current Quarter Q2 FY16	Prior Q2 FY15	UIH 8 Quarter Average
Clinics (OCC) Standard Overall Mean	85	83	84



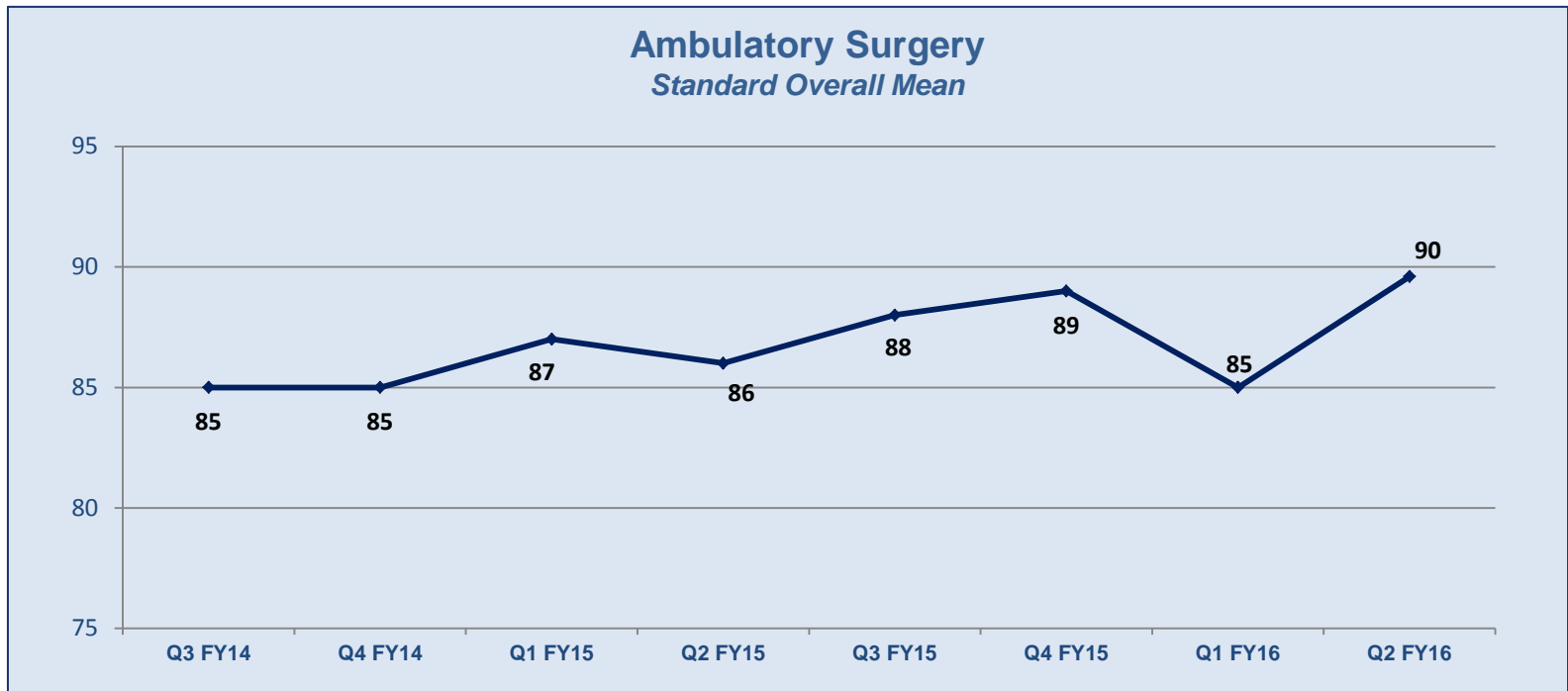
UI Health Metric	Current Quarter Q2 FY16	Prior Q2 FY15	UIH 8 Quarter Average
Outpatient Services (Standard Overall Mean)	86	86	86



UI Health Metric	Current Quarter Q2 FY16	Prior Q2 FY15	UIH 8 Quarter Average
Emergency Department Standard Overall Mean	76	75	78



UI Health Metric	Current Quarter Q2 FY16	Prior Q2 FY15	UIH 8 Quarter Average
Ambulatory Surgery Standard Overall Mean	90	86	87



DASHBOARD DEFINITIONS

UI Health Internal Measures	Definition/Notes	Source
Operating Margin %	Measures operating profitability as a percentage of operating revenue	UI Health Finance
Days Cash on Hand	Measures the number of days that the organization could continue to pay its average daily cash obligations with no new cash resources becoming available	UI Health Finance
Net Accounts Receivable > 60 days	The total money owed to UIH by its payors minus the amount owed that will likely not get paid.	UI Health Revenue Cycle
Total Expense Net Bad Debt/Case Mix Index (CMI)-Adjusted Discharge	Total expense (area wage index-adjusted) divided by CMI-adjusted discharges. CMI-adjusted discharges is defined by CMI, multiplied by discharges, multiplied by gross total patient charges divided by gross inpatient charges.	University Healthcare Consortium
Supply Expense (less Drugs) / Supply Intensity Score Adjusted Discharge	Supply expense (less drugs) divided by supply intensity score-adjusted discharges. Supply intensity score is a value derived from a weighted average of the total number of discharges by the distribution of MS-DRG—weighted values, assigned based on expected supply-related consumption.	University Healthcare Consortium
Total Inpatient Mortality Index (Observed/Expected Ratio)	The total inpatient mortality index represents all inpatient cases that had a discharge status of "expired" (observed mortality rate divided by expected mortality rate).	University Healthcare Consortium
Patient Safety Indicator 12 Post-operative Pulmonary Embolism or Deep Vein Thrombosis (rate per 1000 surgical patients)	The rate of deep vein thrombosis (DVT) per 1000 is defined by the AHRQ Patient Safety Indicator (PSI) 12: postoperative pulmonary embolism (PE) or DVT rate	University Healthcare Consortium
Sepsis Mortality	The sepsis mortality index represents all inpatient cases that had a discharge status of "expired" and a principal and/or secondary diagnosis/diagnoses related to sepsis: ICD-9 codes 038, 038.0-038.9, 785.52, 995.91, 995.92, 771.81, 998.02 (sepsis observed mortality rate divided by sepsis expected mortality rate).	University Healthcare Consortium
30-Day All Cause Readmission Rate	The 30-day all cause readmission rate for adult, non-OB patients is the percentage of patients who return to the hospital for any reason within 30 days of discharge from the prior (index) admission.	University Healthcare Consortium
Central Line Associated Blood Stream Infections	Laboratory-confirmed bloodstream infection (BSI) in a patient who had a central line within the 48 hour period before the development of the BSI and that is not related to an infection at another site - Rate per 1000 line days, all inpatient units combined	University Healthcare Consortium
Catheter Associated Urinary Tract Infections	A UTI where an indwelling urinary catheter was in place for >2 calendar days on the date of event, with day of device placement being Day 1, and an indwelling urinary catheter was in place on the date of event or the day before. If an indwelling urinary catheter was in place for > 2 calendar days and then removed, the UTI criteria must be fully met on the day of discontinuation or the next day. - Rate per 1000 catheter days, all inpatient units combined	University Healthcare Consortium