



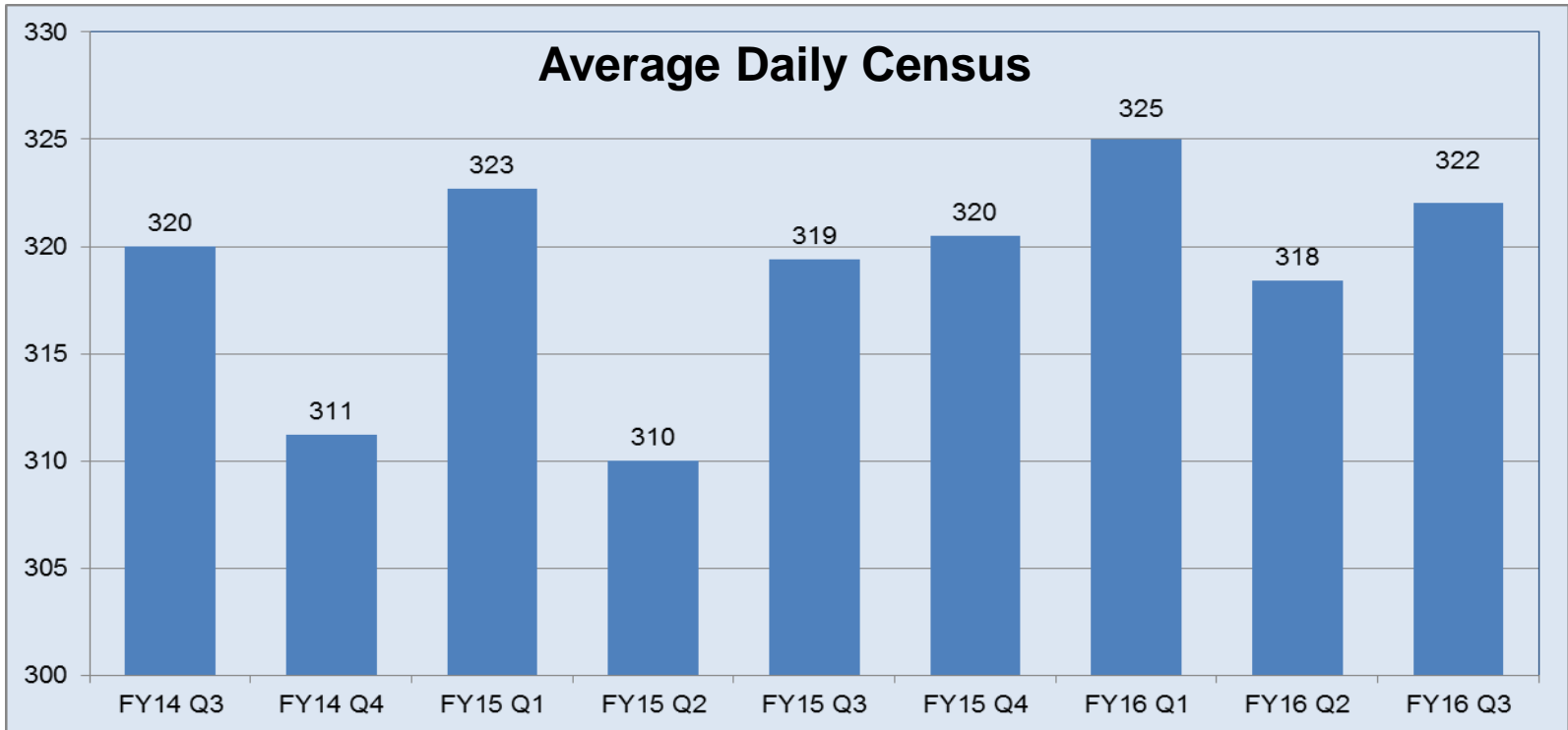
UNIVERSITY OF ILLINOIS HOSPITAL & HEALTH SCIENCES SYSTEM

HOSPITAL DASHBOARD

Reported to the Board of Trustees
May 19, 2016

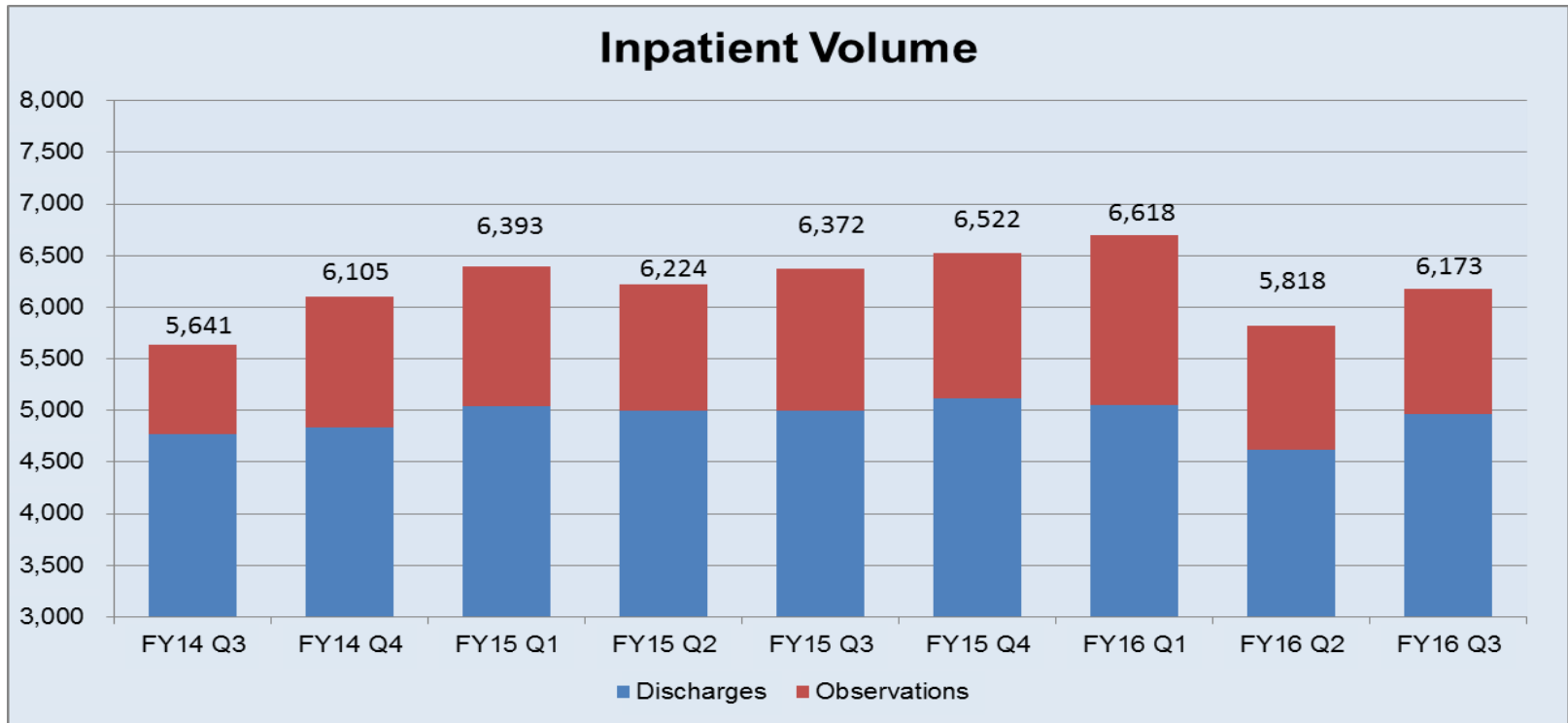


UI Health Metrics	FY16 Q3-Jan+ Feb Actual & Mar Budget	FY16 Q3 Target	FY15 Q3 Actual	3rd Quarter % change FY16 vs FY15
Average Daily Census (ADC)	322	317	319	0.9%



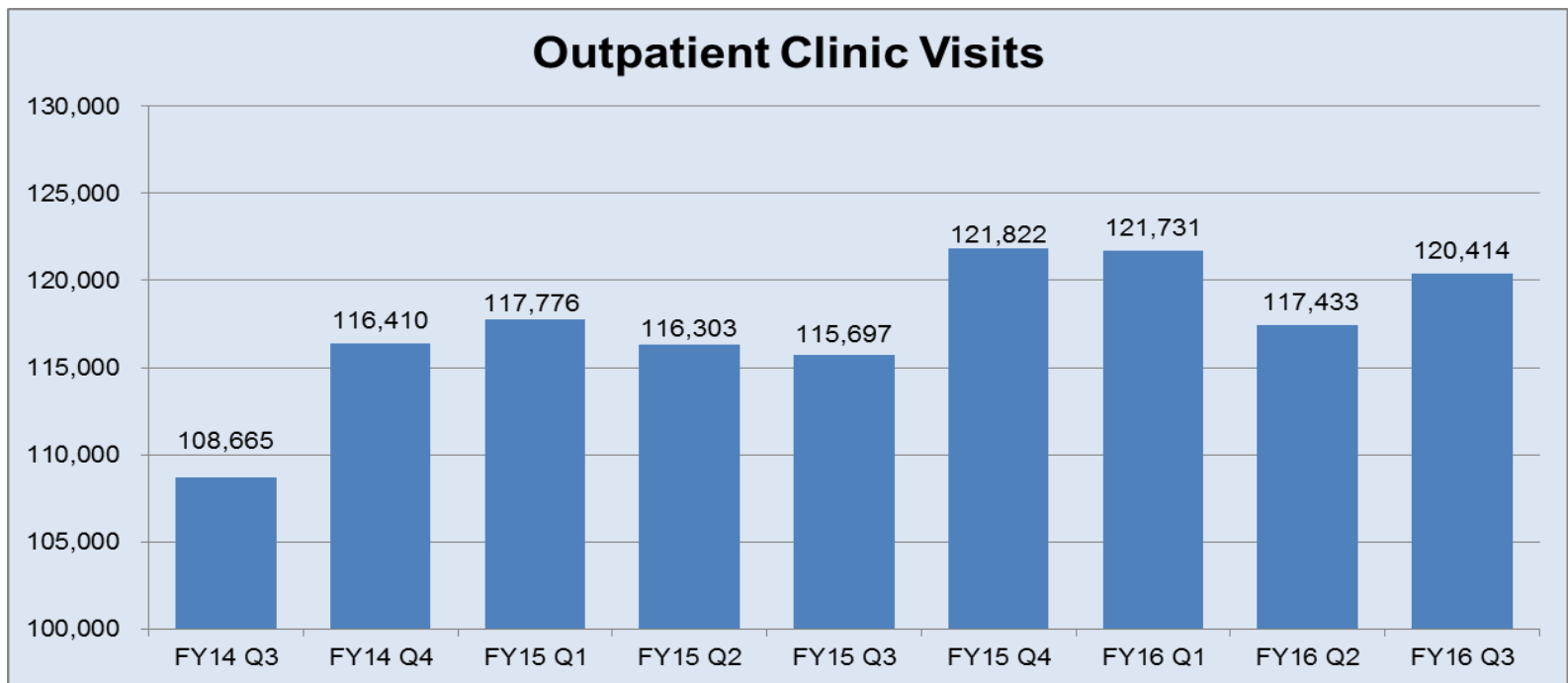
ADC in February 2016 was 326 vs. 316 in February 2015.

UI Health Metrics	FY16 Q3-Jan+ Feb Actual & Mar Budget	FY16 Q3 Target	FY15 Q3 Actual	3rd Quarter % change FY16 vs FY15
Discharges	4,959	5,413	4,996	Combined -3.1%
Observation Cases	1,214	1,374	1,376	



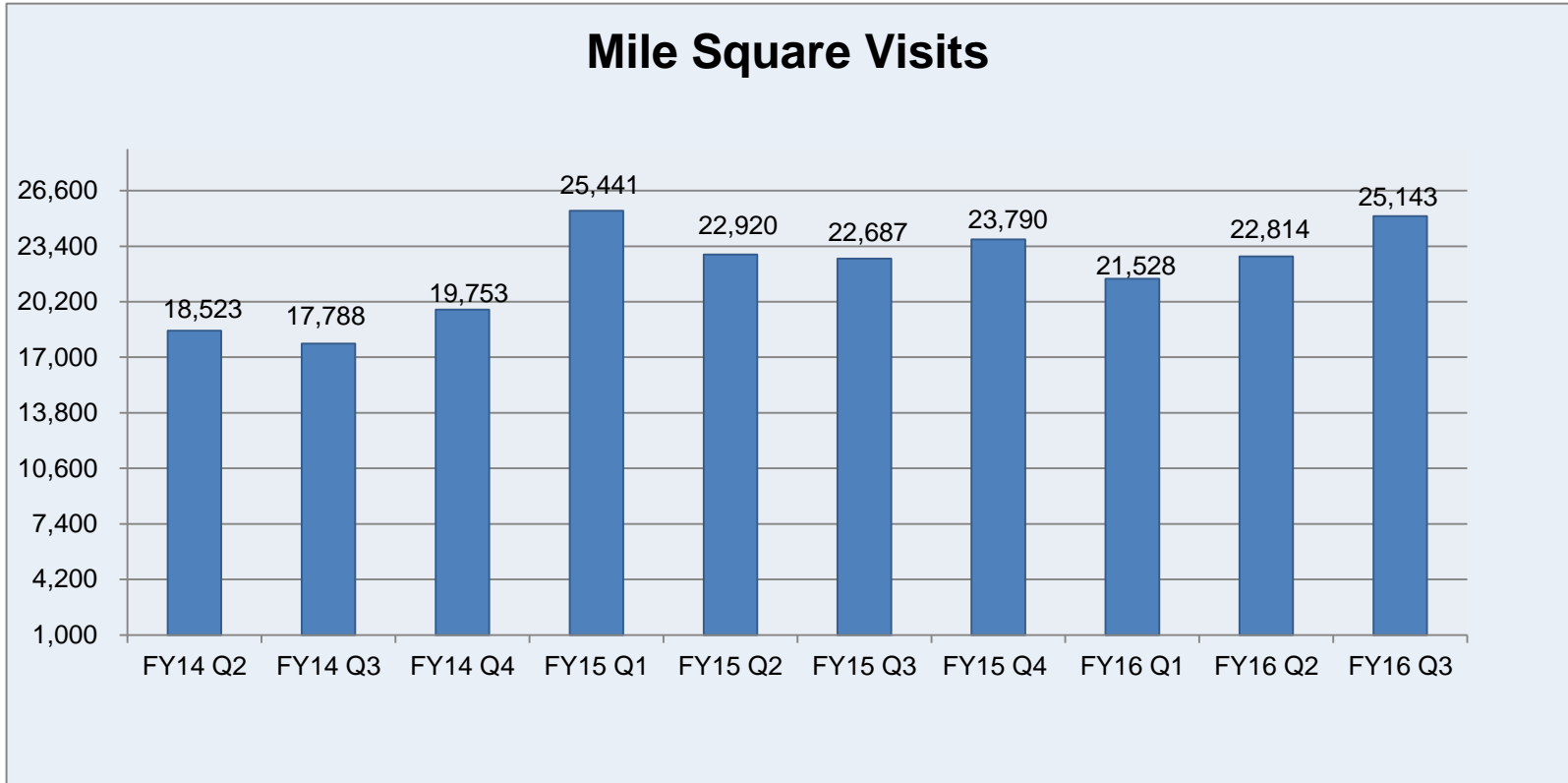
Combined Discharges and Observation Cases for the eight months ending February 2016 are 5.1% under budget and 0.1% lower than last year.

UI Health Metrics	FY16 Q3-Jan+ Feb Actual & Mar Budget	FY16 Q3 Target	FY15 Q3 Actual	3rd Quarter % change FY16 vs FY15
Outpatient Clinic Visits	120,414	121,540	115,697	4.1%



Clinic visits for the eight months ending February 2016 are 0.6% under budget and 2.8% more than last year.

UI Health Metrics	FY16 Q3 Actual	FY16 Q3 Target	FY15 Q3 Actual
Mile Square Visits	25,143	28,442	22,687



Mile Square visits are higher than prior year but lower than budget.



UI Health Mission Perspective: Financial Performance



UI Health |

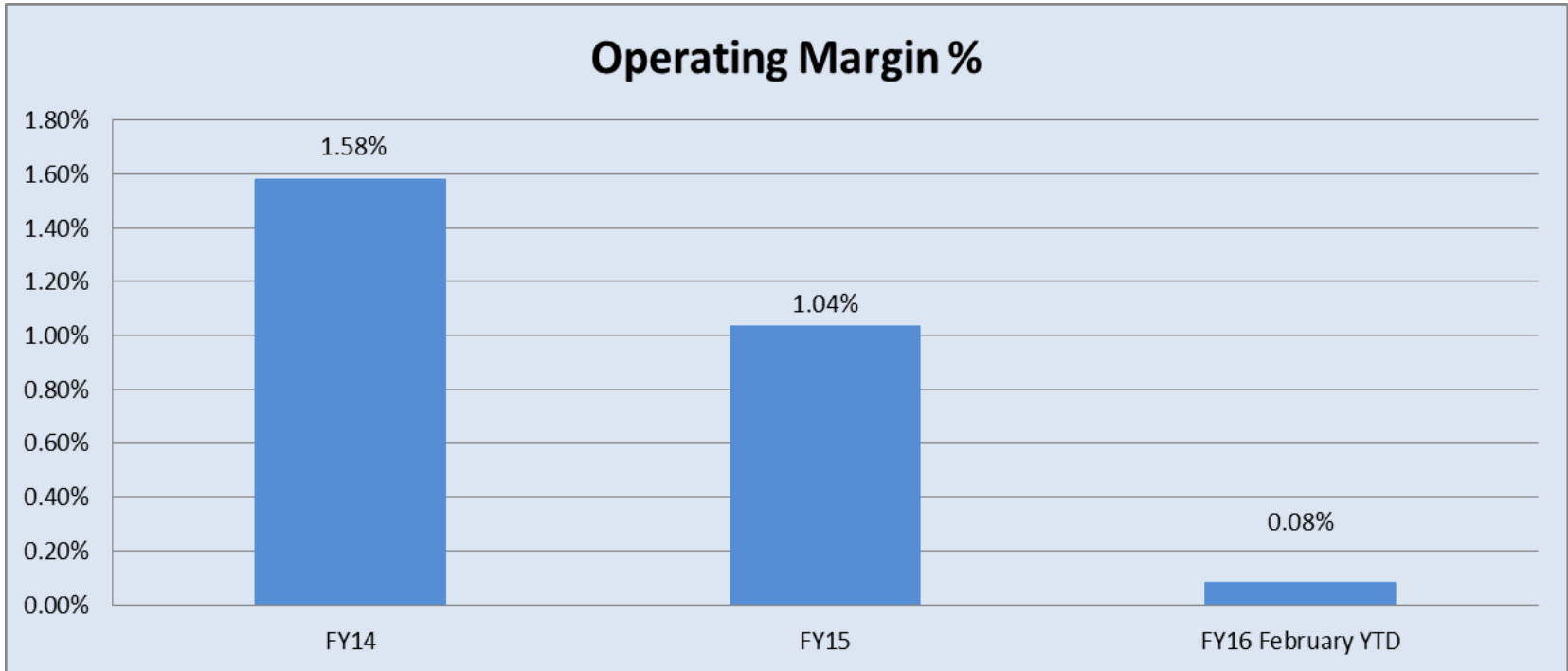


STATEMENT OF OPERATIONS – FEBRUARY 2016

(\$ IN THOUSANDS)

Month					Year-to-Date					
Actual	Budget	Variance		Prior Year		Actual	Budget	Variance		Prior Year
		\$	%					\$	%	
\$ 50,250	\$ 46,756	3,494	7.5%	\$ 42,350	Net Patient Revenue	\$ 395,784	\$ 387,905	7,879	2.0%	\$ 361,704
21,398	22,299	(901)	-4.0%	22,274	Other Revenue	173,640	178,899	(5,259)	-2.9%	173,230
71,648	69,055	2,593	3.8%	64,624	Total Revenue	569,424	566,804	2,620	0.5%	534,934
25,466	23,975	(1,491)	-6.2%	21,613	Salaries & Wages	205,352	202,094	(3,258)	-1.6%	196,009
17,105	17,095	(10)	-0.1%	17,027	Employee Benefits	136,906	136,953	47	0.0%	137,250
24,619	23,742	(877)	-3.7%	24,327	Department Expenses	197,364	194,688	(2,676)	-1.4%	183,157
3,667	3,667	0	0.0%	3,415	General Expenses	29,336	29,336	0	0.0%	27,315
70,857	68,479	(2,378)	-3.5%	66,382	Total Expenses	568,958	563,071	(5,887)	-1.0%	543,731
\$ 791	\$ 576	215	37.3%	\$ (1,758)	Operating Margin	\$ 466	\$ 3,733	(3,267)	-87.5%	\$ (8,797)
(403)	(62)	(341)	-550.0%	(393)	Net Non-operating Income/(Loss)	(2,322)	(491)	(1,831)	-372.9%	1,323
\$ 388	\$ 514	(126)	-24.5%	\$ (2,151)	Net Income/(Loss)	\$ (1,856)	\$ 3,242	(5,098)	-157.2%	\$ (7,474)

UI Health Metrics	FY16 YTD Actual	FY16 (12mos) Target	FY15 Actual
Operating Margin %	0.08%	0.74%	1.04%

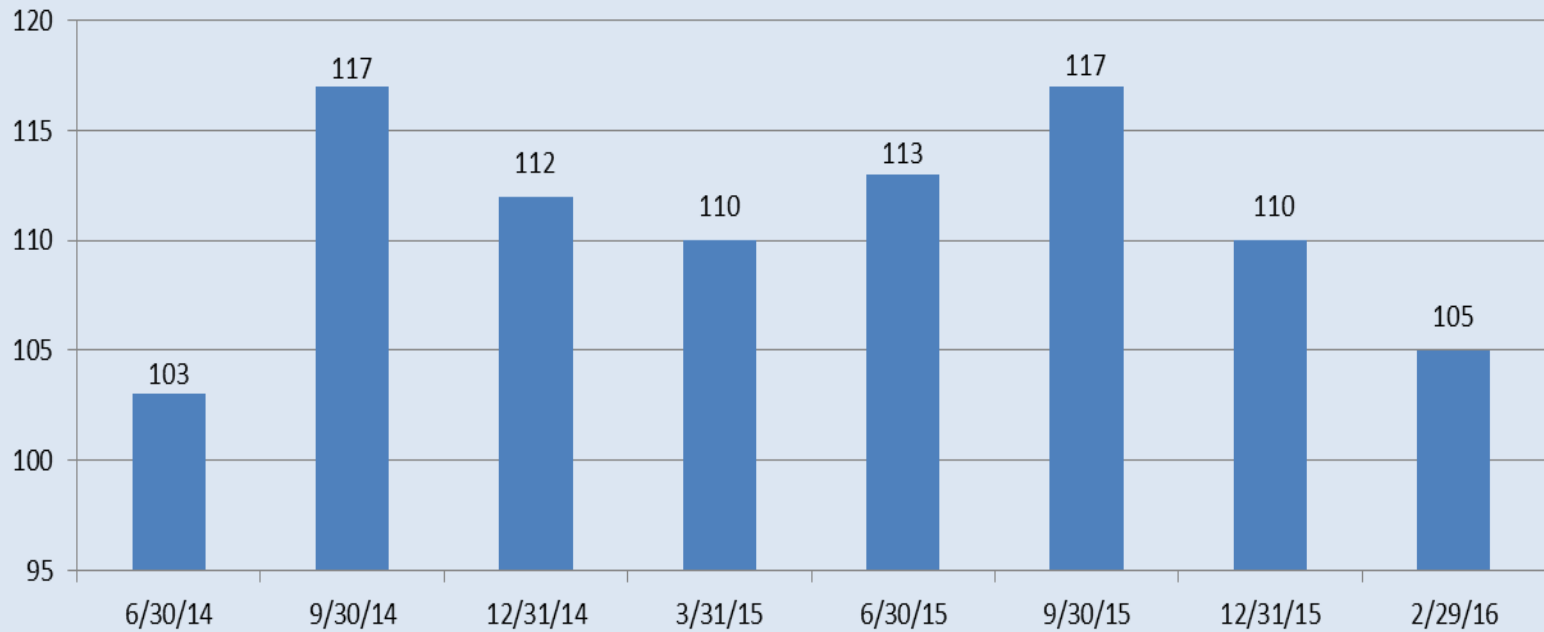


Operating Margin includes Payments on Behalf for Benefits. YTD Margin was adversely impacted by lower volumes and high pharmaceutical costs.

UI Health Mission Perspective: Financial Performance



Days Cash on Hand (Unrestricted)



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



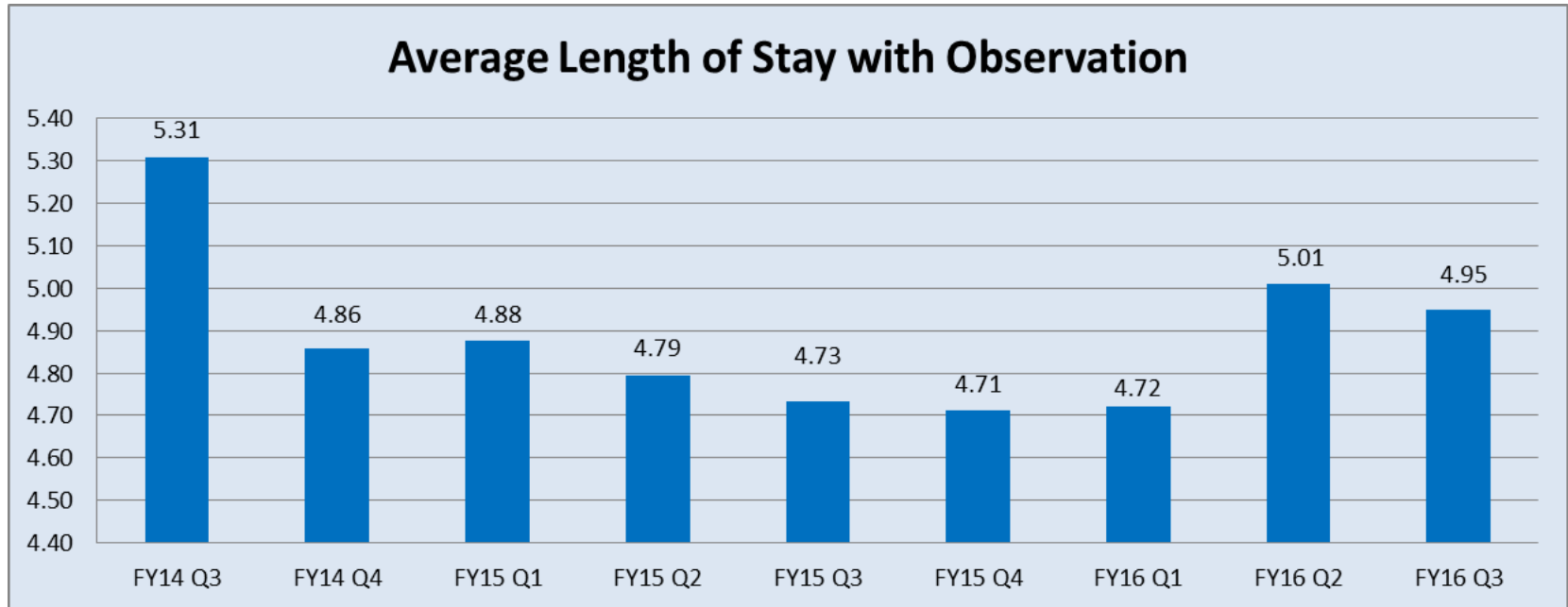
UI Health Mission Perspective: Operational Effectiveness



UI Health |

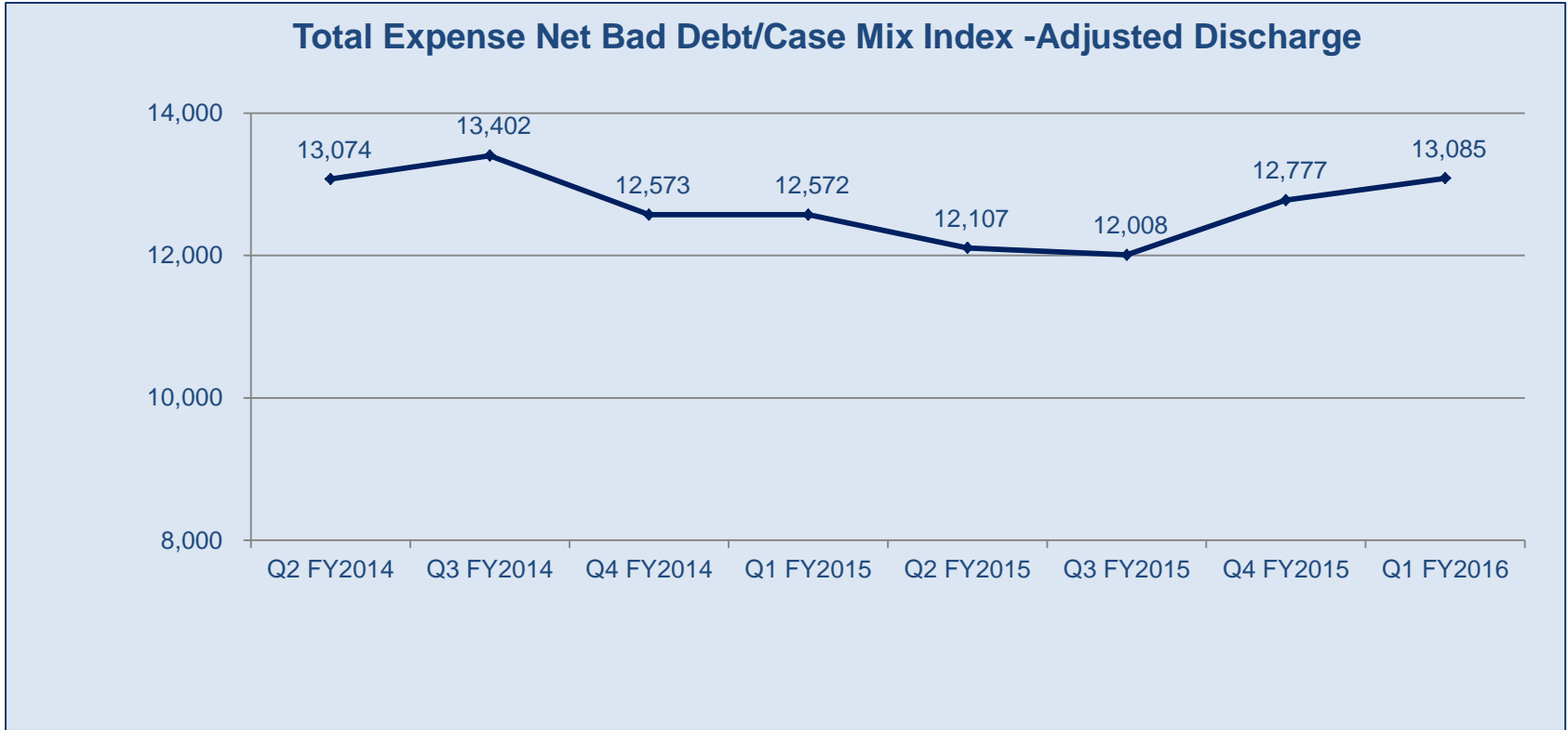


UI Health Metrics	FY16 Q3-Jan+ Feb Actual & Mar Budget	FY16 Q3 Target	FY15 Q3 Actual
Average Length of Stay with Observation (Days)	4.95	4.41	4.73



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

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

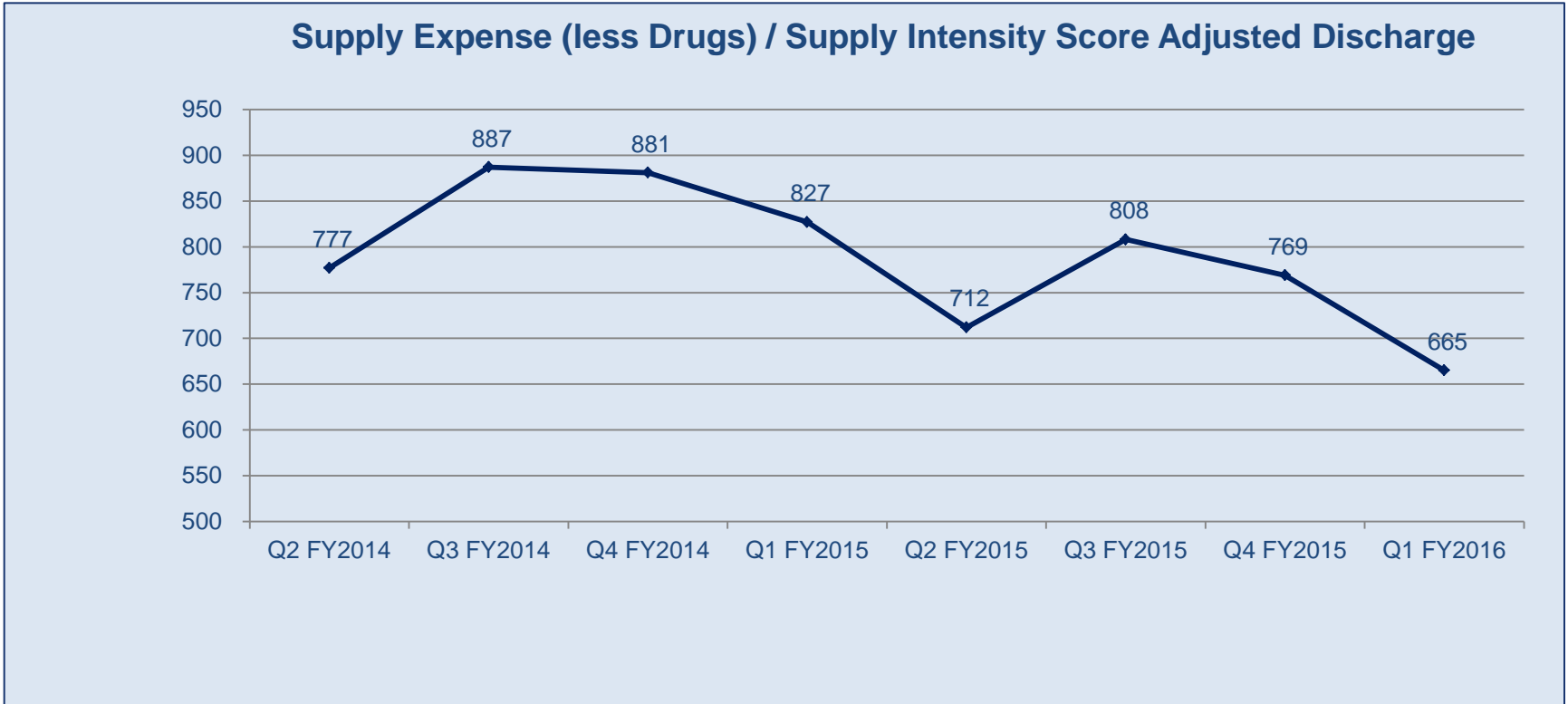


Q4 FY 2015 and Q1 FY 2016 has showed an upwards trend.

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



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



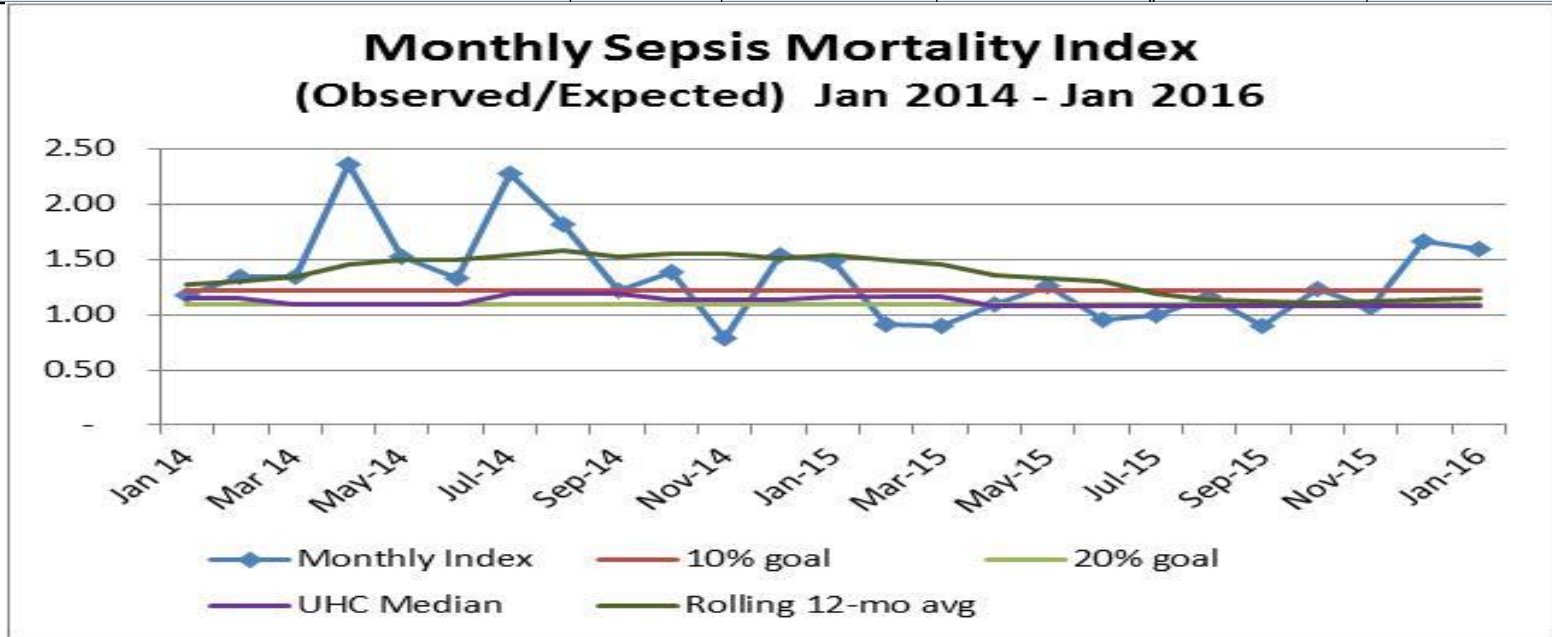
UI Health Mission Perspective: Quality and Safety



UI Health |



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



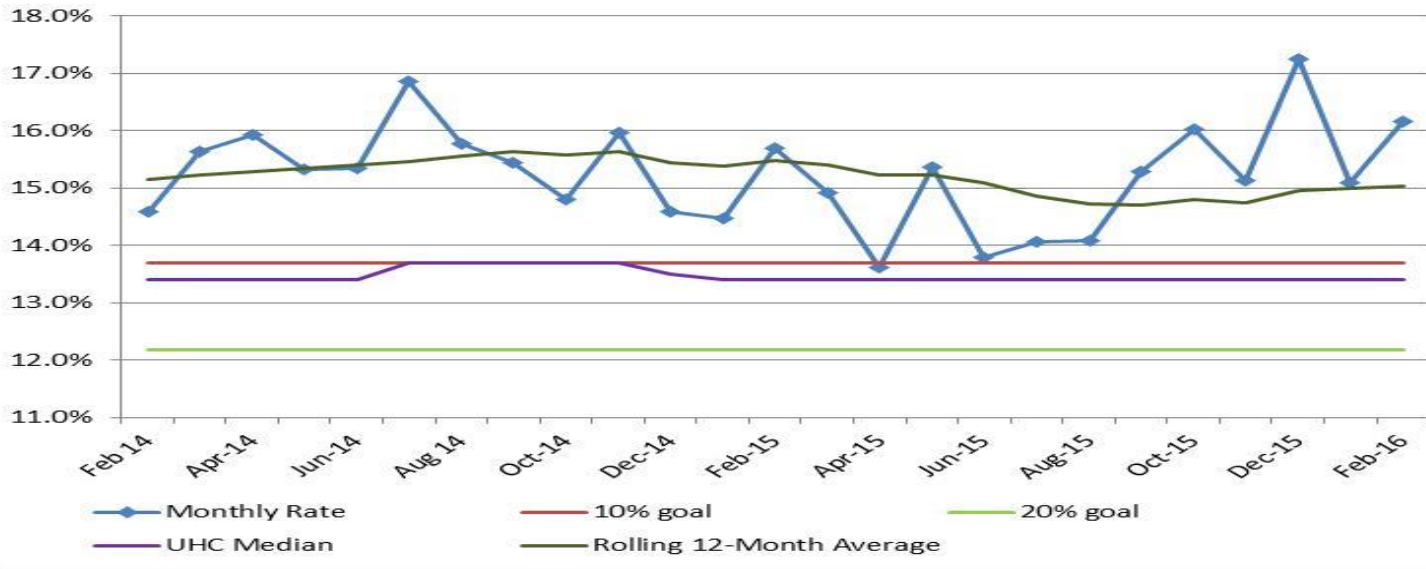
	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15	Dec 15	Jan 16
Number of Sepsis Cases by Month	61	70	61	82	83	83	83	89	102	102	70	78	77
Number of Sepsis Deaths by Month	11	9	8	12	11	9	12	11	13	13	9	12	12

During January 2016, UI Health’s rolling 12-month Sepsis Mortality index (observed/expected deaths) was 1.15, a slight worsening in performance from the previous month and equal to 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 1.22 or below.

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
Feb 2014 - Feb 2016**



	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15	Dec 15	Jan 16	Feb 16
Number of Readmissions by Month	263	277	245	284	250	261	250	275	273	243	291	249	259

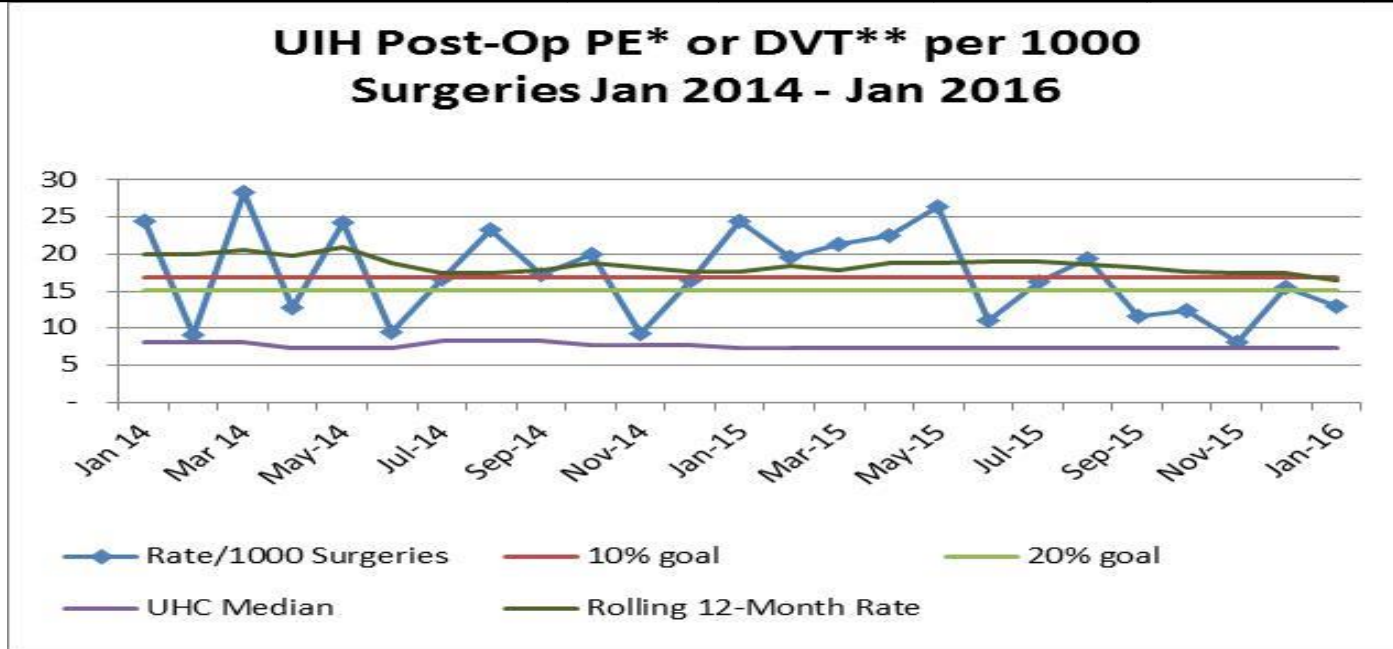
During February 2016, UI Health’s rolling 12-month average 30-day all-cause Readmission Rate was 15.0%, equal to our performance from the previous month and worse than the UHC median.

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 ≤13.7%.

**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



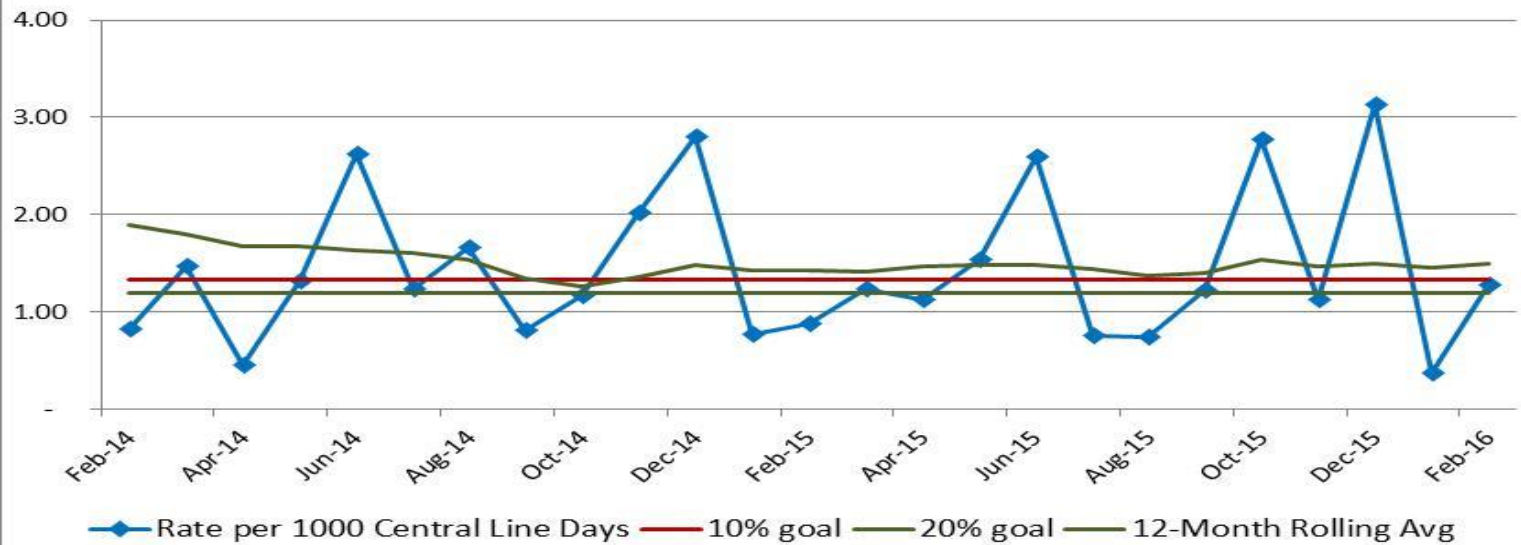
	Jan 15	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sep 15	Oct 15	Nov 15	Dec 15	Jan 16
Number of Post-Op DVTs by Month	3	3	4	4	4	1	5	4	1	4	2	5	4
Number of Post-Op PEs by Month	6	3	4	5	6	3	1	3	4	1	2	3	1

During January 2016, UI Health's rolling 12-month average post-operative PE/DVT rate improved from the previous month to 16.42 per 1000 surgeries, our best-ever performance tracking of 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.

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*
Feb 2014 through Feb 2016
Rate per 1000 Line Days, All Inpatient Units Combined



	Feb 15	Mar 15	Apr 15	May 15	Jun 15	Jul 15	Aug 15	Sept 15	Oct 15	Nov 15	Dec 15	Jan 16	Feb 16
Number of Infections by Month	2	4	3	4	7	2	2	3	8	2	8	1	3

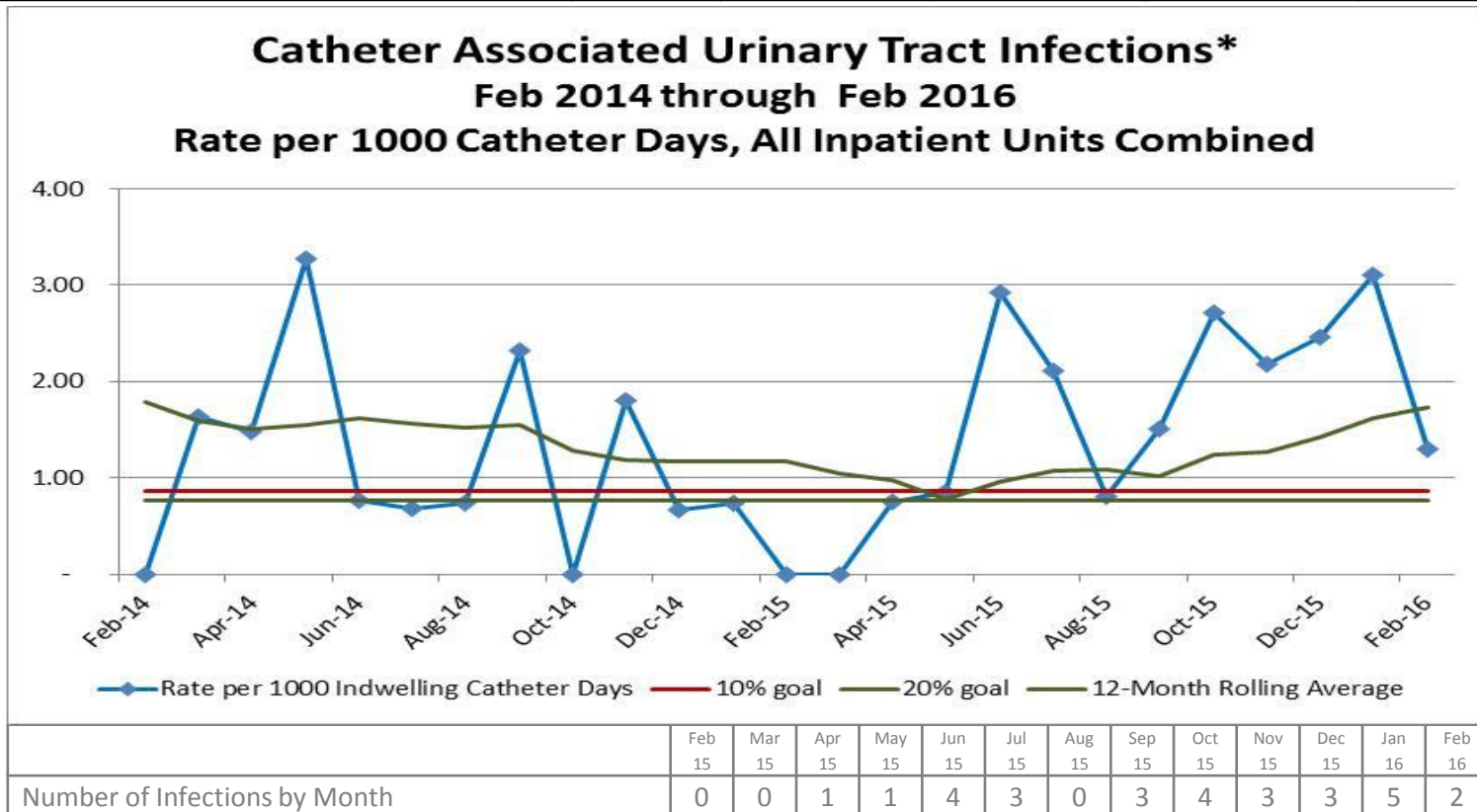
Our 12-month rolling average CLABSI rate held steady in February 2016 at 1.49, with a total of 3 CLABSIs.

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: Operational Effectiveness



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



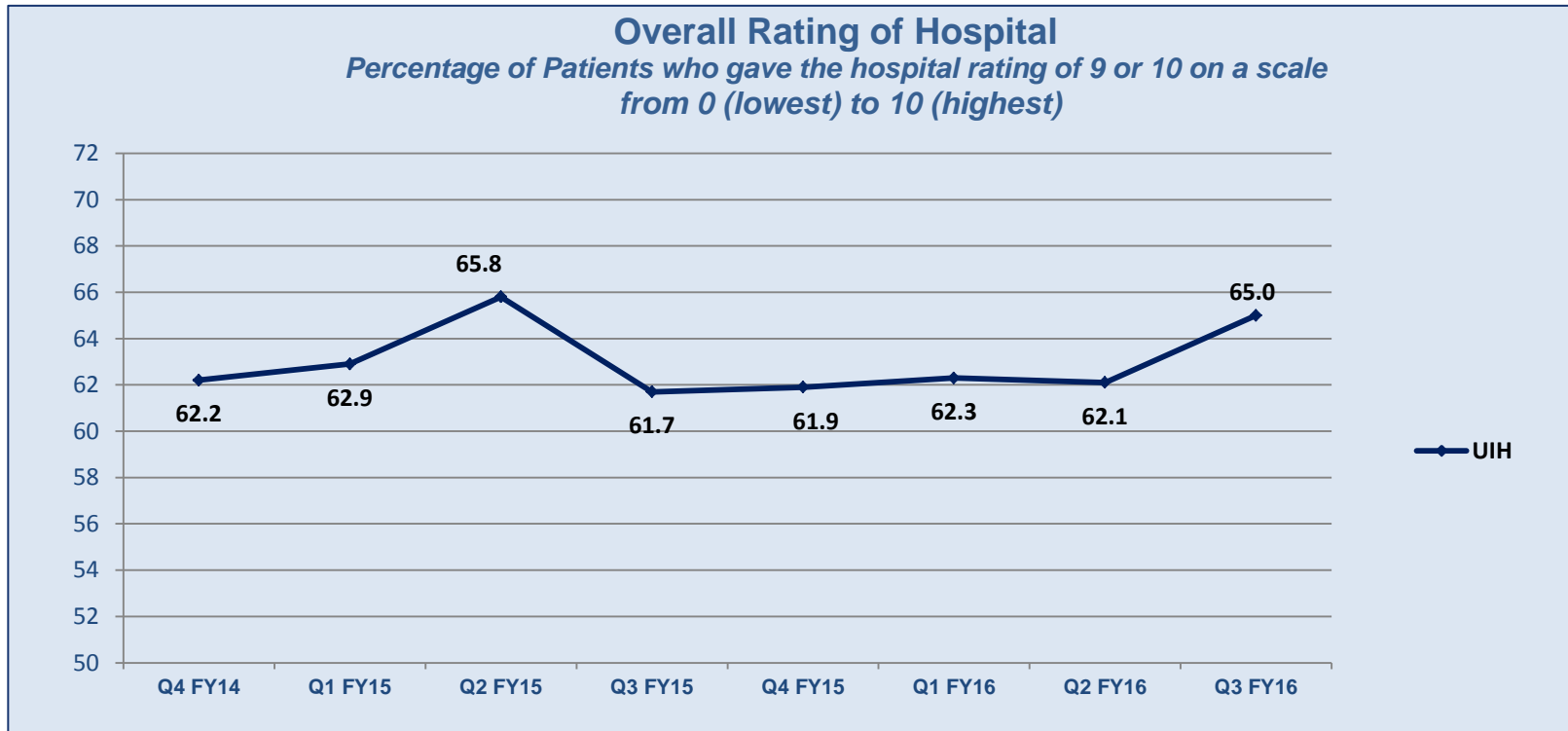
Our rolling 12-month average CAUTI rate worsened to 1.72, with 2 CAUTI infections for the month.

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.

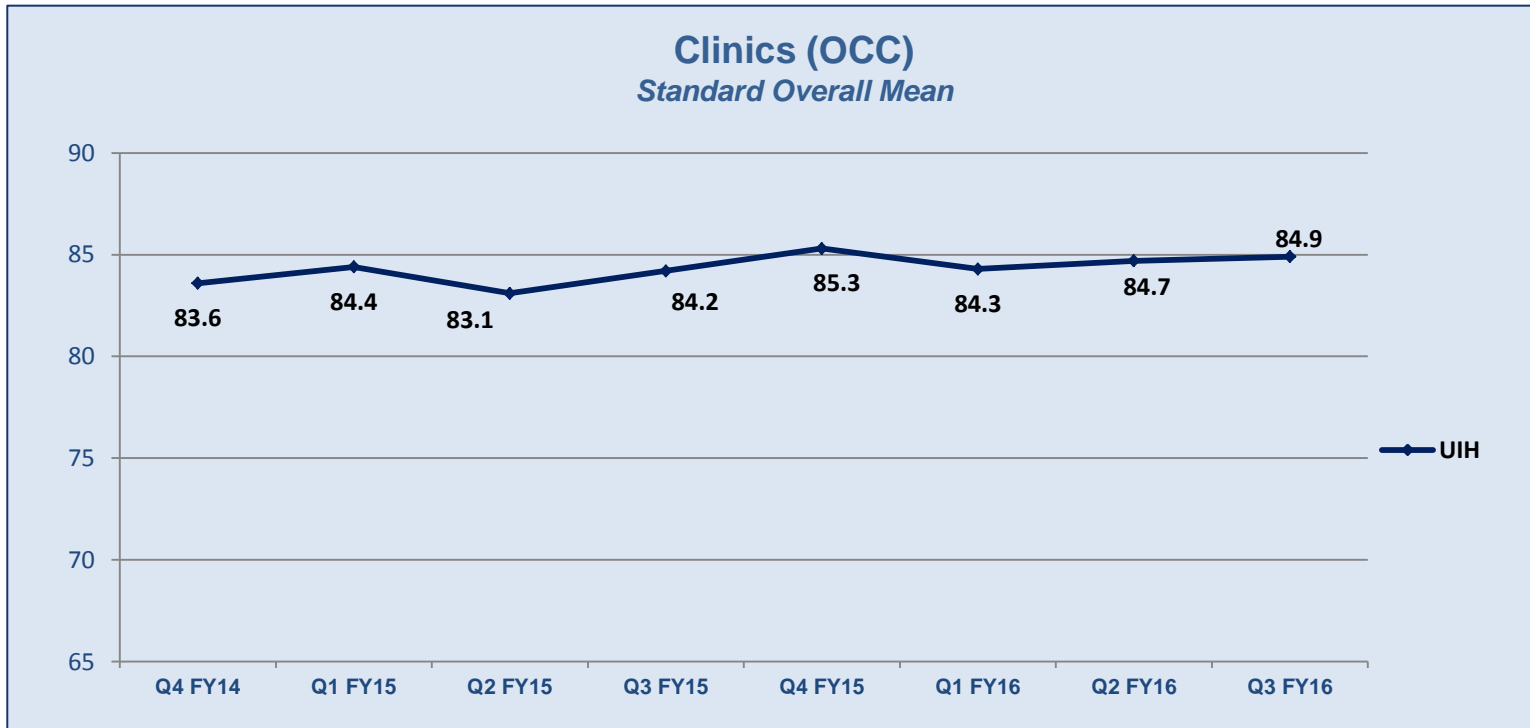


UI Health Mission Perspective: Customer

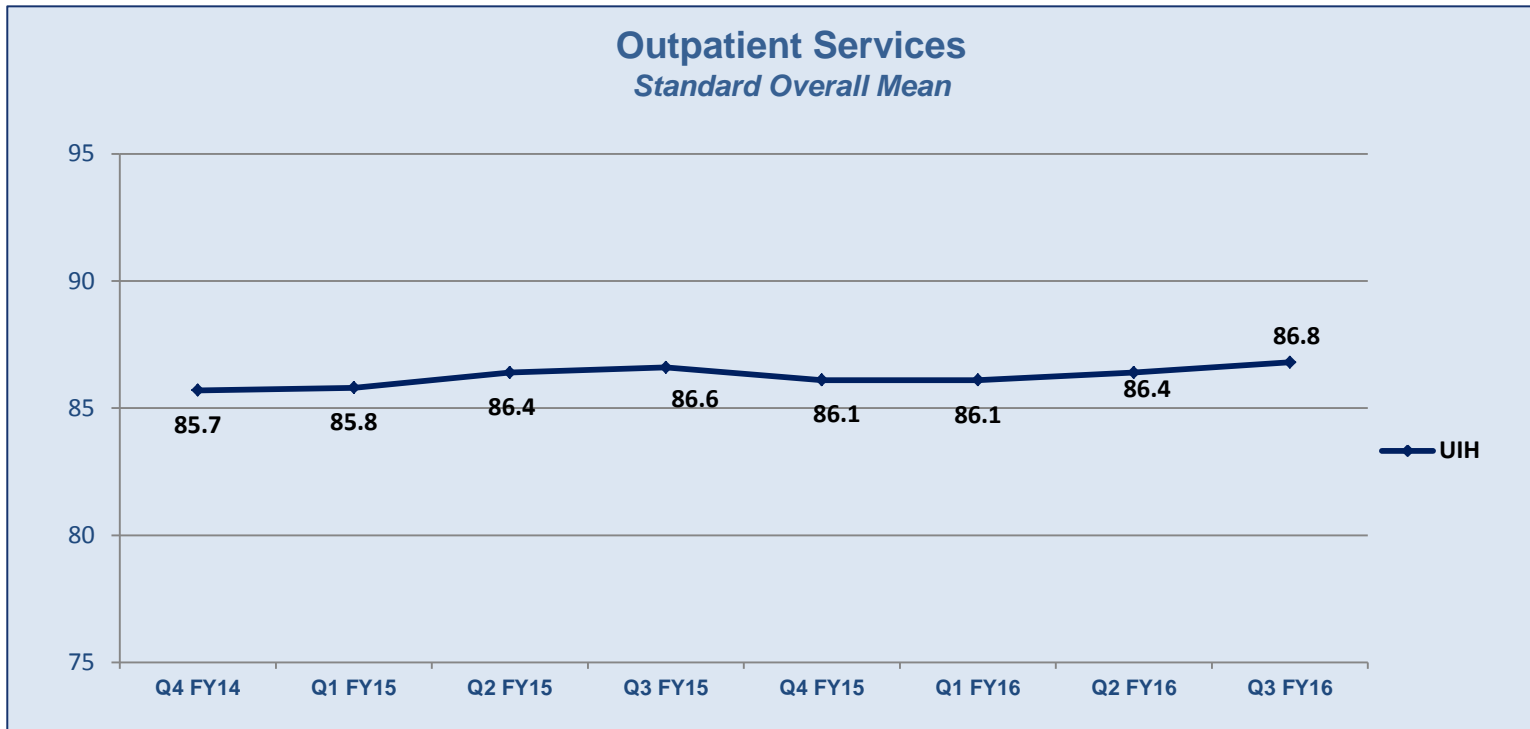
UI Health Metric	Current Quarter Q3 FY16	Prior Q3 FY15	UIH 8 Quarter Average
HCAHPS (Overall Rating of Hospital)	65.0	61.7	63.0



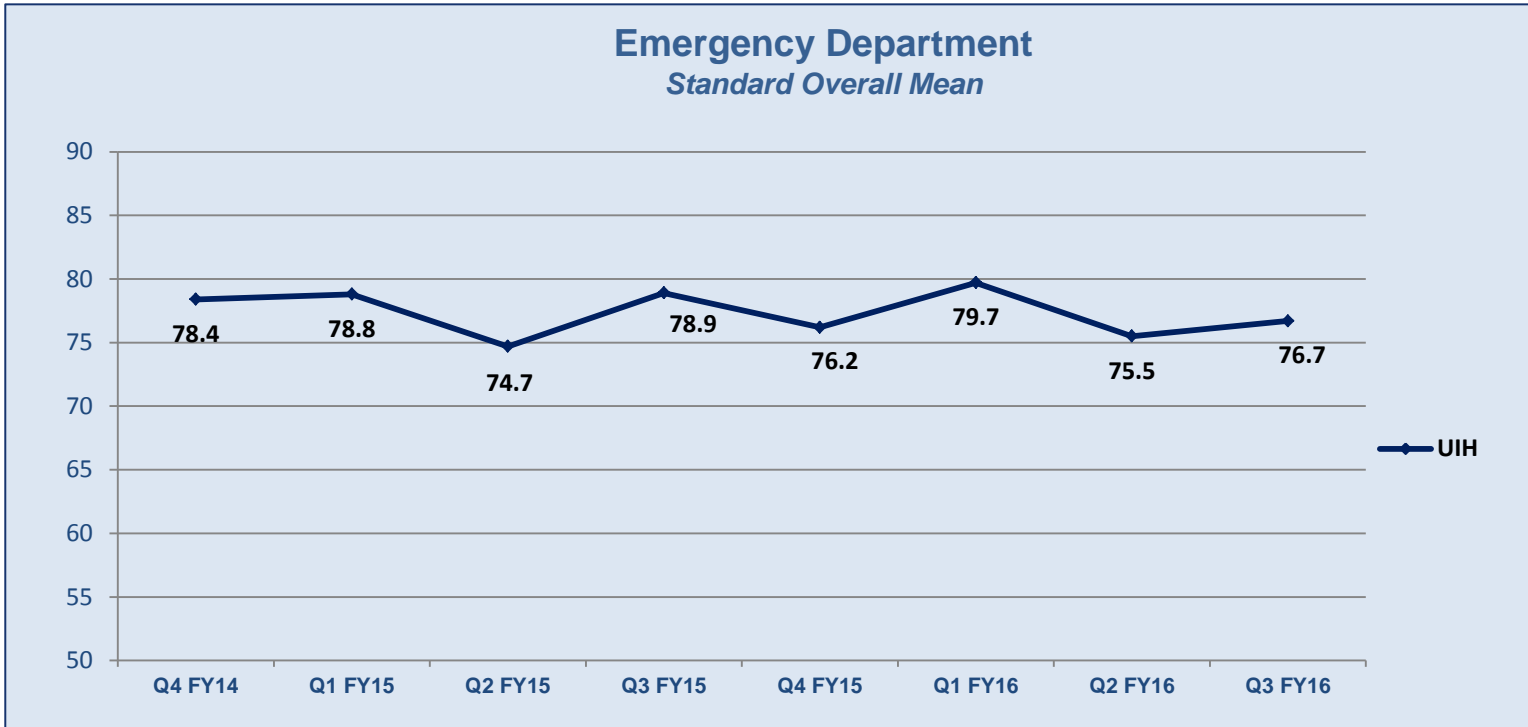
UI Health Metric	Current Quarter Q3 FY16	Prior Q3 FY15	UIH 8 Quarter Average
Clinics (OCC) Standard Overall Mean	84.9	84.2	84.3



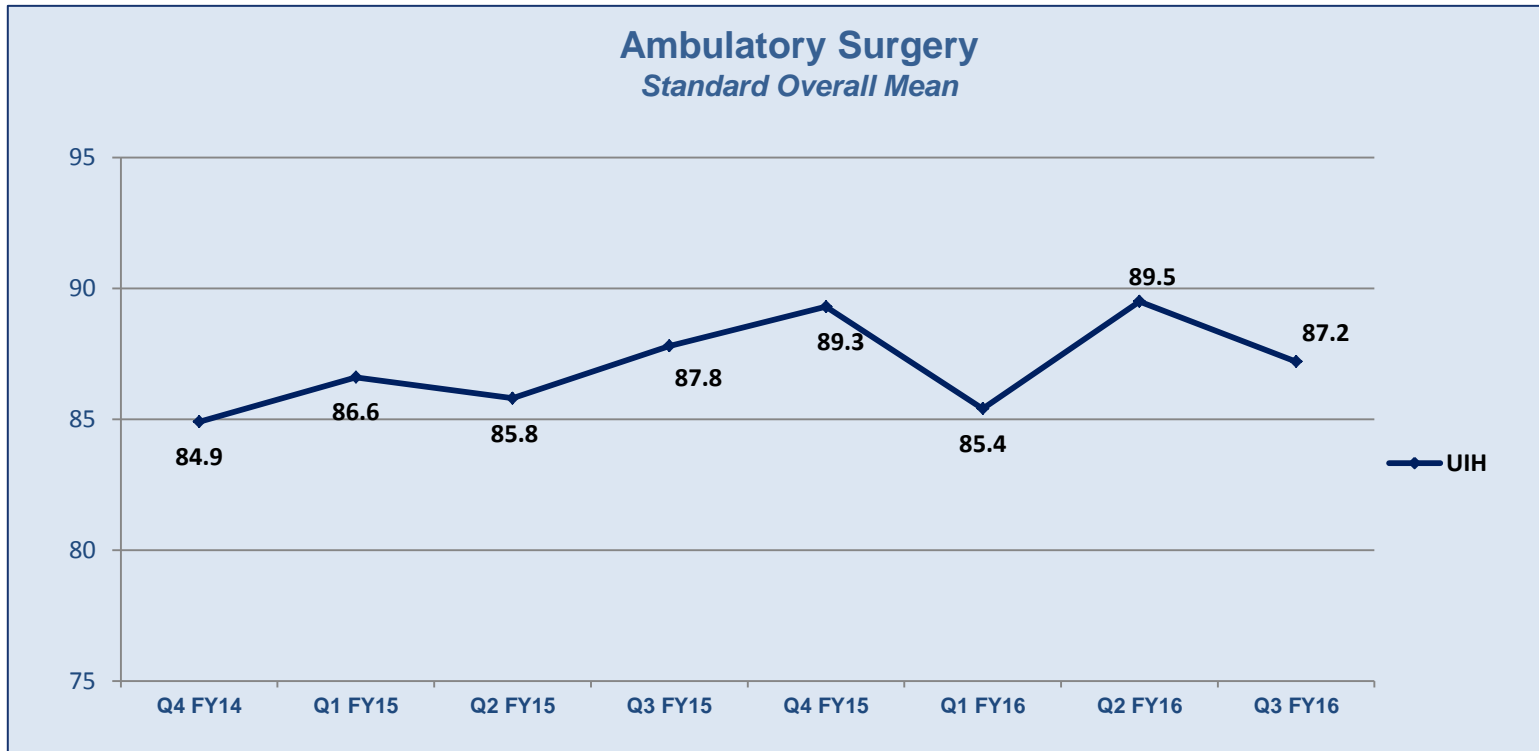
UI Health Metric	Current Quarter Q3 FY16	Prior Q3 FY15	UIH 8 Quarter Average
Outpatient Services (Standard Overall Mean)	86.8	86.6	86.2



UI Health Metric	Current Quarter Q3 FY16	Prior Q3 FY15	UIH 8 Quarter Average
Emergency Department Standard Overall Mean	76.7	78.9	77.4



UI Health Metric	Current Quarter Q3 FY16	Prior Q3 FY15	UIH 8 Quarter Average
Ambulatory Surgery Standard Overall Mean	87.2	87.8	87.1



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
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
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